ABSTRACT

Introduction: Cervical cancer is the second most common cancer among women worldwide, globally, 527,600 cases of cervical cancer and 270,000 cervical cancer deaths occur annually. The prevalence of cervical cancer is steadily increasing in sub-Saharan Africa, with more than 75,000 new cases and 50,000 deaths registered yearly. In East Africa, cervical cancer is the leading cause of cancer deaths and has the highest age-standardized incidence rates of 42.7 per 100,000 women per year. In Uganda screening is erratic, opportunistic, and in some places absent due to a lack of resources or lack of financial commitment. According to MOH report only 7.5% of female of reproductive age in Uganda which CIU female students are part of, utilized cervical cancer screening services, this is due to an information gap which has led to delayed diagnosis of cervical cancer, eventually leading to presentation in late stages, terminal illnesses, economic burden to the family and eventual death.

Objective of the study: The objective of the study was to assess the uptake of cervical cancer screening services among female students at Clarke International University using the Health Belief model.

Methodology: In the study, a cross-sectional design was employed to examine the uptake of cervical cancer screening. Quantitative designs and methods were used. A total of 236 female students were selected using stratification and simple random sampling and were interviewed using pre-tested structured questionnaires. The data was entered and analyzed using SPSS.

Study results: The uptake of cervical cancer screening was 33.5%. Logistic regression analysis revealed that the being married (OR=3.74 95% CI, 1.97 – 8.54), belief of not being at risk (OR=0.18, 95% CI 0.08-0.3), belief that being diagnosed with cervical cancer would be a severe threat to ones’ health (OR 0.44, 95% CI 0.16 – 0.73), thoughts that there are benefits for screening for cervical cancer (OR 0.38, 95% CI 0.15 – 0.91), agreeing that pap smear would give a piece of a mind about an individual’s health (OR 5.2 95%, CI2.22 – 22.51), agreeing that Cervical cancer can easily be curable if detected early (OR 2.58 95, CI 1.03 – 7.56), agreeing that It’s costly to do a pap test at most private health facilities while at public facilities there is a long waiting queue (OR 0.70(0.03 – 0.99) were factors that predicted uptake of cervical cancer screening.

Conclusions and Recommendations: I believe this study inculcates sensitization on the public evidence based health practices through educational programs and availing the required service to the people to help improve the health of women but also their level of knowledge so as to increase the cervical cancer practices. In addition cervical cancer screening awareness should be rolled down in schools most especially girls should be encourage to do early screening and where to obtain a the service so as to minimize cervical cancer cases and complication.