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# A Study on the Effects of Cervical Cancer on Marital Relationship of Female Patients at the Cancer Disease Hospital in Lusaka District, Zambia

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### Abstract

The study was conducted the effects of cervical cancer on marital relationship of female patients at the cancer Disease Hospital in Lusaka district, Zambia. The study was based on a descriptive research design and a total of 70 female cervical cancer patients were randomly selected through simple random sampling. Data was collected by the use of a semi structure questionnaire and analyzed with the aid of the Statistical Package for Social sciences, The results of the study showed that majority of the respondents are aware about cervical cancer and cervical cancer screening. However the results showed that the uptake of cervical cancer screening is still low due to lack of screening facilities and well trained medical personnel. The results further shows that cervical cancer patients are facing psycho social challenges such as divorce, discrimination and gender based violence amongst others. Based on the research findings, there is need for adequate civic education for partners and the community about cervical cancer aimed at eliminating discrimination and stigma of female patients of cervical cancer. There is also need for scaling up awareness campaigns that will address the various psycho-social challenges faced by cervical cancer patients.

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### 1. Introduction

Cervical cancer is a global major health concern that is leading morbidity and mortality. The majority of cervical cancer deaths occur in developing countries such as Zambia. Cervical cancer is a disease that is preventable but it has been noted that it still remains the second largest cancer killer of women in low and middle income countries with most women dying in prime of life (WHO 2013). The WHO global strategy towards the elimination of cervical cancer as a public health problem requires that 90% of girls are vaccinated with the human papillomavirus (HPV) vaccine by the age of 15 years, 70% of women are screened with a high performance test by 35 years with a repeat screening by 45 years, and 90% of women identified with both pre-cancerous and invasive cervical cancer receive treatment. Within the Zambian context cervical cancer is the most common cancer in Zambian women, and approximately 28% of all patients with cancer seen at the Cancer Diseases Hospital in Lusaka experience this disease. Cervical cancer cases are on the rise in Zambia, according to WHO report, in 2020 cervical cancer deaths

reached 559 and the age adjusted death rate was 23.03 per 100,000 and was ranked 48<sup>th</sup> in the world, while in 2018, there were about 1230 new cases of cervical cancer and 791 deaths and was ranked the third leading cause of death among all the cancers and the leading cause of death in females.

It is very evident that lack of awareness and deep seated stigma associated with the disease also pose significant barrier to access help (WHO 2013). Furthermore Female cervical cancer patients suffer desertion from their partners once they are diagnosed which increases the high rate of divorce/separation. Stigma and discrimination is also greatly associated with cervical cancer patients. Due to the psycho-social impacts of cervical cancer, psychosocial care is considered an important component of quality cancer care. Individuals treated for cancer can experience biologic or physical, emotional, spiritual, and financial consequences which have an impact on their quality of living. There is growing advocacy regarding the need for psychosocial care, given the level of unmet supportive care needs and high emotional distress reported for patients.

## 2. Problem Statement

Most women are at risk of developing cervical cancer. Unlike many other cancers, cervical cancer is one of the most preventable by both primary and secondary prevention methods. In Zambia, the See-and treat cervical cancer screening program was launched in 2006. Initially, it was only targeted at HIV-positive women before it became available to all women regardless of their HIV status. Cervical cancer still remains the most common cancer seen at Cancer Disease Hospital (CDH) in Lusaka, comprising approximately 35% of all cancers managed at CDH and accounting for about 30% new cancer cases per year. Despite all efforts put in place by the government and other stake holders in the prevention of cervical cancer there are still a lot of psycho-social challenges that women with cervical cancer are facing within their families and communities. A number of female patients have been reported being divorced by their spouses due to cervical cancer. Because of the rising numbers of divorce it is important to get to know the effects so of cervical cancer on marital relationships.

## 3. Objectives of the Study

### 3.1 Main Objectives

To examine the psychosocial effects of cervical cancer on marital relationship of female patients in Lusaka District, Zambia.

### 3.2 Specific Objectives

- i) To assess the prevalence rate of Cervical Cancer amongst women
- ii) To assess the attitudes and perceptions of women on cervical cancer.
- iii) To examine the accessibility to cervical cancer screening services among women of reproductive age.
- iv) To find the psychosocial effects of cervical cancer on marriages marital relationship of female patients.

## 4. Research Questions

- i) What is the prevalence rate of Cervical Cancer amongst women?
- ii) What are the attitudes and perceptions of women on cervical cancer?
- iii) How accessible are cervical cancer screening services among women of reproductive age
- iv) What are the psychosocial effects of cervical cancer on marriages marital relationship of female patients?

## 5. Literature Review

Cervical cancer is the easiest gynaecologic cancer to prevent, with regular check-ups, screening tests and follow-ups (Centre of Disease Control (CDC), 2013). Cancer of the cervix is the major gynaecological health problem that has been on the increase and remains a leading cause of death among all cancers (WHO, 2013). Globally, an estimated 500,000 women are diagnosed with cervical cancer and over 250,000 die from it each year, more than 80% of women residing in resource-limited settings that have access to less than 5% of global health resources (Balogun *et al.*, 2012; WHO/ICO, 2013). Zambia has the second highest incidence of cervical cancer globally (Bateman *et al.*, 2015).

Health care service is a critical factor in both the acceptability of service to women and the feasibility of the service sustainability (Cunning *et al.*, 2015). The most important factors include trained human and technical resource and

infrastructure with adequate laboratory capacity for screening cervical cancer. These are often absent in many low and middle income countries (Akinyemiju *et al.*, 2015). Finocchiaro-Kessler *et al.*, (2016), conducted a study on regarding and benefits of cervical cancer screening found that the main barriers identified by all participants were accessibility and availability of quality services. Facilities that lack comfort and privacy, high costs, and courtesy of providers, contribute to poor service delivery (Begum *et al.*, 2014; Lin and Chen, 2014). Begum *et al.*, (2014), found that barriers that pertain to women's beliefs are anxiety borne by women awaiting test results if pre-test counseling is not adequately done and the procedure is not clearly explained to the woman for her to understand.

Women's attitudes towards cervical cancer and screening have been shown to influence their decision to be screened for the disease (Abdullahi *et al.*, 2009; Fernandez *et al.*, 2009). A qualitative study done in Mexico it was noted that women may fail to seek screening because their male sexual partners may be opposed to the male providers giving the examination (Kileo *et al.*, 2015). Perhaps it is less embarrassing to show private body parts to a female rather than a male health worker. Despite having these services, a number of barriers to the uptake of screening and vaccination have been identified by previous studies, which include but are not limited to religious and cultural beliefs, social influences lack of noticeable symptoms, and administrative/policy restrictions (Nyambe *et al.*, 2018).

## 6. Theoretical Framework

The research is guided by the Roy Adaptation Model (RAM) and the Social Ecological Model (SEM). The Roy Adaptation model provides a solid theoretical foundation of the study as it focuses much on the ability of a person to adapt to their prevailing environment. This theory is appropriate to the study as cervical Cancer patients are faced with various social, economic, physical, emotional and psychological challenges due to the disease hence they need to adapt to their current environment Furthermore the Social Ecological Model (SEM) provides an opportunity for understanding the social factors that prevails in the social environment of cervical Cancer patients. This Social, environment do have both positive and negative effects to the patients.

## 7. Research Methodology

### 7.1 Research Design

The researcher used a descriptive research design as it enables the collection of data that help to describe the research phenomenon. In this context this design was selected as it provided a robust framework to adequately described the effects of cervical cancer on marital relationships.

### 7.2 Population

The target population for the study comprised all cervical cancer patients at the Cancer Disease Hospital in Lusaka, Zambia.

### 7.3 Sampling

In this study the respondents were selected through both probability and non-probability sampling. The purposive sampling was used to select the key informants and simple random sampling technique was used to select the cervical cancer patients A total of 70 cervical cancer patients were sampled.

## 7.4 Data collection tools and methods

The data was collected by the use of a semi structured questionnaire that was prepared objective wise to ensure that the data collection will provide a good basis for answering all the research questions. The data was analysed with the aid of the Statistical Package for Social Sciences

## 8. Research Findings, Analysis and Discussion

### 8.1 The Prevalence Rate of Cervical Cancer Amongst Women

Awareness is one of the essentials for the successful implementation and access of cervical cancer prevention and treatment services. The results of the research show that majority of the respondents as reported by 60% of the respondents reported that majority of the people are aware about cervical cancer. Furthermore in terms of the major source of information, majority of the respondents as represented by 52% reported health officials and other source includes fellow community members, churches and NGOs. This signifies the important role that health official are playing in raising awareness about cervical cancer. Furthermore, 68% of the respondents indicated that they are aware about cervical cancer screening. Despite the fact that majority are aware is still an area of great concern as 32% of the respondents are still not aware about cervical cancer screening.

As regards the prevalence rate of cervical cancer, 68% of the respondents reported that the prevalence rate is from medium to high and 32% reported that it low. This shows that cervical cancer is becoming a major health problem that needs urgent attention. The research study indicates that there is an increase in the prevalence rate of cervical cancer among females in study area. This calls for the health practitioners on cervical cancer to take proactive approach to manage cervical cancer patients in the study area.

### 8.2 The Attitudes and Perceptions of Women on Cervical Cancer

Altitudes and perceptions of women on cervical cancer are very important as they determine the response that individuals will make towards the issues. 52% of the respondents reported positive attitude from the patients while 20% reported that it is negative. On the other hand in terms of people's attitudes towards cervical cancer patients 32% reported positive attitudes and perceptions but is worrisome that 44% of the research respondents indicated that people's attitudes and perceptions towards cancer patients is negative.

As regards the main factors affecting attitudes and perceptions, 48% of the research respondents indicated that lack of information was one of the factors affecting the perception and attitudes of community members on cervical cancer, this was followed by 20 cultural believes is one of the factors affecting the perception and attitudes of community members on cervical cancer and education levels is one of the factors that affect the perception and attitudes of community towards cervical cancer. Negative cultural believes contributed to negative perception and attitudes towards female patients on cervical cancer. Additionally, there is lack of adequate support from some family and community members in some parts of the study area. The research findings also indicated that lower levels of education by community and family members contributed to negative perception and attitudes towards female patients on cervical cancer.

### 8.3 Accessibility of Cervical Cancer Screening Services Among Women of Reproductive Age

As regards the awareness of cervical cancer screening services, 72% of the research respondents indicated that they are aware of the cervical cancer screening services among women of reproductive age. Furthermore 64% of the research respondents indicated that they accessed cervical cancer screening services in their area. However it is still worrisome that 36% indicated that they have not accessed any cervical cancer screening services in their area. In terms of the accessibility of the cervical cancer screening services only 60% reported that the services are accessible

There are various stakeholders providing cervical cancer screening services to the community members and only 40% of the research respondents indicated that the cervical cancer screening providers in their area were very effective. In terms of challenges faced in accessing the services 20% of the research respondents indicated that one of the challenges in accessing cervical cancer screening services 36% of the research respondents indicated that they lack proper equipment in their area for screening cervical cancer, other challenges includes unavailability of cervical cancer services in their area, lack of experienced health practitioners in their area to screen cervical cancer they have limited support from family members and the community

The research findings also indicated that there is lack of adequate experienced health practitioners on cervical cancer in the study area. Additionally, research findings indicated that there is lack of adequate screening services in some parts of the study area.

### 8.4 The Psychosocial Effects of Cervical Cancer on Marriages Marital Relationship of Female Patients

Cervical cancer has both psychological and social effects on marital relationships of the female patients. 52% of the research respondent indicated that they had experienced negative effects on their marital relationships due to cervical cancer. Furthermore 92% of the research respondents indicated that they agree that cervical cancer can result in divorce on marital relationship of female patients.

76% of the research respondents strongly agreed that cervical cancer caused a reduced sexual interest on female patients of cervical cancer. 64% of the research respondents indicated that they strongly agreed that cervical cancer resulted in discrimination and segregation on marital status of female patients. 58% of the research respondents strongly agreed that cervical cancer resulted in gender based violence on the marital relationships of female patients. The majority of the respondents indicated that cervical cancer resulted in reduced sexual interest on both the patient and the partner of female suffering from cervical cancer. The female patients of cervical cancer suffer discrimination and segregation from their sexual partners and some members of the community.

All the negative factors resulted in marriage divorce and therefore brought suffering on the patients suffering from cervical cancer. There is an increase divorce rate on female patients suffering from cervical cancer. Additionally, the majority of the female patients of cervical cancer experienced gender-based violence.

## 9. Recommendations

- i) The government, local government, Non-Governmental Organizations (NGO's), religious organizations should work together to provide civic education to help communities, families and partners of female patients of



cervical cancer to understand the disease better and most importantly manage it when a loved one is affected by this disease.

- ii) The female patient herself of cervical cancer should be given adequate civic on the management of cervical cancer to avoid the patient looking down on herself and suffer from deep depression and giving up in marital relationships.
- iii) The local government in Lusaka district establishes more facilities with adequate experience health practitioners in the area. It is clear from the research findings that the in some parts of the Lusaka district in Zambia there are no adequate experienced health practitioners as such targeted effort should be made to train adequate number of health practitioners to manage cervical cancer female patients effectively and efficiently.
- iv) There is greater need for more awareness to reduce the psychosocial effects related to cervical cancer on the patients. This will enable the community members to have a good understanding of cervical cancer and provide the required positive support to the cervical cancer patients.

## Conclusion

The research findings show that the prevalence rate of cervical cancer is high in the study area. This calls for the health practitioners on cervical cancer to take proactive approach to manage cervical cancer patients in the study area. The research findings also reveal that there is negative attitude and perception on cervical cancer of people in the study area. This was because of a number of factors such as lack of information about cervical cancer, negative cultural factors, lower education levels and negative social factors. These factors result in preconceived negative ideas about female patients suffering from cervical cancer. The research findings also shows that screening services are accessible to the female patients of cervical cancer however there are a number of challenges that are experienced including lack of proper equipment for screening cervical cancer on the majority of the patients. In some areas it was discovered that the screening services were unavailable making it difficult for the patients to access the screening services. The research also reveals that there is lack of experienced health practitioners in some parts of the study area.

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