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Self-Help Group-Based Awareness of Cervical Cancer Screening - A Narrative Review

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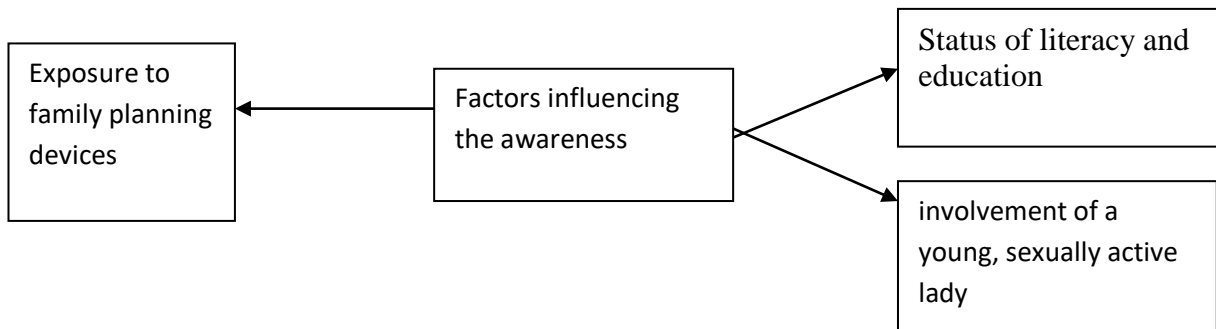
Abstract

In India, one of the most prevalent malignancies affecting women is cervical cancer.¹ Women's access to treatment and palliative care, as well as their knowledge of primary and secondary prevention techniques, need to be improved in order to prevent and control it. A focused strategy is required to eradicate cervical cancer before the World Health Organization's 2030 deadline.¹²

By using tests, examinations, or other quickly applied processes, screening encourages the identification of undiagnosed diseases or problems.³ The ability to conduct screening tests with a significant number of participants and the availability of facilities capable of carrying out follow-up care, diagnosis, and treatment are both necessary for the screening process to be successful.⁴

Introduction

Cervical cancer is the most common type of cancer among rural Indian women. More than 60–70% of tumours are found at advanced stages, with little hope for recovery. Increased survival rates and early identification of cervical cancer are benefits of screening. Women's actions when seeking medical attention may be influenced by their views and understanding about cervical cancer screening.⁵ Cervical cancer is more common in women worldwide than any other type of cancer. Approximately 500,000 women obtain new diagnosis of invasive cervical cancer; most of these women were never checked for the illness.⁶ These ladies come from developing nations in excess of 80% of cases. An estimated 96,922 women in India receive a cervical cancer diagnosis as a result of cancer screening each year.¹⁸ One of the most prevalent and feared illnesses affecting women is cervical carcinoma, which makes up 16% of all instances of the disease worldwide and is most common in India.¹⁹ The situation is far more serious in rural regions, where the majority of women do not have a formal education and are not aware of the risks of cervical cancer. The incidence of cervical cancer in the villages has been found to be decreased by a number of screening methods, including rural cancer registries and camp-based cancer detection. It has been demonstrated that cervical cytology screening reduces the disease's occurrence. despite the fact that several screening methods have been proposed and tested in low-resource environments across our nation. In the current analysis.¹⁹



Factors affecting the disease's awareness are shown in Fig. 1.

Worldwide Illness Burden

Estimates of the global burden of disease (GBD) indicate that low- and middle-income nations currently account for around 70% of all cancer deaths. Oncologists have been working hard to increase cancer patients' chances of survival, yet cancer research and treatment remain among the most difficult areas in the biomedical sciences. Most people agree that around 60% of cancer-related deaths can be avoided with⁷

enhanced facilities for screening (a test or method used to detect disease) and preventive care (removing the causes of disease so that exposure to risk is minimised). Considering that early detection of cancer is linked to a high rate of survival.¹

Risk variables linked to cervical cancer

Oncogenic human papilloma viruses are often linked to cervical cancer (HPVs). Additional risk factors that could change a woman's chance of getting cervical cancer include early marriage, several sexual partners, multiple pregnancies, poor genital cleanliness, and ignorance. The most common sexually transmitted infection, HPV is highly prevalent (9–13%) worldwide and does not currently have a specific therapy. Cervical cancer is frequently associated with oncogenic human papillomaviruses (HPVs). Cervical cancer risk in women may be modified by additional risk factors, including early marriage, having several sexual partners, becoming pregnant more than once, not cleaning your genitalia, and ignorance.⁸The most common sexually transmitted infection, HPV is highly prevalent (9–13%) worldwide and does not currently have a specific therapy. The pre-invasive stage of cervical cancer is protracted, lasting ten to fifteen years. This offers a window of opportunity for early cancer identification as well as the detection and treatment of neoplasia in pre-invasive stages using straightforward outpatient treatment techniques. The prevalence and death rate of this illness are a function of the infrastructure and resources available in the medical field for screening and treating the entire population.⁹

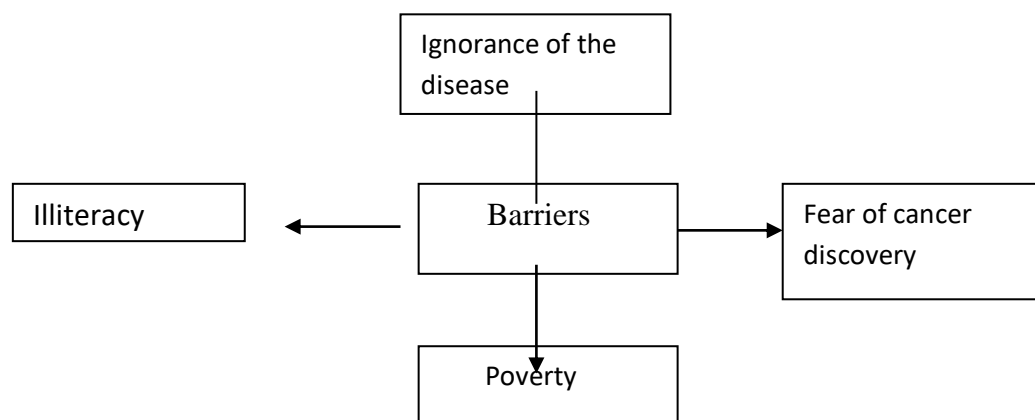


Figure 2 shows the obstacles that contribute to the low early diagnosis rate of cervical cancer.

Pap smears in cytology

In rural India, it is currently the modality that is used the most. It has been shown to about 80% lower the risk of cervical cancer in wealthy countries.¹³ But because of its low sensitivity, it needs a lot of infrastructure, money, and testing iterations.

Indian Initiatives for Screening for Cervical Cancer

If cervical cancer is to be prevented, even one screening round is preferable to none at all in terms of incidence and mortality. The condition is more common in rural areas among women who are mostly poor, have not attended formal school, and are not aware of the risk elements that support the disease's progression. Younger, literate women have more awareness and knowledge than older, illiterate women, according to surveys on Rural women's knowledge, attitude, and practice (KAP). Numerous screening techniques have been used, especially in rural areas, to reduce the frequency of sickness.

Evidence of Self-Help Group-Based Knowledge of Screening for Cervical Cancer

- Through the ASHA health worker programme, which aims to raise awareness and increase the quantity of screenings for cervical cancer and early cancer diagnoses, SHGBAC is contrasted with current awareness [Table/Fig-1]. [10–22].

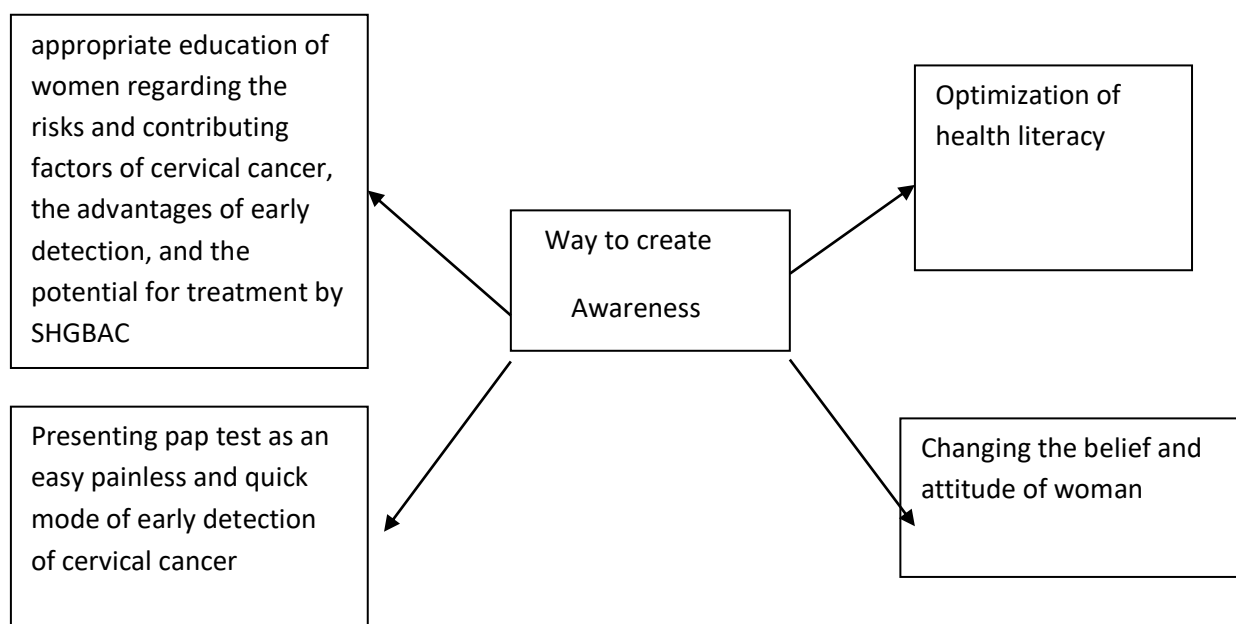


Fig. 3. Ways to create awareness among rural woman.

Author name	Country and year of the study	Objectives of the study	Findings
Abhijit V. Boratne, R. Angusubalakshmi, Smrithi Maniraj ¹⁰	India 2021	to investigate the practices Regarding women's awareness about cervical cancer in rural Puducherry who are involved in self-help groups (SHGs).	According to the study, women's understanding about cervical cancer differed statistically significantly from their educational and socioeconomic background.

Neerja Bhatla, Jyoti Meena ¹¹	India 2021	to increase women's understanding of access to treatment and palliative care, as well as primary and secondary prevention strategies.	Despite all of the advancements, the researchers discovered that Cervical cancer screening is necessary because the virus has already infected millions of women. The new standard of treatment for preventing cervical cancer should include a point-of-care HPV test and broad immunisation.
Michelle Deguara, Neville Calleja ¹²	India 2021	to assess women between the ages of 25 and 64's attitudes towards screening and degree of knowledge regarding cervical cancer.	The study, according to its findings, offers a clearer picture of the populations most at risk in terms of screening attendance and knowledge about cervical cancer. Enhancing health literacy and putting health promotion initiatives into action will raise screening attendance, risk factor awareness, and early symptom recognition.
Saurabh Bobdey , Jignasa Sathwara , Aanchal Jain , Ganesh Balasubramaniam ¹³	India 2021	To evaluate India's cervical cancer burden	The researchers discovered that high-quality cytology screening may not be feasible for widespread usage in underdeveloped nations due to a lack of infrastructure and quality control. Therefore, in resource-poor nations like India, cervical cancer screening programmes based on visual screening tests like VIA/VILI should be created as an essential component of basic health care facilities.
Bhagwan Nene,Kasturi Jayant ¹⁴	India 2021	to identify, within the framework of a randomised controlled study, the variables linked to involvement in the cervical cancer identification and care.	Using suitable tactics to deliver services, good cervical cancer screening participation rates can be accomplished in poor countries' rural areas, regardless of the test being utilised. To significantly boost screening uptake, techniques for communication and delivery that target It is necessary to have older, less educated women who often use reproductive services less regularly.
Neha Taneja,Bhavika Chawla ¹⁵	India 2021	to investigate the screening habits, attitudes, and knowledge of Indian women regarding cervical cancer.	The authors found that effective information, education, and communication are necessary to increase women's knowledge of cervical cancer.
Indira Zhetpisbayeva ¹⁶	India 2023	The aim of this study is to determine and evaluate the factors that lead to the low rates of HPV vaccination and cervical cancer screening among rural residents. to make recommendations for how to solve these issues.	To find the best practices that support health equity, more research on cervical cancer prevention in rural and distant areas is required. The authors discovered that several actions may be taken to increase rural people' participation in HPV vaccination programmes and CC screening programmes, which are necessary to address the greater frequency of CC in these areas.

Supriti Ghosh and Sneha D. ¹⁷	India 2020	To evaluate women's screening habits, attitudes, and knowledge from tribal cultures on cervical cancer	Although the study's female participants had a positive outlook, the scientists discovered that their knowledge of cervical cancer was often inadequate. To enhance these women's knowledge of and compliance with cervical cancer screening screening, a long-term health education programme screening programme is necessary.
Khanna, Divya ¹ ; Khargekar, Naveen, Budukh, Atul ¹⁸	India 2019	the community health workers in the Varanasi area of Uttar Pradesh's knowledge, attitude, and practise (KAP) regarding screening for cervical cancer.	The study concluded that increasing worker education programmes and enticing them to take part in screening campaigns are the most crucial steps towards closing the current gap between the attitudes towards and usage of cervical cancer screening.
Satyanarayana, L, Asthana, S .Bhambani, S Sodhani, P, Gupta, S ²⁰	India 2018	to show how well assisted visual cervical screening tests function in a remote North Indian population compared to traditional Pap smear testing.	The study's findings indicate that VIA screening can sometimes be more successful than the Pap test as a main screening method for identifying high-grade CIN. situations where it is not practical.
Vijay Zutshi, Supriya Dankher & Aarzo Malik ²¹	India 2017	to evaluate practices, views and expertise about screening for cervical cancer and prevention.	The investigation found that although screening is a preventive measure, asymptomatic women do not prioritise it. Thus, it may be advantageous to implement motivational programmes that involve male family members and community leaders to lower the incidence of cervical cancer by immunisation and screening.
Anand Narain Srivastava, Jata Shankar Misra ¹⁹	India 2015	to determine which women belong to high-risk categories so that this screening can be more successful in early detection.	According to the study, initial screening for the prevention and management of cervical cancer in India is also necessary, in addition to the HPV vaccination programme. Educational intervention and awareness programmes are also needed.
Rengaswamy Sankaranarayanan, M.D., Bhagwan M. Nene, M.D. ²²	India 2009	to assess the impact of a single screening cycle on the incidence of cervical cancer and the corresponding death rates in the US by using cytologic testing, human papillomavirus (HPV) testing, or visual inspection of the cervix with acetic acid (VIA).	After only one round of HPV testing, the number of instances of advanced cervical cancer was proven to be statistically considerably reduced, the researchers found. deaths from cervical cancer in an environment with limited resources.

CONCLUSION

In India, the most common cancer among women is cervical cancer. Many screening techniques are available, yet most Indian Women are still not given cervical cancer screenings. The increasing incidence of cervical cancer may be due to a lack of coordinated screening facilities across the country and a lack of awareness about the disease. To increase Women's awareness regarding cervical cancer, as well as efficient informational, educational, and communication

techniques are required. By using a self-help group-based awareness campaign, this project aims to improve cervical cancer screening, early diagnosis, and treatment (SHGBAC).

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