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Cervical cancer information access, needs, preferences and strategies for dissemination among rural kenyan women with low educational attainment: a mixed methods study

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Statement of the problem: Cervical cancer is the leading cause of cancer-related deaths among Sub-Saharan African women yet screening uptake remains sub-optimal. In Kenya, particularly among rural women and those with limited formal education, cervical cancer screening rates are low. Nonetheless, the role of information sources in cervical cancer screening and uptake has not been previously studied. The objective of this study was to identify the needs, preferences and strategies for cervical cancer information dissemination among women rural Kenyan women with low educational attainment, and to investigate the relationship between women's access to information sources and cervical cancer screening uptake.

Methods: A mixed methods study design was employed, involving cross-sectional surveys (N=174) and semi-structured interviews with a sub-sample of women (n=21) from rural Bomet and Kericho Counties. Logistic regression was used to analyze quantitative data, while qualitative results were examined through thematic analysis. The results were then integrated.

Results: The mean age of participants was 45.3 years, with the majority from low-income households (88.5%). Most participants had heard about cervical cancer (82.2%) from the media (36.8%), health workers (24.1%), social networks (21.3%), or other sources (1.7%). Only 6.3% had ever been screened for cervical cancer. Health workers and radio were identified as the most trusted sources of information. Women who had accessed cervical cancer information from multiple sources had 366% higher odds of being screened (Odds ratio=4.66, confidence interval=1.19-18.25). The integration of findings highlighted the importance of using existing community structures, diverse information sources, and verbal communication to promote cervical cancer screening uptake.

Conclusion: Access to health information significantly influences cervical cancer screening uptake. Stakeholders should consider cultural and contextual factors when disseminating cervical cancer information.

Biography

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