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"A study to assess the of national cancer control programme on knowledge regarding prevention of cancer among adults in selected community area at Puducherry.".

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Abstract

Cancer is an important public health problem with 8 to 9 lakh cases occurring every year. At any point of time, it is estimated that there are nearly 25 lakh cases in the country. Research approach was the most significant part of any research. A pre-experimental research design. The population for the present study includes the adults in selected community area. The sample size were 30 adults individual who are living, purpose sampling technique. **Result**: The finding reveals that out of 30 samples. Majority of the adults 18(60%) had moderate level of knowledge, 11(36.7%) had Inadequate level of knowledge, and 1(3.3%) had adequate level of knowledge. The mean and standard deviation level of knowledge regarding awareness on national cancer control programme among adults is (9.93+3.463) respectively.

Keywords- effectiveness, national cancer control programme, knowledge, prevention of cancer, adults

INTRODUCTION

"***Cancer is a journey, but you walk the road alone. There are many places to stop along the way and get nourishment -you just have to be willing to take it".***

-Emily Hollenberg"

Cancer is an important public health problem with 8 to 9 lakh cases occurring every year. At any point of time, it is estimated that there are nearly 25 lakh cases in the country. Every year about 4 lakh deaths occur

due to cancer. 40% of the cancers in the country are related to tobacco use. Data from population-based registries under the National Cancer Registry Programme indicate that the leading sites of cancer among men are cancer of oral cavity, lungs, oesophagus and stomach and among women are cancer of uterine cervix, breast and oral cavity. Cancers namely those of oral and lungs in males and cervix and breast in females account for over 50% of all cancer deaths in India. National Cancer Registry Programme (NCRP): For data base of cancer cases, National Cancer Registry Programme (NCRP) was initiated in 1982 by ICMR, which gives a picture of the magnitude and patterns of cancer.

National Cancer Registry Programme (NCRP) data of Indian Council of Medical Research (ICMR) suggest a wide demographic variation in incidence of cancer. While Aizwal district has an age-adjusted incidence rate (AARs) of 273.4, the rural registry of Barshi in Maharashtra has an AAR of 51.8. These data reflect the impact of environmental and cultural factors on the incidence of cancer. In urban registries like Delhi, Mumbai and Thiruvananthapuram, breast cancer is the most common cancer in women and in registries such as Barshi, Aizwal and Guwahati, cervical cancer is most common in women. Cancer of the stomach and liver are among the most common malignancies in Mizoram and carcinoma of the gall bladder figures among the top five cancers in some registries such as Delhi and Dibrugarh.

REVIEW OF LITERATURE

Miller KD et al, 2022 Sep; In Surveillance Research, American Cancer Society, Atlanta, Georgia. The 3 most prevalent cancers are prostate (3,523,230), melanoma of the skin (760,640), and colon and rectum (726,450) among males and breast (4,055,770), uterine corpus (891,560), and thyroid (823,800) among females. More than one-half (53%) of survivors were diagnosed within the past 10 years, and two-thirds (67%) were aged 65 years or older. One of the largest racial disparities in treatment is for rectal cancer, for which 41% of Black patients with stage I disease receive proctectomy or proctocolectomy compared to 66% of White patients. Surgical receipt is also substantially lower among Black patients with non-small cell lung cancer, 49% for stages I-II and 16% for stage III versus 55% and 22% for White patients, respectively. These treatment disparities are exacerbated by the fact that Black patients continue to be less likely to be diagnosed with stage I disease than White patients for most cancers, with some of the largest disparities for female breast (53% vs 68%) and endometrial (59% vs 73%). Although there are a growing number of tools that can assist patients, caregivers, and clinicians in navigating the various phases of cancer survivorship, further evidence-based strategies and equitable access to available resources are needed to mitigate disparities for communities of color and optimize care for people with a history of cancer.

STATEMENT OF THE PROBLEM:

A study to assess the effectiveness of national cancer control programme on knowledge regarding prevention of cancer among adults in selected community area at puducherry.

OBJECTIVES OF THE STUDY:

1. To assess the knowledge regarding awareness on national cancer control programme among adults.

2. To find out the association between knowledge score regarding cancer with selected demographic variables of adults.

ASSUMPTIONS:

The tool prepared for the study will be sufficient for collecting information regarding National cancer control programme among adults in selected community area.

There may be decreased knowledge of samples regarding the national cancer control programme on knowledge regarding prevention of cancer

MATERIALS AND METHODS:

This chapter includes a description of sample size, sampling technique, sampling criteria. instrument, methods of data collection, research approach, research design setting population, tool description of the tool data collection technique, and plans for data analysis.

SECTION A: It consist of demographic variables including age, gender, religion, educational status, type of the family, marital status, income, dietary habits, bad habits, family history of cancer, previous knowledge regarding cancer, history of any chronic diseases, source of information.

SECTION B: It consist of knowledge items 25 objective type of multiple choice questions with 4 distracts. All questions had only one correct answer, each correct answer was awarded as a single score and scoring interpretation as

SCORING INTERPRETATION:

The knowledge was categorized as below:

KNOWLEDGE LEVEL	SCORING INTERPRETATION
Inadequate knowledge	0-32%
Moderate knowledge	33 -68%
Adequate knowledge	69-100%

RESEARCH APPROACH:

Research approach was the most significant part of any research. Research approach is an umbrella which covers the basic procedure for conducting the research. It involves the description of the plan to investigate the phenomenon under study in a structured (quantitative), unstructured (qualitative) or a combination of the two methods. For the present study, the Quantitative research approach and cross-sectional design was adopted.

RESEARCH DESIGN:

A descriptive research design was adopted for this study.

POPULATION:

The population for the present study includes the adults in selected community area.

SAMPLE:

An adult at selected area kalitheerthalkuppam at Puducherry.

SAMPLE SIZE:

30 Adults individual who are living in the selected area at kalitheerthalkuppam.

SAMPLE TECHNIQUES:

In this study a purpose sampling technique were used for selecting the samples.

SETTING OF THE STUDY:

The study was conducted in selected area at Puducherry at kalitheerthalkuppam village is located in Madagadipet Taluk, district of Puducherry, state India. It is located 26 Km towards west from district headquarters Puducherry, pin code 605107 and postal head office villianur. This place is the border of the Puducherry district and Villupuram district. The village has 666 houses and has population of 2731 of which 1320 are males while 1411 are females as per population census.

SAMPLE SELECTION CRITERIA:

Inclusion criteria:

- Both male and female adults
- Person who willing to participate in the study
- Person who are available during data collection

Exclusion criteria:

- Persons who not willing to participate
- Patient who are all absent at the time of data collection
- Patients who are terminally ill

RESULTS:

The finding reveals that out of 30 samples the study to assess the effectiveness of national cancer control programme on knowledge regarding prevention of cancer among adults in selected community area at Puducherry. Majority of the adults 18(60%) had moderate level of knowledge, 11(36.7%) had Inadequate level of knowledge, and 1(3.3%) had adequate level of knowledge. The mean and standard deviation level of knowledge regarding awareness on national cancer control programme among adults is (9.93+3.463) respectively

Frequency and percentage wise distribution of demographic variables among adults.

SL.NO	DEMOGRAPHIC VARIABLES	FREQUENCY (N)	PERCENTAGE (%)
1	**Age in years**		
	a) 19 to 27 years	1	3.3
	b) 28 to 36 years	23	76.7
	c) 37 to 45 years	6	20
	d) 46 to 55 years	0	0
2	**Gender**		
	a) Male	13	43.3
	b) Female	16	53.3
	c) Transgender	1	3.4
3	**Educational status**		
	a) Illiterate	8	26.7
	b) Primary	2	6.6
	c) Secondary	8	26.7
	d) Degree and above	12	40
4	**Monthly income of the family per month?**		
	a) Below Rs.5000/-	3	10
	b) Rs. 6000/- to 10000/-	8	26.6
	c) Rs. 11000/- to 15000/-	8	26.7
	d) Rs. 16000/- or above	11	36.7
5	**Marital status**		
	a) Single	16	53.3
	b) Married	14	46.7
	c)Widower	0	0
	d) Divorced	0	0
6	**Religion**		
	a) Hindu	16	53.3
	b) Muslim	3	10

	c) Christian	11	36.7
	d) Others	0	0
7	**Type of family**		
	a) Joint family	13	43.3
	b) Nuclear family	17	56.7
8	**Diet pattern**		
	a) vegetarian	1	3.3
	b) Non – vegetarian	29	96.7
9	**Any family history of cancer**		
	a) Yes	3	10
	b) No	27	90
10	**Any previous knowledge regarding cancer**		
	a) Yes	3	10
	b) No	27	90
11	**Bad habits**		
	a) Smoking	0	0
	b) Alcohol	2	6.7
	c) Betel leaves chewing	0	0
	d) Nil	28	93.3
12	**History of any chronic diseases**		
	a) Yes	1	3.3
	b) No	29	96.7
13	**Source of information regarding cancer**		
	a) Radio or television	6	20
	b) Newspaper	15	50
	c) Medical professionals	4	13.3
	d) Other	5	16.7

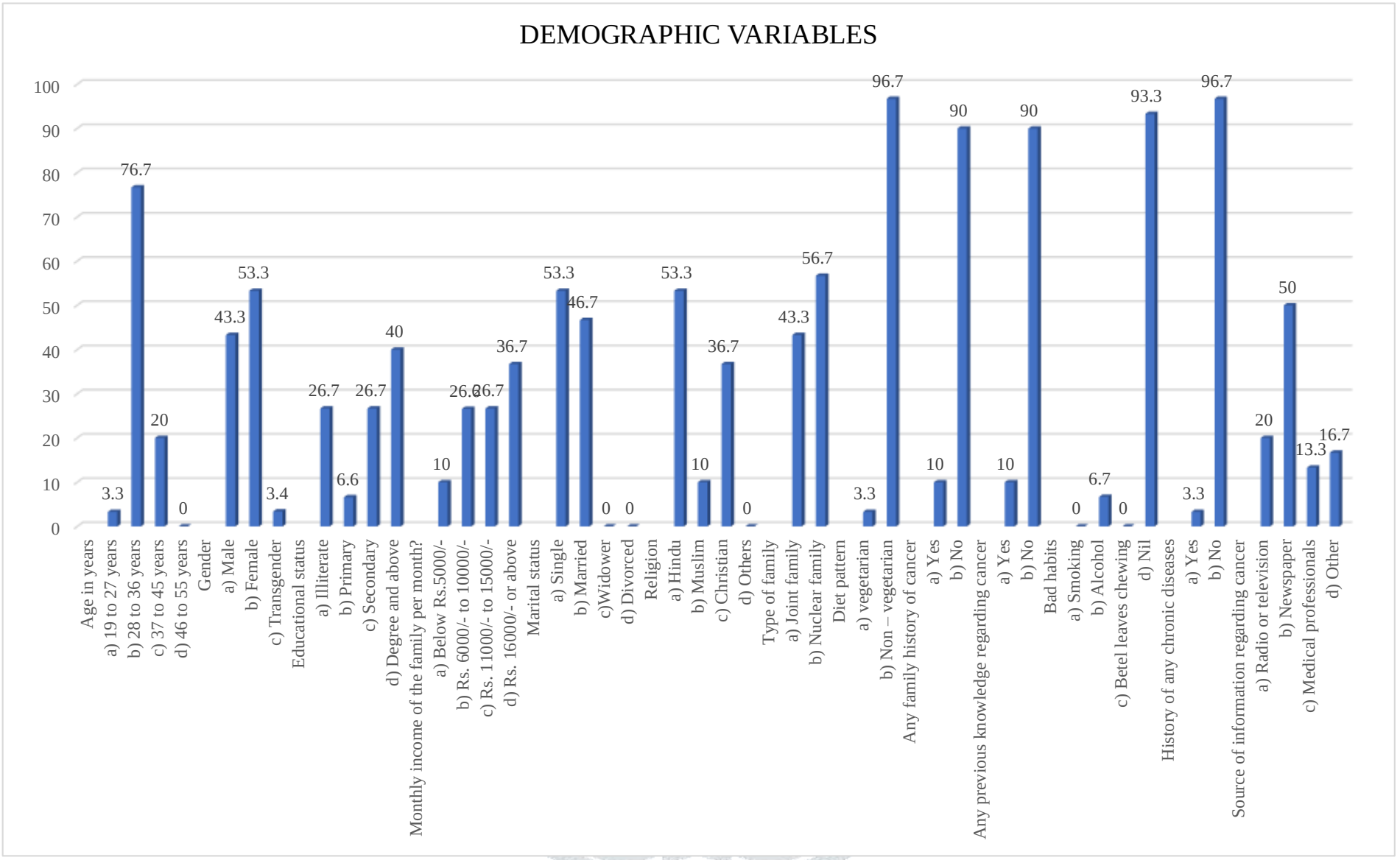

Fig 4.1 percentage wise distribution of demographic variables

Frequency and percentage wise distribution of level of knowledge regarding awareness on national cancer control programme among adults.

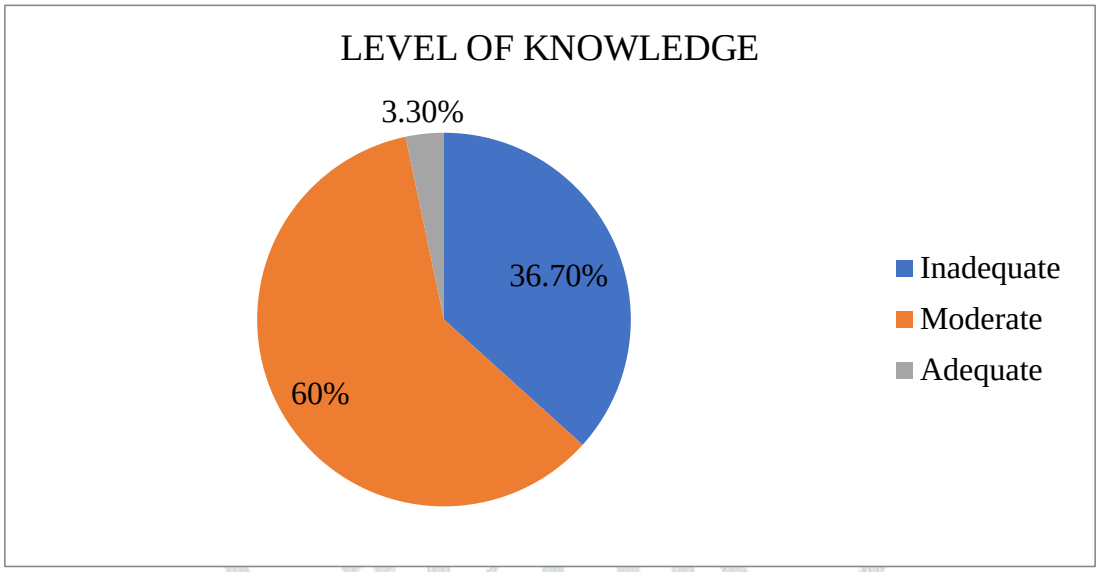

Fig 4.2: Percentage wise distribution of level of knowledge regarding awareness on national cancer control programme among adults.

Association between the level of knowledge score regarding cancer with selected demographic variables of adults.

SL. NO	DEMOGRAPHIC VARIABLES	LEVEL OF KNOWLEDGE						Chi-square X^2 and P-Value
		INADEQUATE		MODERATE		ADEQUATE		
		N	%	N	%	N	%	
1	**Age in years**							
	a) 19-27 years	0	0	1	5.6	0	0	X^2=3.46 Df=4 p =0.483 NS
	b) 28-36 years	7	63.6	15	83.3	1	100	
	c) 37-45 years	4	36.4	2	11.1	0	0	
	d) 46-55 years	0	0	0	0	0	0	
2	**Gender**							
	a) Male	2	18.2	11	61.1	0	0	X^2=6.96 Df=4 p =0.138 NS
	b) Female	8	72.7	7	38.9	1	100	
	c) Transgender	1	9.1	0	0	0	0	
3	**Educational status**							
	a) Illiterate	5	45.5	3	16.7	0	0	X^2=7.80 Df=6 p =0.252 NS
	b) Primary	0	0	2	11.1	0	0	
	c) Secondary	1	9.1	6	33.3	1	100	
	d) Degree and above	5	45.2	7	38.9	0	0	
4	**Monthly income of the family per month**							

	a) Below Rs.5000/-	2	18.2	1	5.6	0	0	X^2=5.71
	b) Rs. 6000/- to 10000/-	1	9.1	6	33.3	1	100	Df=6
	c)Rs. 11000/- to 15000/-	3	27.3	5	27.8	0	0	p =0.456
	d) Rs. 16000/- or above	5	45.4	6	33.3	0	0	NS
5	**Marital status**							
	a) Single	6	54.5	9	50	1	100	X^2=0.962
	b) Married	5	45.5	9	50	0	0	Df=2
	c)Widower	0	0	0	0	0	0	p =0.618
	d) Divorced	0	0	0	0	0	0	NS
6	**Religion**							
	a) Hindu	5	45.5	10	55.6	1	100	X^2=1.33
	b) Muslim	1	9.1	2	11.1	0	0	Df=4
	c) Christian	5	45.4	6	33.3	0	0	p =0.855
	d) Others	0	0	0	0	0	0	NS
7	**Type of family**							X^2=0.794
	a) Joint family	5	45.5	8	44.4	0	0	Df=2
	b) Nuclear family	6	54.5	10	55.6	1	100	p =0.672
								NS
8	**Diet pattern**							X^2=1.78
	a) vegetarian	1	9.1	0	0	0	0	Df=2
	b) Non – vegetarian	10	90.9	18	100	1	100	p =0.409
								NS
9	**Any family history of cancer**							X^2=1.32
	a) Yes	2	18.2	1	5.6	0	0	Df=2
	b) No	9	81.8	17	94.4	1	100	p =0.516
								NS
10	**Any previous knowledge regarding cancer**							X^2=0.146
	a) Yes	1	9.1	2	11.1	0	0	Df=2
	b) No	10	90.9	16	88.9	1	100	p =0.930
								NS
11	**Bad habits**							
	a) Smoking	0	0	0	0	0	0	X^2=0.211
	b) Alcohol	1	9.1	1	5.6	0	0	Df=2
	c) Betel leaves chewing	0	0	0	0	0	0	p =0.900
	d) Nil	10	90.9	17	94.4	1	100	NS
12	**History of any chronic diseases**							X^2=0.690
	a) Yes	0	0	1	5.6	0	0	Df=2

	b) No	11	100	17	94.4	1	100	p =0.708 NS
13	**Source of information regarding cancer**							
	a) Radio or television	2	18.2	4	22.2	0	0	**X^2=13.77**
	b) Newspaper	3	27.3	12	66.7	0	0	**Df=6**
	c)Medical professionals	3	27.3	0	0	1	100	**p =0.032**
	d) Other	3	27.2	2	11.1	0	0	***S**

-p < 0.05 significant, *-p < 0.001highly significant, NS-Non significant

The table 3 depicts that the demographic variable, Source of information regarding cancer had shown statistically significant association between the level of knowledge score regarding cancer with selected demographic variables of adults. The other demographic variable had not shown statistically significant association between the level of knowledge score regarding cancer with selected demographic variables of adults respectively.

CONCLUSION AND RECOMMENDATIONS:

The present study was to assess the effectiveness of national cancer control programme regarding cancer among adults in selected community area at Puducherry. A pre experimental research design was selected for this study with quantitative research approach was adopted for this study. Population of the study consist of community peoples. The study samples were selected by using purposive sampling technique at selected community area at Puducherry.

NURSING IMPLICATION:

The study has implicated for nursing practice, nursing education, nursing administration and nursing research.

NURSING PRACTICE:

The nurse working in the hospital, clinical setting and in community should practice health education as an integral part of nursing profession. The nurse will instruct about national cancer control programme through this effective health education it can also be improved.

NURSING EDUCATION:

The nurse educator to know about the national cancer control programme. The nursing student needs to provide health education, etc.,

NURSING ADMINISTRATION:

The nursing administration should take on active role in organizing and implementing health education campus in the community.

NURSING RESEARCH:

The findings of the study help the professional nurses and student to develop enquiry by providing a base. The study helps the nurse researcher to develop knowledge of National cancer control programme.

RECOMMENDATION:

- A similar study can be conducted by large number of samples in future.
- The study was conducted to particular group of people at particular age.
- This study can be done at the various states of India
- The study can do at large number of samples.

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