

Cancer knowledge, attitudes, and practice among nurses and midwives in Isparta, Turkiye

Hilal Demiralay ¹, Isparta Health Directorate, Family Health Center No. 71, Isparta, Turkey.

Suggested Citation:

Demiralay, H. (2022). Cancer knowledge, attitudes and practice among nurses and midwives in Isparta, Turkiye. *International Journal of Emerging Trends in Health Sciences*. 6(2), 57-62. <https://doi.org/10.18844/ijeths.v6i2.8666>

Received from April 17, 2022; revised from June 28, 2022; accepted from August 02, 2022.

Selection and peer review under the responsibility of Prof. Dr. Nilgun Sarp, Uskudar University, İstanbul.

©2022 by the authors. Licensee Birlesik Dunya Yenilik Arastirma ve Yayıncılık Merkezi, North Nicosia, Cyprus.

This article is an open-access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (<https://creativecommons.org/licenses/by/4.0/>).

Abstract

This study aims to investigate the habits, lifestyle, knowledge, attitudes, and practices of nurses and midwives serving in Isparta. Within the scope of the study, data were collected through face-to-face interviews with 300 midwives and nurses aged 19-55 working in Isparta province. Many of the participants in the study stated that the most common type of cancer in women is breast cancer. While most of the participants thought that the most common type of cancer in men was lung cancer, few stated that it was prostate cancer. No statistically significant difference was observed in the knowledge and behaviors of the participants on cancer, according to whether they are midwives or nurses, their income status, and their education level. While nurses and midwives have a high level of risk perception and knowledge about cancer, it has been observed that they do not show the necessary care in control and treatment.

Keywords: Attitudes; cancer; knowledge; midwives; nurses.

* ADDRESS FOR CORRESPONDENCE: Hilal Demiralay, Isparta Health Directorate, Family Health Center No. 71, Isparta, Turkey.
E-mail address: demiralay.hilal@gmail.com

1. Introduction

Smoking, alcohol, ionizing radiation, certain chemicals and hormones, inadequate and unbalanced diet, lack of physical activity, and obesity are some risk factor's role in cancer formation (Armstrong and Doll, 1975; Strensward and Clark, 2004). Nearly half of starting regular cigarette smokers die in the early stages of life because of smoking. Cigarettes have the greatest etiological importance in cancer deaths (Boyle and Levin, 2008). 80 - 90% of lung cancer is emerging in smokers. Lung cancer risk in smokers compared to people who never smoked 10 to 65-fold increased (Wei and Spitz, 1997). Considering the role of smoking in the development of lung cancer, lung cancer includes prevented cancer (Skuladottir et al., 2000).

Insufficient, excess, or the wrong food habits and improper preparation and cooking of food cause major health problems. Some of these health problems also included organ cancers (Rabiu and Yahuza, 2023). Good and conscious nutrition has great importance in the prevention of cancer as well as in the treatment process. Obesity is associated with the development of some cancers. One of the biggest causes of death in obese patients is cancer (Efil, 2005; Muhsiroglu, 2007; Yörük et al. 2016).

Taking more fatty foods, and insufficient consumption of compote food, fruits, and vegetables are for cancer-risk situations. Consuming salt and salty foods were shown to increase the risk of stomach cancer, consuming sugar and sugary foods causes excess in colorectal, pancreatic, breast, and ovarian cancer risk, consuming excess fat, calorie foods, and obesity causes breast, ovarian, and prostate cancer risk (Thompson et al. 2005; Renehan et al., 2008; Nöthlings et al. 2007). Studies in recent years have shown that cancer is a disease that can be prevented and treated (Hamilton et al., 2019; Hayward, Cidro, Dutton & Passey, 2020). Over 30% of cancer deaths could be prevented.

1.1. Purpose of study

Nurses are primary healthcare workers in hospitals who give information and consultation to the public. Individuals receive their first check-ups, vaccinations, growth and follow-up, pregnancy, elderly care, and education and consultancy services on many issues from nurses. This study aims to investigate the lifestyle and habits of nurses, their knowledge, attitudes, and practices on cancer.

2. Materials and Methods

2.1. Participants

This research was performed, on 19-55 years of age, 300 women nurses and midwives. The prepared questionnaire was administered to receive consent from nurses and midwives by the method of face-to-face interviews. Midwives and nurses were assessed about cancer risk perception, knowledge, attitudes, and practice.

2.2. Data Collection Instrument

Data were obtained using a demographic survey. The questionnaire consists of 10 questions about socio-demographic characteristics and an information questionnaire consisting of 20 questions prepared by the literature. The questions in the information questionnaire were prepared in a multiple-choice format.

2.3. Analysis

Statistical analysis was performed with SPSS statistical analysis software. Analysis results were presented as numbers and percentages. The chi-square test was used for the comparison and classified independence of variables. The significance level was set at 5%.

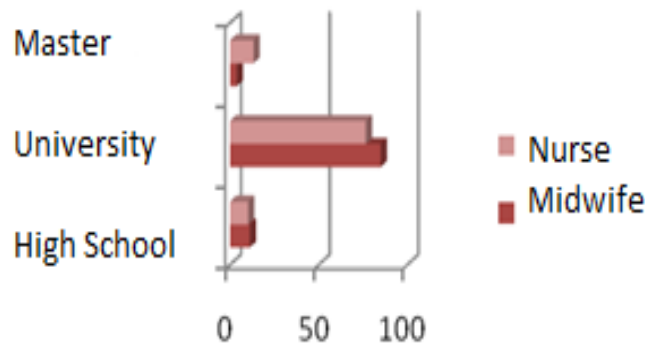
2.4. Ethics

Ethics approval was obtained from the Ethics Committee of Süleyman Demirel University for this study. Since the data collection instrument was an interview, oral permission was taken from the participants before the commencement of the interviews. Their identities were hidden, and the study did not harm the environment, the public, or the participants.

3. Results

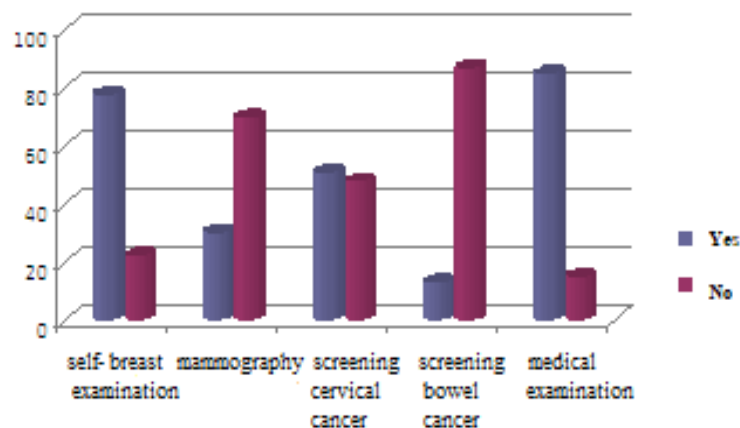
Knowledge and behaviors on cancer of participants have not observed statistically significant differences according to income and education level, to be a nurse or midwife ($p > 0.05$). Participating nurses in the study 76.6% of university graduates, 13.3% have a master's degree, and 10.2% are high school graduates. Participating midwives in the study, 85% of university graduates, 3.8% have a master's degree, and 11.2% are high school graduates (Figure 1).

Figure 1
Participants' educational levels



14.9% of nurses and midwives stated that they were never to be examined by a doctor. 8.7% have a medical examination every six months, while 25.5% of six-twelve months, the rest of the participants being a medical examination for two years. 78,4% of participants do a self-breast examination, 29.8% have taken mammography once in their life, 51.4% have done screening for cervical cancer, and 13% have bowel cancer (Figure 2). 85.6% of the participants stated that cancer prevalence increased in recent years.

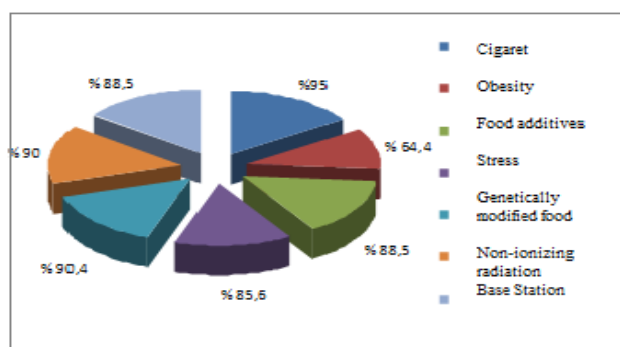
Figure 2
The rate of participants' examination taking



83.2% of nurses and midwives stated that breast cancer is the most common form of cancer in women. 63% think that the most common type of cancer in men is lung cancer and 29.3% prostate cancer.

Nurses and midwives noted that obesity, non-ionizing radiation, inadequate consumption of vegetables and fruits, wrong preparation of food, lack of physical activity, and including additives and genetically modified conditions increase cancer risks (Figure 3).

Figure 3
Cancer factors perception of participants



4. Discussion

Cancer knowledge, attitudes, and practice of nurses and midwives were investigated in this study. Respondents consist of 60% nurses and 40% midwives. A significant difference has not been observed in points of knowledge, attitudes, and behavior between nurses and midwives. 80.8% of surveyed nurses and midwives are university graduates, of which 8.5% have a master's degree. 10.7% are high school graduates. This shows that the level of training of nurses and midwives is significantly higher. In the result of this study, a significant difference wasn't observed in knowledge, attitudes, and practice according to the level of education, compared to the study of Ebu, Abotsi-Foli & Gakpo, (2021).

The distribution of cancer types varies from country to country depending on their level of development, the distribution of cancer types can vary in different cities within the same country (Jemal et al. 2005; Wiseman, 2008; Ogunkorode, Adeniji & Esan, 2023). According to the Public Health Agency of Turkey, in 2008 most common in men the lung cancer at 69,2% rate, and breast cancer is seen in women most frequently at 40.7 %. With a rate of 37.6 % the second most common cancer is prostate cancer in men. In this study, 63% of nurses and midwives reported that lung cancer is seen most frequently in men, 29.3 % percent, prostate cancer is the most common. 83.2 % percent of respondents reported breast cancer is seen most frequently in women. These results are consistent with the literature data. 61 % of respondents stated that cancer is a disease that can be prevented. The awareness of cancer is a disease that can be prevented and can be controlled in recent years has begun to increase (Tuncer, 2008). Cancer has the highest potential preventability of all chronic diseases reported in new scientific studies (Sener and Grey, 2005; Doughtie et al., 2020).

In this study, participants reveals that factors such as smoking, obesity, stress, lack of physical activity, and low consumption of fruit and vegetable increase cancer. Environmental and dietary factors have an importance important in several cancer mortality studies (Güler, 1998). The effective prevention of risk factors such as tobacco use, unhealthy diet, physical inactivity, and alcohol use will reduce the risk of cancer in 2008. World Cancer Report stated that effective screening can successfully treat many cancer diagnoses (Wei and Spitz, 1997). In this study, 90.4% of nurses and midwives thought that genetically modified foods and food additives affect cancer, and 9.6% stated that 'I have no information about it'. A similar study has shown 31% of students of the Faculty of Health Sciences have a good level of knowledge about genetically modified foods (Tokuç et al. 2013; Düzova et al. 2022).

Fourteen percent (14%) of midwives and nurses stated that they have ever made a medical examination for the risk of cancer, 70% of all did not make the mammography, 48,6% of all that take any cervical cancer screening (pap smear), 21.6 % of them weren't taking breast self-examination, 86% wasn't screening for bowel cancer. In a conducted study, 37% of school nursing students don't make breast self-examination, and 95% of all stated that they didn't make a clinical breast examination (Aslan et al. 2007; Bouya et al. 2019). In this study, 23% of respondents indicated that they didn't have training in health institutions for dealing with cancer.

5. Conclusions

Risk perception and knowledge levels of nurses and midwives were higher against cancer. It is seen that they didn't have the necessary attention to the control and treatment issues. Midwives and nurses are knowledgeable, educated, and reliable healthcare workers about health issues. They must be in the case of cancer disease prevention, diagnosis, treatment, coordination, and planning stages.

Health care that may allow enough time for patients, who can understand your feelings and concerns, to be ready to support, is much needed. Also, by supporting our nurses and midwives doing more of these; we must give them the necessary training. Specific branches of nursing should be created.

References

- Armstrong, B., and Doll, R. (1975). Environmental factors and cancer incidence and mortality in different countries, with special reference to dietary practices. *Int J Cancer*, 15:617-631. <https://onlinelibrary.wiley.com/doi/abs/10.1002/ijc.2910150411>
- Aslan, A., Temiz, M., Yiğit, E. (2007). Hemşirelik Yüksek Okulu Öğrencilerinin Meme Kanseri Hakkında Bilgi, Tutum ve Davranışları. *TSK Koruyucu Hekimlik Bülteni*; 6 (3). <http://openaccess.mku.edu.tr/xmlui/handle/20.500.12483/885>
- Bouya, S., Balouchi, A., Maleknejad, A., Koochakzai, M., AlKhasawneh, E., Abdollahimohammad, A. (2019). Cancer Pain Management Among Oncology Nurses: Knowledge, Attitude, Related Factors, and Clinical Recommendations: A Systematic Review. *Journal of Cancer Education*; 34:839–846. <https://link.springer.com/article/10.1007/s13187-018-1433-6>
- Boyle, P., and Levin, B. (2008). World Cancer Report. World Health Organization, International Agency for Research on Cancer, Lyon. <https://www.cabdirect.org/cabdirect/abstract/20103010665>
- Doughtie, K., Shaitelman, S. F., Stauder, M. C., Lopez-Varon, M., Baker, E., Salcedo, M. P., ... & Schmeler, K. (2020). The Role of Nurse Practitioners in Global Cancer Care. *International Journal of Radiation Oncology, Biology, Physics*, 108(3), S80-S81. [https://www.redjournal.org/article/S0360-3016\(20\)33652-X/abstract](https://www.redjournal.org/article/S0360-3016(20)33652-X/abstract)
- Duzova, M., Küçükinalı, S., Emamvırdı, A., Kozak, A. T., Genç, H. İ., Cırık, H. A., Ulucan, A. M. (2022). Knowledge, Attitudes and Behaviors of Medical School Students about HPV, HPV Vaccine and Cervical Cancer: A Survey Study in a Medical School. *Genel Tıp Dergisi*, 32(6), 724-729. <https://dergipark.org.tr/en/pub/geneltip/issue/74876/1219410>
- Ebu, N. I., Abotsi-Foli, G. E., & Gakpo, D. F. (2021). Nurses' and midwives' knowledge, attitudes, and acceptance regarding human papillomavirus vaccination in Ghana: a cross-sectional study. *BMC nursing*, 20, 1-10. <https://link.springer.com/article/10.1186/s12912-020-00530-x>
- Efil, S. (2005). *Sağlık çalışanlarında obezite sıklığı ve etkileyen faktörlerin değerlendirilmesi*. Afyon Kocatepe Üniversitesi. İç Hastalıkları Hemşireliği Anabilim Dalı, Yüksek Lisans Tezi, Afyon. <http://acikerisim.aku.edu.tr/xmlui/handle/11630/3902>
- Güler, N., (1997) *Çevre ve Kanser*. I. Ulusal Çevre Hekimliği Kongresi 1997, I. Ulusal Çevre Hekimliği Kongre Kitabı; 28-48. Ankara.
- Hamilton, K., Henderson, J., Burton, E., & Hagger, M. S. (2019). Discussing lifestyle behaviors: perspectives and experiences of general practitioners. *Health psychology and behavioral medicine*, 7(1), 290-307. <https://www.tandfonline.com/doi/abs/10.1080/21642850.2019.1648216>
- Hayward, A., Cidro, J., Dutton, R., & Passey, K. (2020). A review of health and wellness studies involving Inuit of Manitoba and Nunavut. *International Journal of Circumpolar Health*, 79(1), 1779524. <https://www.tandfonline.com/doi/abs/10.1080/22423982.2020.1779524>

- Jemal, A., Clegg, L.X., Ward, E., Ries, L.A., Wu, X., Jamison, P.M. (2004). Annual report to the nation on the status of cancer, 1975-2001, with a special feature regarding survival. *Cancer*;101(1):3-27.
- Muhsiroğlu, O., (2007). *Beslenme ve Kanser*. Hasta Bilgilendirme Kitaplığı. Ankara: Gata Basımevi.
- Nöthlings, U., Murphy, S.P., Wilkens, L.R., Henderson BE, Kolonel LN. (2007) Dietary glycemic load, added sugars, and carbohydrates as risk factors for pancreatic cancer: the Multiethnic Cohort Study. 1–4. *Am J Clin Nutr*; 86:1495-501. <https://academic.oup.com/ajcn/article-abstract/86/5/1495/4754408>
- Ogunkorode, A., Adeniji, O. M., & Esan, D. T. (2023). Assessment of nurses' perception of role of genetics in development of breast cancer at Federal Teaching Hospital, Ido-Ekiti. *Revista de Senologia y Patología Mamaria*, 36(2), 100441. <https://www.sciencedirect.com/science/article/pii/S0214158222001323>
- Rabiu, I., & Yahuza, Z. (2023). Knowledge and Attitude towards Human Papilloma Virus Infection, Vaccines, and Cervical Cancer Prevention among School Students in Kano, Nigeria. *Advances in Virology*. <https://www.hindawi.com/journals/av/2023/2803420/>
- Renahan, A.G., Tyson, M., Egger, M., Heler, R.F., Zwahle, M., (2008) Body-mass index and incidence of cancer: a systematic review and meta-analysis of prospective observational studies. *Lancet*; 371: 569–78. <https://www.sciencedirect.com/science/article/pii/S014067360860269X>
- Sener, S.F. and Grey, N. (2005). The global burden of cancer. *J Surg Oncol*; 92: 1-3.
- Skuladottir, H., Olsen, J.H., Hirsch, F.R. (2000). Incidence of lung cancer in Denmark: historical and actual status. *Lung Cancer*; 27:107-18. <https://www.sciencedirect.com/science/article/pii/S016950029900104X>
- Strensward, J., Clark, D. (2004). *Palliative medicine-a global perspective*. In: Doyle D, Hanks G, Cherny N, Camlan K, editors. Oxford textbook of palliative medicine. 3rd ed. Oxford: Oxford University Press; 1119-224.
- Thompson, P.A, Lopez, A.M., Stopeck, A., (2005) Breast Cancer Prevention. in: Fundamentals of Cancer Prevention. Ed: Alberts DS, Hess LM ed. Springer; 255-276
- Tokuç, B., Aktaş, E., Yanık, G., Yiğit, M. (2013). *Sağlık Bilimleri Fakültesi öğrencilerinin Genetiği Değiştirilmiş Organizmalar Konusunda Bilgi ve Tutumları*. 16. Ulusal Halk Sağlığı Kongresi.
- Tuncer, M., (2008) *Türkiye’de Kanser Kontrolü*. Türkiye Cumhuriyeti Sağlık Bakanlığı Kanserele Savaş Dairesi. Ankara.
- Wei, Q., and Spitz, M.R. (1997). The role of DNA repair capacity in susceptibility to lung cancer: A review. *Cancer and Metastasis Reviews* 16:295-307. <https://link.springer.com/article/10.1023/A:1005852211430>
- Wiseman, M. (2008). The second world cancer research fund/American institute for cancer research expert report. food, nutrition, physical activity, and the prevention of cancer: a global perspective: nutrition society and BAPEN Medical Symposium on ‘nutrition support in cancer therapy’. *Proceedings of the Nutrition Society*, 67(3), 253-256. <https://tinyurl.com/yyc5upa>
- Yörük, S., Açıkgöz, A., Ergör, G., (2016). Determination of knowledge levels, attitude, and behaviors of female university students concerning cervical cancer, human papillomavirus, and its vaccine. *BMC Women's Health*; 16:51. <https://bmcwomenshealth.biomedcentral.com/articles/10.1186/s12905-016-0330-6>