The role of culture and literacy in knowledge utilization and management of cancer in Kenya

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Background

- Cancer IS among the leading causes of morbidity and mortality worldwide, with approximately 14 million new cases and 8.2 million cancer related deaths in 2012 (World Cancer report 2014)
- It is projected that an estimated 15.5 million people will be diagnosed, and 12 million will die of cancer in the year 2030
- This is due to shifting trends in health behaviors (e.g. increases in smoking and sedentary lifestyles)
• In Kenya, cancer ranks third on causes of deaths in the country

• 80% of reported cases of cancer are diagnosed at advanced stages, when very little can be achieved in terms of curative treatment (Kenya Cancer Statistics & National Strategies 2011-2016)
In its strategic plan, the Kenya Ministry of public health and sanitation and ministry of medical services (2011) have emphasized enhanced health promotion, education and advocacy as one of the key strategies to improve public understanding of cancer.

Despite the above efforts, cancer continues to claim many lives in the country.
Aim

- The research aim was to investigate the role that culture ad literacy plays in the screening, prevention, and management of cancer.
Health literacy as a personal asset

1. Prior understanding of individual capacity – reading fluency, numeracy, existing knowledge
2. Tailored information, communication, education
3. Developed knowledge and capability
4. Skills in social organization and advocacy
5. Skills in negotiation and self-management
6. Improved Health Literacy
7. Changed health behaviours and practices
8. Engagement in social action for health
9. Participation in changing social norms and practices
10. Improved health outcomes, healthy choices and opportunities

Nutbeam, 2008: 2076
Study objectives

- Determine the existing knowledge on cancer among Kenyan population

- Establish cultural factors that influence screening, prevention and management of cancer in Kenya.

- Find awareness raising strategies that can be used in the screening, prevention and management of cancer.
Data collection

The research adopted both quantitative and qualitative approach.

- Questionnaires (general population)
- Interviews (medical practitioners)
- Focus group discussions
- Document analysis
Findings

- Cancer information is documented and passed mainly in English or Kiswahili hence only reaches a few

- Access to information in rural areas is limited

- Individuals with low literacy have less knowledge of early detection and screening of cancer
WHAT IS CERVICAL CANCER?

Cervical cancer is a type of cancer that develops in a woman’s cervix, the lower part of the uterus (womb). On average, a woman dies every two minutes from cervical cancer in the world.

WHAT CAUSES CERVICAL CANCER?

Almost all cervical cancer is caused by HUMAN PAPILLOMA VIRUS (HPV) infections.

WHAT IS HPV?

Human papilloma virus (HPV) is the name of a group of viruses that are very common. HPV can be transmitted through sexual contact.

HPV IS VERY COMMON.

Most sexually active women and men will be infected with HPV at some point in their lives.

Most HPV infections will resolve naturally, but some infections can lead to abnormal cells in the cervix. If the abnormal cells are not removed or resolved naturally, they can lead to cervical cancer.
ARE THERE ANY SYMPTOMS OF HPV INFECTIONS AND CERVICAL CANCER?

There are no specific symptoms of HPV infections before cancer occurs.1 The symptoms of cervical cancer only appear late, when the cancer is advanced.2 Symptoms may include:

- Irregular bleeding between periods
- Bleeding after sex
- Discharge
- Fatigue and weight loss
- Vaginal discomfort or itchy discharge
- A single swollen leg

*These symptoms are not linked to cervical cancer. Please consult your doctor if you have one or more of the shown symptoms.

HOW CAN YOU PROTECT AGAINST HPV AND CERVICAL CANCER?

Cervical cancer can be prevented through regular screening. Screening is most commonly done via a technique that is called the PAP SMEAR.

**Screening can help to detect abnormal cells caused by HPV at an early stage.**
Once detected these cells require careful follow up or may need to be removed through a small operation. *

**Vaccination** can help to reduce a large proportion of cancer-carrying HPV infections in the first place and therefore strongly reduce the risk of cervical cancer.

The World Health Organization recommends a combination of vaccination and screening to prevent cervical cancer.

**WHAT’S NEXT?**

Help protect your daughter and yourself from the risks of HPV and cervical cancer – talk to your doctor today.
Viewed as a death sentence

- People believe cancer is not treatable, hence considered a death sentence
- In many cases, a diagnosis of cancer is kept as a secret from the patient—revealed to a member of the family
- Cancer is, often referred to in silent tones
- Treatments seem not to offer much hope—particularly to people with low financial resources
Varied theories

- Caused by limited heath literacy- Misinformation from friends leads to considerable misconceptions
  - Cancer in infectious
  - Fear for screening-Knowing their status will hasten death
  - Cutting into the cancer makes it spread to other organs
Fear for embarrassment

- Fear for being viewed as defective or less feminine or masculine to their partners (prostate, cervical or breast cancers)
- Men delay seeking treatment due to fears that treatment will render them sterile
- The sensitivity of the parts of the body affected compels men to suffer silently and only resort to treatment when they cannot bear the pain any further.
Witchcraft

- Cancer was (and still is) associated to witchcraft, or curse-chira
- They often seek healing from witch doctors
- Medical attention is sought when it is too late
Taboo language

- Culturally, reproductive language is prohibited between genders and age groups.

- Talking about breast, cervical or prostate cancer symptoms or body parts affected by the disease involves the use of what is considered taboo language.

- They are less willing to undergo the necessary physical exams to investigate the cause of such symptoms.
• No specific name for prostate cancer- often referred to as ‘ugonjwa ya wazee’ (men’s disease)

• In the Kikuyu community, the breast is more talked about openly in the community than prostate and cervical cancers (not affecting areas ‘below the belt’).
Age and gender differences

- Parents are not comfortable talking about their ailments to younger people (their children & medical practitioners)

- Culture does not permit parents to talk about their private parts to their sons/daughters

- Unless they have a neutral person they can confide in, they will live with the disease as long as it is bearable
Religion

- Punishment for sin - patient urged to seek forgiveness from God

- Religious beliefs help them to cope

- Prayer gives hope for healing as well as assurance of eternal peace and life after death
CONCLUSION

- Although there is a huge chunk of information available about cancer, correct information is only available to a small population.
- Improved strategies tailored to patient culture and health literacy is essential.
- Need to demystify cancer and minimize barriers that hinder accessibility to information.
Recommendations

- Health promotion activities should consider the health communication barriers of low health literacy and limited English proficiency to encourage more people to go for screening (translate materials into vernacular).

- Medical practitioners to be prepared for a diversity of attitudes, values, and practices and respect them.

- Demystify cancer through survivorship campaigns – will help in changing stigma.
Questions
Purnell: Cultural Competence

- Having the skills, knowledge, and understanding about another culture that allows healthcare provider to assess and intervene in a culturally acceptable manner.
- Knowledge about a diverse culture means you know what questions to ask.
- Developing an awareness of one’s own existence, sensations, thoughts, and environment without letting it have an undue influence on those from other backgrounds.
- Accepting and respecting cultural differences.