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Motivational factors for women to visit early detection clinics for breast cancer in Baghdad

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Abstract

Background: Breast cancer is the most common cancer among women worldwide, including in Iraq, where it accounts for about one-third of female cancers and predominantly affects younger women. Early detection is crucial for effective control and treatment, reducing both healthcare and economic burdens.

Objectives: This study aims to identify the motivational factors that prompt women in Baghdad to visit early detection clinics for breast cancer.

Methods: A cross-sectional study was conducted with 50 Iraqi women attending the Early Detection Clinic for Breast Cancer at Al Elweiya Maternity Teaching Hospital. Data were gathered through direct interviews, reports, and case reviews.

Results: The primary motivational factors for clinic visits included breast complaints (76%), physician advice (8%), consultation for a positive family history (8%), general knowledge (6%), and media advice (2%). The study found no significant relationship between demographic characteristics such as age ($p = 0.6394$), occupation ($p = 0.07097$), marital status ($p = 0.3642$), or family history of breast cancer ($p = 0.0907$). However, there was a significant relationship with education level ($p = 0.0149$).

Conclusion: Most women did not visit early detection clinics until they experienced symptoms, often delaying attention until they were already affected by the disease. Awareness and concern about breast cancer increased only after symptom onset, highlighting the need for better education and awareness programs to encourage proactive health-seeking behavior.

Keywords: Motivational factors, breast cancer, screening

Introductions

Breast cancer is the most common cancer among women globally, both in developed and developing countries ^[1]. It stands as the leading cancer among Iraqi women, accounting for roughly one-third of female cancers and about one-quarter of female cancer deaths ^[2, 3, 4]. Over the past two decades, studies have indicated an increasing incidence of breast cancer in Iraq, notably affecting younger women and posing a significant health threat ^[5, 6]. Efforts to combat breast cancer in Iraq focus on enhancing early detection and screening services through health education programs and awareness campaigns. Early detection is crucial as it facilitates effective control and treatment, thereby reducing healthcare and economic burdens ^[7]. Unlike developed countries such as the UK and the US, where breast cancer mortality rates are lower, Iraq experiences high mortality rates due to late-stage diagnoses, even among younger women ^[8]. Various personal and environmental factors influence screening practices, including education, awareness, income, cultural characteristics, marital status, and family relationships ^[9, 10]. Recognizing the importance of these factors, this study aims to identify the motivational factors that encourage women in Baghdad to visit early detection clinics for breast cancer.

Method

A cross-sectional research was done from 1/6/2023 to 1/11/2023, involving 50 Iraqi women who were receiving care at Al Elweiya Maternity Teaching Hospital. An interview was conducted to obtain the necessary information. A thorough examination of the case records was conducted. A significance level of $p < 0.05$ was used.

Results

Table (1) shows the demographic information of the participants. The participants with age >40 years old represent (64%) of the studied sample while those aged ≤40 years old

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represent (36%). The participants with secondary school education and below had the higher Percentage in the studied sample (60%), while those with higher level of education had percentage of (40%). Furthermore, the category "housewife" had the highest percentage, reaching (58%), followed by "employed" with (42%). It was found that (80%) of the studied sample were married. While (34%) of the sample had positive family history of breast cancer and (66%) had negative family history.

Table 1: distribution of patients according to sociodemographic factors.

variable	Frequency	(%)
Age:		
≤40	18	36%
>40	32	64%
Total	50	100%
Educational level:		
≤secondary	30	60%
>secondary	20	40%
Total	50	100%
Occupation:		
House wife	29	58%
Employed	21	42%
Total	50	100%
Marital Status:		
Married	40	80%
Single	7	14%
Divorced	1	2%
Widow	2	4%
Total	50	100%
Family History of Cancer:		
Positive	17	34%
Negative	33	66%
Total	50	100%

Table (2) shows the type of motivational factors that cause women to visit breast clinics. The most frequently reported factor was breast complaint (76%). The remaining factors include (8%) for advice by physician, (8%) for consultation by physician for positive family history, (6%) for knowledge and (2%) due to advice by media, as shown in the table.

Table 2: Type of motivational factors that causes women to visit breast clinic.

Type of factor	Frequency	(%)
Advice by (media)	1	(2%)
Advice by physician	4	(8%)
Consultation by physician for positive "FH"	4	(8%)
Breast complaint	38	(76%)
Her knowledge	3	(6%)
Total	50	(100%)

Table (3) shows the relationship between demographic characteristics and the most frequent motivational factor (breast complaint) in the studied sample. There was no significant association between age groups (≤40, >40) and breast complaint as indicated by non-significant p-value of 0.6394. While there was a significant association between the educational level (≤secondary and >secondary) and breast complaint (p-value: 0.0149). It was found that there was no significant association between occupational status and breast complaint (p-value: 0.07097). No significant

association was found between the marital status and breast complaint as indicated by non-significant p-value (0.3642). Finally there was no significant association between the family history of breast cancer and breast complaint (p-value: 0.0907).

Table 3: Relationship between demographic characteristics and breast complaint

demographic characteristics	Breast complaint		Chi square	P - value
	Positive	Negative		
Age:				
>40	27	7	0.2195	0.6394*
≤40	11	5		
Education:				
≤secondary	26	3	5.9275	0.0149**
>secondary	11	9		
Occupation:				
Employed	11	8	3.2604	0.07097*
Housewife	24	4		
Marital status:				
Married	31	12	0.8234	0.3642*
Un- married	10	1		
Family history of breast ca.				
Positive	10	7	2.8616	0.0907*
Negative	28	5		

Discussion

Breast cancer is the leading cause of morbidity and mortality among women worldwide [11, 12]. In Iraq, breast cancer remains a significant health issue, and screening is essential to prevent its spread [13]. This study aims to highlight the motivational factors driving women to visit early detection clinics for breast cancer and to explore the relationship between these factors and the socio-demographic characteristics of the participants.

The most frequent motivational factor identified was the presence of a breast complaint. However, no significant association was found between age and breast complaints as a motivational factor (p-value=0.6394), which contrasts with a study conducted in western Iran where age was a significant factor for breast cancer screening [14]. Our study did find a significant association between educational level and breast complaints as a motivational factor (p-value=0.0149). This aligns with studies from Addis Ababa [15], Mekelle [16], and Spain [17], which indicate that higher educational levels increase the likelihood of women reporting symptoms and participating in breast cancer screening. No significant association was found between family history of breast cancer and breast complaints (p-value=0.0907). This finding contrasts with a study from Addis Ababa, which suggested that a family history of breast cancer increases awareness and health-seeking behavior regarding breast cancer screening [15, 16]. Furthermore, there was no significant association between occupational status and breast complaints as a motivational factor (p-value=0.07097). This finding disagrees with research indicating that employment status provides more opportunities to utilize healthcare and social services [18]. Additionally, no significant association was found between marital status and breast complaints as a motivational factor (p-value=0.3642), contrary to a study that found married women were more likely to undergo breast examinations and participate in breast cancer screening than single or previously married women [19].

Conclusion

The majority of women did not proactively pursue breast cancer screening prior to the manifestation of symptoms, frequently opting to wait until they are already afflicted by the illness. Consequently, individuals become more attentive and these signs work as incentives for them to seek early detection clinics for breast cancer. Hence, it is imperative for governmental and healthcare organizations to enhance their endeavors in order to heighten public health consciousness regarding the peril of breast cancer. It is crucial to provide women with education on the prevention and appropriate management of breast cancer in order to protect against the illness in the future.

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