

Uterine Fibroid Awareness And Knowledge Among Women In Barangay Busbus: A Quantitative Study

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Abstract

This study investigated uterine fibroid awareness and knowledge among women in Barangay Busbus. It examined the socio-demographic profiles of participants (age, ethnicity, educational attainment, marital status) and their comprehension of fibroid etiology, symptoms, treatment, and prevention strategies. The primary objective was to determine if significant correlations existed between socio-demographic factors and levels of awareness and knowledge. A quantitative survey, utilizing a non-probability purposive sample of 200 women, generated primary data. Analysis incorporated descriptive statistics (frequencies, percentages, means, standard deviations) and inferential statistics (ANOVA, t-tests). Results revealed a moderate level of uterine fibroid awareness and knowledge, with the sample predominantly comprising young, early-adult, married Tausug women possessing a secondary education. Crucially, no statistically significant relationships were observed between the measured socio-demographic variables and levels of awareness or knowledge. This lack of correlation suggests that other, potentially more influential factors—such as access to quality healthcare, effectiveness of communication channels disseminating information about uterine fibroids, or the impact of prevailing cultural beliefs—require further investigation to explain the observed patterns of uterine fibroid awareness and knowledge within this specific community.

The study's findings highlight the moderate level of uterine fibroid awareness and knowledge among women in Barangay Busbus. This understanding, while present, underscores the need for enhanced education and outreach initiatives. To effectively address the identified knowledge gaps, a multi-faceted approach is recommended, encompassing policy changes, community-based programs, and further research. By providing women with the necessary information and resources to understand and manage uterine fibroids, the community can improve overall health outcomes and well-being. The study's results serve as a valuable tool for exploring the physical, emotional, and social consequences of uterine fibroids and for advocating for improved healthcare access and support for affected women.

Keywords: uterine fibroids, etiology, signs and symptoms, treatment and management, prevention, awareness, knowledge, women in barangay bus-bus

INTRODUCTION

Uterine fibroids, also called leiomyomas or myomas, are non-cancerous tumors that can grow in or around a woman's uterus. They can be tiny or as large as a grapefruit. While usually harmless, fibroids can cause serious problems if not treated, like unbearable pain, heavy bleeding, anemia, and even infertility. The number of women with fibroids is rising worldwide, especially among Asian women of Chinese descent. In the Philippines, fibroids are a major reason for gynecological hospital visits. Many women don't know they have fibroids because they often don't have symptoms until the problem is quite advanced. Existing research on uterine fibroid awareness in Jolo is limited, despite a significant number of cases. Jolo's unique cultural, socioeconomic, and healthcare context means women's health issues, particularly those related to reproductive health, may be overlooked due to cultural norms, resource scarcity, or other barriers. This lack of awareness and knowledge can lead to delayed diagnosis and treatment, resulting in serious health consequences. This study aims to address this gap by assessing women's knowledge of uterine fibroids, including their causes, symptoms, treatment, and prevention. The findings will provide valuable data to support public health initiatives aimed at improving awareness, early detection, and treatment options for women in Barangay Bus-bus and Jolo more broadly. This study assesses uterine fibroid awareness among Barangay Busbus women, examining knowledge of causes, symptoms, treatment, and prevention. It will profile participants by age, ethnicity, education, and marital status to identify correlations with awareness levels, informing targeted educational programs and improved healthcare access for early detection and treatment.

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METHODOLOGY

This study employed a purposive sampling technique to recruit 200 women of reproductive age (13-65 years) from Barangay Bus-bus, Jolo, Sulu. The sample, reflective of the barangay's diverse ethnic

composition (including Sama, Badjao, and Tausug populations), was selected to ensure representation of the target demographic. Data collection, conducted via surveys administered between February and March 2024, utilized a validated, two-part questionnaire designed to assess both demographic characteristics and levels of awareness regarding uterine fibroids. The questionnaire's second section employed a five-point Likert scale to measure awareness across four key dimensions: etiology, signs and symptoms, treatment and management, and prevention. This non-probability sampling approach facilitated focused data collection pertinent to the research objectives. Ethical considerations were paramount throughout this study. Informed consent, obtained from all participants (either written or verbal), ensured their well-being and the security of their data. Participant privacy and confidentiality were maintained, with data securely stored and accessed solely by the research team. Participants were also explicitly informed of their right to withdraw from the study at any time. Data were collected using a validated Tausug-language survey questionnaire (Cronbach's alpha = .609 and 8.12), administered to a sample of 200 participants from Barangay Bus-bus following the acquisition of informed consent. Subsequent data analysis leveraged SPSS version 16, employing both descriptive and inferential statistical techniques. Descriptive statistics, specifically frequency distributions and percentages, were used to delineate the socio-demographic profile of the sample. Inferential analyses included the calculation of weighted means and standard deviations to quantify awareness levels of uterine fibroids, along with the application of one-way ANOVA and independent samples t-tests to assess the statistical significance of differences in awareness levels across various socio-demographic subgroups. All analyses were conducted while strictly maintaining participant confidentiality and anonymity.

RESULTS AND DISCUSSIONS

Sociodemographic profile of the respondents

The sociodemographic profile of the participants is presented below. The sample consisted predominantly of young adults (aged 19-39), identifying primarily as Tausug, with a high proportion being married and having attained secondary education. This demographic context is crucial for interpreting the study's findings, particularly given the respondents' position within a life stage characterized by significant transitions into traditional adult roles. The results underscore the influence of educational attainment on navigating the challenges and opportunities related to healthcare access within this population. (Lopez, M. et al., 2020)

Table 2.1 reveals a mixed understanding of uterine fibroids, highlighting a disparity between general awareness and knowledge of specific etiological factors. While understanding of fibroids as benign tumors originating in uterine smooth muscle cells (statement 1) and their common occurrence among women of reproductive age (statement 2) shows a "moderately aware" level (mean scores above 2.5), knowledge of more nuanced aspects falls short.

In conclusion, while basic awareness exists, the data underscores the need for targeted education to address the specific knowledge gaps identified, ultimately improving women's health outcomes and reducing the impact of uterine fibroids.

Table 1.: Profile of Respondents

| VARIABLES | FREQUENCY | PERCENT |
|-----------------------------|------------|-------------|
| Age | | |
| ▪ 13-18 years old | 19 | 9.5% |
| ▪ 19-39 years old | 121 | 60.5% |
| ▪ 40-65 years old | 60 | 30% |
| TOTAL | 200 | 100% |
| Ethnicity | | |
| ▪ Tausug | 196 | 98% |
| ▪ Badjao | 4 | 2% |
| TOTAL | 200 | 100% |
| Education Attainment | | |
| ▪ None | 14 | 7% |
| ▪ Elementary Level | 20 | 10% |
| ▪ Secondary Level | 82 | 41% |

| | | |
|-----------------------|------------|---------------|
| ▪ Tertiary Level | 61 | 30.5% |
| ▪ College Graduate | 23 | 11.5% |
| TOTAL | 200 | 100% |
| Marital Status | | |
| ▪ Single | 58 | 29% |
| ▪ Married | 142 | 71% |
| TOTAL | 200 | 100.0% |

Awareness and Knowledge of Uterine Fibroid in terms of Etiology

Table 2.1 shows a mixed level of awareness regarding the etiology (causes) of uterine fibroids. Understanding of fibroids as benign pelvic tumors originating in the uterine smooth muscle cells (statement 1) and their common occurrence among women of reproductive age (statement 2) shows a "moderately aware" level, with mean scores above 2.5. However, knowledge of the increased prevalence during reproductive years due to hormone-stimulated growth (statement 3), the higher frequency in nulliparous (never given birth) versus multiparous women (statement 4), and the potential for pregnancy complications (statement 5) all fall into the "less aware" category (mean scores below 2.5). The overall mean score of 2.622 also falls within the "moderately aware" range, suggesting a somewhat better understanding of the basic nature of fibroids compared to the specific factors influencing their development and consequences.

Table 2.1: In terms of Etiology

| | Mean | Std. Deviation | Description |
|--|--------------|----------------|-------------------------|
| 1. Uterine fibroids are benign pelvic tumors in women that develop from the smooth muscle cells of the uterus. | 2.8600 | 1.62283 | Moderately aware |
| 2. Uterine fibroids are a common tumor among women of reproductive age. | 2.6950 | 1.57620 | Moderately aware |
| 3. The prevalence of uterine fibroids increases during the reproductive years due to hormone-stimulated growth | 2.5350 | 1.53314 | Less aware |
| 4. Nulliparous women are more frequently affected by uterine fibroids than multiparous women. | 2.4700 | 1.47307 | Less aware |
| 5. Uterine fibroids can lead to pregnancy complications. | 2.5500 | 1.44497 | Less aware |
| Total | 2.622 | 1.3271 | Moderately aware |

(Legend: 1.00-1.50 not aware; 1.51-2.50 less aware; 2.51-3.50 moderately aware; 3.51-4.50 aware; 4.51-5.00 well aware)

Awareness and Knowledge of Uterine Fibroid in terms of Signs and Symptoms

The results from Table 2.2 clearly indicate a low level of awareness regarding the signs and symptoms of uterine fibroids. All five symptoms listed—prolonged and heavy menstrual bleeding, pelvic pain and pressure, frequent urination or constipation, infertility, and difficulty getting pregnant or experiencing pregnancy complications—received mean scores that fall within the "less aware" category (1.00-2.50) according to the provided legend. The overall average score of 2.317 further confirms this low level of awareness. This suggests a significant knowledge gap that needs to be addressed.

The results from Table 2.2 paint a concerning picture: a demonstrably low level of awareness regarding the signs and symptoms of uterine fibroids. The fact that all five key symptoms—prolonged and heavy menstrual bleeding, pelvic pain and pressure, frequent urination or constipation, infertility, and difficulty getting pregnant or experiencing pregnancy complications—received mean scores placing them within the "less aware" category (1.00-2.50) is deeply troubling. The overall average score of 2.317 further reinforces this alarmingly low level of awareness.

In conclusion, the low awareness levels revealed by the data represent a significant public health concern. Addressing this knowledge gap through targeted educational campaigns and improved access to healthcare is crucial for improving women's health outcomes and reducing the burden of uterine fibroids.

Table 2.2: In terms of Signs and Symptoms

| | Mean | Std. Deviation | Description |
|--|--------------|----------------|-------------------|
| 1. One common sign of fibroids is prolonged and heavy bleeding during your period. | 2.4400 | 1.43061 | Less aware |
| 2. Pelvic pain and pressure are also common symptoms. | 2.4250 | 1.43691 | Less aware |
| 3. You might also experience frequent urination or constipation. | 2.2200 | 1.53407 | Less aware |
| 4. Infertility can sometimes be a sign of fibroids. | 2.3100 | 1.43674 | Less aware |
| 5. Women with fibroids may have more trouble getting pregnant or experience pregnancy complications. | 2.1900 | 1.37234 | Less aware |
| Total | 2.317 | 1.1948 | Less aware |

(Legend: 1.00-1.50 not aware; 1.51-2.50 less aware; 2.51-3.50 moderately aware; 3.51-4.50 aware; 4.51-5.00 well aware)

Awareness and Knowledge of Uterine Fibroid in terms of Treatment and Management

Table 2.3 reveals a mixed understanding of uterine fibroid treatment and management. While awareness of the potential need for surgery (statement 2) and the possibility of MRI-focused ultrasound surgery (statement 5) are rated as "moderately aware," knowledge of the potential negative effects of some herbal remedies (statement 1) and the possibility of hysterectomy if fibroids are not detected early (statement 4) also fall into the "moderately aware" category. The understanding of myomectomy as a common surgical treatment (statement 3) is classified as "less aware". The overall mean score of 2.791, falling within the "moderately aware" range, suggests a reasonable grasp of some treatment options, but with gaps in knowledge regarding certain aspects such as herbal remedies and the potential progression to hysterectomy.

Table 2.3 reveals a mixed understanding of uterine fibroid treatment and management, indicating areas of both adequate and inadequate knowledge. While awareness of the potential need for surgery (statement 2) and MRI-focused ultrasound surgery (statement 5) is rated as "moderately aware," significant gaps exist. In conclusion, while a general awareness of treatment options exists, the data highlights critical knowledge gaps that could lead to ineffective or harmful treatment decisions. Addressing these gaps through comprehensive patient education is essential for improving women's health outcomes and ensuring access to appropriate and timely care.

Table 2.3: In terms of Treatment and Management

| | Mean | Std. Deviation | Description |
|---|--------------|----------------|-------------------------|
| 1. I understand that some herbal remedies may actually make fibroids grow larger. | 2.1200 | 1.33962 | Less aware |
| 2. I know that surgery may be necessary to treat fibroids. | 3.0850 | 2.07347 | Moderately aware |
| 3. Myomectomy is a common surgery used to treat fibroids. | 3.0400 | 1.56546 | Less aware |
| 4. If fibroids are not found early enough, a hysterectomy might be needed. | 2.8300 | 1.58228 | Moderately aware |
| 5. MRI-focused ultrasound surgery is another option for managing fibroids | 2.8800 | 1.49222 | moderately aware |
| Total | 2.791 | 1.2768 | Moderately aware |

(Legend: 1.00-1.50 not aware; 1.51-2.50 less aware; 2.51-3.50 moderately aware; 3.51-4.50 aware; 4.51-5.00 well aware)

Awareness and Knowledge of Uterine Fibroid in terms of Prevention

Table 2.4 demonstrates a relatively high level of awareness regarding the preventative aspects of uterine fibroids. Statements about maintaining a healthy lifestyle (statements 1 and 2) and regular checkups (statement 5) scored in the "Aware" category (above 3.5). Maintaining a healthy weight (statement 3) and early detection (statement 4) received scores in the "Moderately Aware" range (2.51-3.50). The overall total

mean score of 3.413 further supports this finding, placing the overall awareness of preventative measures firmly within the "Moderately Aware" to "Aware" range. This suggests a better understanding of preventative strategies compared to the knowledge of symptoms, etiology, or treatment options.

Table 2.4 presents a positive contrast to the previous findings, demonstrating a relatively high level of awareness regarding preventative aspects of uterine fibroids. The strong scores achieved for statements about maintaining a healthy lifestyle (statements 1 and 2) and regular checkups (statement 5), falling within the "Aware" category (above 3.5), are encouraging. Even the scores for maintaining a healthy weight (statement 3) and early detection (statement 4), which fell into the "Moderately Aware" range (2.51-3.50), contribute to a positive overall picture. The overall total mean score of 3.413 further solidifies this, placing the overall awareness of preventative measures firmly within the "Moderately Aware" to "Aware" range.

In contrast to the knowledge gaps identified in previous tables regarding symptoms, etiology, and treatment options, this data suggests that focusing on preventative measures may be a particularly effective strategy for improving overall health outcomes related to uterine fibroids. Future research and public health campaigns should leverage this relatively high level of awareness to build upon existing knowledge and further promote preventative practices.

Table 2.4: In terms of Prevention

| | Mean | Std. Deviation | Description |
|--|--------------|----------------|-------------------------|
| 1. Living a healthy lifestyle can help lower my chances of getting fibroids | 3.6850 | 3.30003 | Aware |
| 2. Eating well and exercising regularly can help prevent fibroids. | 3.6950 | 1.42200 | Aware |
| 3. Maintaining a healthy weight can reduce my risk of fibroids. | 3.0550 | 1.52763 | Moderately aware |
| 4. Early detection is key to avoiding serious complications from fibroids. | 3.3100 | 1.56079 | Moderately aware |
| 5. I should get regular checkups, especially if I have heavy or prolonged periods. | 3.5700 | 1.50880 | moderately aware |
| Total | 3.413 | 1.3276 | Moderately aware |

(Legend: 1.00-1.50 not aware; 1.51-2.50 less aware; 2.51-3.50 moderately aware; 3.51-4.50 aware; 4.51-5.00 well aware)

Significant Differences On Uterine Fibroid Awareness And Knowledge When Grouped According To Their Socio Demographic Profile.

This ANOVA table examines the relationship between socio-demographic factors and uterine fibroid awareness/knowledge. The key finding is that only educational attainment shows a statistically significant relationship ($p = .000$) with awareness and knowledge of uterine fibroids. Age, ethnicity, and marital status do not show statistically significant relationships. This means that differences in understanding of uterine fibroids are significantly associated with differences in educational levels, but not with age, ethnicity, or marital status in this study's sample.

This ANOVA analysis reveals a statistically significant relationship ($p = .000$) between educational attainment and awareness/knowledge of uterine fibroids. This is a key finding, highlighting that differences in understanding of this condition are strongly associated with educational levels. Conversely, age, ethnicity, and marital status show no statistically significant relationships with uterine fibroid awareness.

In conclusion, this ANOVA analysis provides valuable insights into the factors associated with uterine fibroid awareness. The strong correlation with educational attainment underscores the need for targeted, accessible educational interventions to address health disparities and improve overall understanding of this condition. Future research should explore the interplay of other socioeconomic factors and delve deeper into the causal mechanisms underlying this observed relationship.

Table 3.1.: Significant Differences on Uterine Fibroid Awareness and Knowledge When Grouped

According to Their Socio Demographic Profile.

| | | Sum of Squares | Df | Mean Square | F | Sig. | Interpretation |
|-------------------------------|----------------|----------------|------------|-------------|-------|------|-----------------|
| Age | Between Groups | 1.546 | 2 | .825 | .631 | .628 | Not Significant |
| | Within Groups | 325.882 | 197 | 1.771 | | | |
| | Total | 327.428 | 199 | | | | |
| Ethnicity | Between Groups | 4.631 | 1 | .068 | .126 | .467 | Not Significant |
| | Within Groups | 322.731 | 198 | 1.503 | | | |
| | Total | 284.102 | 199 | | | | |
| Educational Attainment | Between Groups | 53.370 | 4 | .845 | 9.490 | .000 | Significant |
| | Within Groups | 274.058 | 195 | 1.638 | | | |
| | Total | 324.424 | 199 | | | | |
| Marital Status | Between Groups | .068 | 1 | .068 | .047 | .839 | Not Significant |
| | Within Groups | 327.360 | 198 | 1.503 | | | |
| | Total | 350.726 | 199 | | | | |

This study assessed uterine fibroid (myoma) awareness and knowledge among 200 women residing in Barangay Busbus. Utilizing a structured survey instrument, the research investigated the level of understanding related to myoma etiology, symptoms, treatment, and prevention strategies. Analysis of variance (ANOVA) and t-tests were employed to examine the data. Findings indicated a moderate level of awareness, yet significant knowledge gaps were identified across all aspects of the condition. Notably, these gaps were not significantly associated with socio-demographic variables. The study concludes that further research is warranted to explore the complex interplay of community factors, healthcare access, and cultural influences on myoma awareness and subsequent healthcare-seeking behaviors. The development and implementation of targeted educational interventions are recommended to address the identified knowledge deficit and improve health outcomes for women within the community.

Women in Barangay Busbus often don't know enough about uterine fibroids (myomas), even though it's a common health issue. They might have heard of it, but understanding the symptoms and how to get help is a real struggle. Things like missed periods or unusual bleeding could be signs, but without the right information, women might wait too long to see a doctor. It's not about fault, it's about realizing that everyday life can make it hard to find and understand important health information. The study shows we need to make it easier for women to get the knowledge and care they need, so they can manage their health better.

CONCLUSION

Analysis of the data revealed that while uterine fibroids awareness is moderate among women in Barangay Busbus, a significant knowledge deficit exists regarding the condition. This limited understanding was not significantly correlated with socio-demographic factors such as age, ethnicity, education, or marital status. The absence of such correlations suggests that other factors, including access to healthcare, communication channels, and cultural beliefs, may play a more substantial role in shaping uterine fibroids awareness. Further research is recommended to explore these influential factors. The identified knowledge gaps highlight the critical need for increased education and outreach programs designed to empower women with the information necessary to effectively understand and manage uterine fibroids, ultimately improving health outcomes and well-being within the community.

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