

disease. This finding is supported by a study done in the Southeastern region of Nigeria where 87.3% of rural women were aware of breast cancer. The respondents in this study identified the media (television, radio, internet), books, seminars, and family and friends as the major sources of information on breast cancer. Studies conducted in other regions of the country also reported similar major sources of information. However, Olowokere et al in their study done in rural communities reported the hospital as the major source of information. This study recorded a 70.1% awareness rate of breast self-examination (BSE) with only 10.6% who practiced it monthly. This is similar to studies conducted in other regions of the country

### **Conclusions**

Breast cancer screening is crucial for the early detection of breast cancer to reduce the morbidity and mortality associated with it. This study has highlighted the low awareness and practice rates of breast cancer screening methods among women. Collaborative and intersectoral efforts aimed at providing breast cancer screening methods should be intensified. It is recommended that policymakers foster strategies for strengthening awareness campaigns on the practice of breast cancer screening methods. Further studies to identify factors that influence the practice of these screening methods are encouraged.

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### **ANALYSIS OF CERVICAL CANCER SCREENING IN GHANA**

#### **Introduction**

Cervical cancer is a malignant neoplasm arising from the cells of the cervix – the lower part of the uterus that connects to the vagina. It is primarily caused by persistent infection with high-risk human papillomavirus (HPV), particularly types 16 and 18, which account for approximately 70% of cervical cancer cases globally (WHO, 2023). The development of cervical cancer is often a slow process, potentially spanning 10 to 20 years from initial HPV infection

to the onset of invasive disease, thanks to the presence of recognisable precancerous lesions that can be effectively managed when detected early. In Ghana, cervical cancer is a critical public health issue. According to GLOBOCAN 2022 and recent national reports, cervical cancer stands as the second most prevalent cancer among women. Estimates suggest that there are over 3,000 new cases diagnosed yearly with mortality figures being similarly concerning due to limited access to early screening and treatment facilities. Contributing factors in Ghana include low screening uptake, limited public awareness, and disparities in the availability of screening services across different regions.

### ***Goal***

The goal of this research is to assess the current status of cervical cancer screening services in Ghana.

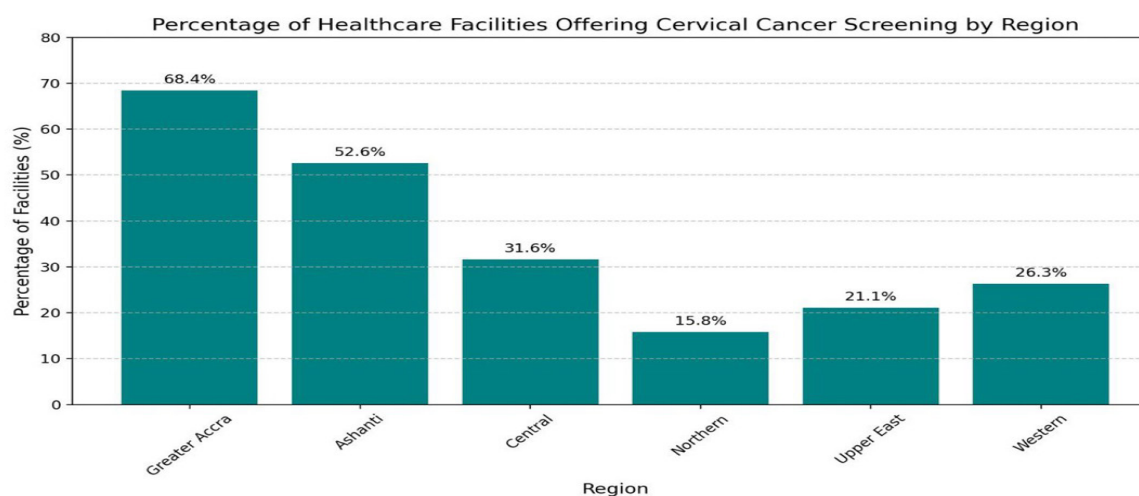
### ***Material and methods of research***

Data for this research were collected via a mixed-methods approach that combined quantitative surveys with qualitative interviews. Specifically, structured questionnaires were administered in 120 healthcare facilities across Ghana to determine the availability and quality of cervical cancer screening services, with the responses, including screening percentages by region, analyzed statistically. In addition, qualitative data were gathered through focus group discussions and in-depth interviews with clinicians and women eligible for screening. These transcripts were systematically coded and analyzed using NVivo 12 software to extract thematic insights related to screening awareness, infrastructural challenges, and recommended improvements. The data analysis involved the use of descriptive statistics for the quantitative component, with results visualized through bar charts and tables, and regional differences analyzed to identify significant trends. Thematic content analysis was applied to the qualitative data, categorizing responses into major themes such as accessibility, awareness, and infrastructural constraints.

### ***The results of the research and their discussion***

Our analysis revealed significant disparities in access to cervical cancer screening services. Out of 120 healthcare facilities surveyed, only about 35.8% offered the screening. Further regional analysis showed that regions such as Greater Accra and Ashanti have a higher availability of such services compared to regions like Northern or the Upper East.

The bar chart below illustrates these regional variations:



***Figure 1 – Regional variations in cervical cancer screening service availability in Ghana***

The quantitative findings reveal disparities in facility coverage for cervical cancer screening across different regions in Ghana. In Greater Accra, approximately 68.4% of facilities offer screening, while Ashanti shows an availability of around 52.6%. In contrast, the Northern zone records only 15.8–21.1% coverage. The statistical trends indicate that screening services are not uniformly distributed, highlighting significant infrastructural and logistical challenges in achieving universal cervical cancer screening in Ghana. Qualitative insights from interviews uncover several barriers to effective screening. A lack of awareness and education about the importance of early screening, along with misconceptions about cervical cancer, hinder uptake. Additionally, resource constraints, such as inadequate trained personnel and screening equipment, are reported by many facilities. Cultural and social factors, including stigma and beliefs in some regions, also contribute to delays or the complete avoidance of regular screenings. These multifaceted issues, encompassing resource limitations, lack of awareness, and regional disparities, drive the low rates of screening. Graphical representations confirm that Western regions tend to have better screening coverage compared to Northern regions, underscoring the need for targeted interventions in areas with lower coverage.

### **Conclusions**

This research on cervical cancer screening in Ghana indicates that while some regions are capable of providing adequate screening, there remain substantial gaps that contribute to the persistently high incidence and mortality rates associated with cervical cancer.

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## **ANALYSIS OF CURRENT PRACTICES AND STATISTICAL INSIGHTS OF BREAST CANCER SCREENING IN LEBANON**

### **Introduction**

Breast cancer is the most prevalent cancer among women globally, and early detection is crucial for effective treatment and improved survival rates. In Lebanon, breast cancer accounts for approximately 35% of all cancers among women. The age-standardized incidence rate is estimated at 69 new cases per 100,000 women per year. Notably, almost 50% of breast cancer patients in Lebanon are below the age of 50. These statistics highlight the importance of implementing robust screening programs to identify the disease at its earliest stages. This research study focuses on evaluating the current breast cancer screening practices in Lebanon, aiming to provide insights that can inform and enhance the country's healthcare strategies.