

**CERVICAL CANCER SCREENING UPTAKE AS PREDICTOR OF MORBIDITY  
AMONG TEACHERS IN AKWA IBOM NORTH WEST SENATORIAL DISTRICT,  
NIGERIA**

By

**Ifiok Paul JOHNSON**  
**Human Kinetics and Health Education**

**ABSTRACT**

*The study examined the extent to which cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District. Correlational research design was adopted for the study. The population of the study comprised of 1,532 female teachers in the 84 Public Secondary Schools in Akwa Ibom North West Senatorial District as at 2024/2025 academic year. A sample size of 485 teachers were selected for the study. The selection was done using multistage sampling procedure. Two researcher's made instruments entitled "Cervical Cancer Questionnaire (CCQ) and Morbidity among Teachers Questionnaire (MATQ) were used for data collection. The instruments were subjected to face validity. Reliability coefficients of 0.84 and 0.87 were obtained for the "Cervical Cancer Questionnaire (CCQ)" and "Morbidity among Teachers Questionnaire (MATQ) respectively using Cronbach Alpha statistics. Simple linear regression was used to answer the research questions and also to test the hypotheses formulated at .05 level of significance. The findings of the study showed that: knowledge of method of cervical cancer screening uptake and personal interest of cervical cancer screening uptake significantly predict morbidity among teachers in Akwa Ibom North West Senatorial District. Based on the findings of the study, it was concluded that cervical cancer (Knowledge of method of cervical cancer screening uptake and personal interest of cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West senatorial district. It was recommended among others that, Ministry of Education should organize regular seminars and workshops to improve teacher's knowledge of cervical cancer screening methods. This will empower them to understand available screening options, procedures, and benefits.*

**KEYWORDS: Cervical Cancer, Screening Uptake, Knowledge, Personal Interest, Morbidity and Female Teachers**

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**INTRODUCTION**

Globally, cervical cancer ranks as the fourth most common cancer in women, with an estimated 604,000 new cases and 342,000 deaths reported in 2020, disproportionately impacting low- and middle-income countries (Bray, 2021). In resource-limited settings, even well-educated women, including teachers, often lack adequate awareness of cervical cancer prevention strategies. The long progression from high-risk human papillomavirus (HPV) infection to invasive disease provides an opportunity for early detection; yet, screening uptake remains low. For example, in sub-Saharan Africa, only 9—13 percent of eligible women have ever been screened, despite teachers having potential as community health advocates (WHO, 2022).

In Nigeria, cervical cancer remains the most common gynecological malignancy in Nigeria. Age-standardized incidence is approximately 29 per 100,000 women, with around 14,089 new cases and 8,240 deaths annually (Ajah and Ali, 2020). Despite this, screening rates are dismally low. Among health workers in North-West Nigeria, over 68 percent had never undergone a Pap smear, citing lack of facilities (77%), financial limitations (76 %), and low awareness (75%) as major barriers (Christie and Vanni, 2021). In Lagos, Toye (2017) found that although 100 percent of female secondary school teachers were aware of cervical cancer and

Pap smear as a method, screening uptake remained limited due to lack of access, affordability, and service availability.

Studies targeting public secondary school teachers in Ikot Ekpene and Abak paint an alarming picture. Ikpe (2019) reported that 71 percent of respondents had low knowledge of cervical cancer risk factors, 57.9 percent had poor symptom awareness, and only 28.8 percent demonstrated adequate knowledge of preventive measures. While 77 percent understood that cervical cancer was preventable, only 42.2 percent were aware of Pap smear testing, and a mere 8.4 percent had ever undergone the test. This low uptake persisted even after health education interventions: in a controlled intervention by Umoh (2022), knowledge of symptoms rose from 10.1 percent to 66.5 percent and risk factor awareness from 6.1 percent to 59.5 percent, but screening uptake improved marginally from just 11.9 percent to 22.2 percent in the intervention group. According to Mbang (2022), understanding factors such as knowledge of screening methods and personal interest, accessibility, affordability, availability, are vital to addressing morbidity.

Morbidity is defined as the incidence or prevalence of disease within a population, impacts individuals not only physically but also mentally and professionally. For the purpose of this study, teaching, by nature, is a high-demand occupation, involving long hours, high stress levels, and frequent exposure to environmental and psychosocial risks. Cervical cancer screening uptake is the rate of which eligible women participate in test (like pap smear or HPV tests) to detect abnormal cervical cells (Bente *et al.*, 2019) Cervical cancer Screening uptake has been identified as crucial component for early detection and improved treatment outcomes. Evidence suggests that widespread of HPV vaccination and routine screening can prevent up to (80%) of cervical cancer case significantly reducing morbidity (Atnafu *et al.*, 2024). Therefore, cervical cancer screening uptake such as mammograms, pap smears and Colonoscopies are used to detect precancerous conditions and early - stage cancer. The success of cervical cancer screening uptake programs in resource- limited setting hinges on identifying and addressing these barriers through context -specific interventions and policy implementations. It is based on this background that the researcher is encouraged to determine the extent to which cervical cancer (Knowledge of method of cervical cancer screening uptake, personal interest of cervical cancer screening uptake, accessibility of screening service, affordability of screening service, availability of screening service and belief system) predict morbidity among teachers in Akwa Ibom North West senatorial district.

### **Statement of the Problem**

In an ideal educational setting, teachers free from morbidity serve as vibrant pillars of academic excellence, mental alertness, and consistent instructional delivery. Their physical and emotional wellbeing directly influences their productivity, attendance, classroom engagement, and the overall quality of education students receive. Healthy teachers serve as role model and custodians of knowledge, fostering an enabling environment for effective learning. In this state, schools enjoy reduced absenteeism, minimal disruptions to the academic calendar, and greater student outcomes.

Unfortunately, the reality in many Nigerian schools, particularly in low-resource settings such as Akwa Ibom State, reflects a troubling departure from this ideal. Despite being literate and working in structured environments, many teachers remain uninformed or uninterested in regular screening. This disinterest, driven by fear, cultural stigma, limited access to health services, and financial constraints, has resulted in late diagnoses, escalating treatment costs, and, ultimately, rising morbidity rates. The ripple effects are significant: frequent sick leaves, reduced classroom performance, disrupted lesson planning, and

psychological distress among affected staff and students alike. Some teachers are forced into early retirement or prolonged medical leave, contributing to a shortage of qualified teaching staff and diminished learning outcomes in schools.

Many women continued to suffer in silence due to logistical, financial or emotional barriers. As a result, morbidity remain high especially from preventable conditions such cervical cancer. It is against this problem that the researcher seeks to determine the extent to which cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District.

### **Purpose of the Study**

The main purpose of this study is to determine the extent to which cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District, Nigeria. Specifically, the study seeks:

- i) To determine the extent to which Knowledge of method of cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District.
- ii) To determine the extent to which personal interest of cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District.

### **Research Questions**

The following research questions were raised to guide this study:

- i) To what extent does Knowledge of method of cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District?
- ii) To what extent does personal interest of cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District?

### **Research Hypotheses**

The following null hypotheses were formulated to guide this study and were tested at .05 level of significance.

- i) Knowledge of method of cervical cancer screening uptake does not significantly predict morbidity among teachers in Akwa Ibom North West Senatorial District.
- ii) Personal interest of cervical cancer screening uptake does not significantly predict morbidity among teachers in Akwa Ibom North West Senatorial District.

### **Literature Review**

#### **Morbidity**

Morbidity refers to the incidence or prevalence of disease within a population and encompasses both physical and psychological ailments that impair an individual's ability to function. When applied to teachers, morbidity captures the spectrum of health conditions from chronic pain and musculoskeletal disorders to mental health challenges that reduce their effectiveness in the classroom and weaken the educational system.

#### **Cervical Cancer**

Cervical cancer is a malignant neoplasm that develops from the cells lining the cervix, the lower portion of the uterus that connects to the vagina. This cancer primarily arises in the transformation zone, where squamous and glandular epithelia meet, and manifests typically as squamous-cell carcinoma which is the most prevalent histological type. Nearly all cases of

cervical cancer are attributable to persistent infection with oncogenic human papillomavirus (HPV), particularly types 16 and 18. These carcinogenic HPV strains are implicated in approximately seventy percent of cervical cancer cases globally.

### **Knowledge of method of Cervical Cancer screening uptake**

Knowledge of method of cervical cancer screening uptake refers to an individual's awareness and understanding of how various screening techniques such as Pap smear, visual inspection with acetic acid (VIA), and HPV testing serve to detect precancerous changes before invasive disease arises. This knowledge shapes health-seeking behavior by influencing whether women perceive screening as necessary, accessible, and beneficial. Inadequate knowledge of screening methods is directly associated with low screening uptake.

### **Personal Interest of Cervical Cancer Screening Uptake**

Personal interest in cervical cancer screening uptake refers to an individual's intrinsic motivation, perceived relevance, and personal engagement in undertaking screening procedures, such as Pap smear, visual inspection with acetic acid, or HPV DNA testing. It is driven not merely by external prompts or awareness but by a felt necessity and a psychological readiness to prioritize personal health in the context of one's life. High personal interest means that screening is viewed as a valuable personal action, integrated into health priorities rather than a reactive response to symptoms or external pressure (Obi, 2021). A woman's personal interest in undergoing cervical cancer screening can be influenced by several deeply personal factors, including her perceived risk of disease, previous experiences with health services, health beliefs, and readiness to take personal responsibility for prevention. Personal interest is intricately related to perceived susceptibility, a concept central to health behavior theories. Toye (2018) investigated "Knowledge, perceptions and practice of cervical cancer prevention among female public secondary school teachers in Mushin, Lagos State." Employing a descriptive cross-sectional design, the research sampled 300 teachers selected via two stage random sampling from multiple secondary schools. Data were collected using a self-administered, structured questionnaire whose face validity was ensured through pilot testing among similar respondents and reliability assessed through Cronbachs alpha (reported at 0.82). Analysis using EPI Info software involved descriptive statistics. Findings showed universal awareness of cervical cancer and prevention among participants, with 91.4 percent aware of Pap smear as a screening method and 67 percent having had at least one screening. Despite this, the absence of organized national screening programmes undermined sustained uptake, underscoring that even high awareness must be supported by systemic service delivery to impact morbidity. The previous study adopted cross sectional research design while the present study adopts correlational research design.

Ijezie (2022) assessed "Effect of Health Education on the Knowledge of Cervical Cancer and Uptake of Papanicolaou Smear Test among Teachers in Uyo, Akwa Ibom State." This quasi\_experimental design featured intervention and control groups each comprising 185 teachers, selected using multistage sampling across public secondary schools. A semi\_structured questionnaire, validated via expert review and pilot tested for reliability (Cronbachs alpha ~0.78), measured knowledge and uptake before and after health education. Data analysis with Stata compared groups using chi-square tests. Results revealed striking improvement: symptom knowledge rose from 10.1 percent to 66.5 percent, risk factor knowledge improved from 6.1 percent to 59.5 percent in the intervention arm, and Pap smear uptake climbed from 11.9 percent to 22.2 percent ( $p = 0.01$ ). These findings demonstrate that enhanced knowledge of screening directly promotes uptake and may reduce disease burden

among teachers. The previous study adopted quasi-experimental design while the present study adopts correlational research design.

Olaoye and Adebayo (2019) conducted a study titled “Personal Motivation and Cervical Cancer Screening Uptake Among Secondary School Women Teachers in Ibadan, Oyo State.” The researchers adopted a descriptive cross-sectional design. This investigation targeted 250 female teachers aged 25—55, selected through a multistage sampling approach across ten urban schools. The research instrument was a structured questionnaire assessing personal interest, past screening behavior, and perceived health status. Content validity was established through expert review by gynecologists and education specialists, while reliability testing using Cronbachs alpha yielded a high score of 0.88. Data were analyzed using SPSS with descriptive and inferential statistics, including chi-square tests to determine associations. Findings revealed that teachers with high personal interest, driven by perceived susceptibility or desire to maintain health were twice as likely to have undergone screening compared to those with lower interest levels ( $p < 0.01$ ). The previous study was conducted in Ibadan, Oyo State while the present study is conducted in Akwa Ibom North West Senatorial District.

### **Design of the Study**

The study adopted correlational research design. A correlational research design is type of non-experimental (observation) quantitative research design where a researcher measures two or more variables systematically and assesses the statistical relationship (that is the correlational) between them with little or no effort to control extraneous variables. The primary purpose is to identify if a relationship exists between variables and to determine the direction and strength of that relationship.

### **Population of the Study**

The population of the study comprised of 1,532 female teachers in the 84 Public Secondary Schools in North West Senatorial District as at 2024/2025 academic year (Source: Akwa Ibom State Secondary Education Board, Uyo, 2025).

### **Sample and Sampling Technique**

The sample size of this study was 485 female teachers. Multistage strategy was used in selecting female teachers from the Senatorial District. In stage one, five out nine Local Education Committee was randomly selected using cap and draw method. There were 41 secondary schools in the selected five LEC with a total of 705 female teachers. In the second state 70 percent of female teachers numbering 493 were randomly selected using toss of coin. The sample size of 485 is appropriate since it is more that minimum sample size of 317 determined using Taro Yamane formulae.

### **Instrumentation**

Two researchers made instruments were utilized for data collection. The instruments were entitled “Cervical Cancer Questionnaire (CCQ) and Morbidity among Teachers Questionnaire (MATQ)”. The CCQ consist of six clusters representing the six independent sub-variables of cervical cancer (Knowledge of method of cervical cancer screening uptake, personal interest of cervical cancer screening uptake, accessibility of screening service, affordability of screening service, availability of screening service and belief system) with five items each, making a total of 30 items. Similarly, the MATQ consists of 20 items structured on the same scale to elicit information on cervical cancer. Respondent were expected to indicate by ticking (√) the extent to which they agree or disagree with the items. Both instruments

were developed using four points scale of Strongly Agree (SA)-4 points, Agree (A)- 3 points, Disagree (D) - 2 points, Strongly Disagree (SD)- 1 point.

**Method of Data Analysis**

Simple Linear Regression analysis was used for answering of research questions and testing of all the null hypotheses. All the null hypotheses were tested at .05 significance level. In order to take decision as regard research questions, any R-value that fell between 0.10-0.39 was regarded as low, 0.40 - 0.59 moderate, 0.60-0.79 high and 0.80-0.99 very high.

**Results**

**Research Question 1:** To what extent does Knowledge of method of cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District?

**Table 1: Result of Simple Linear Regression Coefficient of the extent to which Knowledge of method of cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District (N=485)**

Variables	R	R <sup>2</sup>	Adjusted R <sup>2</sup>	Decision
Knowledge of method of cervical cancer screening uptake	0.851	0.742	0.741	Very High Extent
Morbidity among teachers				

The result in Table 1 show a correlation coefficient (R-value ) of 0.851, indicating a very high positive relationship between knowledge of method of cervical cancer screening uptake and morbidity among teachers in Akwa Ibom North West Senatorial District. The coefficient of determination (R<sup>2</sup> — value) of 0.742 also shown in Table 4.1 indicates that (74.2 %) of the variance in morbidity among teachers in Akwa Ibom North West Senatorial District is explained or predicted by knowledge of method of cervical cancer screening uptake. This means that knowledge of method of cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District to a very high extent.

**Research Question 2:** To what extent does personal interest of cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District?

**Table 2: Result of Simple Linear Regression Coefficient of the extent to which personal interest of cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District (N=485)**

Variables	R	R <sup>2</sup>	Adjusted R <sup>2</sup>	Decision
Personal interest of cervical cancer screening uptake	0.552	0.304	0.303	Moderate Extent
Morbidity among teachers				

The result in Table 2 show a correlation coefficient (R-value) of 0.552, indicating a moderate positive relationship between personal interest of cervical cancer screening uptake and morbidity among teachers in Akwa Ibom North West Senatorial District. The coefficient

of determination ( $R^2$  value) of 0.304 also shown in Table 4.2 indicates that (30.40 %) of the variance in morbidity among teachers in Akwa Ibom North West Senatorial District is explained or predicted by personal interest of cervical cancer screening uptake. This means that personal interest of cervical cancer screening uptake predict morbidity among teachers in Akwa Ibom North West Senatorial District to a moderate extent.

**Hypothesis 1:** Knowledge of method of cervical cancer screening uptake does not significantly predict morbidity among teachers in Akwa Ibom North West Senatorial District

**Table 4.7: Result of Simple Linear Regression Coefficient of the prediction of morbidity among teachers in Akwa Ibom North West Senatorial District by knowledge of method of cervical cancer screening uptake (N=485)**

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	12899.14	1	12899.14	91.70	.00 <sup>b</sup>
	Residual	67945.26	483	140.67		
	Total	80844.40	484			

  

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error			
		1	(Constant)	28.11	1.61	
1	Knowledge_of_method_of_cervical_cancer_screening	3.15	.11	.85	29.43	.00

The result in Table 4.7 shows the F-ratio of 91.70 with the corresponding probability level of significance of .00 alpha at 1 and 483 degrees of freedom. This level of significance is less than .05 in which the decision is based. With this result, the null hypothesis was rejected. The result in Table 4.7 also shows an unstandardized coefficient (B) of 3.15 which indicates that for every one-unit increase in knowledge of method of cervical cancer screening uptake, morbidity among teachers in Akwa Ibom North West Senatorial District increases by 3.15. Furthermore, the t-value of 29.43 with a corresponding significance level of .00 which is also less than .05, reinforces that knowledge of method of cervical cancer screening uptake significantly predict morbidity among teachers in Akwa Ibom North West Senatorial District.

**Hypothesis 2:** Personal interest of cervical cancer screening uptake does not significantly predict morbidity among teachers in Akwa Ibom North West Senatorial District

**Table 4: Result of Simple Linear Regression Coefficient of the prediction of morbidity among teachers in Akwa Ibom North West Senatorial District by personal interest of cervical cancer screening uptake (N=485)**

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	7495.40	1	7495.40	49.36	.00 <sup>b</sup>
	Residual	73349.00	483	151.86		
	Total	80844.40	484			

  

Model		Unstandardized Coefficients			t	Sig.
		B	Std. Error	Beta		
1	(Constant)	21.72	2.70		8.03	.00
	Personal_interest_of_cervical_cancer_screening	1.19	.17	.55	6.53	.00

The result in Table 4 shows the F-ratio of 49.36 with the corresponding probability level of significance of .00 alpha at 1 and 483 degrees of freedom. This level of significance is less than .05 in which the decision is based. With this result, the null hypothesis was rejected. The result in Table 4 also shows an unstandardized coefficient (B) of 1.19 which indicates that for every one-unit increase in personal interest of cervical cancer screening uptake, morbidity among teachers in Akwa Ibom North West Senatorial District increases by 1.19. Furthermore, the t-value of 6.53 with a corresponding significance level of .00 which is also less than .05, reinforces that personal interest of cervical cancer screening uptake significantly predict morbidity among teachers in Akwa Ibom North West Senatorial District.

### Discussion of Findings

The finding of the prediction of morbidity among teachers in Akwa Ibom North West Senatorial District by knowledge of method of cervical cancer screening uptake revealed that knowledge of method of cervical cancer screening uptake significantly predict morbidity among teachers in Akwa Ibom North West Senatorial District. This finding implies that teachers who are knowledgeable about the methods of cervical cancer screening, such as Pap smear, HPV testing, or visual inspection with acetic acid, are more likely to engage in preventive screening practices. Adequate knowledge helps them understand the importance, procedure, and benefits of screening, leading to early detection and treatment of precancerous conditions, which consequently reduces morbidity. Conversely, those with poor knowledge are less likely to undergo screening, increasing their chances of developing advanced stages of the disease, which contribute to higher morbidity levels. The finding lend credence to that of Ijezie (2022) who found that enhanced knowledge of screening directly promotes uptake and may reduce disease burden among teachers. The finding is in line with the observation of Surakatu (2022) who reported that detailed knowledge of HPV as a causative agent and understanding of prevention methods were poor, contributing significantly to low screening rates. The finding further lend credence to that Adekanle (2023) whose finding confirmed a significant association between higher knowledge scores and positive screening behaviour.

The finding of the prediction of morbidity among teachers in Akwa Ibom North West Senatorial District by personal interest of cervical cancer screening uptake revealed that personal interest of cervical cancer screening uptake significantly predict morbidity among teachers in Akwa Ibom North West Senatorial District. Personal interest reflects an individual's level of motivation and willingness to participate in health-promoting behaviors.

Teachers who show personal interest in cervical cancer screening are more proactive in seeking medical advice, attending health talks, and participating in screening exercises. This positive attitude enhances early diagnosis and reduces the likelihood of complications. On the other hand, lack of personal interest often results in neglect of preventive health measures, delayed diagnosis, and increased morbidity due to late presentation of the disease. The finding is in line with that of Olaoye and Adebayo (2019) whose finding revealed that teachers with high personal interest, driven by perceived susceptibility or desire to maintain health were twice as likely to have undergone screening compared to those with lower interest. The finding is also in line with that of Buhari and Waji (2020) who found that teachers who perceived themselves at risk were 2.7 times more likely to be screened than those who did not. The finding further aligns with that of Nwachukwu (2022) who found that 57 percent of teachers who actively expressed personal interest primarily due to beliefs about self-care and professional responsibility had undergone screening.

### **CONCLUSION/RECOMMENDATIONS**

Based on the findings of the study, it was concluded that cervical cancer (Knowledge of method of cervical cancer screening uptake, personal interest of cervical cancer screening uptake, accessibility of screening service, affordability of screening service, availability of screening service and belief system) predict morbidity among teachers in Akwa Ibom North West senatorial district. Based on the findings of the study, it was recommended that:

- i) Ministry of Education should organize regular seminars and workshops to improve teacher's knowledge of cervical cancer screening methods. This will empower them to understand available screening options, procedures, and benefits.
- ii) Teachers should be encouraged to prioritize preventive health care by attending regular health check-ups and participating in cervical cancer screening programs.

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