臺北市子宮頸抹片檢查陽性個案求醫行為相關因素之探討

Factors Related to the Medical Seeking Behavior of Cervical Positive Clients in Taipei

中文摘要

論文名稱：臺北市子宮頸抹片檢查陽性個案求醫行為相關因素之探討
研究所名稱：臺北醫學大學護理學研究所
研究生姓名：楊鎧玉
畢業時間：九十一學年度第一學期
指導教授：陳靜敏 臺北醫學大學護理學研究所副教授

臺北市為防治子宮頸癌，針對三十歲以上婦女的抹片篩檢率至 89 年已提升至 40%以上，致使陽性個案大約有 3,000 多人，陽性率約為 1% ；但其複診完成率在台北市卻很低，大約有 16%陽性個案未去複診求醫。本研究旨在探討影響抹片陽性個案對子宮頸癌與抹片的認知、行動線索、自覺症狀嚴重程度、健康控握信念和求醫行為之相關與影響因素。

本研究採用橫斷式相關性研究設計，以結構式問卷郵寄方式，並由信義區衛生所為前驅研究單位，正式研究以隨機分層取樣法選取臺北市其他 11 行政區 30 歲以上抹片 CIN I 以上陽性個案，共寄出 553 份問卷，實得有效問卷 135 份(回收率 26%)。

本研究對象平均年齡為 47.43 歲，經濟狀況中上，以高中以上、有宗教信仰、已婚、家管者居多；在對子宮頸與抹片相關知識方面認知率可達 73%；平均接受到 3.41 類訊息來源而決定去求醫；在自覺婦科症狀方面，以陰道分泌物為首，但問題並不嚴重；健康控握信念方面，以內控信念得分最高（M=3.75，SD=0.38）。平均接獲抹片報告時間以 7 天居多，而抹片結果也以「發現異常細胞」為主有七成以上，因此選擇求醫接受治療的有 132 人（97.8%）未求醫者僅 3 人，且在一週內就去的有 69.7%，治療的類型以西醫為主 130 人，而選擇該類型治療的主要理由為「治療的技術與效果」，顯示研究對象為都會型高教育、高收入、已婚、理性內控型人格特質的中壯年婦女。

婦女的社會人口學特質與子宮頸癌相關知識、行動線索、自覺症
狀嚴重程度在統計上並無顯著之相關；但在健康控握信念之內控信念與宗教信仰有顯著差異，權威外控與婚姻狀況，機運外控與經濟狀況有顯著相關，而年齡也與前兩者呈現正相關，表示年齡越大，越朝向外控型人格特質。已求醫者在接獲抹片報告後選擇去治療的時間快慢與宗教信仰有顯著差異。而治療類型（純西醫或合併其他治療）與知識得分有顯著相關。為找出影響已求醫者在求醫類型及時間上的重要因素，將自變項重組為兩分法，投入進行對數迴歸統計，結果發現並無顯著差異。而研究顯示有求醫者才較有意願填答並回寄問卷，因此如何針對未就醫族群，進行進一步介入性措施研究探討，應可作為建構我國婦女保健政策之

重要參考。

關鍵詞：抹片陽性、認知、行動線索、自覺症狀、健康控握信念、求醫行為

英文摘要

Abstract

Title of Thesis：Factors Related to the Medical Seeking Behavior of Cervical Positive Clients in Taipei

Institution：Graduate Institute of Nursing, Taipei Medical University

Author：Yang, Kai-Yu

Thesis directed by：Ching-Min Chen, RN, DNS, Associated Professor

Since the year 2000, cervical screening rate for women 30 years old and over has raised to more than 40%, which resulted in identifying around 3,000 cervical positive clients each year. The most important issue is that 16% of the clients not sought medical treatment. The aim of this study was to explore the factors related to the medical seeking behavior of cervical positive clients in Taipei. The major purpose was to describe and explore the relationships between cervical positive women's current knowledge, action clue, severity of gynecologic symptoms, health locus of control and medical seeking behavior。

Correlational research design was used in this study. The structured questionnaire has been mailed to 553 qualified correspondences for their self-report. The pilot study was done in Xin-Yi District Health Center, then the stratify random sampling was applied to select women with positive Pap finding and who were 30 years old and over in other 11 districts in Taipei. The 135 effective questionnaires were returned (26% response rates).

The majority of the clients were high school graduated, married, housewife, with religious belief, and economic status of medium high and mean age of 47.43. Their knowledge toward cervical cancer and Pap was relatively high (73%), and action cues received to seek treatment were also a lot (3.41 sources). The most common gynecologic symptom was vaginal discharge, and the majority of the clients belong to internal locus of control. The majority of women received their Pap smear results as "found abnormal cells" within 7days. As the result, 132 clients seek care immediately (within 7days), 69.7% selected western medicine, and the main reason for it was "the effectiveness of the treatment". However, there was still 3 clients did not seek care. Base on the results of this study, no significant difference in client's demographic variables with knowledge, action cues and gynecologic symptoms was found. Types of religion were associated with speed of seeking care and internal locus of control. Marital status and economic level were associated with external locus of control.

Older client's tended to be external locus of control. Women's knowledge of Pap and cervical cancer was significantly different by type of therapies client selected. Logistic regression analyses revealed that not a single independent variable could predict either speed of seeking care or type of therapy all variables. With such a high prevalence of seeking care among cervical positive clients (97.8%), this study indicated a high self-selection bias that women seek care were more willing to return questionnaires. Intervention on how to reach and promote noncompliance women would need further investigation.
Keywords：cervical positive client, knowledge, action clue, gynecologic symptom, health locus of control, medical seeking behavior