

KNOWLEDGE AND PRACTICE REGARDING BREAST SELF-EXAMINATION AMONG FEMALE NURSING PROFESSIONALS

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Abstract: Breast cancer is a global health issue and a leading cause of death among women nationally and internationally, it accounts for the second most common cancer in women. It has been identified as a major public health problem in both developed and developing nations because of its high incidence-prevalence, Breast cancer associated morbidity and mortality can be reduced through early detection by means of screening programs.

Key Words: Breast Self-Examination, Planned teaching programme, Practice.

1. INTRODUCTION:

Breast cancer is a second leading cause of morbidity and mortality among women. Breast cancer is distinguished from other types of cancer by the fact that it occurs in a visible organ and be detected and treated at an early stage. The 5-year survival rate reached to 85% with early detection whereas later detection decreased the survival rate to 56%. The low survival rates in less developed countries can be attributed to the lack of early detection as well as inadequate diagnosis and treatment facilities.

The age-standardized incidence rate of breast cancer among Indian women is 22.9 and the mortality rate is 11.19. In the present scenario, roughly 1 in 26 women are expected to be diagnosed with breast cancer in their lifetime. It has been identified as a major public health problem in both developed and developing nations because of its high incidence-prevalence, over-burdened health system and direct medical expenditure.

Studies have shown that in most of the developing nations breast cancer is diagnosed in advanced stages of the disease when compared with developed nations and thus has a poor outcome and high fatality rate. This paper aims to check the effectiveness of breast self-examination in early detection of the breast cancer. In addition, it plans to consider all the factors which hampers with the uptake of the technique and what all could be planned to improve the current scenario. Breast self-examination (BSE) has been identified as the only realistic approach in early detection of breast cancer in developing nations.

Objectives:

1. To assess the existing knowledge and practice regarding breast self examination among female nursing professionals.
2. To evaluate the effectiveness of planned teaching programme regarding Breast Self Examination among female nursing professionals.
3. To find out the association between knowledge score and practice score among female nursing professionals regarding breast self examination with selected demographic variables.

2. HYPOTHESIS:

H₀: There is no significant difference between pre-test and post-test knowledge scores and practice score of female nursing professionals regarding breast self examination.

H₁: There is significant difference between pre-test and post-test knowledge scores and practice score of female nursing professionals regarding breast self examination.

3. LITERATURE REVIEW:

A review summary of previous researchers is presented in the following table.

NO.	AUTHOR AND TITLE	RESEARCH VARIABLE	RESULT
1.	Shalini(2011) "Awareness and Impact of Education on Breast Self	Independent Variable: PTP Dependent Variable:	Result Shows that majority (52%) of them was in the age group of

	Examination Among College Going Girls”	Knowledge of college going students.	18-19 years and 72% of them were had average knowledge on BSE in the pretest score. Out of 40 participants only one student was performing BSE occasionally.
2.	Dollor Dhosi(2012), “Knowledge, Attitude, and Practice among Female Dental Students”	Independent Variable: PTP Dependent Variable: Knowledge of dental students	Result shows a need for educational programs to create awareness regarding regular breast cancer screening behavior.
3.	Mulken azage(2013), “Assessment of Factors Associated with Breast Self-Examination among Health Worker”	Independent Variable: PTP Dependent Variable: Knowledge of Health workers	Result shows that 37% of HEWs had ever practiced BSE and 14.4% practiced it regularly. The three main reasons for not doing regular BSE were no breast problem (53.2%), not knowing the technique of BSE (30.6%), and not knowing the importance of BSE (21.4%).
4.	Praveen N., “knowledge and practice of breast selfexamination (bse) among females in rural area”	Independent Variable: PTP Dependent Variable: Knowledge of females in rural areas	Result reveals that The level of knowledge and practice of breast self examination among female is unacceptably low. Efforts should be made to increase level of knowledge and practice of breast self examination through health education programmes.
5.	Konika (2016) “Effectiveness of PTP on knowledge regarding BSE among nursing students”	Independent Variable: PTP Dependent Variable: Knowledge of nursing students	Result shows a significant difference between the mean post test and pre test knowledge score . so PTP was effective in improving knowledge of student nurses.

4. METHODOLOGY:

Research Approach: Interventional research approach.

Research Design: A quasi experimental one group pretest & posttest research design.

Setting of the study – The study was conducted in selected hospitals of south western Rajasthan

Sample size: 60 Female nursing professionals.

Sample technique: Simple random technique.

VARIABLES:

- ❖ Dependent variables- Effectiveness of planned teaching program me.
- ❖ Independent variables-knowledge & Practice of Female nursing professionals regarding BSE.

CRITERIA:

- Inclusion Criteria:

- Female Nursing professionals who are willing to participate.
- Female Nursing professionals who are working in selected hospitals of south western Rajasthan.
- Available at the time of data collection.

5. METHOD:

Section A – Demographic data

Section B- Questionnaire (It consist of knowledge regarding BSE).

Teaching guide – Planned teaching program me regarding knowledge and practice regarding BSE.

Observational Check list- Consist of steps of BSE.

DATA COLLECTION PROCEDURE:

The data collection was done for the period of four weeks .The participants were selected by simple random sampling technique. Purpose of study was explained and obtained informed consent from each participant. Data collection was done using structured interview questionnaire.

6. ANALYSIS:

Analysis and interpretation of the data was done using SPSS statistical method to find out the association between post test knowledge score and selected socio demographic variables.

7. FINDINGS:

Section A : Distribution of female nursing professionals with regards to demographic variables.

Table:01

N-60		
Demographic Variables	No. of female nursing professionals	Percentage (%)
Age(in years)		
20-25 yrs	8	13.3
26-30 yrs	26	43.3
31-35 yrs	26	43.3
Above 35 yrs	0	0.00
Educational status		
Diploma	29	48.3
Graduate	20	33.3
PG Diploma	7	11.7
Postgraduate	4	6.7
Years of experience		
1-3 yrs	34	56.7
4-6 yrs	26	43.3
7-9 yrs	0	0.00
≥10 yrs	0	0.00
Area of working		
General Ward	29	48.3
Maternity Ward	31	51.7
Gynaecology Ward	0	0.00
Other Ward	0	0.00

Section B : Assessment of existing knowledge and practice regarding breast self examination among female nursing professionals.

Table 2: Distribution of female nursing professionals with regard to pre test and post test knowledge regarding breast self examination

Level of knowledge score	Percentage score	Knowledge Score	
		Pre Test	Post Test
Poor	0-25%	1(1.67%)	0(0%)
Average	26-50%	31(51.67%)	0(0%)
Good	51-75%	25(41.67%)	1(1.67%)
Excellent	76-100%	3(5%)	59(98.33%)

n=60

Mean ± SD	12.56 ± 3.67	23.50±1.67
Mean Percentage Score	50.26%	94%
Range	2 - 22	18-25

The above table no 2 shows the frequency and percentage wise distribution of female nursing professionals according to pre test and post test level of knowledge regarding breast self examination. The levels of knowledge were seen into 4 categories, poor, average, good and excellent. 1.67% of the female nursing professionals in pre test had poor, 51.67% of them in pre test had average, 41.67% in pre test and 1.67% in post test had good and 5% in pre test and 98.33% in post test had excellent level of knowledge score. Mean knowledge score in pre test was 12.56 ± 3.67 whereas in post test it was 23.50±1.67.

Table 3: Distribution of female nursing professionals with regard to pre test and post test practice regarding breast self examination

n=60

Level of practice score	Percentage score	Practice Score	
		Pre Test	Post Test
Poor	0-25%	12(20%)	0(0%)
Average	26-50%	30(50%)	0(0%)
Good	51-75%	14(23.33%)	10(16.67%)
Excellent	76-100%	4(6.67%)	50(83.33%)
Mean ± SD		5.51± 2.23	11.25±1.14
Mean Percentage Score		45.97%	93.75%
Range		1-11	9-12

The above table no 3 shows the frequency and percentage wise distribution of female nursing professionals according to pre test and post test level of practice regarding breast self examination. The levels of practice were seen into 4 categories, poor, average, good and excellent.

20% of female nursing professional in pretest had poor, 50% in pre test had average, 23.33% of them in pre test and 16.67% in post test had good and 6.67% in pre test and 83.33% in post test had excellent level of practice score.

Mean practice score in pre test was 5.51 ± 2.23 whereas in post test it was 11.25±1.14.

Section C: Analysis of effectiveness of Planned Teaching programme on knowledge regarding breast self examination among female nursing professionals.

Table 4: Significance of difference between knowledge scores in pre and post test of female nursing professional in relation to breast self examination

n=60

Overall	Mean	SD	Mean Percentage	t-value	p-value
Pre Test	12.56	3.67	50.26	20.51	0.0001*HS p<0.05
Post Test	23.50	1.67	94.00		

*HS- Highly Significant

Table no 4 depicts the overall mean knowledge scores of pre test and post test which reveals that post test mean knowledge score was higher 23.50 with SD of ±1.67 when compared with pre test mean knowledge score value which was 12.56 with SD of ±3.67.

The statistical Student’s paired t test implies that the difference in the pre test and post test knowledge score found to be 20.51 statistically significant at 0.05% level. Hence it is statistically interpreted that planned teaching programme on knowledge regarding breast self examination among female nursing professionals from selected hospitals of Southern Western Rajasthan was effective. Thus H1 is accepted and H0 is rejected.

8. RESULT:

It shows post test knowledge score is higher than pretest &” t” Test implies that the difference in the pre and post test knowledge score found to be 20.51% statically significant at 0.05%. Hence it is strongly interpreted that “the effectiveness of PTP was effective so H1 is accepted , and there is no association between knowledge& practice with selected sociodemographic variables.

9. DISCUSSION:

Breast self-examination (BSE) provides an inexpensive method for early detection of breast tumors, thus knowledge and consistent practice could protect women from severe morbidity and mortality due to breast cancer. This study assessed the knowledge and practice of breast self-examination among nursing professionals in south western Rajasthan.

10. RECOMMENDATIONS:

The researcher recommends the following-

1. Nursing professionals need to improve their teaching skills to teach students and clients about breast self-examination.
2. Nursing professionals should update their knowledge on current health issues to improve the quality of care and verify ways to facilitate women to come for treatment once they identify abnormalities in their breast.
3. The department can also create an awareness and outreach programmes and lectures on breast self-examination examination.
4. Nursing professionals should also ensure that they practice breast self-examination because it is believe that “early diagnosis and treatment reduces the risk of complications.

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