

KNOWLEDGE AND PRACTICE OF BREAST SELF EXAMINATION AMONG FEMALE SECONDARY SCHOOL STUDENTS IN IBADAN METROPOLIS.

BY

Fatima R. Rahji RN, BNSc. MSc (Ibadan)

Midwife Educator,

College of nursing and midwifery, Eleyele, Ibadan, Nigeria.

Fatimah.rahji@gmail.com, 08028107583

INTRODUCTION

Breast cancer is a major public health problem both in Nigeria and worldwide. This is due to its disease and financial burden, fatality and tendency for increased incidence (Acikgoz and Ergor, 2013). Breast cancer is the second most diagnosed cancer worldwide (Ferlay *et al.*, 2013) and the leading cause of female death in the world (Jemal, *et al.*, 2011). Though not all breast lumps are cancerous, breast lump may be a sign of breast cancer (Breast Cancer Campaign, 2014). This necessitates that breast lumps are detected early enough in order to reduce its mortality rate. Breast lumps are detected and diagnosed in either of the following ways: Mammography, Clinical Breast Examination (CBE) and Breast Self-Examination (BSE).

Breast self-examination has been widely recommended as a relatively simple, non-invasive, non-hazardous, and cost free screening method. This is so when comparing it with other kinds of screening methods in the detection of breast lumps. Since the incidence rate of breast cancer increases with age, all women should perform breast self-examination regularly once breast development starts (American Cancer Society, 2015). One out of eight women may be diagnosed with breast cancer in her life time (Shrivastava, 2013). Early detection and effective treatment are important factors in reducing the morbidity and mortality associated with breast cancer (Steward and Wild, 2014). Understanding women's belief and practice towards BSE is indispensable to enhancing early detection, prompt diagnosis and management of breast disease, increase the survival rate and quality of life especially in low-income countries like Nigeria.

Awareness about breast cancer has long been advocated across the world; unfortunately studies have revealed that a major proportion of women are still not concerned with it (Kanaga, 2011). Techniques such as BSE, clinical breast examination (CBE) and mammography are available for bringing about a marked reduction in breast cancer incidence (Seely and Alhassan, 2018).

Mammography which is more accurate but require hospital visit and specialized equipment/technical expertise. When compared with CBE and mammography, BSE is helpful as it is cost-free, simple, non-invasive intervention carried out by women themselves.

Breast cancer is the most commonly diagnosed cancer, worldwide. It is considered the leading cause of cancer death in females, as it accounted for 23% (1.38 million) of the total 6 billion new cancer cases and about 14% (458,400) of the total cancer deaths of about 3.3 million deaths in 2008. It is known that half of the breast cancer cases and 60% of the deaths are estimated to take place in developing countries (Bray et al., 2018). Official statistics of the Egyptian National Cancer Institute, breast cancer represents 18.9% of total cancer cases in Egypt. 35.1% in women and 2.2% were in men (Ibrahim et al., 2014). In Nigeria, the median age at diagnosis for breast cancer is ten years younger than in the United States and Europe (Assi et al, 2013). Cancer in young is generally more aggressive and results in lower survival rates, making early detection even more crucial in Nigeria. This observation emphasized the importance to raise breast cancer awareness among young females (Sambanje and Mafuvadze, 2012). Another dimension to the problem is that Breast cancer mortality rates for African women are higher compared with women in Western countries (Vanderpuye et al, 2017).

There is however, no sufficient evidence to disapprove the use of BSE, for its simplicity, non-invasive, inexpensive, affordable and accessible method to younger and high risk women to detect early changes in their breasts (Secginli, 2011). The early detection of breast cancer is the most important and beneficial area of protection techniques of all available for BSE, is known to be effective, cheap and less painful. However, it is dependent on knowledge about, attitude towards and practice among young females. This can be conceived as a precursor to CBE which is one of the primary modes of screening for breast cancer. Its effectiveness is dependent upon the skills of health care providers and available facilities. Mammography can reduce mortality rates for women aged 40 to 74 by 25% (Seely and Alhassan, 2018). World Health Organization

reported that mammography is the most successful way of detecting breast cancer among women older than 50 years (WHO, 2011).

Mortality rates from breast cancer have decreased by 25 to 30% with early detection, improved quality of screening activities, and enhanced treatment (Birnbaum et al, 2016). Many studies have shown that midwives have positive influence on women's breast cancer knowledge and BSE practice.

The research focuses of this paper is to assess and provide empirical quantification and benchmark information about how knowledgeable students are, their attitude to and practice of BSE in Ibadan North West Local Government Area.

The objectives of this study are:

- Asses the knowledge of students on breast self-examination.
- To Assess the practice of student on self-breast
- To identify factors influencing practice of breast self-examination.
- Determine the perception of students toward breast self-examination.

2. Methodology

Eleyele secondary school was purposively selected around Eleyele community, Ibadan. The target population comprises of all the female students in SS1, SS2 and SS3. This gave a total of one hundred and fourteen students (110).

Data were collected using a self-administered questionnaire. The questionnaire was developed through extensive literature search. The instrument was tested for validity and reliability before the final usage for data collection. It consisted of closed and open based on the intended objectives of the study. Thereafter to ensure the avoidance of missing data and missing information the researcher used four research assistants in guide the students through the filling of the questionnaire. In the final stage, the main analytical tool used is Descriptive statistics while results were presented using tables, frequency distribution, percentages.

Permission to collect data was obtained from the Local Inspector of Education, Ibadan North West Local Government Area. Further permission and approval was obtained from principal before the commencement of the study. In addition, informed consent was obtained from each

respondent and they were assured of their confidentiality and anonymity of the information provided.

3. Results

Table 1: Socio-demographic characteristic of respondents

Variable	Frequency	Percentage
Age		
12 -14	41	37.3
15-16	65	57.3
17-19	4	5.4
Total	110	100
Tribe		
Yoruba	90	81.8
Igbo	13	11.8
Hausa	7	6.4
Total	110	100
Class		
SS1	24	21.8
SS2	66	60
SS3	20	18.2
Total	110	100
Religion		
Christianity	79	71.8
Islam	31	28.2
Total	110	100

The demographic information of the students is as shown in table 1 it shows that the mean age of respondents was 15.5 ± 1.4 years. It ranged from 12 to 19 years and majority 57.3% are between 15 and 16 years old. Due to the geographical setting of the study, majority (81.8%) of the respondent were of the Yoruba tribe. About six out of every ten female students interviewed is from SS2.

Table 2: Knowledge about breast self-examination

Variables	Frequency	Percentage
Have you heard about breast self-examination?		
Yes	102	92.7
No	8	7.3
Source of Information		
School	48	43.6
Health worker	14	12.7
Mass media	28	25.5
Family/friends	12	10.9
No	8	7.3
Breast examination is?		
Going to the hospital to see a doctor	5	4.5
Examination of one's breast to detect any abnormality	97	88.2
No response	8	7.3
What category of people should perform breast self-examination?		
Female teacher	6	5.5
Pregnant women	6	5.5
Female students	23	20.9
All of the above	67	60.9
No response	8	7.3
Breast self-examination is a practical method to detect the presence of abnormal growth		
Yes	88	80.0
No	14	12.7
No response	8	7.3
When is the right time to examine the breast as adolescent?		
Before menstruation	23	20.9
During menstruation	18	16.4
After menstruation	39	35.5
None of the above	30	27.3

It could be deduced from table 2 that majority 102 (92.7%) of the respondents have heard about BSE. Their sources of information include school 48 (43.6%), health workers 14 (12.7%), mass media 28 (25.5%), and friends/family 12 (10.9%). The level of knowledge among the students according to their responses was high because 97 (88.2%) of them were able to explain that BSE is the examination of one's breast to detect any abnormality or abnormal growth.

Table 3: Practice of BSE among the Respondents

Variable	Frequency	Percentage
Do you practice breast self-examination?		
Yes	36	36.3
No	74	63.7
If you practice BSE when		
When bathing or standing before the mirror	18	18.2
After menstruation	3	3.0
When am less busy	9	9.1
When am about sleeping	2	2.0
In the hospital	3	3.0
Before menstruation	1	1.0
Which position do you maintain when you examine your breast?		
Standing before the mirror	16	(16.2%)
Lying down	20	(20.1%)
No idea	74	(63.7%)
Have you ever notice any abnormality in your breast during conduction of breast self-examination?		
Yes	13	13.1
No	23	23.2

Table 3 presents the level of practice of BSE among the senior secondary school students, 74(67.3%) of the respondent said they have not practice self-breast examination before while 18(18.2%) of them have practice BSE when bathing or standing before the mirror, 20(20.1%) practice while lying down and 74(64.7%) had no idea of how to do BSE. Most 23(23.2%) of the

participants that has practice BSE on themselves before have not noticed any abnormality in their breast during the exercise.

Table 4: Factors influencing the practice of breast self-examination

Variable	Frequency	Percentage
Anxious about any abnormal findings when practicing breast self-examination	84	76.4
Yes	26	23.6
No		
Lack of knowledge on how to perform breast self-examination		
Yes	39	35.5
No	71	64.5
Inadequate knowledge about the benefit of breast self-examination hinder the practice		
Yes	72	65.5
No	38	34.5

In table 4, some of the factors identified by the respondents that affect their practice of BSE were presented. Majority 84(76.4%) of the respondents were of the opinion that been anxious about detecting any abnormality on their breast during the examination might be a factor for not practicing. Most 71(64.5%) of the participants claimed that their none practice of BSE was as a result of lack of knowledge on how to perform breast self-examination. On the contrary, majority 72 (65.5%) of them asserted that inadequate knowledge about the benefit of breast self-examination may hinder their practice of BSE.

4. Discussion

This study was aimed at assessing the knowledge and practice of self-breast examination BSE among senior secondary school students in Ibadan metropolis. The age of the respondent ranged from 12 to 19 years. The respondents were adolescence and they are expected to start learning and practicing breast self-examination (BSE).

Findings from this study revealed that there is high level of awareness of breast self-examination 92.7% among the respondents and the major sources of information include school 43.6%, health workers and mass media. This concurs with the work of Faronbi and Abolade, 2012 who declared there is high level of awareness of BSE in their study. Reason for this increased awareness may be due to the fact that there is increase sensitization and mass campaign about BSE in both the print and electronic media on daily basis. Moreover, all the respondents were students which might give them the opportunity of coming across BSE issues in education materials.

The study also revealed that the students have good knowledge of BSE as majority of them were able to give a simple definition of what BSE entails. This is supported by the study carried out by Ahmed, et al., 2018, which found that there is high level of knowledge about BSE. However this is contrary to the finding of Faronbi and Abolade, 2012, that submitted that about half of their respondents have insufficient knowledge of BSE.

Findings from this study also revealed that BSE was practiced by majority of the participant in this study as six out of every ten respondents said they practice BSE. The finding was supported by the research carried out by Bassey et al, 2010 who discovered that BSE was practice by majority of their respondents. This is contrary to the work of Chattu, et al, 2018; they found that BSE was poorly practiced by their respondents.

5. Conclusion

In conclusion, this study has shown that students in Ibadan metropolis are aware of breast self-examination (BSE) and their source of information is schools and electronic media. Furthermore, the students that participated in this study displayed good knowledge of BSE according to their responses, although the practice has not gotten to a desired level. And most of those that do practice do not know when and how to do BSE.

6. Implication for Midwifery

Most female students at senior secondary school are just becoming a woman. At this stage they experience some changes in not just their body biology but also psychologically. These changes include starting menstruation, body building and breast development. This is the time for them to gain knowledge about what is happening to their body and how to detect early if there is any abnormality. This knowledge can be well impacted into these young women by midwives and other health care provider.

This could be achieved through designing and implementing an intensive health education programme for female students on the necessity and practice of breast self-examination. Educational materials such as handbills, poster and leaflets should be freely made available during such teachings so as to facilitate better learning. Midwives could also be involved in advocacy visit to media houses to disseminate appropriate information on breast self-examination through radio and television programs. This will raise people's awareness and knowledge on breast self-examination, its implications and the importance of breast cancer

screening and early detection. Finally, further research should be conducted to cover an expanse population, this will allow for generalization.

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