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Knowledge, Attitude and Practice of Self-Breast Examination among the Female Students of the University of Ibadan, Nigeria

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Abstract: Nigeria, even though rich by natural endowments, is at the individual human level, a resource-poor country of very many poor people who cannot afford the cost of most health care, including the preventive ones. This latter, should be its thrust in health service provision, especially for the cancers. Studies in these areas are therefore very essential. This is a descriptive and exploratory study to identify knowledge, attitude and practice of self-breast examination among the female students of the University of Ibadan, Oyo State, Nigeria. Two hundred and twenty eight students were selected by stratified random sampling from their different faculties and studied through a validated questionnaire called Female Self-Breast Examination (FSBE) inventory. The age range of the students was between 18-32 years; 221 (96.9%) of them were single and 7 (3.1%) married. One hundred and ninty five (85.5%) of the students knew about cancers and 225 (98.7%) have heard about breast cancer. Breast cancer was by far the most well known female cancer, followed remotely by the equally malignant cervical cancer (31 or 13.6%). One hundred and forty eight (64.9%) heard of breast cancer from television and 188 (82.5%) have heard about self-breast examination.One hundred and twenty two (53.2%) of the students knew what self-breast examination is used for while 106 (46.8%) did not. The knowledge is not deep, however as only 64 (28%) knew the interval for self-breast examination while 11 (25%) practice self-breast examination regularly. One hundred and swenty one (75%) of the students will like to be taught how to do self-breast examination. Neither age nor course/area of study has influence either on the knowledge of the student concerning breast cancer or on their self-breast examination. There is urgent need for dissemination of better information on self-breast examination to secondary school students and students in tertiary institutions if we are going to make any headway in the prevention of breast cancer in Nigeria by this only workable avenue to that goal.

Key words: Knowledge, attitude, practice, self-breast, examination

INTRODUCTION

Breast cancer is a very important global women's health problem of the 21th century. The disease occurs in older women and is the second highest cause of death in the developed countries while in the developing countries; it is the third commonest cause of death after infections and parasitic diseases and those of the cardiovascular system (WHO, 1995). Olopade (2000) described breast cancer in the developing countries as aggressive disease of the young women. Taguchi and Shiba (1998) stated that breast cancer ranked second most common cancer in women in developing countries and one of the major causes of death. Specifically in Nigeria, according to Solanke (2000) about 100,000 new cases occur every year and going by the current population projections, 500,000 cases will occur annually by the year 2010. Risk factors associated with breast cancer could be grouped as gender related, personal life style and others. Wanebo (1983) stated that gender is the most important factor as incidence and mortality rate is high in females while Offit and Brown (1994) mentioned that lifestyle related risk factors such as oral contraceptives, having no children, no breast feeding, induced abortion, Hormonal Replacement Therapy (HRT), alcohol and obesity are risk factors. According to Henderson (1995) other factors are age, personal and family history, menstrual history, some nutritional factors and carcinogenic exposure. In spite of all these factors, real causes of cancer are not yet fully known. Breast cancer is one of the preventable and manageable cancers once detected early. As such there is need for every woman, beginning with every adolescent girl, to be able to do self-breast examination in order to detect breast cancer early. This behaviour will promote breast health by secondary prevention (or virtual cure) of any detected breast cancers.

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Energy needs to be geared towards early detection through the use of secondary preventive measures such as self-breast examination. Based on that, there is need to identify the knowledge of breast self-examination among the university undergraduates for early detection and treatment of cancer. Mamon and Zapka (1985) found out that women who practice BSE have a better chance of early detection, an increase of survival rate and better treatment option. Champion (1992) corroborated the same in his own study. Maurer described breast self examination as a self-care practice that is easy, convenient, private, safe, involving no cost and requiring no specific equipment. This exercise is very important and urgently needed in this environment for early detection and treatment of breast cancer. Jenkins (2003) revealed from the findings of his study that in places where breast-self examination is widely practiced, 70-80% of breast cancers are discovered by patients themselves BSE is therefore very useful in the detection of breast lumps and as a way of preventing breast cancer. The objective of this study therefore was to establish the knowledge, attitude and practice of self-breast examination among the undergraduate students of the University of Ibadan so as to plan skill acquisition and training for them as may be needed.

MATERIALS AND METHODS

This is essentially a descriptive study though some correlations were sought between some of the indices in the study. The population of undergraduate students of the University of Ibadan was sampled. Two hundred and fifty female students were selected through stratified random sampling of three faculties after which simple random sample was used to select 250 students with the help of a self constructed and validated questionnaire with a reliability coefficient of 0.75. Two hundred and twenty eight questionnaires were adequately completed and so were used for the analysis of this study.

RESULTS

A total of 228 students completed and returned their questionnaires adequately to be used for the analysis of this study. The students were from 3 areas of study; namely, the faculties of Education and the Social Sciences as well as the College of Medicine. The age of the students ranged between 17-32 years, with a mean age of 20. Single students were 221 (96.9%) while 7 (3.1%) were married. The students were mostly from the states in the South-south, South-east and South-west geo-political zones of Nigeria. Students of Oyo State origin dominated, with 43 making up 18.9% of the population. The Christians were 187, making 82% of the population. Table 1 shows the year of study of the students while Table 2 is the summary of the answers to the major knowledge questions of the study. Year 2, which usually has the largest number of students, is reflected in the study also.

One hundred and ninty five (95.5%) of the students know about breast cancer while 33 (14.5%) did not know anything about breast cancer. Only 64 (28.1%) of the students knew the recommended interval for SBE; and only 25 (11.1%) actually practiced SBE regularly. One of the students described cancer as growth, 25% as diseases, 2.2% as lump in the breast while 8.8% described cancers as tumors. One hundred and forty four (63.2%) said that cancers could be prevented while 25% answered in the negative; 11.8% did not know whether it could be prevented or not. 98.7% reported that they had heard about breast cancer while 3% said they had not. The commonest source of information about breast cancer was the television (Table 3).

Table 1: Year of study of the students

Year of study	Frequency	(%)
1	45	19.7
2	82	36.0
3	45	19.7
4	36	15.8
5	20	8.8
Total	228	100.0

Table 2: Summary of socio-demographic and key knowledge answers in the survey

Index	Yes (%)	No (%)
Know some things about cancers	195 (85.5)	33 (14.5)
Cancers can be prevented	144 (63.2)	57 (25.0)*
Have heard about breast cancers	225 (98.7)	3 (1.3)
Have heard about self-breast examination	188 (82.5)	40 (17.5)
Have undergone clinical breast examination	29 (12.7)	199 (87.3)
Has learnt how to do SBE	130 (57.0)	98 (43.0)
Has cancer history in the family	21 (9.2)	207 (90.8)
Practices SBE regularly	25 (11.0)	203 (89.0)

*Don't know 27 (11.8%)

Table 3: Sources of information on breast cancer as given by the students

	Yes	No
Radio	38.2	61.8
Television	64.9	35.1
Health workers	44.7	55.3
School	21.5	78.5
Church	8.8	91.5

Table 4: Uses of breast- self examination

No response	52 (22.89%)
To detect breast lump in the breast	122 (53.5%)
Learn to diagnose	4 (1.8%)
To detect breast cancer	39 (17.1%)
To maintain balance of one's self	11 (4.8%)

Table 5: Attitudinal responses of the students

Item	Yes (%)	No (%)
SBE is too embarrassing	6 (2.6)	222 (97.4)
SBE is a very useful thing to do	106 (46.5)	122 (53.5)
SBE should be actively promoted	131 (57.5)	97 (42.5)
I know how to do SBE well	84 (36.8)	144 (63.2)
Would like to know how to do SBE	171 (75.0)	28 (12.3)*
Early detection of breast cancer is very important	221 (96.9)	7 (3.1)

* No response 29 (12.7%)

One hundred and eighty eight (82.5%) of the students reported to have heard of breast self examination while 17.5% have not heard of it. Table 4 shows the uses to which SBE could be put as revealed by the students. Detection of breast lump was the most frequently give usage. Table 5 is a summary of the attitude responses of the students. Fortunately 222 (97.0%) of the students agree that SBE is not too embarrassing. However, the other attitudinal responses are not so good.

Correlations: Knowledge of breast cancer and self-breast examination are correlated with good attitudes towards SBE ($r = 0.196$; $p < 0.01$). Similarly, attitudes were better in some faculties than the others; notably medicine> social science > education ($r = 0.147$; $p<0.05$).

DISCUSSION

The study focused on the knowledge, altitude and practice of cancers in general and about breast cancers and self- breast examination in particular among the female students. Two hundred and twenty five (98.7%) of the students have known about breast cancer while 148 (64.9%) heard about it from television, showing the dominance and the utility of this avenue in information dissemination in the modern Nigerian communities. However only188 (82.5%) have heard about self-breast examination and only 122 (53.2%) of them knew what self-breast examination is used for. The knowledge is not deep as only 64 (28%) knew the correct interval for self breast examination. This in line with the findings of Popovic *et al.* (1991) that there is insufficient knowledge among urban female population about SBE. Only 25 (11%) of the respondents practiced SBE regularly; 50% did not practice at all while 30% did it infrequently. Besides considering SBE as not too embarrassing, all the other attitudinal responses were poor or very poor. These should constitute issues for Information, Education and Communication (IEC) in regard of breast cancer and SBE activities. The very encouraging finding is that 75% of the population is highly motivated to learn self-breast examination. It suggests that the ground is good for IEC in this regard and that only the lack of such adequate IEC may have been the problem before; as it is difficult to know anybody who have seen an actual case of late detection of breast cancer and death thereof and not desire to prevent is as such. There is need to plan educational intervention for effective improvement in both frequency and proficiency in self- breast examination as this has been found to effective in early detection of breast cancer and so its possible cure (Ozturk *et al.*, 2000).

The developing countries, of which Nigeria is a major one has neither the publicly available resources, the technology or the other things that are needed for any other than very cheap and easily implemented early self-detection of the cases and simple surgical removal of the cancers. All efforts should be put in this direction, starting with the must useful target groups of the community as the university students, etc, armed with the information available from studies such as these.

RECOMMENDATION

It is therefore recommend that further research (e.g., among women elite, sports women, musicians and other role model women) and education in breast cancer (including SBE in schools) should be pursued quite aggressively in Nigeria and other developing and resource-poor countries.

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