ASSESSMENT OF KNOWLEDGE, ATTITUDE AND PERCEPTION ON BREAST SELF-EXAMINATION PRACTICE AMONG FEMALES ATTENDING OUT-PATIENT CLINIC IN BABCOCK UNIVERSITY TEACHING HOSPITAL, ILISHAN-REMO, OGUN STATE, NIGERIA

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Abstract

The study assessed knowledge, attitude and perception on breast self-examination practice among females attending out-patient clinic in Babcock University Teaching Hospital, Ilishan-Remo, Ogun State, Nigeria. Descriptive research design was adopted. Three hundred females were used as sample. The instrument used for data collection was a self-developed, validated and reliable questionnaire with Cronbach alpha reliability coefficient of 0.85. Data were processed using Statistical Package for Social Science version 23. Using descriptive statistics of percentage while three hypotheses were tested using inferential statistics of Chi-square at 0.05 level of significance. Results revealed that this study revealed that majority of participants had moderate knowledge on self-examination practice, positive attitude practice and positive perception of breast self-examination practice. Furthermore, results also showed that there is a significant relationship between knowledge and breast self-examination practice (p=0.000); significant relationship between attitude and breast self-examination practice (p=0.000) and significant relationship between perception and breast self-examination practice (p=0.000). On the basis of the findings, it was recommended that more awareness and health education programme be carried out by healthcare professionals to improve breast self-examination practice.

Keywords: Breast self-examination: Females: Out-Patients: Babcock University Teaching Hospital.

Introduction

Breast is considered a significant component of female beauty all over the world, therefore, any disorder or abnormality observed can cause emotional disturbance to the individual. Reaction to breast cancer in female comes in various ways and the manner of acceptance depends on her philosophy of life, because cancer is a terminal disease of the human being. Breast cancer is the most common cancer among women and it is also the second most occurring malignancy in the world. It is among the category of cancers that can be detected early if adequate screening measures are conducted (Koc, Gulen-Savas, Ergol, Yildirim-Cetinkaya & Aydin, 2019). From the year 2008 to the year 2012, the incidence rate of breast cancer had an increase of greater than 20% and mortality rate had an increase of 14% (Birhane, Alemayehu, Anawte, Gebremariyam, Daniel, Addis & Negash, 2017). The International Agency for Research and Cancer which is an agency of the World Health Organization (WHO) conducted a study and found out that in 2018, 2.1 million women globally were diagnosed with breast cancer for the first time in their lives (Koc, Gulen-Savas, Ergol, Yildirim-Cetinkaya & Aydin, 2019).

Two out of ten women who are newly diagnosed with breast cancer in healthcare facilities that have high resources die, while seven out of ten women diagnosed in healthcare facilities with low resources die (Birhane, Alemayehu, Anawte, Gebremariyam, Daniel, Addis & Negash, 2017). 627,000 women died from breast cancer which is approximately 15% of all cancer deaths among women (Johnson 2019). The rate of women being diagnosed with breast cancer is on the increase in almost all regions of the world and also in many regions of Africa (Birhane, Alemayehu, Anawte, Gebremariyam, Daniel, Addis & Negash, 2017). In Nigeria, female breast cancer is recognized as major cause of morbidity and mortality with incidence rate ranging from 36.3 to 50.2/100,000 live birth (Amin, Ewunonu, Oguntebi & Liman, 2017). It is a problem in public health because it is in the industrious years of a woman's life that it occurs (Birhane, Alemayehu, Anawte, Gebremariyam, Daniel, Addis & Negash, 2017).

Recommended preventive techniques to reduce breast cancer mortality and morbidity include breast self-examination (BSE); clinical breast examination (CBE) and mammography. The clinical breast examination and mammography require specialized equipment and expertise. The individual must also visit health facilities. Breast self-examination can be done by individual female. Breast self-examination is inexpensive, simple, quick and cost free. It benefits women in two ways; women become familiar with both the appearance and the feel of their breast and detect any changes in their breast as early as possible. The practice of breast self-examination with several reasons like lack of time, lack of self confidence in

their ability to perform the technique correctly, fear of possible discovery of a lump, and embarrassment associated with manipulation of the breast were cited by many authors. American Cancer Society (2015) stated that finding and reporting breast changes early through breast self-examination offers woman the best opportunity for reducing breast cancer death. Everyone needs to know that early detection saves lives.

Factors including knowledge, attitude and perception have been identified to influence breast self-examination practice (Oladimeji, Tsoka-Gwegweni, Igbodekwe, Twomey, Akolo, Balarabe & Oladimeji, 2015). Studies have shown that determinants of breast self-examination include knowledge, attitude and practice (Ahmed, Zahid, Ladiwala, Sheikh & Memon, 2018; Birhane, Alemayehu, Anawte, Gebremariyam, Daniel, Addis & Negash, 2017; Getu, Kassaw, Tlaye & Gebrekiristos, 2018). Despite its importance in the early diagnosis of breast cancer, studies have shown that breast self-examination is still not adequately practiced by women in Nigeria (Bellgam & Buowari, 2015; Ohaeri & Aderigbigbe, 2019; Ogunbode, Fatiregun & Ogunbode, 2015). This may be due to inadequate knowledge of breast self-examination, negative or neutral attitude towards breast self-examination, and poor perception of breast self-examination. Hence, the need for a study to assess factors influencing breast self-examination practice among females attending outpatient clinic in Babcock University Teaching Hospital, Ilishan-Remo, Ogun State, Nigeria.

Objectives of the Study

i. Assess level of knowledge about breast self-examination practice among females attending outpatient clinic in Babcock University Teaching Hospital, Ilishan-Remo, Ogun state, Nigeria.

ii. Assess level of attitude towards breast self-examination practice among females attending outpatient clinic in Babcock University Teaching Hospital, Ilishan-Remo, Ogun state, Nigeria.

iii. Determine how out-patient females perceive breast self-examination practice in Babcock University Teaching Hospital, Ilishan-Remo, Ogun state, Nigeria.

Research Questions

i. What is the level of knowledge about breast self-examination practice among females attending outpatient clinic?

ii. What is the attitude of females towards breast self-examination practice?

iii. How do out-patient females perceive breast self-examination practice?

Methodology

Descriptive research design was employed. Babcock University Teaching Hospital is located within the main campus of Babcock University in Ilishan-Remo, Ogun state, Nigeria. Babcock University main campus is a secured and safe part of Ilishan-Remo. Boundary towns with Ilishan-Remo include Ikenne, Ilara, Irolu, Iperu, and Akaka. Ilishan-Remo is a Yoruba town, therefore, a great majority of people who live there are Yoruba. Babcock University Teaching Hospital was founded by the administrators of Babcock University and officially opened on January 1, 1986 as Babcock University Medical Centre which then metamorphosed to Babcock University Teaching Hospital. Chief J. S. K. Osibodu was acknowledged as the main driving force who pioneered the establishment of a standard hospital in Ilishan-Remo. Babcock University Teaching Hospital, Ilishan Remo, Ogun State, Southwest, Nigeria established in 2011 and offering tertiary healthcare services in general outpatient, paediatrics, surgery, chemical pathology, immunology and medical microbiology, orthopedics, maxillofacial surgery, anesthesia, intensive care, public health and disease control, radiology, ophthalmology, psychiatry, obstetrics and gynaecology, medicine, haematology and histopathology. The study population comprises all females attending out-patient clinic in Babcock University Teaching Hospital, Ilishan-Remo, Ogun state, Nigeria.

Total enumeration method was used to include 300 females attending outpatient clinic in Babcock University Teaching Hospital, Ilishan-Remo, Ogun State, Nigeria which was obtained from average two weeks patients' record of attendance in the study setting. A researcher designed questionnaire was used in data collection. It had 5 sections which are: section A: socio-demographic data, personal and family history; section B: knowledge of breast self-examination practice; section C: towards breast self-examination section D: practice and section E: perception about breast self- attitude examination practice. Socio-demographic data section A consists of 4 items while personal and family history consisted of 3 items. Knowledge about breast self-examination practice had 10 items, attitude towards breast self-examination practice had 6 items and perception about breast self-examination practice had 6 items. Knowledge score of participants below 40% was categorized as low, knowledge score of participants between 40% - 70% was categorized as moderate, while knowledge of score of participants above 70% was categorized as high. Attitude score below 50% was categorized as negative while attitude score above 50% was categorized as positive. Perception score below 50% was categorized as negative while

perception score above 50% was categorized as positive.

Ethical clearance was sought and obtained from Babcock University Health Research Ethics Committee to conduct this study. The participants were briefed in details about the study, this is to ensure the right of autonomy & self-determination. All participants however consented to be part of the study and were treated with respect and confidentiality. The questionnaire was serially numbered for control and recall purpose. Data obtained were processed and analysed using Statistical Package for Social Science (SPSS) version 23. Descriptive statistics were used to analyze and present the data. Hypotheses were tested using inferential statistics of Chi-square at 0.05 level of significance.

Results

Table 1 shows that majority of the respondents 117 (39.0%) are aged within 30-39, 183 (61.0%) are married, 122 (40.7%) had Senior Secondary School certificate and 155 (51.7%) are Yoruba.

Table 2 shows that majority of the respondents 262 (87.3%) have not attained menopause, 286 (95.3%) have no personal history of any breast disease and 292 (97.3%) have no family history of breast disease.

Table 1: Socio-Demographic Data of Respondents

Variables		Frequency	Percentage (%)
Age	20-29	4	1.3
	30-39	117	39.0
	40-49	107	35.7
	50-59	53	17.7
	60-69	19	6.3
	Total	**300**	**100**
Marital status	Single	96	32.0
	Married	183	61.0
	Divorced	14	4.7
	Widowed	7	2.3
	Total	**300**	**100**
Educational status	No formal education	7	2.3
	FSLC	23	7.7
	JSSC	41	13.7
	SSSC	122	40.7
	Bachelor Degree	107	35.7
	Total	**300**	**100**
Ethnicity	Yoruba	155	51.7
	Igbo	99	33.0
	Hausa	15	5.0
	Others	31	10.3
	Total	**300**	**100**

Table 2: Personal and Family History of Respondents

Variables		Frequency	Percentage (%)
Have you attained menopause?	Yes	26	8.7
	No	262	87.3
	Uncertain	12	4.0
Do you have a personal history of any breast disease?	Yes	14	4.7
	No	286	95.3
Does anyone in your family have a history of any breast disease?	Yes	8	2.7
	No	292	97.3

Research Question One

What is the level of knowledge about breast self-examination practice among females attending outpatient clinic?

Table 3 shows the knowledge level about breast self-examination practice. Results reveal that 33.7% of respondents have low knowledge level regarding breast self-examination practice, 39.0% have moderate knowledge level regarding breast self-examination practice, while 27.3% have high knowledge level regarding breast self-examination practice. This study conclude that majority of

respondents had moderate knowledge on self-examination practice.

Score	Frequency	Percent (%)
Low < 40%	101	33.7
Moderate 40-70%	117	39.0
High >70%	82	27.3
Total	300	100.0

Research Question Two

What is the attitude of females towards breast self-examination practice?

Table 4 shows the attitude towards breast self-examination practice. Results reveal that majority of the respondents 203 (67.7%) had positive attitude towards breast self-examination practice while 97 (32.3%) had negative attitude towards breast self-examination practice.

Table 4: Attitude towards Breast Self-Examination Practice

Score	Frequency	Percent (%)
Negative < 50%	97	32.3
Positive ≥50%	203	67.7
Total	300	100.0

Research Question Three

How do out-patient females perceive breast self-examination practice?

Table 5 shows the perception of breast self-examination practice. Results reveal that majority of the respondents 182 (60.7%) had positive perception of breast self-examination practice while 118 (39.3%) had negative perception of breast self-examination.

Table 5: Perception of Breast Self-Examination Practice

Score	Frequency	Percent (%)
Negative < 50%	118	39.3
Positive ≥50%	182	60.7
Total	300	100.0

Results on table 6 reveal that there is a significant relationship between knowledge of breast self-examination and breast self-examination practice with a p-value <0.05 (0.000, χ^2=61.067). Therefore, the null hypothesis is rejected and research hypothesis is accepted which states that there is a statistically significant relationship between knowledge of breast self-examination and breast self-examination practice.

Table 6: Relationship between Knowledge about Breast Self-Examination and Breast Self-Examination Practice

		Practice		χ^2	df	P-value
		Good (%)	Poor (%)			
Knowledge about self- breast examination	Low	37(19.0)	64 (61.0)	61.067	2	0.000*
	Moderate	84 (43.1)	33 (31.4)			
	High	74 (37.9)	8 (7.6)			
Total		195 (100.0)	105 (100.0)			

Results on table 7 revealed that there is a significant relationship between attitude towards breast self-examination and the breast self-examination practice with a p-value <0.05 (0.000, χ^2=36.544).

Therefore, the null hypothesis is rejected and the alternate hypothesis is accepted which states that there is a statistically significant relationship between attitude towards breast self-examination and breast self-examination practice.

Table 7: The Relationship between Attitude towards Breast Self-Examination and Breast Self-Examination Practice

		Practice		χ^2	Df	P-value
		Good (%)	Poor (%)			
Attitude about self-breast examination	Negative	37 (19.0)	60 (57.1)	45.294	1	0.000*
	Positive	158 (81.0)	45 (42.9)			
Total		195 (100.0)	105 (100.0)			

Result on table 8 reveal that there is a significant relationship between the perception of breast self-examination and the breast self-examination practice with a p-value <0.05 (0.000, χ^2=53.982).

Therefore, the null hypothesis is rejected and the alternate hypothesis is accepted which states that there is a statistically significant relationship between perception of breast self-examination and breast self-examination practice.

Table 8: Relationship between Perception of Breast Self-Examination and Breast Self-Examination Practice

		Practice		χ^2	Df	P-value
		Good (%)	Poor (%)			
Perception about self-breast examination	Negative	47 (24.1)	71 (67.6)	53.982	1	0.000*
	Positive	148 (75.9)	34 (32.4)			
Total		195(100.0)	105 (100.0)			

Discussion of Findings

This study set out to assess knowledge, attitude and perception on breast self-examination practice among females attending out-patient clinic in Babcock University Teaching Hospital, Ilishan-Remo, Ogun State, Nigeria. The demographic characteristics revealed that larger proportion of the participants were within reproductive age and that, there were more females between 30-39 years at Outpatient Clinic during data collection. Also, majority of the respondents 262 (87.3%) have not attained menopause, 286 (95.3%) have no personal history of any breast disease and 292 (97.3%) have no family history of breast disease.

The study found that majority of the participants had moderate knowledge on self-examination practice. This finding is in line with Kalliguddi, Sharma and Gore (2019), who found that more respondents had moderate knowledge about breast self-examination in their study on knowledge, attitude and practice of breast self-examination among female IT professionals in Silicon Valley of India. This study also revealed that majority participants had positive attitude towards breast self-examination practice. The outcome of this study corroborates with the findings of the study conducted by Birhane, Alemayehu, Anawte, Gebremariyam, Daniel, Addis and Negash (2017) on the practices of breast self-examination and associated factors among female students in Debre Berhan University and observed that that 96.5% of the respondents have a positive attitude towards breast self-examination.

The findings from the study showed that majority of the participants had positive perception of breast self-examination practice. This is in line with the similar study conducted by Ahmed, Zahid, Ladiwala, Sheikh and Memon (2018), whose respondents perceived breast self-examination as important in detecting breast cancer early in their study titled on breast self-examination awareness, perception and practices among female students in Karachi, Pakistan. The finding on the test of hypotheses showed significant relationship between knowledge of breast self-examination and breast self-examination practice p-value <0.05(0.000, χ^2=61.067. This outcome agrees with Ossai, Azuogu, Ogaranya, Ogenyi, Enemor and Nwafor (2019), who reported that there is a significant relationship between knowledge of breast self-examination and breast self-examination practice in their study on the predictors of practice of breast self-examination among female undergraduate students of Ebonyi State University.

The result of this study revealed that there is a significant relationship between attitude towards breast self-examination and the breast self-examination practice with a p-value <0.05 (0.000, χ^2=36.544). This outcome support the study of Getu, Kassaw, Tlaye and Gebrekiristos (2018), which also obtained the same findings among female undergraduate students in Addis Ababa University in Ethiopia. This study observed that there is a significant relationship between the perception of breast self-examination and the breast self-examination practice with a p-value <0.05 (0.000, χ^2=53.982).

This outcome corroborates the findings in a study conducted by Nde, Assob, Kwenti, Njunda and Tainenbe (2015), who also reported that there is a statistically significant relationship between perception of breast self-examination and breast self-examination practice among female undergraduate students of University of Buea.

Conclusion and Recommendations

Based on the outcome of this study, the knowledge level of breast self-examination among females is average, attitude and perception towards breast self-examination is also positive. There is also a statistically significant relationship between knowledge, attitude, and perception with breast self-examination practice. It is therefore recommended that more awareness and health education programme should be carried out by health care professionals and emphasis should be made on educating females about breast self-examination in the study area. Efforts should be geared towards encouraging women to monthly self-breast examination and yearly mammography test to serve as preventive measure and for early detection of cancer of breast as the case may be. Education and health institutions including other stakeholders should intensify more efforts at sensitizing women on the importance of breast self-examination.

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