Knowledge on Breast Cancer and the Practice of Breast Self-Examination Among Female Student Nurses

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Background
- Breast cancer (BC) mortality continues to represent a major public health problem.
- BC is second leading cause of cancer deaths in Ghana, with about 2,900 cases diagnosed annually and at least one of eight women with the disease dying (World Health Organization - WHO, 2015).
- Tends to occur a decade earlier among women in developing countries (Clegg-Lamptey et al., 2009).
- Even though breast cancer is less common before 40 years, young women tend to have more aggressive breast cancer (Sutu, 2010).
- It has been noted that the low level of knowledge of the risk factors, the warning signs and symptoms, unhealthy attitude to breast cancer and screening practices and programmes coupled with beliefs and myths about the disease have largely contributed to the late presentation and subsequent poor outcomes of breast cancer in many developing countries including Ghana (Clegg-Lamptey, Dakubo & Attohra, 2009).

Problem Statement
- According to Ringash and Canadian Task Force on Preventive Healthcare (2009) most breast cancers are detected by the woman herself.
- Breast Self-Examination (BSE) would be the best approach for early detection in limited resources countries such as Ghana.
- However, BSE practice is dependent on knowledge and awareness about breast cancer. If this knowledge is poor among women, there will be difficulty promoting BSE (Akhigbe & Omuem, 2009).
- Ayed, Eqtait, Imad, and Nazzal (2015) investigated breast self-examination in terms of knowledge, attitude and practice among nursing students of Arab American University/ Jenin. They discovered that most female nursing students had poor knowledge about BSE and did not perform BSE.
- The aim of this study is to assess the knowledge of breast cancer and the practice of breast self-examination among female nursing students at the University of Cape Coast in Ghana

Specific objectives
- Assess the knowledge of breast cancer and breast self-examination among female nursing students.
- Describe their beliefs about breast cancer.
- Describe the extent of practice of BSE among nursing students.
- Identify barriers to practicing breast self-examination.

Methods
- Design: Descriptive cross-sectional
- Population: The study population was female nursing students at the University of Cape Coast. The total number of undergraduate nursing students at the University of Cape Coast stood at 283 as at 2016 (UCC Basic Statistics, 2016).
- Sample Size and Sampling Technique: A sample size of 180 respondents was used in the study. This sample was determined using the Krejcie and Morgan table. Sixty (60) respondents were picked from each of three levels: 200, 300 and 400 (ie. 2nd year, 3rd year and 4th year). A simple random sampling procedure (the lottery method) was used for selection of respondents.
- Research Instrument: Questionnaire
- Data Analysis: The data collected from the field was cleaned and edited. Statistical Package for Social Sciences (SPSS) version 19 was used to analyze the data and findings resented in percentages and frequencies.

Results

Assessment of breast cancer knowledge

- What is breast cancer?
- Symptoms of breast cancer
- Risk factors for breast cancer

Assessment of breast self-examination knowledge and practices

- How often should BSE be performed?
- Do you perform BSE?

Major findings and conclusions
- We found that the majority of students have good knowledge about the symptoms of breast cancer, however their knowledge about risk factors was inadequate.
- Most students knew what BSE is and could identify the right procedure in a questionnaire.
- Respondents did not follow a regular BSE schedule but performed the procedure whenever they remember.
- Lack of know-how was the main reason for those who do not practice BSE.
- The study uncovered that the nursing students do not believe most of the myths around breast cancer. This finding is important to the extent that, students will be able to dispel such thoughts from their patients.
- Most of the deficiencies in knowledge and practice of BSE could be remedied with increased education.