

A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURE TEACHING PROGRAMME ON KNOWLEDGE REGARDING BREAST SELF EXAMINATION AMONG REPRODUCTIVE AGE WOMEN ATTAINED MEDICAL OPD AT PIMS HOSPITAL OF UDAIPUR

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ABSTRACT

Introduction: Breast cancer is one of the most common cancers among women and a leading cause of cancer-related deaths worldwide. Early detection through Breast Self-Examination (BSE) can help identify abnormalities and promote timely treatment. Improving women's knowledge regarding BSE is essential for early detection and prevention of breast cancer. Objectives: To assess the effectiveness of a Structured Teaching Programme (STP) on knowledge regarding Breast Self-Examination among women of reproductive age attending the Medical OPD. Methodology: A pre-experimental one-group pre-test and post-test design was adopted. The study included 100 reproductive-age women selected through non-probability convenience sampling. A structured knowledge questionnaire was used to assess knowledge before and after the Structured Teaching Programme. Results: The majority of participants were aged 36–45 years (40%), Hindu (91%), married (70%), from joint families (73%), had higher secondary education (45%), resided in rural areas (69%), and had no family history of breast cancer (96%). In the pre-test, 27% had poor knowledge, 57% had adequate knowledge, and 16% had good knowledge. Following the intervention, poor knowledge decreased to 6%, adequate knowledge was 41%, and good knowledge increased to 53%. The mean knowledge score increased from 12.33 ± 1.95 in the pre-test to 18.51 ± 1.50 in the post-test. The calculated t-value (24.56) was greater than the table value (1.98) at the 0.05 level of significance, indicating a statistically significant improvement in knowledge. The overall effectiveness of the Structured Teaching Programme was 24.72%. Conclusion: The Structured Teaching Programme was effective in significantly improving knowledge regarding Breast Self-Examination among women of reproductive age. Educational interventions can play an important role in promoting breast cancer awareness and early detection practices.

Keywords: Breast Self-Examination, Breast Cancer, Structured Teaching Programme, Knowledge, Reproductive Age Women, Effectiveness, OPD.

INTRODUCTION

Health is a valuable asset and an essential component of a happy and productive life. According to Newman's System Model, health is a condition in which all parts and subparts of an individual function in harmony. The Alma-Ata Declaration emphasized health promotion and disease prevention through the adoption of healthy lifestyles and appropriate coping strategies.

Women experience unique health challenges throughout their lives, requiring special attention and healthcare interventions. Among these challenges, cancer remains a major public health concern. Breast cancer is the most common cancer among women worldwide and is a leading cause of cancer-related mortality. It develops when abnormal breast cells grow uncontrollably and fail to undergo normal programmed cell death (apoptosis), resulting in the formation of malignant tumors.

Early detection plays a crucial role in reducing breast cancer morbidity and mortality. Breast Self-Examination (BSE) is a simple, cost-effective method that helps women become familiar with the normal appearance and feel of their breasts, enabling them to identify any unusual changes at an early stage. Therefore, enhancing women's knowledge regarding BSE through educational interventions is important for promoting early detection and improving breast health outcomes.

OBJECTIVES

1. To assess the pre test knowledge score regarding breast self examination among reproductive age women attained medical OPD at PIMS hospital of Udaipur.
2. To evaluate the effectiveness of structured teaching programme regarding breast self examination.
3. To find out the association of the knowledge score with selected demographic variables.

HYPOTHESES

1. H₀: - there will be significant difference between pretest & posttest knowledge score regarding BSE.
2. H₁: - there will be significant difference between pretest & posttest knowledge score regarding BSE.

RESEARCH METHODOLOGY

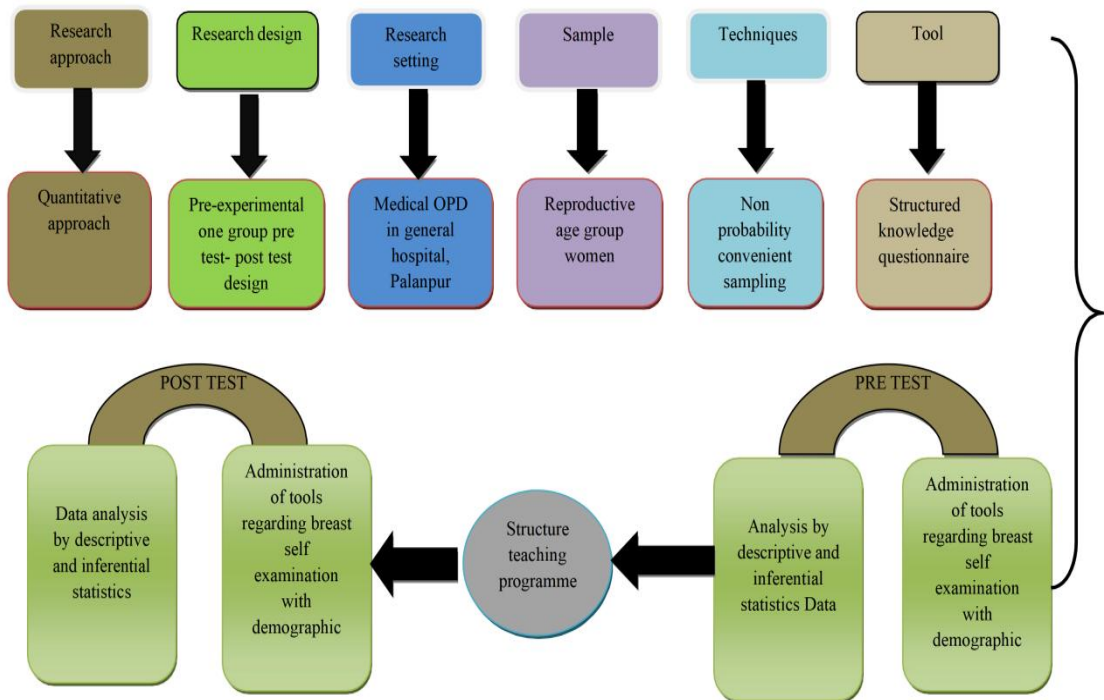


Figure: 2 Schematic representation of research design to assess effectiveness of STP on knowledge regarding breast self examination

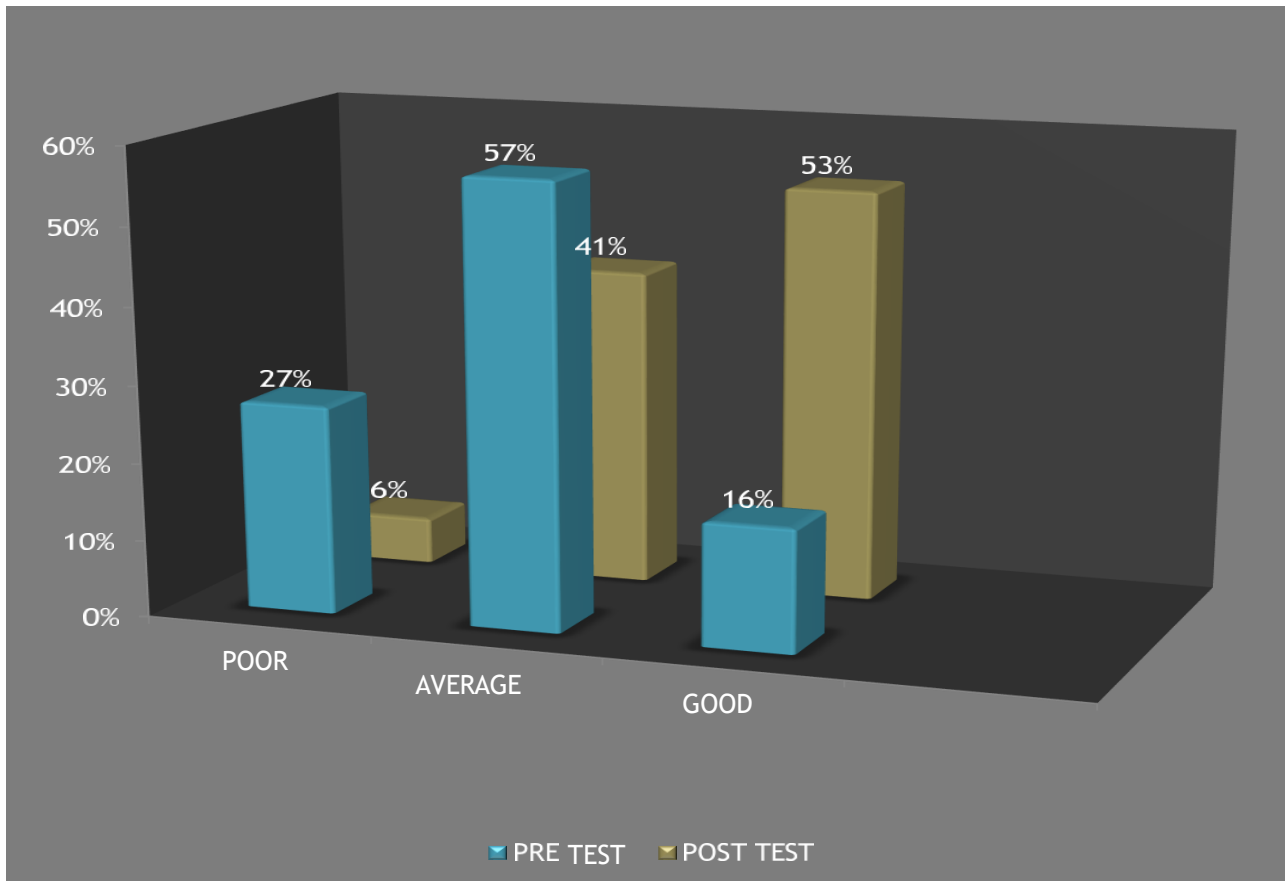
RESULT

SECTION-I

Among the 100 participants, the majority were aged 36–45 years (40%), Hindu (91%), married (70%), and belonged to joint families (73%). Most had completed higher secondary education (45%), while 50% were engaged in other occupations. A majority resided in rural areas (69%), had no bad habits (93%), and reported no history of breast cancer (96%). Regarding sources of information about breast self-examination, most participants obtained information from peer groups (59%), followed by other sources (21%), newspapers (17%), and books (3%). These findings indicate that the study population predominantly consisted of married, rural women with higher secondary education and limited exposure to formal sources of health information.

SECTION-II

Figure . Bar diagram representing percentage wise distribution of the sample according to pre - test and post- test level of knowledge.



The findings showed that before the Structured Teaching Programme, 27% of the participants had poor knowledge, 57% had average knowledge, and only 16% had good knowledge regarding breast self-examination. After the intervention, the percentage of participants with poor knowledge decreased to 6%, while those with average knowledge were 41% and those with good knowledge increased markedly to 53%. These results indicate a substantial improvement in the knowledge level of the participants following the Structured Teaching Programme, demonstrating its effectiveness in enhancing awareness regarding breast self-examination.

SECTION-III

Association Between Knowledge and Selected Demographic Variables

The chi-square analysis revealed that there was a statistically significant association between the level of knowledge regarding breast self-examination and selected demographic variables such as age ($\chi^2 =$

12.99), marital status ($\chi^2 = 14.5$), educational status ($\chi^2 = 14.22$), and place of living ($\chi^2 = 6.66$), as the calculated chi-square values were greater than the respective table values at the 0.05 level of significance. Therefore, these variables significantly influenced the knowledge level of the participants. However, no significant association was found between knowledge and religion ($\chi^2 = 0.65$), family type ($\chi^2 = 0.06$), occupation ($\chi^2 = 4.80$), bad habits ($\chi^2 = 0.02$), history of breast cancer ($\chi^2 = 0.25$), and source of information about breast self-examination ($\chi^2 = 0.98$), as the calculated values were lower than the table values. Hence, the level of knowledge was independent of these demographic variables.

DISCUSSION

The present study was conducted to assess the effectiveness of a Structured Teaching Programme (STP) on knowledge regarding Breast Self-Examination (BSE) among women of reproductive age attending the Medical OPD.

Regarding the demographic characteristics, the majority of participants were aged 36–45 years (40%), Hindu (91%), married (70%), belonged to joint families (73%), had higher secondary education (45%), and resided in rural areas (69%). Most participants had no history of breast cancer (96%) and obtained information regarding BSE mainly through peer groups (59%).

The findings of the study revealed that before the implementation of the Structured Teaching Programme, 27% of participants had poor knowledge, 57% had average knowledge, and only 16% had good knowledge regarding breast self-examination. After the intervention, the proportion of participants with poor knowledge decreased to 6%, while those with good knowledge increased substantially to 53%. These findings indicate that the Structured Teaching Programme effectively enhanced the participants' knowledge regarding breast self-examination.

The mean pre-test knowledge score was 12.33 ± 1.95 , whereas the mean post-test knowledge score increased to 18.51 ± 1.50 . The calculated t-value (24.56) was much higher than the table value (1.98) at the 0.05 level of significance, demonstrating a statistically significant improvement in knowledge after the educational intervention. Therefore, the research hypothesis was accepted, confirming the effectiveness of the Structured Teaching Programme.

The study also examined the association between knowledge and selected demographic variables. Significant associations were found with age, marital status, educational status, and place of living, indicating that these factors influenced the knowledge level regarding breast self-examination. However,

no significant association was observed with religion, family type, occupation, bad habits, history of breast cancer, or source of information.

Overall, the findings support the importance of educational interventions in improving women's awareness and knowledge regarding breast self-examination. The Structured Teaching Programme proved to be an effective strategy for increasing knowledge and may contribute to the early detection of breast abnormalities and breast cancer among women.

CONCLUSION

The study concluded that women of reproductive age had inadequate to average knowledge regarding Breast Self-Examination (BSE) before the implementation of the Structured Teaching Programme. Following the intervention, a significant improvement in knowledge was observed among the participants. The post-test results demonstrated that the Structured Teaching Programme was highly effective in enhancing knowledge regarding breast self-examination. The calculated t-value confirmed a statistically significant difference between pre-test and post-test knowledge scores. Furthermore, demographic variables such as age, marital status, educational status, and place of living were significantly associated with the level of knowledge. The findings emphasize the importance of health education programmes in promoting awareness and encouraging early detection practices for breast cancer. Therefore, Structured Teaching Programmes can be effectively utilized as an educational strategy to improve women's knowledge and promote breast health.

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