

Knowledge and Practice of Breast Self-Examination among Female Traders in Ibadan, Nigeria

Dr. M.O. Balogun MBBS (Ib), MPH (Ib) and Dr. E.T. Owoaje MBBS (Ib); FWACP (Comm. Hlth)
Department of Community Medicine, University College Hospital, PMB 5116, Ibadan,
Oyo State, Nigeria.

SUMMARY

Breast cancer is the most common cancer among women worldwide and it can be detected at an early stage through breast self-examination (BSE). This study was carried out to assess knowledge and practice of breast self-examination among female traders in a well-defined market. A descriptive cross-sectional survey was carried out among a total sample of 281 women in Sango market, Ibadan in, 2003. Female traders were interviewed using interviewer administered questionnaires to obtain information on their sociodemographic characteristics, items traded, knowledge and practice of breast self-examination. The mean age of the respondents was 37.3 ± 12.8 years (range was 16-80 years), 142 (50.5%) were aged between 30 and 49 years. Two hundred and seven (73.7 %) were married. One hundred and four (37.0%) had secondary education and 68 (24.2%) had no formal education. Only 89 (37.1%) of the traders were aware of breast self-examination, 51 (18.1%) of the traders had ever checked their breast. The level of awareness of breast self examination was highest among those aged 50-59 years ($p = 0.067$). Awareness of breast self-examination was found to be related to educational attainment. Women who had tertiary education were more knowledgeable about breast self examination ($p = 0.045$). The level of knowledge and practice of breast self-examination

among female traders in Nigeria is unacceptably low. Efforts should be made to increase level of knowledge and practice of breast self-examination through health education programmes.

Keywords: Breast self-examination, female traders, Sango market, knowledge and practice

INTRODUCTION

Cancers in all forms are responsible for about 12 per cent of deaths throughout the world[1], globally breast cancer is the most common malignant neoplasm among women[2, 3]. Breast cancer causes 376,000 deaths a year worldwide; about 900,000 women are diagnosed every year with the disease[4]. There is evidence that screening for breast cancer has a favourable effect on mortality from breast cancer[5]. Breast self-examination(BSE) is one of the important steps for identifying breast tumours at an early stage[6]. Thorough clinical examination and patient education in self-examination can have a crucial impact on early identification of breast cancer; its diagnosis and, ultimately, enhanced survival. In many countries, especially developing countries like Nigeria, BSE will most likely be the only feasible approach to wide population coverage as it is a cheap and easy method[1].

The objective of this study was therefore to assess knowledge and practice of breast self-examination among female traders in a well-defined market and to identify associated factors. This will be useful in making recommendation with regards to health education of women concerning BSE.

All Correspondence to Dr. M.O. Balogun

Department of Community Medicine,
University College Hospital,
PMB 5116, Ibadan,
Oyo State, Nigeria
Email: mobalogun2004@yahoo.com
234-8053052084

MATERIALS AND METHODS

Study area

The study was carried out in Sango Market, an urban market located in Ibadan North Local Government Area, Oyo State. Oyo State is one of the 36 states of Nigeria and is located in the South Western region of the country. The State was created in 1976 out of the old Western region and has a projected population of about 4 million[7]. Over 60% of the population resides in the urban areas. Ibadan is the capital of the state and has a population of about 2 million[7]. Ibadan municipality is divided up into 5 local government areas namely Ibadan North, North East, North West, South East and South West. Each of the local government areas is further subdivided into wards.

Sango market is one of the five markets in Ibadan North Local government; others include Bodija, Sabo, Ode Olo and Mokola markets. Sango market is a traditional open air all purpose market consisting of individual stalls built in the late 1960s by the Ibadan City Council. The market has one public toilet that is not functioning and two wells, which are not well maintained. The market has no refuse and sewage disposal systems but has access to electricity supply.

Study design and population

The survey was part of a larger study on women's health. It was a descriptive cross-sectional study aimed at collecting data about the work conditions and health problems of female traders in Sango market, Ibadan. These women were registered female traders selling in Sango market and constitute 70% of all traders selling in the market. These traders are mainly Yorubas and sold food items such as meat, pepper, vegetables, provisions, raw rice and beans.

Permission to carry out the study was obtained from the market leaders. The objectives of the study and all procedures involved were explained to the leaders and the traders themselves to obtain their consent. All female traders who were registered members of the market were recruited for the study. Hawkers and unregistered traders were excluded.

Data collection, analysis and management

A total sample of all registered female traders sell

ing in the market was recruited for the study. A pretested structured questionnaire containing both closed and open-ended questions was administered to the traders by trained interviewers. The questionnaire sought information on sociodemographic and occupation characteristics of the respondents, common health problems, care seeking behaviour, reproductive health status and clinical assessment of the respondents.

Questionnaires were coded and statistical analysis was done using Statistical Package for Social Sciences software programme (SPSS) Version 10 to calculate frequencies and chi-square analysis to test for associations between categorical variables.

RESULTS

Social and Demographic Characteristics

A total of 281 respondents were interviewed and their social and demographic characteristics are presented in Table 1. The mean age of the respondents was 37.3 ± 12.8 years (range was 16 – 80 years), of these, 142 (50.5%) were aged between 30 and 49 years. Two hundred and seven (73.7 %) were married; of these 119 (57.5%) were of a monogamous marriage. One hundred and four (37.0%) had secondary education and 68 (24.2%) had no formal education (Table 1).

Awareness and Practice of Breast Self Examination among Traders

One hundred and ninety two (68.3%) of the traders were not aware of breast self-examination while 89 (31.7%), were aware and 51 (18.1%) of the traders had ever checked their breast. The level of awareness of breast self examination was highest (38.7%) among those aged 50-59 years and was lowest among those less than 30 years and 60 years ($p = 0.067$). (Table 2). The women who had tertiary education were more knowledgeable about breast self-examination while those who had primary education were the least knowledgeable ($p = 0.045$).

Fifty-one (18.1%) of the traders reported that they practised breast self-examination. The practice was highest amongst those aged 50-59 years and lowest for those aged less than 30 years ($p = 0.125$). The practice of breast self examination was reportedly higher among women who had no formal education and lowest amongst those with primary education ($p = 0.087$) (Table 3).

Breast Self-Examination among Female Traders

TABLE 1: Socio-demographic characteristics of respondents

	n	%
<i>Age group(years)(n=281)</i>		
<30	83	
29.6		
30-39	86	30.6
40-49	56	19.9
50-59	31	11.0
>60	25	8.9
Total	281	100.0
<i>Marital Status(n=281)</i>		
Single	43	15.3
Married	207	73.7
Divorced	14	5.0
Widowed	17	6.0
Total	281	100.0
<i>Type of Marriage(n=281)</i>		
Monogamous	119	57.5
Polygamouns	88	42.5
Total	207	100.0
<i>Level of Education (n=281)</i>		
None	68	24.2
Primary	86	30.6
Secondary	104	37.0
Tertiary	23	8.2
Total	281	100.0

TABLE 2: Awareness of Breast Self-Examination by Age and Level of education of Trader

Characteristic	Awareness of Breast Examination		n=281 p-value
	Yes (%)	No (%)	
<i>Age group (Years)</i>			
<30	18(21.7)	65(78.3)	0.067
30-39	33(38.4)	53(61.6)	
40-49	21(37.5)	35(62.5)	
50-59	12(38.7)	19(61.3)	
>60	5(20.0)	20(80.0)	
<i>Level of Education</i>			
None	29(42.6)	39(57.4)	0.045
Primary	21(24.4)	65(75.6)	
Secondary	29(27.9)	75(72.1)	
Tertiary	10(43.5)	13(56.5)	

TABLE 3: Practice of Breast Examination by Age and Level of education of Traders

Characteristic	Practice of Breast Self Examination		n=281 p -value
	Yes (%)	No (%)	
<i>Age group (Years)</i>			
<30	9(10.8)	74(89.2)	0.125
30-39	17(19.0)	69(80.2)	
40-49	13(23.2)	43(76.8)	
50-59	9(29.0)	22(71.0)	
>60	3(12.0)	22(88.0)	
<i>Level of Education</i>			
None	19(27.9)	49(72.1)	0.087
Primary	12(14.0)	74(86.0)	
Secondary	15(14.4)	89(85.6)	
Tertiary	5(21.7)	18(78.3)	

DISCUSSION

Breast self-examination (BSE) provides an inexpensive method for early detection of breast tumors, thus knowledge and consistent practice could protect women from severe morbidity and mortality due to breast cancer [8]. This study assessed the knowledge and practice of breast self-examination among traders in Ibadan, Oyo state. Less than one-third of the respondents (31.7%) were aware of BSE. This is lower than 85.5% of women studied in Port Harcourt and 50% of those studied in South Africa [9, 10]. The level of awareness is however higher than 11.9% of women in China who were aware of BSE [11]. This could be due to the fact that 98% of women studied in Port Harcourt had formal education while 90.1% of those studied in China were rural women. In this study association was observed between level of education of traders and their awareness of breast self-examination, respondents with tertiary education were more knowledgeable about BSE. This finding is consistent with other studies conducted among nursing students in Saudi Arabia and health workers in Iran [12, 13]. In this study, less than one-fifth of the women interviewed reported practicing BSE, this level is however higher than women studied in United Arab Emirates, South Asia and Brazil [14, 15, 16].

Factors such as reduced access to health facilities could be responsible for these lower figures reported. Studies conducted among women in Port-Harcourt and Lagos revealed higher level of practice of 72% and 62% respectively [9, 16]. Perhaps this could be related to the higher level of education of the respondents in those studies. In the study conducted in Port Harcourt the women interviewed were from all works of life while the women studied in Lagos were school teachers. There was however no association between level of education of traders and practice of BSE in this study.

CONCLUSION

This study shows that level of awareness and practice of breast self-examination among traders in Ibadan, Oyo State, is unacceptably low. The market environment provides a reasonable location to educate the women on importance of BSE and how to examine themselves since these women spend most of their time in the market. Educational programmes could be designed to meet their needs in their own workplace environment. Otherwise the women may not have the opportunity to have such valuable and life saving information. The group approach would also foster regular practice of BSE as some of the women could be trained to act as peer educators for the other traders. The effect of this

approach in conjunction with electronic and print media would provide access to comprehensive information on breast self-examination for these women.

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