



A Study To Assess The Effectiveness Of A Structured Teaching Programme On Knowledge Regarding Prevention Of Breast Cancer Among Women Residing In A Selected Area, Udupi District.

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Abstract: This study aims to evaluate women's knowledge about breast cancer prevention using a structured questionnaire, determine the effectiveness of a structured teaching programme by measuring improvements in knowledge, and examine the relationship between women's initial knowledge levels and selected demographic variables.

INTRODUCTION

WHO promotes breast cancer control within the context of comprehensive national cancer control programmes that are integrated into NCDs and other related problems. Preventive measures included in comprehensive cancer control are prevention, early detection, diagnosis and treatment, rehabilitation and palliative care. According to the WHO, 1,050,000 cases of breast cancer arise annually in the world. Measures to control modifiable breast cancer risk, such as maintaining a healthy weight, regular exercise and reducing alcohol intake, will help in reducing the prevalence of BC. Increasing awareness and health education are effective ways for the identification of breast cancer in women.

NEED FOR THE STUDY

In India, the prevalence of BC is increasing with an estimated 80,000 new cases were diagnosed annually and one in 22 women is likely to suffer from breast cancer during her life time. In females, BC is the most common form of cancer. In India, the incidence is 19.1 per 100000 population, and the death rate is 10.4 per 100000 population. In the absence of an exact etiological agent for breast cancer, the most appropriate way of controlling it is by early detection and treatment. In 2020, an estimated 231,840 new cases of invasive breast cancer were diagnosed among women, and 40,290 women died from breast cancer. About 88,847 new cancer cases were detected in Karnataka by 2020.

OBJECTIVES OF THE STUDY

1. To assess the knowledge regarding the prevention of breast cancer among women as measured by a structured knowledge questionnaire.
2. To assess the effectiveness of a structured teaching programme on knowledge regarding the prevention of breast cancer among women in terms of gain in knowledge.
3. To find out the association between pretest knowledge scores regarding the prevention of breast cancer among women and the selected demographic variables.

OPERATIONAL DEFINITIONS

Effectiveness: In this study, effectiveness refers to the extent to which the structured teaching programme regarding prevention of breast cancer among women will achieve the desired effects in terms of gain in mean post – test knowledge score.

Structured teaching programme: In this study, it refers to a systematic and instructional strategy provided using a branching method of teaching through a structured teaching content on preventive aspects of breast cancer among women.

Knowledge: In this study, knowledge refers to the causes, signs & symptoms, treatment, management and prevention of breast cancer as assessed by a structured questionnaire.

Prevention of breast cancer: In this study, prevention of breast cancer refers to measures taken to prevent the occurrence of breast cancer.

Women: In this study, women refer to women residing in a selected area of the Udupi district.

HYPOTHESIS

H1: The mean post-test knowledge score of women regarding the prevention of breast cancer will be significantly higher than the mean pretest knowledge score

H2: There will be a significant association between knowledge and selected demographic variables.

VARIABLES

1. **Dependent variables:** In this study, the dependent variable is knowledge regarding the prevention of breast cancer.
2. **Independent variables:** In this study, the independent variable is the effectiveness of the structured teaching programme on knowledge regarding the prevention of breast cancer.
3. **Demographic variables:** In this study, extraneous variables are age in years, religion, type of diet, educational qualification, occupation, family income, type of family, area of residence, number of children and source of information.

Assumptions: The study assumes that women,

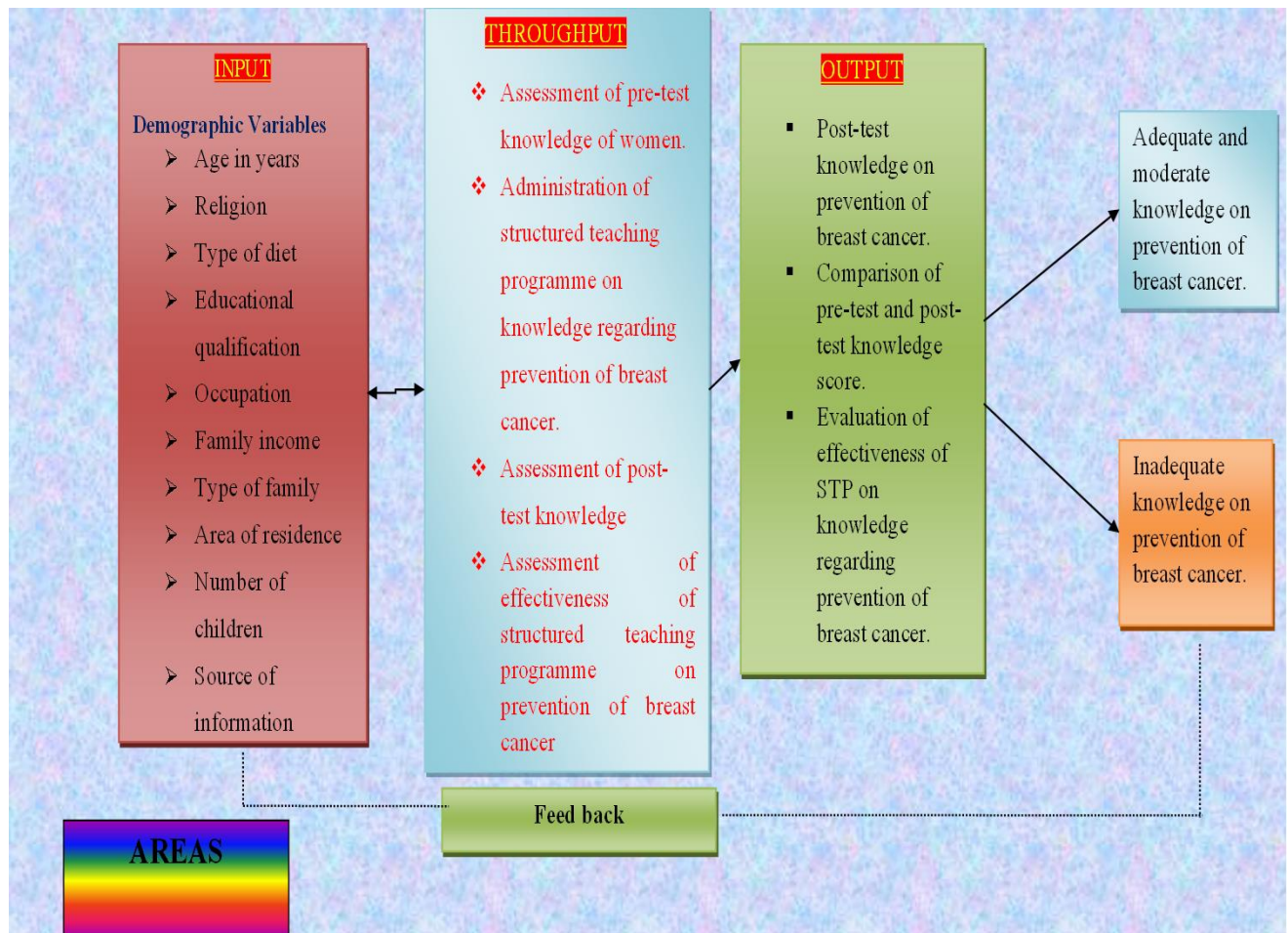
- will answer honestly to the questions.
- will have some knowledge regarding the prevention of breast cancer.
- Structured teaching programme is an aid to improve the knowledge regarding prevention of breast cancer, and in turn will help them to early detection of breast cancer and prompt management.

Delimitation: The study will be delimited to the,

1. women who are residing in the selected community area of Udupi.
2. who are willing to participate
3. who can read and write English and Kannada.

CONCEPTUAL FRAMEWORK

The conceptual framework for this study was developed by applying the general system model by Ludwig Von Bertalanffy (1969).



REVIEW OF LITERATURE

The related literature is presented in the following subheadings:

1. Literature related to the prevalence of breast cancer
2. Literature related to knowledge regarding breast cancer
3. Literature related to the effectiveness of the structured teaching programme

Based on the above categories, 22 reviews were used.

METHODOLOGY

RESEARCH APPROACH

An evaluative approach was used.

RESEARCH DESIGN

A pre-experimental one-group pretest-posttest design was chosen for the study.

SETTING OF THE STUDY

The study was conducted in PHC Hirebettu, Udupi district

POPULATION

In the present study the target population comprises of Women residing in a PHC Hirebettu, Udupi district.

SAMPLE SIZE AND SAMPLING TECHNIQUE

- Sample size-100 Women residing in a PHC, Hirebettu, Udupi district, who fulfilled the inclusion criteria for the study.
- Non-probability purposive sampling technique

Inclusion criteria

1. Women within age group of 18-60 years,
2. Women who are residing in PHC Hirebettu at Udupi
3. Able to read and write Kannada / English

Exclusion criteria

1. Sick at the time of data collection,
2. Not able to cooperate during the time of data collection.

PILOT STUDY

- The pilot study was conducted from 5/2/25 to 12/2/25 after obtaining permission from the authority, Bellarapadi, Udupi. The tool was administered to 10 samples by using a purposive sampling method with similar characteristics to the main study sample. Informed consent was obtained from each respondent, and confidentiality was assured by the investigator. Pretest was conducted on 5/2/25, the average time taken by respondents to answer the tool is 50 minutes, and on the same day structured teaching programme on oral cancer was given. On the 8th day, i.e, 12/2/25 post test was conducted. Data was collected and analyzed by using descriptive and inferential statistics.
- After the pilot study, the tool was found to be feasible, practicable, and acceptable. The pilot study confirmed that the final study would be feasible.

Data Collection Process

Data was collected from 13/2/25 to 20/2/25 after obtaining permission from the authority, PHC Hirebettu, Udupi. Subjects were chosen by a purposive sampling technique. The researcher introduced themselves to the subjects, and the purpose of the study was explained. Obtained written consent from those who were willing to participate in the study. Instructions were given, and the tool was administered. Pretest was conducted on 13/2/25 at 9.00 am onwards. The time to conduct the pretest was about 50 minutes, and on the same day, a structured teaching programme on breast cancer was given. The respondents were thanked at the end of the class. Post-test was conducted on 20/2/25.

DATA ANALYSIS AND INTERPRETATION

The analysis is organised under the following headings.

Section A: Demographic variables of women with respect to age in years, religion, type of diet, educational qualification, occupation, family income, type of family, area of residence, number of children and source of information.

Section B: Assessment of pretest and posttest level of knowledge of women regarding prevention of breast cancer.

Part I: Distribution of the subject's overall knowledge regarding the prevention of breast cancer.

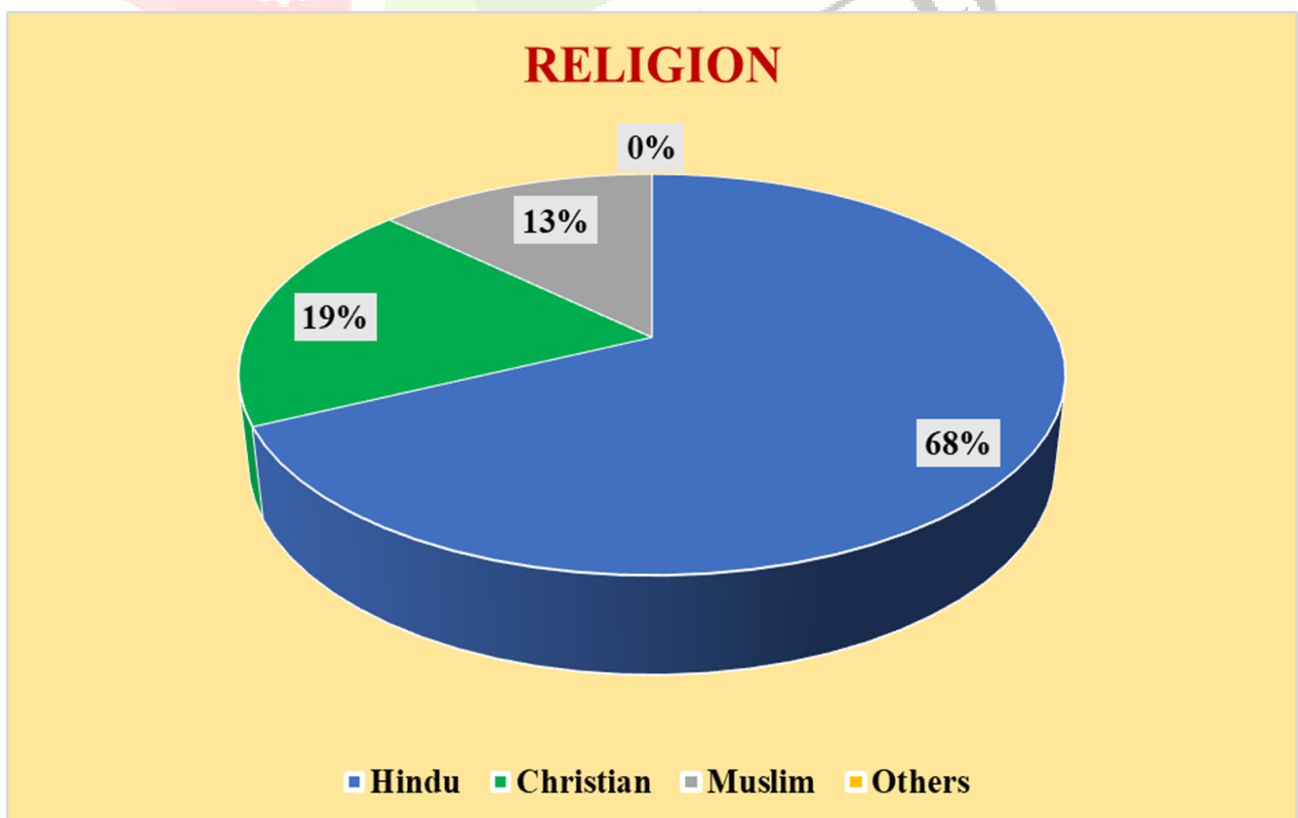
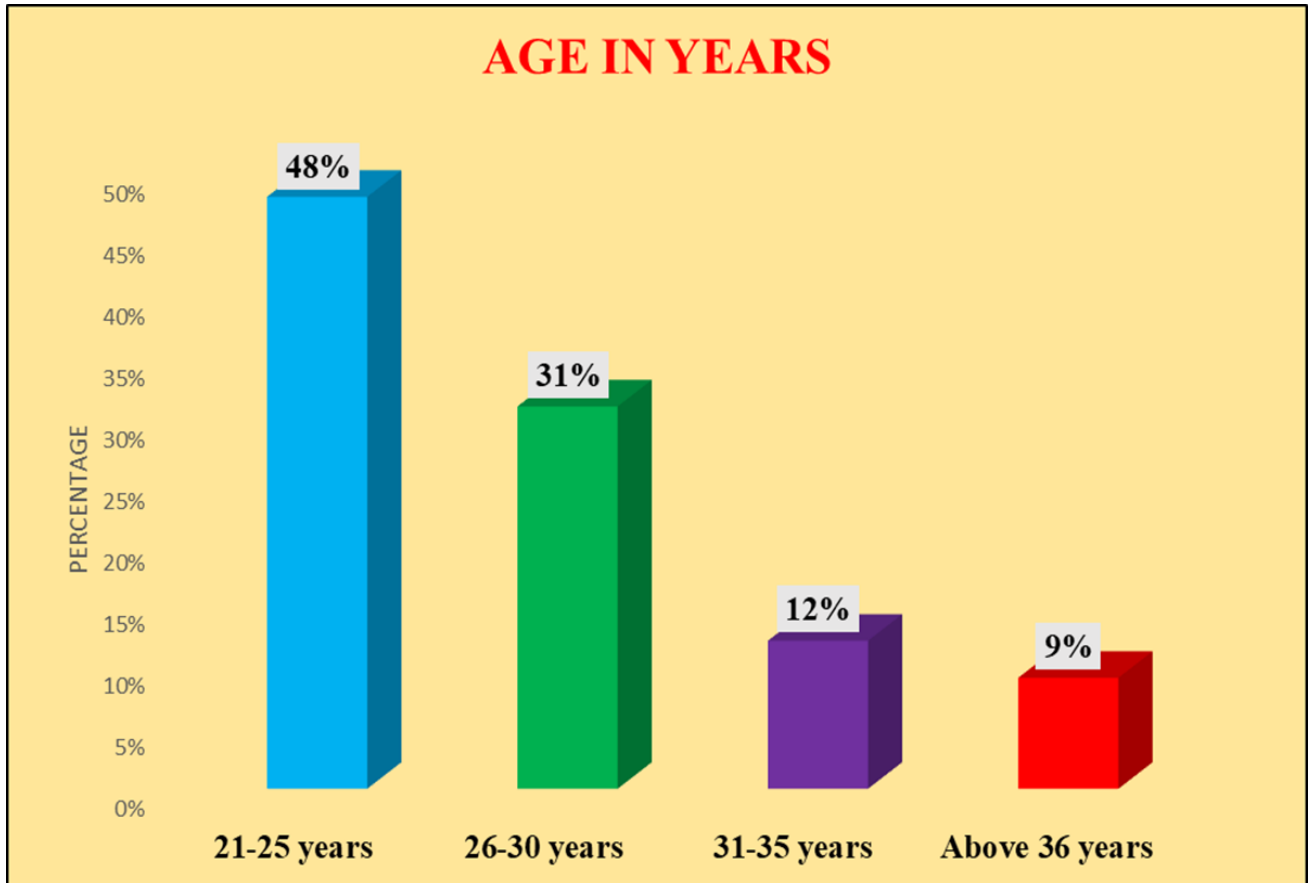
Part II: Area-wise analysis of pretest and posttest knowledge of women regarding prevention of breast cancer.

Section C: Effectiveness of structured teaching programme regarding prevention of breast cancer.

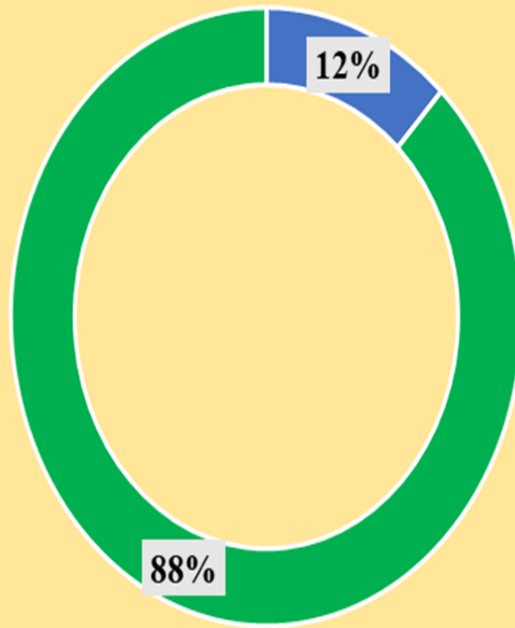
Section D: Association of pretest level of knowledge with demographic variables.

Section A:

This section deals with the demographic characteristics of the sample.

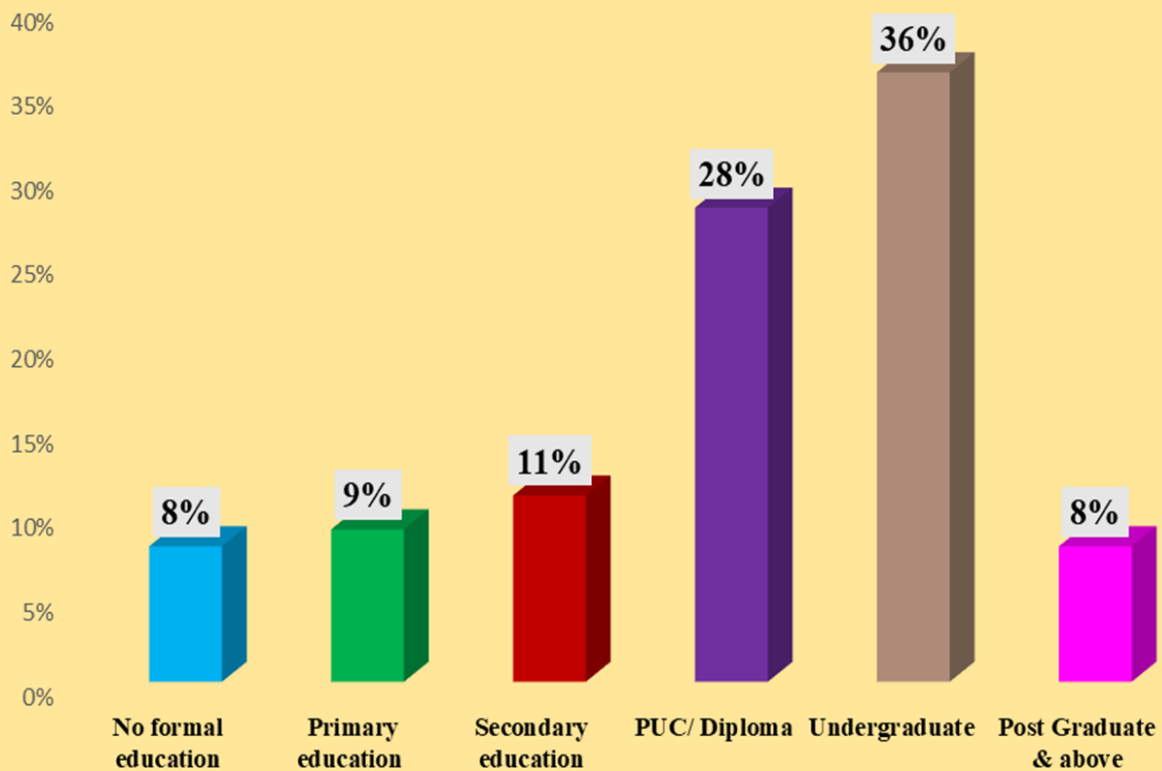


TYPE OF DIET

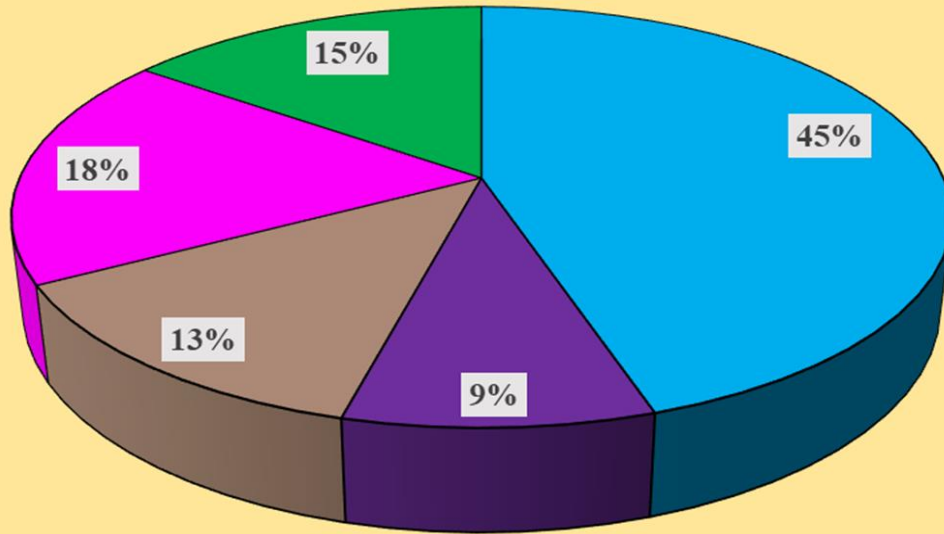


■ Vegetarian ■ Non vegetarian

EDUCATIONAL STATUS

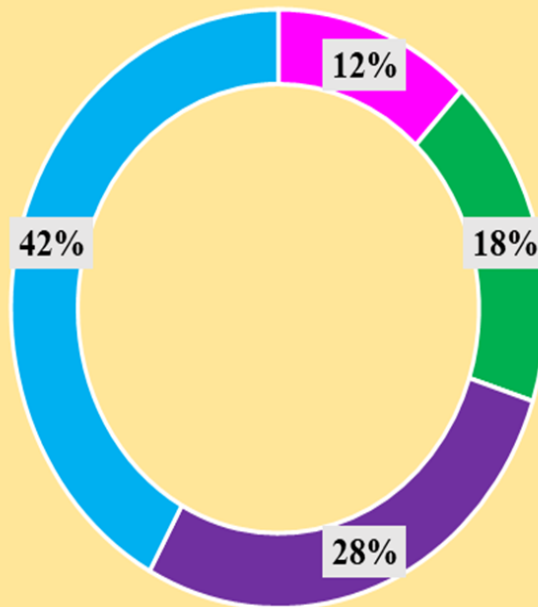


OCCUPATION



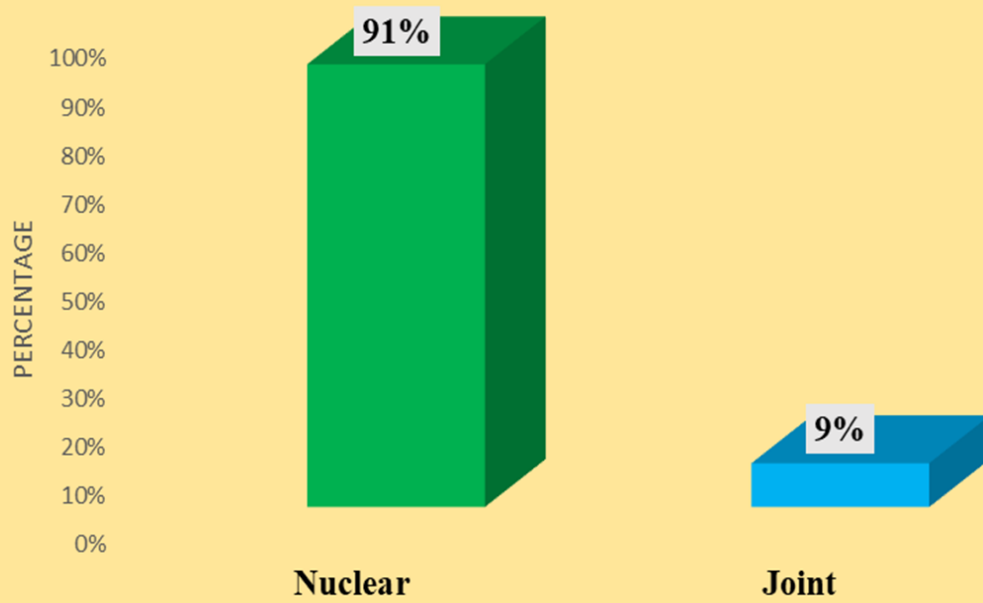
- Housewife
- Self employed
- Private employee
- Government employee
- Daily wages

FAMILY INCOME PER MONTH

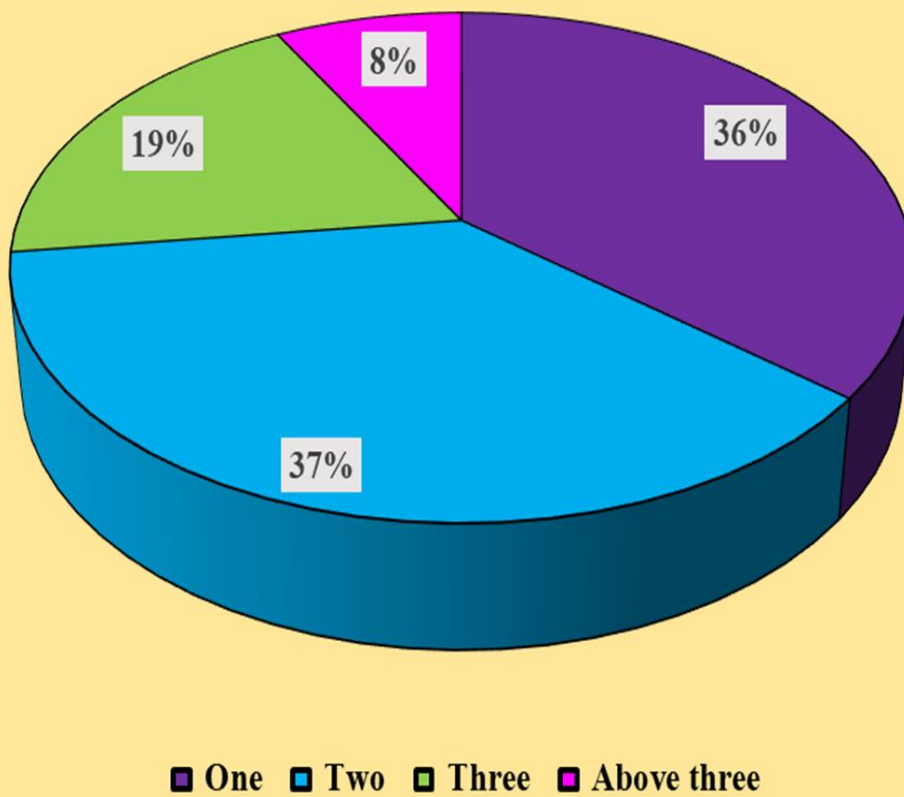


- Below Rs. 20,000/-
- Rs. 20,001 to Rs. 30,000/-
- Rs. 30,001 to Rs. 40,000/-
- Above Rs. 40,001/-

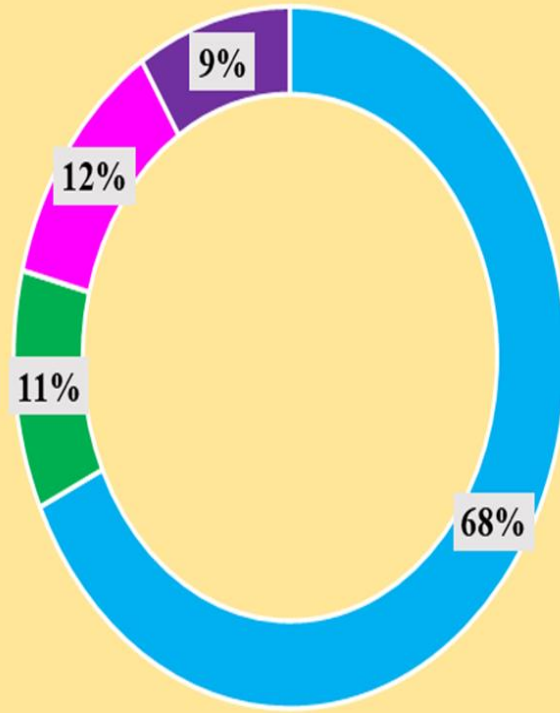
TYPE OF FAMILY



NUMBER OF CHILDREN IN FAMILY



SOURCE OF INFORMATION



■ No information ■ Mass media ■ Family members & friends ■ Health personnel

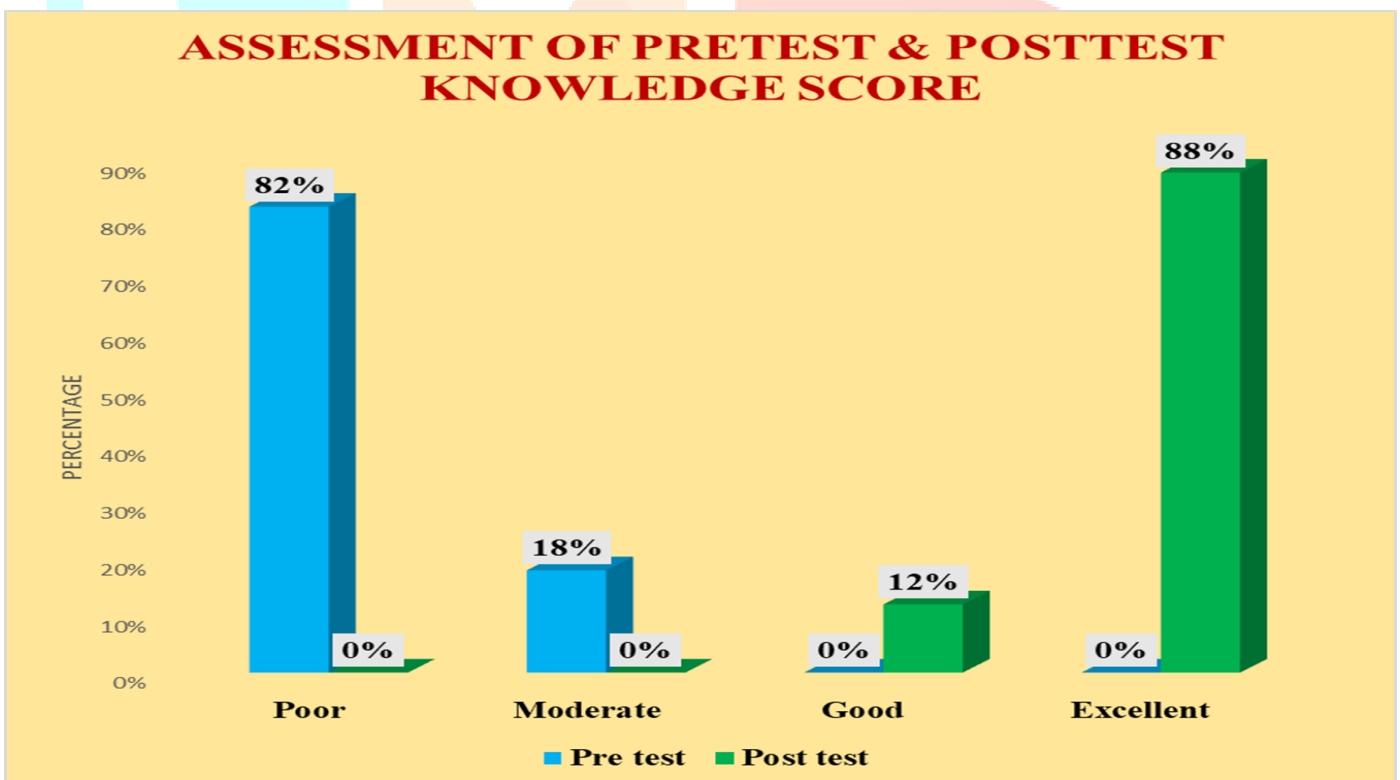


SECTION B

PART A

TABLE 2: Distribution of overall knowledge regarding prevention of breast cancer.

Overall knowledge	Frequency (f)		Percentage (%)	
	Pre test	Post test	Pre test	Post test
Poor	82	0	82 %	0
Moderate	18	0	18 %	0
Good	0	12	0%	12 %
Excellent	0	88	0%	88 %
Total	100	100	100%	100%

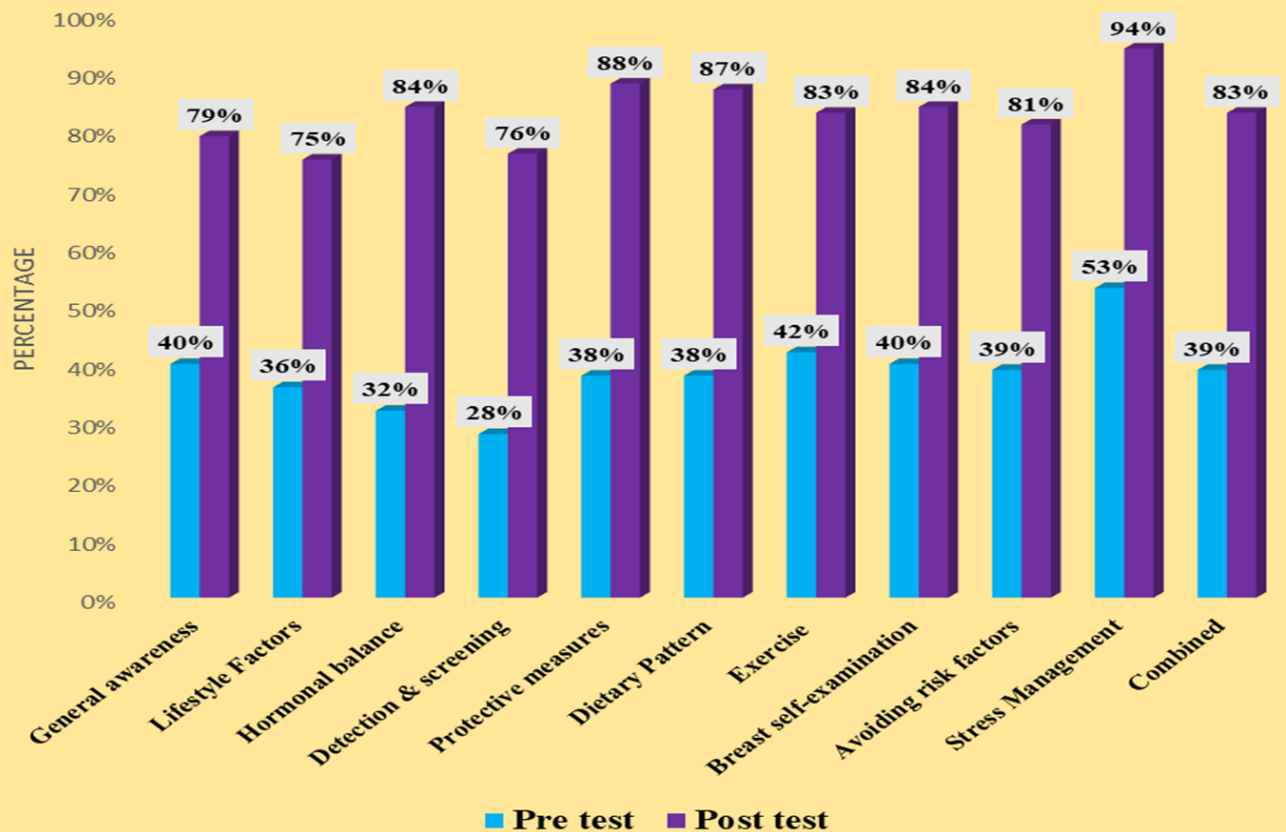


SECTION B

PART B: Area-wise analysis of pretest and posttest knowledge

Sl. No	Area	Max. score	Mean		Mean percentage	
			Pre	Post	Pre	Post
1	General awareness	5	1.98	3.98	40%	79%
2	Lifestyle Factors	5	1.78	3.74	36%	75%
3	Hormonal balance	5	1.62	4.22	32%	84%
4	Detection & screening	5	1.41	3.8	28%	76%
5	Protective measures	10	3.76	8.8	38%	88%
6	Dietary Pattern	7	2.65	6.12	38%	87%
7	Exercise	5	2.1	4.14	42%	83%
8	Breast self-examination	5	1.98	4.22	40%	84%
9	Avoiding risk factors	6	2.34	4.86	39%	81%
10	Stress Management	7	3.71	6.58	53%	94%
Total		60	23.3	50.4	39%	83%

AREAWISE PRETEST & POSTTEST KNOWLEDGE SCORE



SECTION C

Effectiveness of structured teaching programme regarding prevention of breast cancer

Knowledge assessment	Mean	Difference of mean	SD	df	Paired 't' value	p-value
Pre-test	23.3	26.9	6.38	46	27.46	P<0.05
Post-test	50.2		3.79			

SECTION D

Association of pretest level of knowledge with selected demographic variables

S.N	Demographic variables	Chi-square value	Df	p- value	Significance
1	Age	0.027	1	0.869	NS
2	Religion	0.303	1	0.582	NS
3	Type of diet	0.451	1	0.502	NS
4	Educational qualification	0.582	1	0.303	S
5	Occupation	0.075	1	0.512	NS
6	Family income	0.288	1	0.591	NS
7	Type of family	0.217	1	0.432	NS
8	Number of children	0.288	1	0.591	NS
9	Source of information	0.327	1	0.568	NS

Recommendations

- A similar study may be conducted on a larger sample spread over the community in different areas.
- A study can be conducted among women in different aspects of health promotion.
- A study can be conducted among mothers to explore the knowledge, attitude and practices regarding the prevention of breast cancer.

- A comparative study can be conducted to compare the knowledge and practices of government and privately employed hospitals.
- A similar study can be replicated on a large sample to generalise the findings.
- A similar study can be conducted in a different setting.
- A study can be conducted to assess the effectiveness of innovative teaching methods.

