



ORIGINAL RESEARCH PAPER

Nursing

BELIEFS REGARDING BREAST CANCER AND BREAST SELF EXAMINATION

KEY WORDS: Beliefs, breast cancer, breast self examination

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ABSTRACT

Mortality and mobility is increasing day by day with cancer. However, early diagnosis of cancer at an early stages can leads to better prognosis and death casualties may be prevented. But individual's beliefs have impact on diagnosis and treatment of cancer. Therefore, change in their beliefs and myths about cancer by awareness can open the gates for better cure and prognostication. Aim: The aim of the study is to assess beliefs regarding breast cancer and breast self examination among women residing in rural area of district Tarn Taran. Methods: Quantitative (descriptive) Research approach with cross-sectional survey design was used to assess beliefs regarding breast cancer and breast self examination in 500 conveniently selected females who were residing in rural area of district Tarn Taran. Beliefs was assessed by using self structured socio-demographic sheet and checklist. Results: Mean age of subjects was 32.8 years. Majority (95.68%) had history of cancer in the family. Most of the study subjects believe that breast can originates due to bad effect of superstitious power followed by due to curse of God. Conclusion: The study concludes that despite family history of cancer, study subjects had negative beliefs regarding breast cancer and breast self examination. Adequate IEC strategies need to be used to increase awareness regarding breast cancer and breast self examination.

INTRODUCTION

Breast cancer is the most frequent cancer among women, impacting 2.1 million women each year, and also causes the greatest number of cancer-related deaths among women. In 2018, it is estimated that 627,000 women died from breast cancer – that is approximately 15% of all cancer deaths among women. While breast cancer rates are higher among women in more developed regions, rates are increasing in nearly every region globally.¹

Early diagnosis of the malignancy of breast can serve as a milestone for effective management of ailment but lack of cognizance is a major hurdle. Unfortunately, delayed diagnosis of malignancy leads to advanced breast cancer stage, consequently requires aggressive treatment options like chemotherapy or surgery or have to be given palliative care to alleviate their suffering. Indeed, effective treatment and better survival rates would be treatment output if cancer of breast is detected and managed at an early stages.²

The most renowned symbol for breast cancer awareness is a pink ribbon. The pink ribbon indicates an individual's munificence, credence in scientific progress and a can-do attitude. It emboldens consumers to focus on ultimate vision of a cure for breast malignancy, rather than rife with current knowledge and any future treatment options.³

Early diagnosis of malignancy of breast is immensely paramount.⁴ However, salubrious living pattern suchlike punctilious physical exercise, meditation to reduce stress, eat more organic foods and green leafy vegetables, fiber rich diet, keep at arm's length for processed eatables, avoid red meat, hydrate yourself and adopt a healthy way to cook food to cut down the risk of malignancy of breast.⁵

However, certain myths are also prevalent in society regarding malignancy of breast. It was considered as a shameful and dreadful before the 20th century. Therefore, disease remains under the curtain. Strikingly, stigma and myths associated with cancer are major hindrance in the early diagnosis and treatment, which must be discussed even though it can vary from nation to nation. Furthermore, myths and beliefs about disease affect the decision of patient to seek medical help. Most of the females thought that physician is a messenger of God which provides medical help, on the other hand some believe that medical management is useless only God could heal the malignancy of breast.⁶

Likewise, these belief and assumptions illustrate why female postpone the presentation of palpable breast lumps, consequently results in advanced-stage cancer diagnosis.⁷

Another research evaluated the beliefs among African American and Afro-Caribbean women regarding malignancy of breast. It was found that these female hold beliefs that cancer surgeries only made the illness severe, which indicated that medical mistrust might be present. This investigation reported that these beliefs propels towards avoidance of screening and became major impasse for diagnosis and treatment compliance.⁸

Furthermore, It has been reported that African American women's beliefs in God might be another hurdle linked with poor screening (mammography and CBE adherence). Another research study explored that 25% of their study subjects believed that illness was in God's hands.⁹

Therefore, beliefs and values regarding malignancy are paramount determinative not only for cancer forestalling but also in context of psychological and behavioral outcomes following cancer detection and treatment. Malignancy of breast is utmost issue of concern as it is becoming serious menace in females. This can be found in both gender, but females are more susceptible gender. In addition to breast, malignancy cervix cancer is another type of malignancy in females. One of the vital concerns with cancer of breast is its delayed diagnosis at advanced stages. Lack of cognizance and negative beliefs about ailment is a reason for delayed diagnosis. This creates a thought in investigator's mind to plot an action plan and rule out beliefs about breast cancer and breast self examination.

METHODS AND MATERIALS

Quantitative, descriptive cross sectional survey was used to assess beliefs regarding breast cancer and breast self examination from 500 conveniently selected females who were residing at rural area of district Tarn Taran. Following two tools was used in the study which is as follows:

Socio-demographic data sheet: It was a self structured questionnaire which was used in study to collect sociodemographic profile of study subjects. It was consist of 9 items related to socio demographic data of the subjects such as age, marital status, number of children, religion, education, occupation, income, type of family and family history related to cancer.

Belief Checklist on Breast Cancer : A self reported checklist was used to assess the belief of women regarding breast cancer. It consisted of 15 items on various belief and myths.

Scoring and interpretation: The subjects are asked to give response in 'yes' or 'no'. Thus the total scores for belief ranging from 0-15. The score interpretation is as follows:

- Positive = ≥ 9 scores (≥ 60 %)
- Negative = < 9 scores (< 60 %)

The reliability of the tools by 'test-retest method' was 0.86. Pilot study was conducted on fifty subjects and study was found to be feasible.

After obtaining the permission from significant authorities, data was collected from study subjects after written consent has been obtained. Appropriate descriptive and inferential statistics was used to analyze data, p value <0.05 was considered as level of significance.

RESULTS

Sociodemographic characteristics of subjects.

The mean age of the subjects is 32.8 years ± 10.67. Majority of study subjects i.e. 167 (33.4%) subjects have done matriculation. Majority subjects 374 (74.8%) were married. majority of women i.e. 381 (76.22%) were house-wife, more than half of subjects i.e. 269 (53.8%), (40.4%) are having monthly income between Rs. 6000-10000. majority of subjects i.e. 487 (96.8%) belong to Sikh religion. 158 (31.6%) of subjects have three or more children. Majority of subjects i.e. 478 (95.68%) had history of cancer in the family.

Table 1: Frequency and percentage distribution of women according to their belief (scores) regarding breast cancer and breast self examination

Belief (Score)	Women understudy (N=500)	
	f	%
Positive (>9)	258	51.6
Negative (<9)	242	48.4

Table 1 depicts frequency and percentage distribution of women according to their belief (scores) regarding breast cancer and breast self examination. The data revealed that more than half subjects had positive belief regarding breast cancer and BSE whereas 48.4% had negative belief.

Figure 1: Item wise frequency distribution of belief of subjects regarding Breast Cancer and BSE N=500

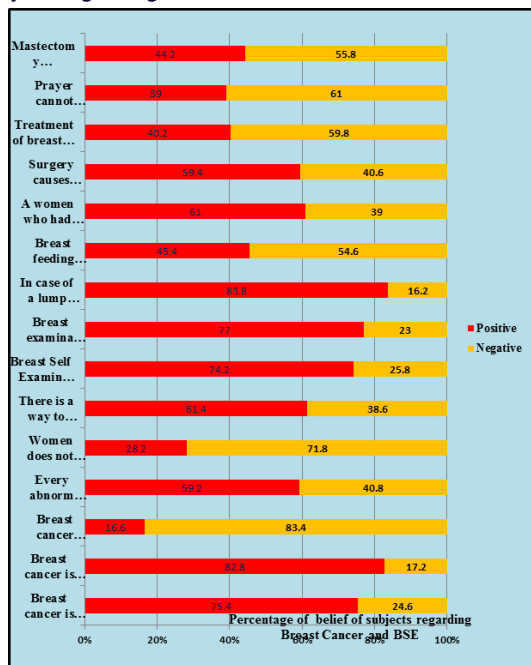


Figure 1 explains item wise frequency distribution of belief of subjects regarding Breast Cancer and BSE. The data revealed that majority of study subjects cancer caused by bad effect of superstitious power whereas two third of study subjects believe that breast cancer is caused due to curse of God. Majority study subjects think that breast cancer cannot be contagious whereas more than half study subjects had belief that every abnormal growth is contagious.

Moreover, 71.80% had belief that women do not lose her family while having breast cancer. More than half study subjects believe that their risk of cancer can be reduced. Two third study subjects feel embarrassment during breast self examination.

Similarly, majority of study subjects feel that women would go to faith healer to seek treatment in case find a lump in breast whereas more than half of study subjects do not believe that breast feeding prevents breast cancer and 61% believe that a woman who had breast cancer can never be cured.

Furthermore, more than half study subjects believe that surgery can spread cancer in the body whereas 40.2% had belief that treatment of breast cancer with radiation is painful and dangerous to lives of women. 61% study subjects do believe that prayer can help to treat cancer from affected part. It was also reported that 44.2% had belief that mastectomy doesn't affect the social as well as sexual life of women. Hence it is concluded that majority of subjects have myths about breast cancer and BSE and are ignorant about the facts about breast cancer and its treatment.

DISCUSSION

The current study suggested that women with lower age had more positive belief regarding breast cancer and BSE than older women. More than half of study subjects believe that surgery can spread cancer in the body which was supported by a study that is conducted by S Garbers, MA Chiasson reported that African American and Afro-Caribbean women believed that cancer surgeries made the illness worse, indicating that medical mistrust might be present.¹⁰

CONCLUSION

The present study revealed that subjects had different beliefs regarding breast cancer and breast self examination which affects the prognosis and early diagnosis of malignancy. The knowledge of about breast cancer and breast self examination is very vital to make them aware of breast cancer and importance of breast self examination and to change their beliefs without any fact. Based on results of this study the investigator distributed the information booklet to change the negative beliefs of women about breast cancer and breast self examination. Similar studies can be conducted on large samples with multiple settings. The present study was delimited to single setting.

Conflict of Interest: None.

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