

**A STUDY TO ASSESS THE KNOWLEDGE OF BREAST CANCER AND BREAST  
SELF EXAMINATION AMONG B.SC. NURSING STUDENTS (GIRLS) OF GALGO-  
TIAS UNIVERSITY**



**Submitted in the faculty of School of Nursing**

**Galgotias University , Greater Noida U.P**

**In partial fulfillment of the requirement for the degree of B.Sc Nursing**

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**CERTIFICATE**

This is to certify that this is a joint project work titled , “A study to assess the knowledge on breast cancer and breast self examination among B.Sc.Nursing students (girls) of galgotias university, Greater Noida , U.P ” , is original study undertaken by KAJAL CHAUHAN, KAJAL CHOUDHARY , INDU, FARHEEN and VINESH under my guidance at School of Nursing , Galgotias University , Greater Noida .

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**DECLARATION BY THE CANDIDATE**

I hereby declare that this dissertation/ thesis entitled “**Study to assess the**

**knowledge regarding breast cancer and self breast Examination among**

**B.S.c.Nursing students( girls) of galgotias university”** is a bonafide and genuine

research work carried out by me under the guidance of **Miss. SIMRAT KAUR,**

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**NAME:**

**Signature of the Candidate**

**Place:**

## **CERTIFICATE BY THE GUIDE**

This is to certify that the dissertation entitled “**Study to assess the knowledge regarding breast cancer and self breast examination among B.Sc.Nursing student (girls) of Galgotia University**” is a bonafide research work done by in partial fulfilment of the requirement for the degree of B.Sc.Nursing .

**Signature of the Guide**

**DATE:**

**PLACE:**

**ENDORSEMENT BY THE PRINCIPAL/ HEAD OF THE  
INSTITUTION**

This is to certify that the dissertation entitled “**Study to assess the knowledge regarding breast cancer and self breast examination among B.Sc.Nursing students(girls) of galgotias university**” is a bonafide research work done by Kajal Chauhan ,Kajal Ghanax , Indu , Farheen , vinesh under the guidance of **Miss. Simrat kaur**, Asst. Professor, Department of medical surgical Nursing.

**Signature of the HOD Seal & Signature of the Principal**

**Respected Miss Simrat Kaur**

**Date:**

**PLACE:**

## **ACKNOWLEDGEMENT**

**“With all my heart I will thank the lord in the assembly of his people;  
how wonderful are the things the lord does”**

we thanks the lord almighty for his grace and for giving us the knowledge and ability to accomplishing this task.

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## **CHAPTER-1**

### **TITLE OF THE STUDY**

**Assess the knowledge regarding breast cancer and self breast examination among B.Sc.Nursing students (girls ) of galgotias university.**

### **BACKGROUND OF THE STUDY**

Cancer is the uncontrolled growth of abnormal cells anywhere in a body. These abnormal cells are termed cancer cells, malignant cells, or tumor cells. These cells can infiltrate normal body tissues. Many cancers and the abnormal cells that compose the cancer tissue are further identified by the name of the tissue that the abnormal cells originated from (for example, breast cancer, lung cancer). Cancer is not confined to humans; animals and other living organisms can get cancer.

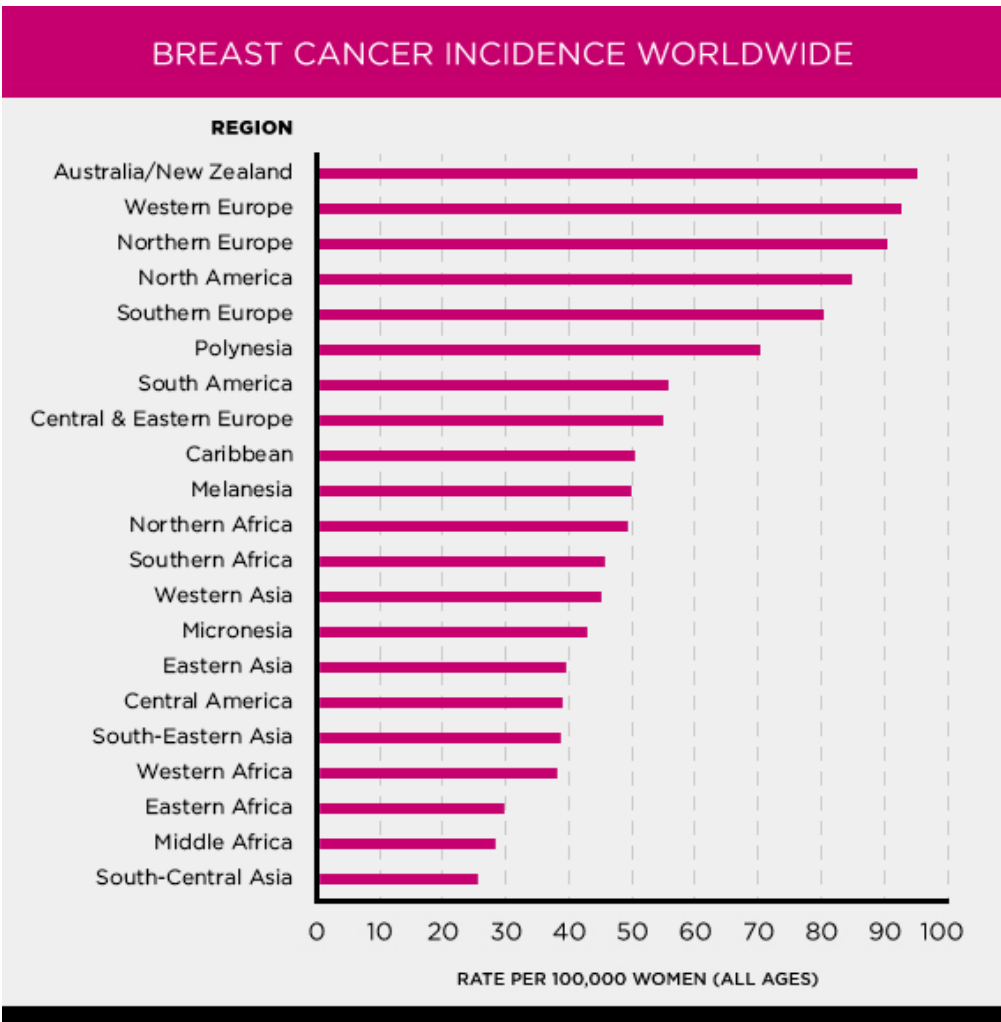
As in all forms of cancer, breast cancer is made of abnormal cells that have grown uncontrollably. Those cells may also travel to places in your body where they aren't normally found. When that happens, the cancer is called metastatic. Produce milk (lobular carcinoma) or the ducts (ductal carcinoma), which carry it to the nipple. It can grow larger in the breast and spread through channels to nearby lymph nodes or through your bloodstream to other organs. The cancer may grow and invade tissue around the breast, such as the skin or chest wall. Different types of breast cancer grow and spread at different rates -- some take

years to spread beyond the breast, while others grow and spread quickly.

A breast self-exam is the regular examination of one's own breasts to detect lumps or other changes that may need to be further evaluated as part of screening for breast cancer .

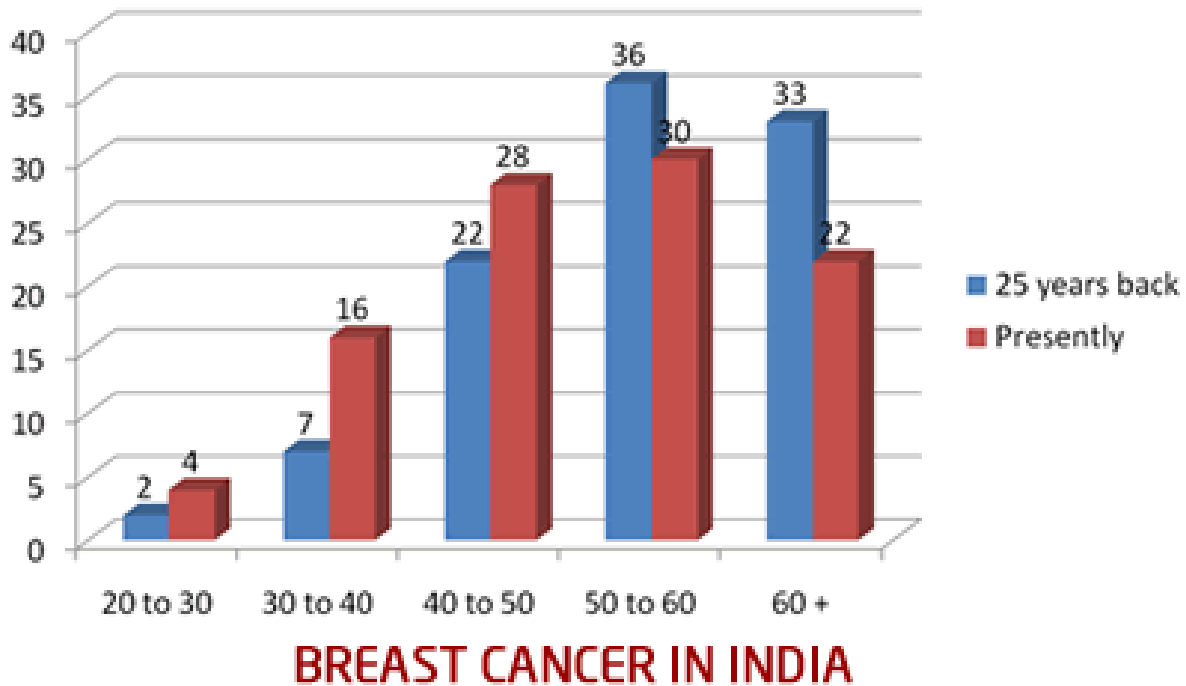
In its early stages breast cancer has few symptoms. However, the earlier that breast cancer is detected, the more treatment options are available and the greater the likelihood of recovery. It is estimated that about 10 to 20% of breast cancers that are detected in a self-exam or a clinical breast exam are not detectable by x-ray-film mammography. It is particularly important for women at increased risk for breast cancer to perform self-exams.

It has generally been recommended that all women perform monthly breast self-exams, beginning in their 20s and continuing throughout life. However, research has shown that general awareness about one's breasts is more important than monthly self-exams and that women who detect their own breast cancers usually do it while bathing or dressing rather than in the course of a regular self-exam. Therefore, as of 2008, the American Cancer Society (ACS) no longer recommended that all women perform monthly breast self-exams. Instead the ACS recommends that women who choose not to perform self-exams should still observe their breasts on a regular basis and be aware of how their breasts look and feel.



**Breast cancer incidence worldwide**

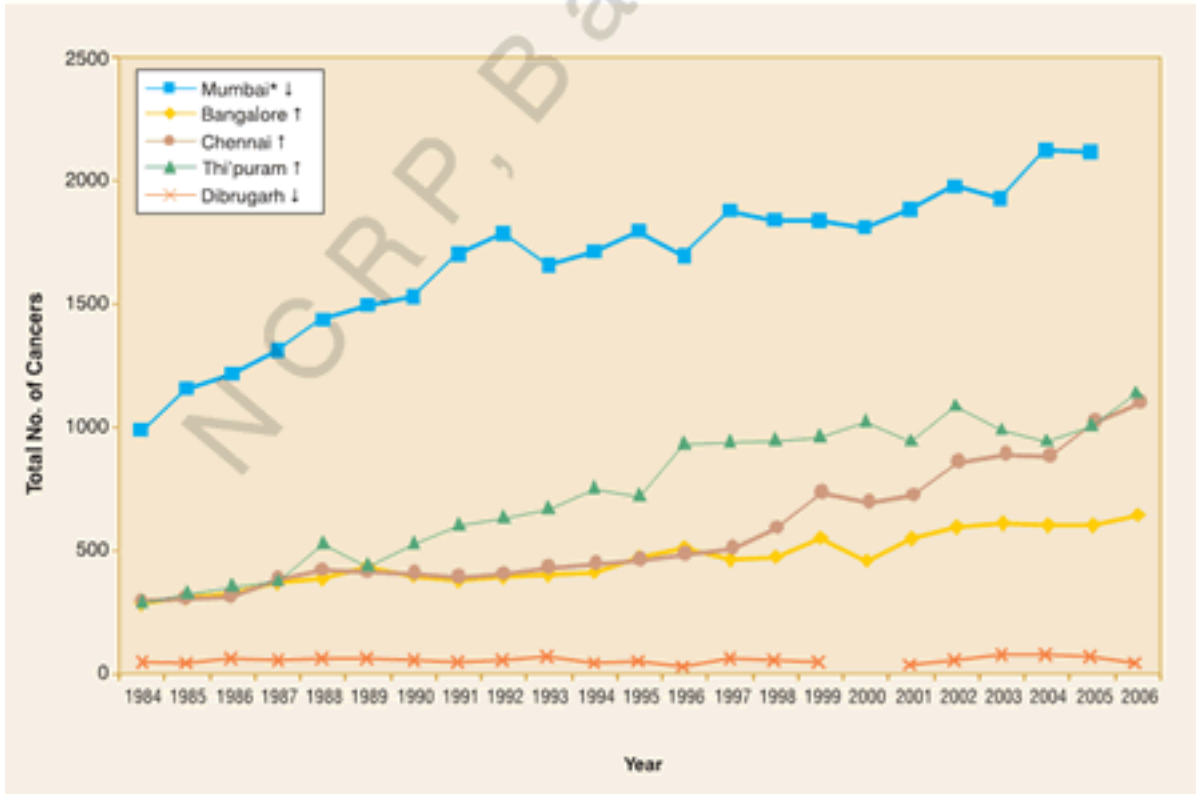
Breast cancer is the most common cancer in women worldwide, with nearly 1.7 million new cases diagnosed in 2012, representing about 25 per cent of all cancers in women. Incidence rates vary widely across the world, from 27 per 100,000 in Middle Africa and Eastern Asia to 92 per 100,000 in Northern America.



### **Breast cancer incidence in india {statewise}**

Breast cancer has ranked number one cancer among Indian females with age adjusted rate as high as 25.8 per 100,000 women and mortality 12.7 per 100,000 women. Data reports from various latest national cancer registries were compared for incidence, mortality rates. The age adjusted incidence rate of carcinoma of the breast was found as high as 41 per 100,000 women for Delhi, followed by Chennai (37.9), Bangalore (34.4) and Thiruvananthapuram District (33.7). A statistically significant increase in age adjusted rate over time (1982–2014) in all the PBCRs namely Bangalore (annual percentage change: 2.84%), Barshi (1.87%), Bhopal (2.00%), Chennai (2.44%), Delhi (1.44%) and Mumbai (1.42%) was observed. Mortality-to-incidence ratio was found to be as high as 66 in rural registries whereas as low as 8 in urban registries. Besides this young age has been found as a major risk factor for breast cancer in Indian women. Breast cancer projection for India during time periods 2020 suggests the number to go as high as 1797900. Better health awareness and availability of breast cancer screening programmes and treatment facilities would cause a favorable and positive

Fig. 14.1 Trends in actual numbers of cancers- Female Breast



clinical picture in the country.

Breast cancer is now the most common cancer in most cities in India, and 2nd most common in the rural areas. Please have a look at the following bar graph about percentage distribution of top ten cancers in females in Mumbai.

The complete details of cancers in various cities like Mumbai, Delhi, Bengaluru, Bhopal, Kolkata, Chennai, Ahmedabad etc. can be found on the [PBCR \(Population Based Cancer Registry\)](#) Website.

After going through all the graphs, the point worth noting is that, breast cancer accounts for 25% to 32% of all female cancers in all these cities. This implies, practically, one fourth (or even approaching one thirds) of all female cancer cases are breast cancers.

Breast cancer accounts for 19-34% of all cancer cases among women in India. There is high

mortality due to late stage diagnosis as patients usually present at an advanced stage because of lack of awareness and nonexistent breast cancer screening programs. Early detection and prompt treatment offer the greatest chance of long-term survival and breast self-examination (BSE) seems to be a important viable optional substitute for early detection of cancer.

Cancer is the second leading cause of mortality and morbidity in both developed and developing countries. In India, cancer prevalence is estimated around 2.5 million, with over 0.8 million new cases and 0.5 million deaths occurring each year . Cancer registries listed as the second most common cancer among women. There is an increase in the incidence of breast cancer and found to be gradually overtaking cancer of the cervix.

Breast self-examination (BSE) is an important screening measure for detecting breast cancer.

There is evidence that women who correctly practice BSE monthly are more likely to detect a lump in the early stage of its development, and early diagnosis has been reported to influence early treatment, to yield a better survival rate.

Thus the present study aimed at identifying the level of knowledge and practice of BSE among degree female students who are the citizen of the future and they can teach their family members, neighbors, friends and the community which helps the people to detect breast cancer in early stage.

Thus the morbidity or mortality can be reduced. In the current study only one participant was practicing BSE occasionally so incorporating the BSE concept in the degree education curriculum is very useful and helpful.



## **NEED OF THE STUDY**

The present study aimed at assessing the level of knowledge and the effectiveness of planned teaching program among bsc.Nursing female students on breast cancer and BSE. It is a patient-centred, inexpensive and noninvasive method of screening for breast cancer. Based on increased incidence of breast cancer and unawareness of BSE among young women, researcher felt a need to provide awareness of breast cancer and BSE among young women and can be reduced the incidence and prevalence of breast cancer in future. The incidence of breast cancer is higher for black women aged less than 40 years than for whitewomen aged less than 40; however, both black and white women aged less than 35 years have the lowest breast cancer survival rates of all age groups.

The issue of breast self-examination (BSE) efficacy has special implications for these women because the BSE and the clinical breast examination (CBE) are the only early detection techniques recommended to them. Breast self-examination is even more important for black women because CBE might not be accessible to them for economic or other reasons. Studies relating BSE practice to tumor stage were reviewed. Most of the evidence was favorable, although it was not obtained with the most scientific methodologic approach. The negative evidence, on the other hand, came from studies with additional methodologic and conceptual problems, and should have little impact when evaluating BSE efficacy. Competence of performance has been shown to affect the efficacy of the self-examination. Most studies on BSE value, however, did not assess the examiner's competence. Because data obtained elsewhere show that most women performing BSE do not perform it competently, the significance of the positive evidence on BSE value is heightened. Most breast tumors are self-discovered, and encouraging competent BSE performance will give more women

better means to discover tumors earlier.

## **PROBLEM STATEMENT**

**Study to assess the knowledge regarding breast cancer and self breast examination among b.sc nursing students (girls) of galgotias university.**

## **OBJECTIVES OF THE STUDY**

The objectives of the study were to:

- 1 To assess the level of knowledge of degree college female students on breast cancer and BSE.
- 2 To determine the effectiveness of planned teaching program among bsc.Nursing female students on breast cancer and BSE.
- 3 To find the association between pretest knowledge and selected demographical variable.

## **HYPOTHESES**

All the hypotheses were tested at 0.05 level of significance.

**H1:**There will be a significant difference between pretest and post-test score on knowledge of breast cancer and BSE among degree college female students.

**H2:**There will be a significant association between pretest knowledge score and selected demographical variables.

## **OPERATIONAL DEFINITIONS**

**KNOWLEDGE:** It refers to the ability of the B.Sc.Nursing girls student to respond regarding

concept of breast cancer and breast self examination from their knowledge score on a knowledge questionnaire.

**EFFECTIVENESS:** In this study effectiveness refers to determine the extent to which the SIM had achieved the desired effect in terms of gain in post-test knowledge score regarding breast cancer and breast self examination.

**SELF LEARNING MODULE:** In this study it refers to the structured learning material prepared by the investigator to promote self learning among bsc.nursing girls which includes definition, incidence, aetiology, risk factors, clinical features, diagnostic measures, preventive measures of breast cancer.

### **ASSUMPTIONS**

The study assumed that:

- The B.Sc.Nursing girls students will have some knowledge on breast cancer and BSE.
- Feel free to express their attitude toward breast cancer and BSE.
- BSE helps in early detection of breast cancer.

### **DELIMITATIONS**

1. The study is limited to bsc.nursing girls of galgotias university at the time of data collection.
2. The study is limited to bsc.nursing girls who are willing to participate in the study.
3. The study is limited to bsc.nursing girls who can read write and speak English.
4. The study is limited to 50 bsc.nursing girls only.

## CHAPTER – II

### REVIEW OF LITERATURE

This chapter presents review of literature related to present study. Review of literature is an important step of any research project from beginning to end. Research studies are undertaken within the context of an existing knowledge base, researchers undertake a literature review to familiarize them with knowledge base. It gives deeper insight into the problem, help in selecting methodology, developing tool and analyzing data

A review of literature provide evidence that the researcher is familiar with what is already know and what is still unknown and untested citing studies that shows substantial agreement and those that seems to present conflicting conclusions help to sharpen and define understanding of existing knowledge in the problem area, provide a background for research project and make the reader.

**Anuradha MD (2013)** conducted a pre-experimental study to assess the knowledge of the women on breast self examination among 30 women in the age group between 35 – 55 years in PSG hospitals, Coimbatore. Purposive sampling technique was used. Data were collected by structured interview schedule. Descriptive and inferential statistics were used to analyze data. Result of this study was majority of the women were in the age group of 46-50 years. most of the women (53%) attained menopause and all of them had children and 40% of the women were on

oral contraceptive pills. Area wise mean post test knowledge score of women was found significantly higher (24.87) than their mean pre test knowledge score (5.76) as evident from  $t$ -value (29) = 20.86 at  $p < 0.05$  level. This suggested that the SIM was effective and it helps to increase the knowledge of women in breast self examination.

**Zhang YJ.et., al (2013)** A cross sectional study was conducted to determine the level of knowledge about breast self examination among 244 women aged 20-64 in rural area of western turkey. The samples were selected by cluster sampling. Four trained doctors collected the data by face to face interview between January and February 2013.

Descriptive & inferential statistics to analyze the data. The study results shown that 23.4% of them had no knowledge about breast self examination, 27.9% had moderately adequate knowledge about breast self examination. Only 10.2% adequate knowledge of breast self examination regularly. 76.6% Reported that they heard about breast self examination, but only 56.1% of them had sufficient knowledge about it. Television or radio programs were the main source of information about breast self examination, and 23.4% sample mentioned health professionals were mentioned as a source of information.

**Tagnoni G (2012)** a descriptive co relational study was conducted to identify knowledge level of breast self-examination and variables related to breast self examination, among 65 Muslim female workers in Mumbai. Purposive sampling technique was used. De

scriptive and inferential statistics were used to analyze the data. Result showed that 86.2% of the women had adequate knowledge about Breast Self Examination and 13.8% moderately adequate knowledge of Breast Self Examination.

**Tarek Tawfik Amin (2012)** conducted a cross-sectional descriptive study to assess level and determinants of knowledge about breast self examination among adult Saudi women in Al Hassan, KSA. Sample size of the study 1,315 Saudi adult females were included, selected through a multistage stratified sampling method from ten primary health care centers. No previous histories of breast cancer, attendance for routine services or accompanying patients were prerequisites for eligibility. Participants were invited to personal interview with pre-tested validated questionnaire including inquiries regarding knowledge of breast self examination (BSE). Both descriptive and inferential statistics were applied; logistic regression was conducted to determine the possible correlates of knowledge. This study result shown that the overall level of knowledge regarding breast self examination was low and dependent upon educational and occupational status.. A positive family history was found in 18% of cases among first and second degree relatives, and 2 % had a prior history of benign breast lesion.

**Aluka C (2012)** conducted a descriptive co relational study to identify knowledge levels of breast self-examination (BSE) and to examine variables related to breast self examination in Turkish women. Data were collected from a convenience sample of 103 Muslim female workers. Descriptive and inferential statistics were used to analyze the data Results showed that 26.2% of the women reported adequate knowledge of BSE and 4.3% reported that they have inadequate knowledge of BSE. Higher health motivation, higher perceived self-efficacy of BSE, marital status, and familial breast cancer history were significantly associated with BSE performance

**Swetha (2012)** Conducted a Quasi Experimental study to determine the effectiveness of structured teaching programme on breast self examination for early detection of breast cancer for the age group of 20-60year women's, the study was conducted at Adhiprasakthi rural centre, poraiyur, Tamil Nadu, convenient sampling technique was used to select the samples,60 samples are selected, data collection tools consist of structured interview schedule and check list to assess the knowledge, attitude,& practice. first pretest of knowledge, attitude,& practice was assessed,after the Pretest the STP was given to the same group, then post test was assessed, data collection were analyzed by using descriptive and inferential statistics. women showed a statistically

significant { $p < 0.05$ } increases in knowledge regarding breast self examination

**Kesiya (2012)** Conducted a study to assess the knowledge and effect of planned teaching programme regarding breast cancer and breast self examination among 60 working women's in the secondary and higher secondary education department in Pune city. Descriptive and inferential statistics were used to analyze the data. A structured questionnaire was used to collect data. The study showed that the mean knowledge score about breast cancer & BSE obtained from working women's in pretest was 7.5 & that of post test was 13.4, this difference was statistically highly significant at [ $p = 0.01$ ] level with „t“ value of 24,16608 at 39 degree of freedom.

**Tuhina Neogi et.al ,(2011)** Conducted a prospective randomized study regarding breast self-examination for early detection of breast cancer in WHO/Russia, Training in breast self- examination (BSE) technique involved 57,712 women, aged 40-64, randomly selected 14 out- patient hospitals in St.Petersburg (2001-2011). Another 64,759 women selected at another 14 out-patient hospitals as in control. All patients with detected tumor pathology of the breast were biopsied and treated at the Institute's Clinic. The study focused on breast cancer incidence, survival and mortality. More women in the BSE group sought medical advice for suspected pathology (4,300) than those in control



(2,438;  $p < 0.05$ ). There were 493 cases of breast cancer in the BSE group with 157 fatalities, 446 cases of breast cancer with 167 fatalities in the control group. There was no significant difference in tumor stage. Nine-year survival (after Kaplan-Meier) from the time of tumor detection was 65% in the study group and 55% in control (log rank 0.774;  $p > 0.05$ ). There has been no significant difference in death rates in both groups for the past ten years.

**Pinar Erbay Dundar (2012)** conducted a cross sectional study to determine levels of knowledge regarding breast self examination, among Turkish women. The aims of this study were about breast self examination and to evaluate health beliefs concerning the model that promotes breast self- examination (BSE) among women aged 20–64 in a rural area of western Turkey. 244 women were recruited by means of cluster sampling in this study. The questionnaire consisted of sociodemographic variables, a risk factors and signs of breast cancer form and the adapted version of Champion's Health Belief Model Scale (CHBMS). Bivariate correlation analysis, Chi square test, Mann-Whitney U test and logistic regression analysis were performed throughout the data analysis. This study results shown that the mean age of the women was  $37.7 \pm 13.7$ . 49.2% of women

were primary school graduates, 67.6% were married. Although 76.6% of the women in this study reported that they had heard or read about breast self examination, our study revealed that only 56.1% of them had sufficient knowledge of breast self examination, half of whom had acquired the information from health professionals. Level of breast self examination knowledge was the only variable significantly associated with the BSE practice ( $p = 0.011$ ,  $p = 0.007$ ). Breast self examination performers among the study group were more likely to be women, who exhibited higher confidence and perceived greater benefits from BSE practice, and those who perceived fewer barriers to BSE performance and possessed knowledge of breast self examination. By using the CHBMS constructs for assessment, primary health care providers can more easily understand the beliefs that influence women's BSE practice.

**Amrik et.al.,(2011)** Conducted a quasi-experimental study to assess the effectiveness of structured teaching programme on knowledge and performance ability of breast self examination among 40 women (20 in experimental group and 20 in control group) in selected rural communities of Ludhiana,Punjab.Structured questionnaire and check lis were used for data collection. The data analyzed by mean, standard deviation, „t“ test and Chi-square test and Co-efficient correlation. The study result shown that there is no statistically significant different between pre-test Breast self examination knowledge score of ex

perimental group (12.30) and control group (13.65) ( $T=1.20NS$ ) and Breast Self Examination performance ability score of experimental group (3.25) and control group (2.85) ( $t=1.19NS$ ). There was statistically significant increase in post-test knowledge Breast Self Examination score of experimental group (27.85) at 0.001 level. ( $t=16.52$ ) and in Breast Self Examination performance ability score of experimental group (17.4) at 0.001 level ( $t=34.54$ ).

### **CHAPTER-III METHODOLOGY**

The research methodology included the strategies to be used to collect and analyse the data, accomplish the research objectives and to test hypothesis. This chapter deals with a brief description of the research approach, research design, setting, population, sample and sampling technique. It also presents development and description of tools, reliability and validity of tools, development of lesson plan of awareness program, pilot study data collection process and the plan for analysis of the research study.

### **PROBLEM STATEMENT**

A study to assess the knowledge regarding breast cancer and breast self examination among B.Sc.Nursing students( girls) of GALGOTIAS UNIVERSITY.

### **RESEARCH APPROACH**

The research approach tells the researcher what data to be collected and how to analyze it. It is over all plan or blue print chosen to carry out the study. It also suggests the possible conclusions to be drawn from the data.

According to Polit and Beck, the purpose of non experimental approach is to observe, describe and document aspects of a situation as it naturally occurs and sometimes as a starting point for hypothesis generation or theory development.

The research approach for this study was non experimental approach, as this study aimed to assess the effectiveness of self learning module on breast cancer and breast self examination among b.sc nursing girls of galgotias university.

### **RESEARCH DESIGN**

Polit and Beck stated that research design depicts the overall plan for organization of a scientific. investigation. It provides an explicit blue print of how research activities will be carried out.

The selection of research design is the most important step as to provide the framework for the study.

The research design incorporates some of the most important methodological decision that the re searcher makes in conducting the study.

According to Polit and Beck, the aim of descriptive- comparative survey design is to compare the relationship among variables in a particular sample rather than to infer cause and effect relationship.

The research design selected for the present study was descriptive design, as the study aims , to assess the knowledge regarding breast cancer and breast self examination among b.sc nursing students (girls )of galgotias university.

## **VARIABLES**

Variables are an attribute of a person or object that varies or takes on different variables.

Independent Variables: knowledge and attitude of b.sc nursing girls.

## **SETTING**

According to Polit and Beck setting is the physical location and the condition in which data collection takes place in the study. The present study was conducted in GALGOTIAS UNIVERSITY, greater noida.

The criterion for selecting this setting was:

- Availability of subjects
- Feasibility of conducting the study
- Familiarity of the investigator with the setting
- Administrative approval and expected co-operation for conducting the study

## **POPULATION**

Polit and Beck stated that the population is the entire set of individuals having common characteristics. Accessible population is the aggregate of cases that confirm to the designated criteria and that are accessible to researcher as a pool of subject for the study. The need for defining a population for a research project arises out of the requirement to specify the group to which the results of the study can be applied.

In the present study population comprises to the b.sc nursing girls of GALGOTIAS UNIVERSITY , greater noida.

## **SAMPLE AND SAMPLING TECHNIQUE**

Sample is a subset of a population, selected to participate in a study (Polit and Beck)

Sample: In the present study, sample comprises of the b.sc nursing girls of GALGOTIAS UNIVERSITY, greater noida.

Sample size: Sample size for the present study was 50 b.sc nursing girls of GALGOTIAS UNIVERSITY, greater noida.

Sampling technique: Convenience sampling technique was used to select b.sc nursing girls of galgotias university, .

Criterion for selecting sample subject was:

- B.sc nursing girls who were available during study period and willing to participate in the study

### **DATA COLLECTION TOOLS AND TECHNIQUES**

Data collection tools are the devices that researcher uses to collect the data. A search for literature was made for the purpose of developing the tool. According to Burns and Groove, data collection is the identification of subjects and the precise, systemic gathering of information (data) relevant to the research purpose or the specific objectives, questions or hypothesis of a study.

A knowledge questionnaire regarding breast cancer and breast self examination was developed in order to obtain data to assess the level of knowledge of b.sc nursing girls of GALGOTIAS UNIVERSITY.

An attitude rating scale was used to assess level of attitude of b.sc nursing girls towards breast cancer and breast self examination.

Paper pencil technique was used.

## **DEVELOPMENT OF TOOL**

After extensive review of books, journals, articles, project reports and expert opinion, knowledge questionnaire regarding breast cancer and breast self examination and an attitude rating scale was developed in order to obtain data to assess the effectiveness of self learning module on breast cancer and breast self examination among b.sc nursing girls.

It had five sections:

Section I: Selected personal variables Performa

Section II: Knowledge questionnaire

Section III: Attitude scale

## **CONTENT VALIDITY OF THE TOOL**

According to Polit and Beck, the degree to which the items in an instrument adequately represent the universe of content for the concept being measured. Content validity of the developed tool was obtained from experts from the field of Medical Surgical Nursing, Community Health Nursing, Child Health Nursing, Obstetric and Gynaecological Nursing. Experts were requested to judge the items for clarity, relevance, appropriateness and meaningfulness for the purpose of the study.

In the structured questionnaire regarding diet, few modifications were made by the researcher based on the suggestions given.

## **PILOT STUDY**

Pilot study was conducted in the month \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ Noida Gautam Budh nagar in Uttar Pradesh after taking administrative permission from concerned authorities. Data was collected from 10 samples to assess the feasibility of the study and analyzed by descriptive and inferential statistics. It was found that 70% b.sc nursing girls were have knowledge towards breast cancer and

breast self examination and 30% were not. The research tools were found to be feasible, practicable and acceptable.

### **DATA COLLECTION PRODUCERS**

Data collection was done from \_\_\_\_\_ to \_\_\_\_\_. Before the data collection, explained about the nature and purpose of the study and co-operation needed from them and received consent from GALGOTIAS UNIVERSITY, b.sc. nursing girls participation.

On the first day after making rapport with b.sc nursing girls , firstly name and age of b.sc.nursing girls was taken to assess the knowledge and practices of b.sc nursing girls. After that socio demographic Performa were filled. On the same day awareness program was conducted by using charts, flash cards, pamphlets and lecture cum discussion method. Group Awareness program was given on breast cancer and breast self examination among b.sc nursing girls of GALGOTIAS UNIVERSITY.

### **PLAN FOR DATA ANALYSIS**

The analysis was to be made based on the objectives and hypothesis. Both descriptive and inferential statistics were used for data analysis such as mean, standard deviation, frequency and percentage to describe sample characteristics and knowledge of b.sc nursing girls regarding breast cancer and breast self examination.

Chi-square test was used to analyze significance of association between knowledge regarding breast cancer and breast self examination and socio-demographic variables of b.sc nursing girls .



## **SUMMARY**

This chapter dealt with research approach, research design, setting, population, sample and sampling technique, development of data collection tool, pilot study. Data collection procedure and plan for data analysis. The next chapter “chapter IV” discusses the analysis and interpretation of the study.

## **CHAPTER 4**

### **ANALYSIS AND INTERPRETATION**

The present study has been taken up with the view to assess the knowledge regarding breast cancer and breast self examination among b.sc.nursing students(girls) of GALGOTIAS UNIVERSITY.

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This chapter deals with the analysis and interpretation of data collected from 50 subjects from galgotias university,greater noida. The analysis of data has been organized and presented according to the objectives of the study.

#### **OBJECTIVES OF THE STUDY**

- To assess the knowledge of girls regarding breast cancer and breast self examination.
- To conduct non-experimental study.

#### **PRESENTATION OF THE DATA**

PART 1 : Data related to study subjects, were analyzed in terms of frequency distribution.

PART2: Data related to knowledge were analyzed and interpreted in terms of percentage.

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### PART 1

**TABLE 1 : TABLE SHOWING DEMOGRAPHIC CHARACTERSTICS ( GENDER , AGE , TYPE OF FAMILY, CLASS, INCOME) .**

SAMPLE CHARACTERISTICS	FREQUENCY	PERCENTAGE
EDUCATION		
• b.sc.nursing 2nd year		46%
• b.sc.nursing 3rd year	23	26%
• b.sc.nursing 4th year	13	28%
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AGE		
• 15-20 years	10	20%
• 20-25 years	38	76%
• 25-30 years	2	4%
TYPE OF FAMILY		
• joint	13	26%
• nuclear	37	74%
• extended	0	0%
FAMILY INCOME		
• 10000-20000/-	13	26%
• 20000-30000/-	08	16%
• 30000-40000/-	10	20%
• Above 40000/-	19	38%
FATHER OCCUPATION		
• daily wages	3	6%
• govt. employee	15	30%
• private sector employee	18	36%
• self employed	14	28%

<b>MOTHER OCCUPATION</b>		
• housewife	41	82%
• daily wages	00	0%
• govt. employee	04	8%
• private sector employee	05	10%
<b>RELIGION</b>		
• hinduism	33	66%
• christianity	02	4%
• muslims	12	24%
• sikhism	03	6%
<b>AREA OF RESIDENCE</b>		
• urban	31	62%
• rural	19	38%

**Table 2 : Frequency and percentage distribution of subjects according to class.**

YEAR	FREQUENCY	PERCENTAGE
b.sc.nursing (2nd year)	23	46%
b.sc.nursing (3rd year)	13	26%
b.sc.nursing (4th year)	14	28%

**Table 2: Tables and pie charts are showing the scoring pattern of knowledge questionnaires and their results respectively.**

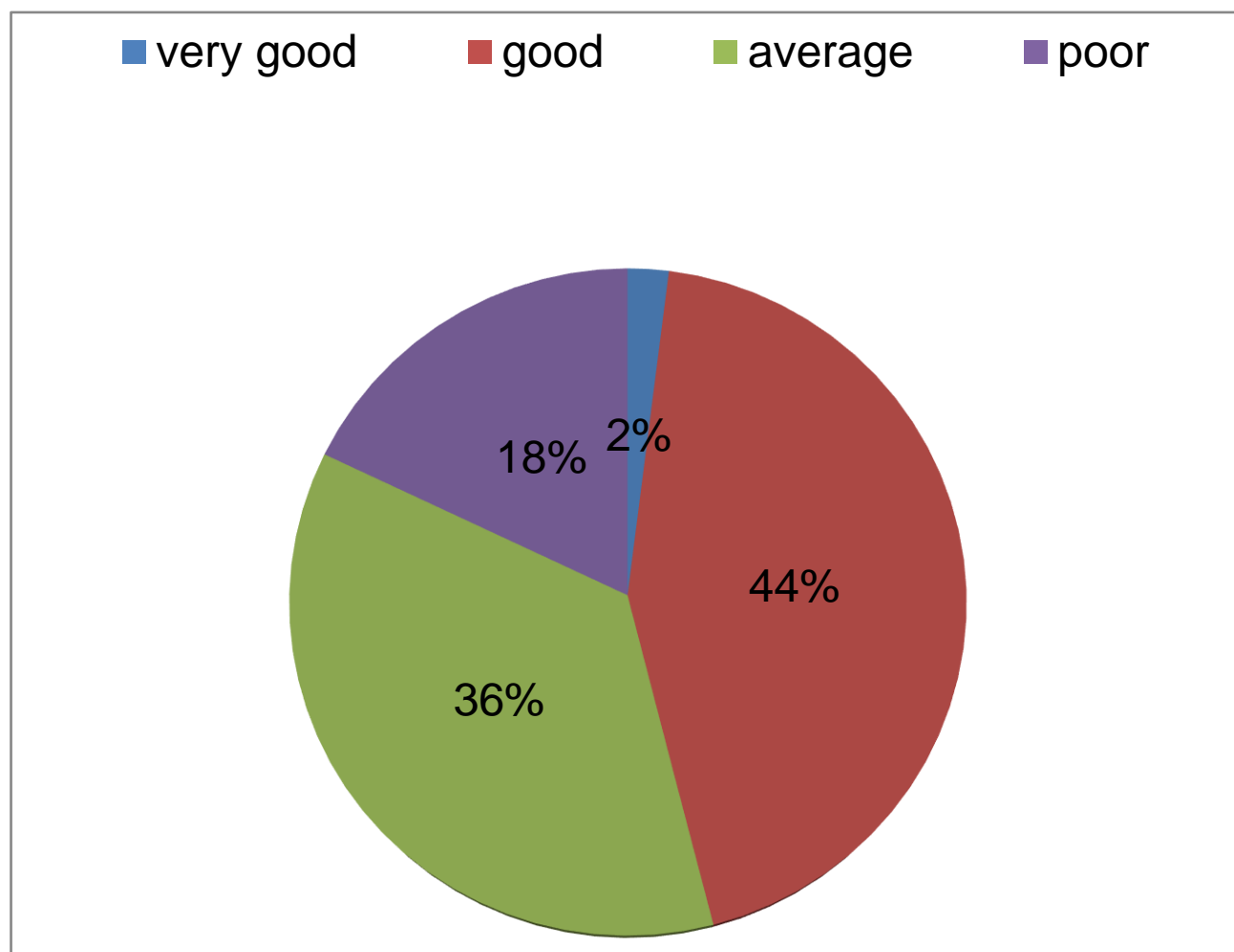
**Table 2.1:Table showing knowledge questionnaire scoring pattern.**

S.NO	PERCENTAGE	SCORE	CATEGORIES
1	80% and above	>15	very good
2	60%-79%	11-14	good
3	35%-59%	8-10	average
4	below 35%	<7	poor

Table2.3: Pie chart showing knowledge questionnaire score

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### CHAPTER 5



SUMMARY , FINDING , CONCLUSION , AND RECOMMENDATION

**SUMMARY :**

In this study non-experimental research approach was used and was aimed at assessing the knowledge of b.sc.nursing students (girls) of galgotias university, about the breast cancer and breast self examination.

**OBJECTIVES :**

The Objectives of the study were :

- To assess the knowledge of female students regarding breast cancer.
- To conduct non experimental study.

Questionnaire method was used in collecting data . After validating , the tool was administered to 50 samples . The data was collected in relation to the objective set .

To analyze the data , frequency and percentage were calculated . Based on this , interpretation was made .

**MAJOR FINDINGS:**



- As regards top age of subjects , majority of students belongs to the age group of 20-25years.
- According to statistical data analysess the knowledge about breast cancer and breast self examination among the b.sc.nursing girls of galgotias university is very good

### **CONCLUSION:-**

The b.sc.nursing girls of galgotias university is having a good knowledge of breast cancer and breast self examination.

### **RECOMMENDATIONS:-**

- A similar study may be replicated on a larger sample covereing the entire student population in galgotias university.
- A non experimental study can be done on female students to assess their knowledge regarding breast cancer and breast self examination.
- A formal education programme can be conducted on breast cancer and breast self examination for b.sc.nursing girls and female staff as well.

- A similar type of study can be done to standardize the present tool