

Evaluating Awareness, Knowledge, Attitude, and Practice of
Breast Self-Examination Among Female Employees of ZS
Associates, Gurgaon

By

Ravina Mathur

*Dissertation submitted in partial fulfillment of the requirements of the degree
MBA Hospital and Health Management*

Academic year, 2017-2019



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TO WHOMSOEVER MAY CONCERN

This is to certify that **MS. Ravina Mathur**, student of MBA Hospital and Health Management from The IIHMR University, Jaipur has undergone internship training at ZS Associates, Gurgaon from **4th February 2019 to 30th April 2019**.

The Candidate has successfully carried out the study on **Evaluating awareness, knowledge, attitude, and practice of breast self-examination among female employees of ZS Associates, Gurgaon** assigned to her during internship training and her approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course requirements.

I wish her all success in all her future endeavors.

A handwritten signature in blue ink, appearing to read 'Ashok Kaushik'.

Col.(Dr.) Ashok Kaushik

Dean, Academics and Student Affairs

The IIHMR University, Jaipur

17 May 2019.

A handwritten signature in blue ink, appearing to read 'Alok Mathur'.

Dr. Alok Mathur

Associate Professor

The IIHMR University, Jaipur



SALES + MARKETING

April 30, 2019

EXPERIENCE CERTIFICATE

This is to certify that Ravina Mathur (Emp ID-20387) was interning in our organization from February 4, 2019 to April 30, 2019. At the time of leaving she was working in the capacity of Knowledge Management Associate – Intern based at the New Delhi office.

We wish you all the success in future endeavors.

For ZS Associates India Pvt Ltd

Mohit Sood
Office Managing Principal

ZS Associates India Private Limited

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Impact where it matters.

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled **“Evaluating Awareness, Knowledge, Attitude and Practice of Breast Self-examination among female employees of ZS Associates, Gurgaon”** and submitted by **Ms. Ravina Mathur** Enrollment No **IIHMR-U/01/2017-19/0641** under the supervision of **Dr. Alok Mathur** for award of MBA in Hospital and Health in The IIHMR University carried out during the period from February 2019 to May 2019 embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other institute or other similar institution of higher learning.



Ravina Mathur

ABSTRACT

TITLE: Evaluating awareness, knowledge, attitude, and practice of breast self-examination among female employees of ZS Associates, Gurgaon

AUTHOR: Ravina Mathur

OBJECTIVES:

1. Determine the public awareness of Breast self-examination among female employees of ZS Associates, Gurgaon
2. Identify characteristics that explain variation in practice of BSE and barriers towards BSE practice
3. Determine the need for breast cancer awareness campaigns

RESEARCH DESIGN:

A descriptive, cross-sectional study was performed by conducting a survey to assess the awareness, knowledge, attitude, and practice of breast self-examination among women. Data was collected from female employees of ZS Associates, Gurgaon through a survey sent via E-Mail (Google Forms). Study was conducted in ZS Associates, Gurgaon. The total sample size incorporated in the study was 80 female respondents. Consecutive sampling technique was used to collectively obtain the data from the accessible cohort of female employees till the required sample size of 100 respondents was obtained.

RESULTS:

Despite the fact 88% of females stated they were aware of breast self-examination (BSE), only 51% females stated that they practice BSE and only 17% females

were practicing it every month, which showed that females were lacking adequate awareness regarding the benefits of early detection of breast cancer through BSE and how to properly perform BSE in a right way every month. Only 37% females know that the right age to start practicing BSE is from 20 years and only 46% females knew that it should be ideally performed a week after periods reflecting limited knowledge regarding breast self-examination.

CONCLUSION:

The results reflect that breast cancer awareness programs and campaigns are needed to raise breast cancer awareness and teach women how to perform BSE. Evidence based knowledge provided by healthcare professionals; especially, doctors, pharmacists and allied health professional can play a significant role in raising breast cancer awareness through community awareness programs

KEYWORDS:

Breast self-examination, Breast cancer awareness, Knowledge, Practice, Awareness

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The project was a success due to the help and support of many peoples. I would like to acknowledge the help of all people who contributed towards the completion of my project. First, I would like to thank the Office Managing Principal of ZS Associates, Gurgaon Mr. Mohit Sood for providing me opportunity to work in ZS Associates, Gurgaon.

I also like to thank my Project Manager Mr. Vinod Nair at ZS Associates, Gurgaon for mentoring and guiding me to proceed with the project.

Without the guidance and blessing of Dr. S.D Gupta, Director Indian Institute of Health Management & Research University Jaipur this project would not have been possible for me. My special thanks to col. Dr. Ashok Kaushik, Dean Academics, and students Affairs, IIHMR University, Jaipur for being a continuous guiding source throughout the degree, I would also like to thank Dr. Alok Mathur, Associate Professor, IIHMR University, my guide for providing me continuous support for making my project successful.

I would like to express gratitude and appreciation for all the people mentioned above to help me complete my study and make my project successful.

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1. INTRODUCTION

1.1 BACKGROUND OF THE DISSERTATION STUDY

Overall breast cancer includes 10% of all cancers occurrence among women making breast cancer the most well-known kind of non-skin cancer in women and the fifth most basic reason for cancer demise. It is the most well-known cancer among women in the United States. It is additionally one of the main sources of cancer passing among women everything being equal. The frequency of breast cancer is ascending in each nation of the world particularly in creating nations. In India the occurrence of breast cancer is on the ascent and turning into the main cancer in females pushing the cervical cancer to the second spot. The ascent in the event of breast cancer is on the grounds that now women are presented to different hazard variables of breast cancer. These incorporate late age at first labor, less youngsters and shorter span of breast nourishing. Likewise, early age at menarche and late age at menopause adds to the hazard. A milestone examination of cancer cases in Delhi, Mumbai, Chennai and Bangalore somewhere in the range of 1982 and 2005 (24 years) by ICMR had discovered that while cervical cancer cases have plunged, the frequency of breast cancer has multiplied. As creating nations receive the western culture and its propensities (fat/liquor consumption, smoking, introduction to oral contraceptives, the changing examples of youngster bearing and breast sustaining, low equality) they are inclined to create numerous incessant medical issues. Breast cancer can strike at any age, and women of each age ought to know about their own hazard factors for breast cancer. Postponements in diagnosing breast cancer likewise are an issue. Numerous more youthful women who have breast cancer overlook the notice signs, for example, a breast irregularity or uncommon release since they trust they are too youthful to even consider getting breast cancer. Examinations incorporate mammography, ultrasound, MRI, needle biopsy/cytology. Any patient presents with breast protuberance or different manifestations suspicious of carcinoma, the finding ought to be made by a mix of clinical evaluation, radiological imaging and

a tissue test taken for either histological or cytological examination triple appraisal.

The odds of fix in women who build up the sickness are identified with early finding. A standout amongst the most ideal methods for early conclusion is by utilization of screening techniques, for example, breast self-examination, clinical test. As the rate of breast cancer is ascending in creating nations like India, there is a present need to instruct the women on preventive proportions of breast cancer. Evaluation of learning and conferring wellbeing training will decide whether they have any hazard factors for breast cancer and in this way they step up to the plate and forestall it.

Prevention remains the foundation of the battle against breast cancer around the world. Albeit some anticipation strategies have been proposed, many stay out of reach to women in creating nations who, amusingly, given the constrained indicative and corrective offices accessible to them, need counteractive action the most. Breast self-examination (BSE), despite the fact that not having been appeared to be viable in lessening mortality, is still prescribed as a general way to deal with expanding breast wellbeing mindfulness and in this manner possibly take into account early discovery of any oddities.

Moreover, BSE keeps on being suggested by social insurance experts since it is free, effortless and simple to rehearse. In spite of this potential, there is almost no information demonstrating the take-up and routine with regards to BSE. Little is known concerning women's learning about breast cancer, their insight on BSE and their routine with regards to BSE. Better archiving women's information on breast cancer and BSE just as their routine with regards to BSE would be valuable in the structure of mediations went for anticipating breast cancer through expanded mindfulness and additionally improved screening. We in this way directed this investigation to evaluate mindfulness, information, mentality, and routine with regards to breast self-examination among women

2. LITERATURE REVIEW

As per World Health Organization, Breast cancer is the top cancer in women worldwide and is expanding especially in creating nations where most of cases are analyzed in late stage. It additionally contains 16% of every single female cancer and is more typical in women than men. Breast cancer is treatable whenever distinguished early and there are two noteworthy parts of early identification of breast cancer: training to advance early determination and screening. The greater part of the all-out passing from the ailment is represented in the creating scene. The low survival rates in less created nations might be clarified for the most part by absence of early discovery programs, absence of satisfactory determination and treatment offices which results in a high extent of women giving late stage sickness.

Kayode, Akande and Osagbemi said that instead the newer modern detection methods available , more than 90% of cases of breast cancer are detected by women themselves, stressing the importance of BSE.

Giridhara et al. said that BSE is still an important detection tool for early identification of breast cancer in developing countries, because it is less expensive, easily available, and does not require technical training.

Okobia said that there is evidence that many of the early breast cancers are self-discovered and that many of early self-discoveries are by BSE performers.

According to Johnson and Dickson-Swift the rise of breast cancer will in general be progressively forceful in young ladies contrasted and more established populace. Likewise, there is an absence of learning about the advantages of BSE among young ladies.

According to Lee et al. the essential factors that expansion danger of breast cancer in women incorporates some acquired hereditary transformations, family ancestry of breast cancer. Different elements that expansion the dangers incorporate a long menstrual history, stoutness, utilization of oral contraceptives, hormone treatment, ethnicity attributes, or utilization of at least one mixed drinks for every day.

According to Peter 1978; Hadi et al., essential strides in BSE are as per the following. To begin with, the women watch her breasts before a mirror, first with arms down and after that with arms up. Women should realize that abnormality of size of the breast is normal and ordinary. Women should search for an alternate anomaly in appearance, for example, asymmetry, smoothing or dimpling. Any new change in the areola, including ulceration ought to be noted. At that point, she lies straight with a little cushion or collapsed towel under the shoulder of the side to be analyzed. The arm is raised over the head. From that point forward, the palpation is performed with the level of the fingers of inverse turn in a deliberate manner to incorporate the whole breast. The full method is then rehashed and connected for the opposite side.

3. AIM OF THE STUDY

The primary aim is to assess the awareness, knowledge, attitude, and practice pertaining to Breast cancer and Breast self-examination in the sample

population. The secondary aim was to assess to which degree beliefs, attitudes and socio-demographic factors are associated with practice of BSE.

4. STUDY OBJECTIVES

1. Determine the public awareness of Breast self-examination among female employees of ZS Associates, Gurgaon
2. Identify characteristics that explain variation in practice of BSE and barriers towards BSE practice
3. Determine the need for breast cancer awareness campaigns

5. STUDY METHODOLOGY

5.1 RESEARCH DESIGN: Descriptive, Cross-sectional study was done to assess the awareness, knowledge, attitude, and practice of breast self-examination among women

5.2 STUDY POPULATION: The sample size includes female employees of knowledge management department of ZS Associates, Gurgaon

5.3 STUDY SETTING: ZS Associates, Gurgaon

5.4 STUDY DURATION: The research was conducted over a period of 3 months from February 2019 to May 2019

5.5 SAMPLING METHOD: Consecutive Sampling

5.6 SAMPLE SIZE: 80 female employees of a corporate firm based in Gurgaon

5.7 DATA TYPE: Primary data

5.8 DATA COLLECTION: A self-administrated questionnaire was used to collect data. The questionnaire comprises four sections socio-demographic characteristics, knowledge, attitude, and practices of BSE questions.

- Socio-demographic data
- Knowledge of BSE
- Practice of BSE

5.9 DATA ANALYSIS: Responses were analyzed using Microsoft Excel

6. RESULT:

6.1 Age

Out of 100 female respondents 50% of the respondents were in the age group of 26-30 years.

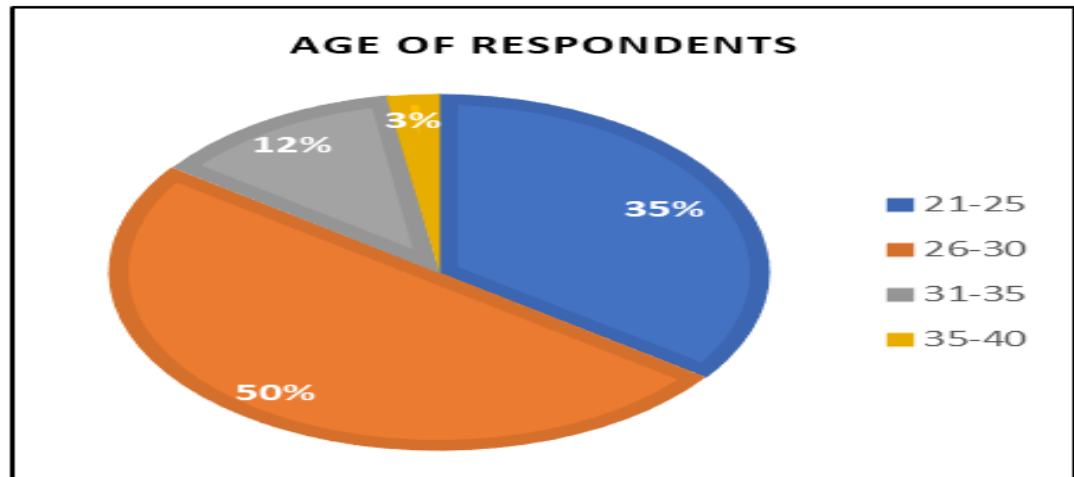


Figure 6.1: Age of Respondents

6.2 Marital Status

72% of the respondents were single and 28% were married.

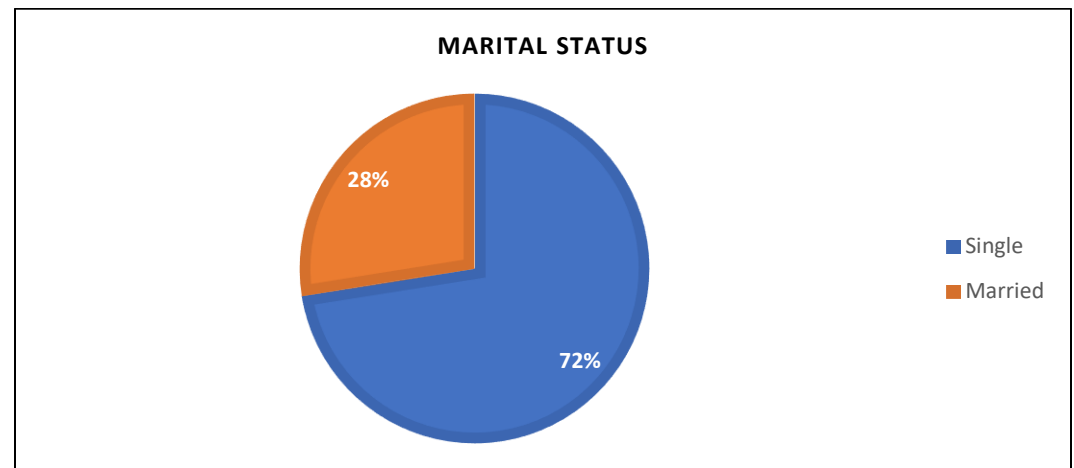


Figure 6.2: Marital status of Respondents

6.3 Awareness about Breast self-examination

87% of the respondents were aware about Breast self-examination

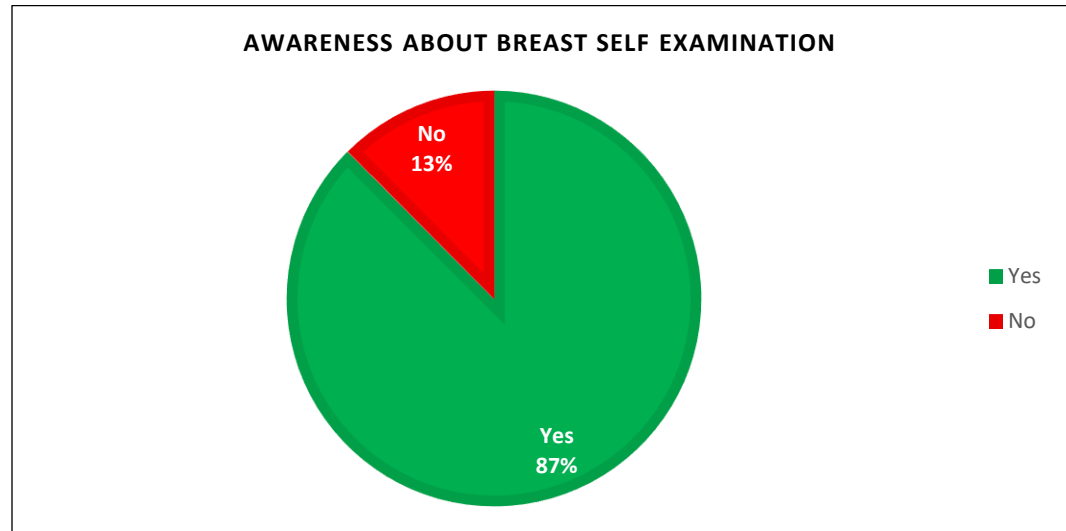


Figure 6.3: Awareness of Respondents about Breast self-examination

6.4 Frequency of visit to obstetrician/gynecologist

Most of the respondents visit a gynecologist only when they feel sick

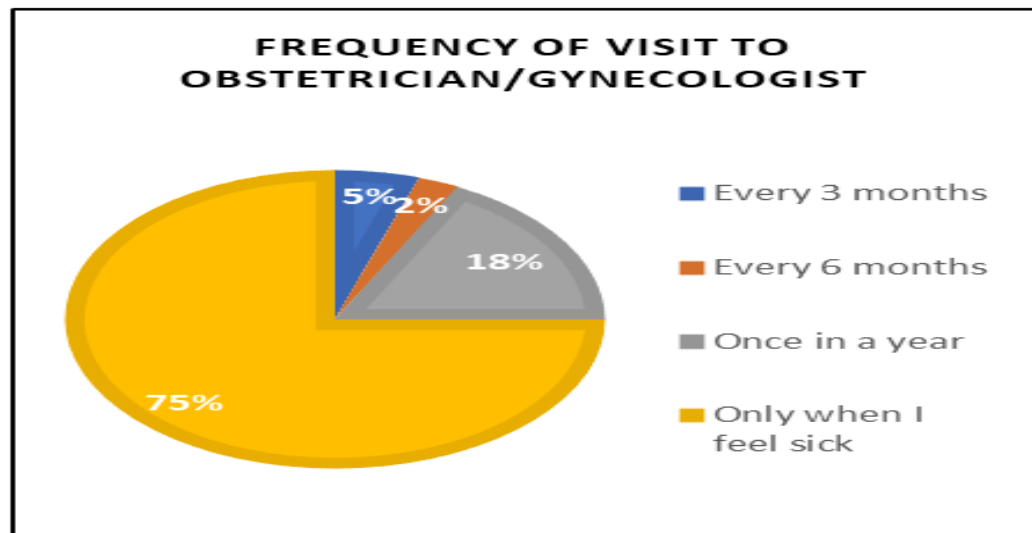


Figure 6.4: Frequency of visit to obstetrician/gynecologist

6.5 Source of information on breast cancer

The source of information on breast cancer was mostly communicated through media (TV, radio, internet, social media sites etc.) and print media.

Communication strategies which are used for creating awareness about breast cancer and breast self-examination should focus on providing information through multiple sources to expand the reach to all female segments of the society and have a greater impact of decreasing the disease burden by making women aware about the benefits of early detection of breast cancer and how it can save number of lives.

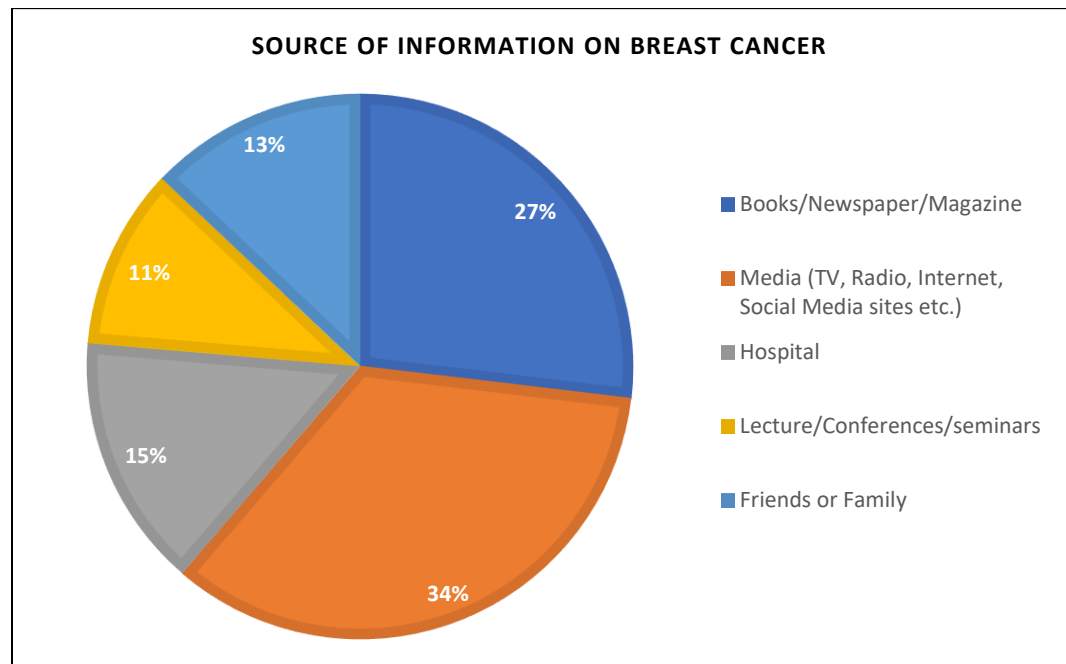


Figure 6.5: source of information on breast cancer

6.6 Number of sources of information

Most of the respondents got information on breast cancer through more than 1 communication sources

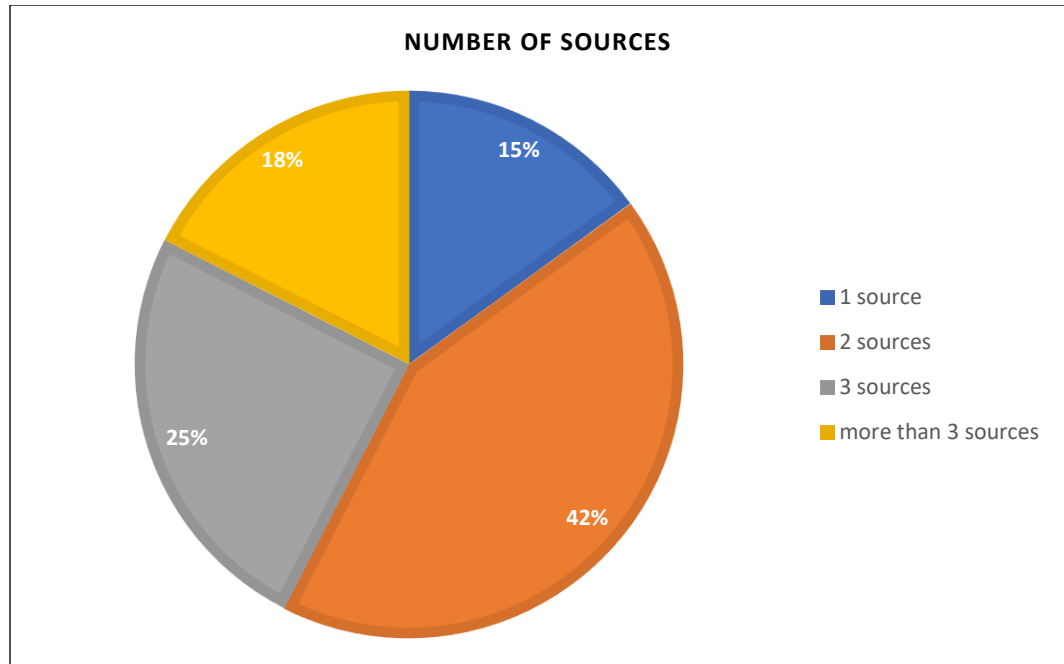


Figure 6.6: Number of source of information on breast cancer

6.7 What age BSE is started

45% respondents knew that BSE should be practiced from age of 20 years.

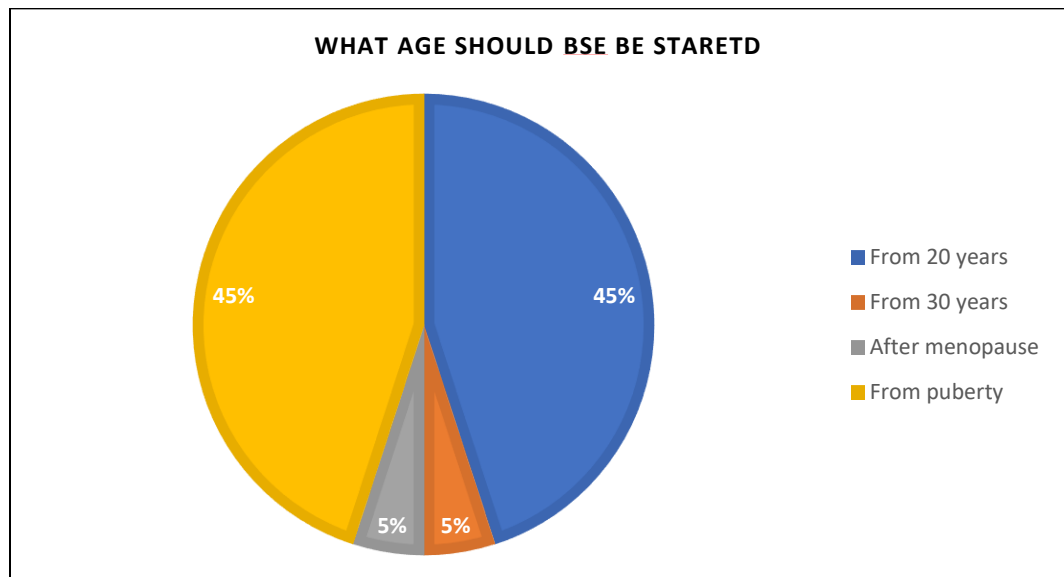


Figure 6.7: What age BSE is started

6.8 How frequently BSE is practiced

55% respondents knew that BSE should be practiced every month

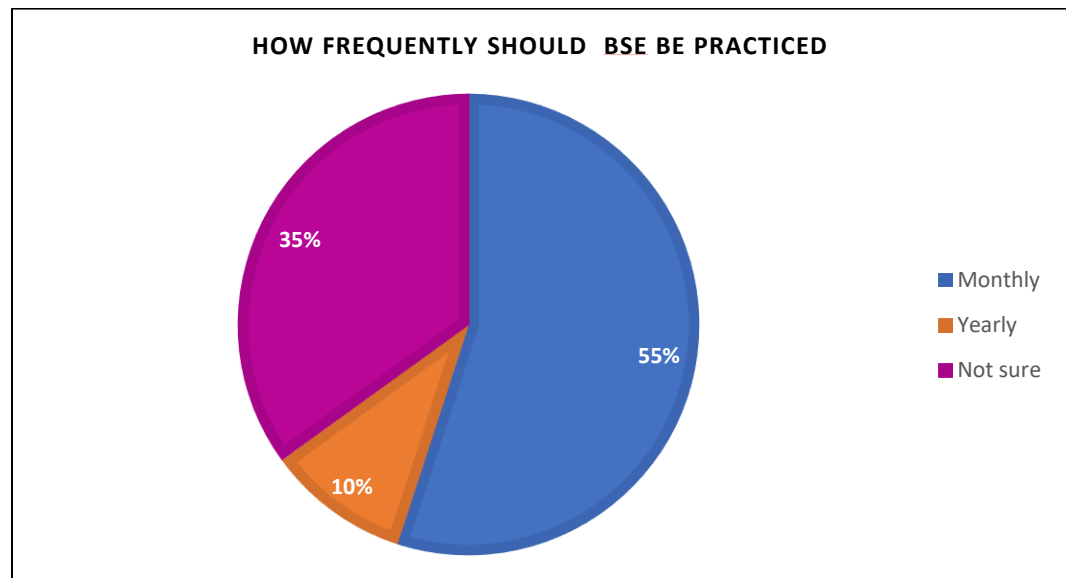


Figure 6.8: How frequently BSE is practiced

6.9 What is the best time to practice BSE

45% respondents knew that the best time to practice BSE is a week after periods.

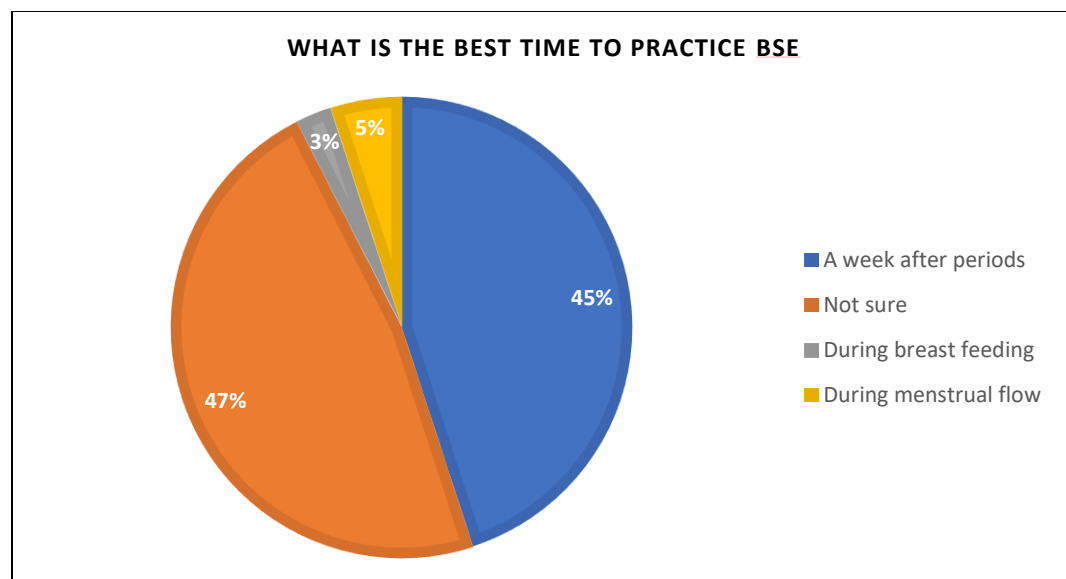


Figure 6.9: What is the best time to practice BSE

6.10 knowledge about usefulness of BSE

87% respondents knew that BSE is a useful tool for the early detection of breast cancer

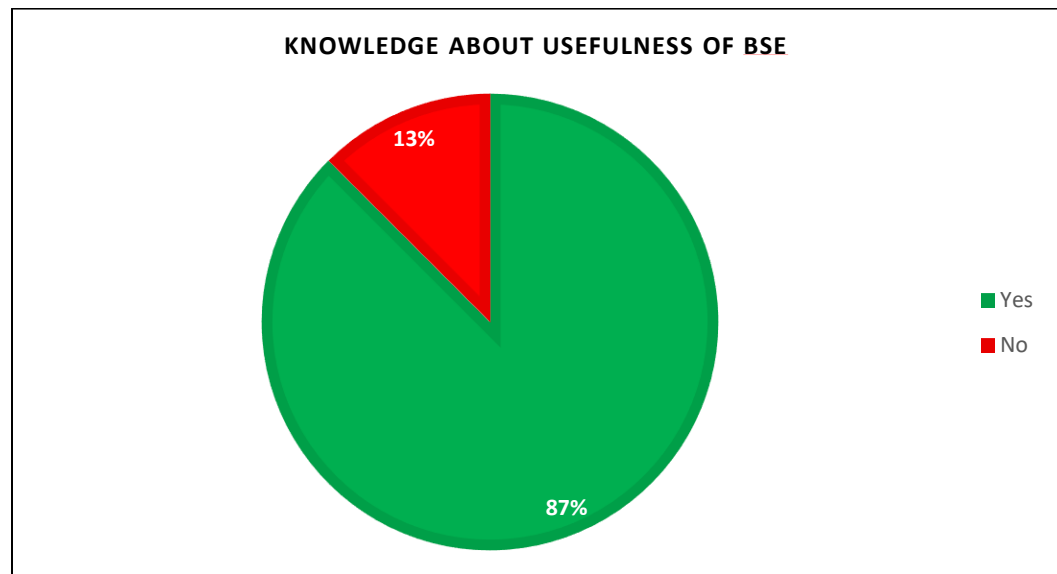


Figure 6.10: knowledge about usefulness of BSE

6.11 BSE Practice by Respondents

Only 47% respondents practices BSE

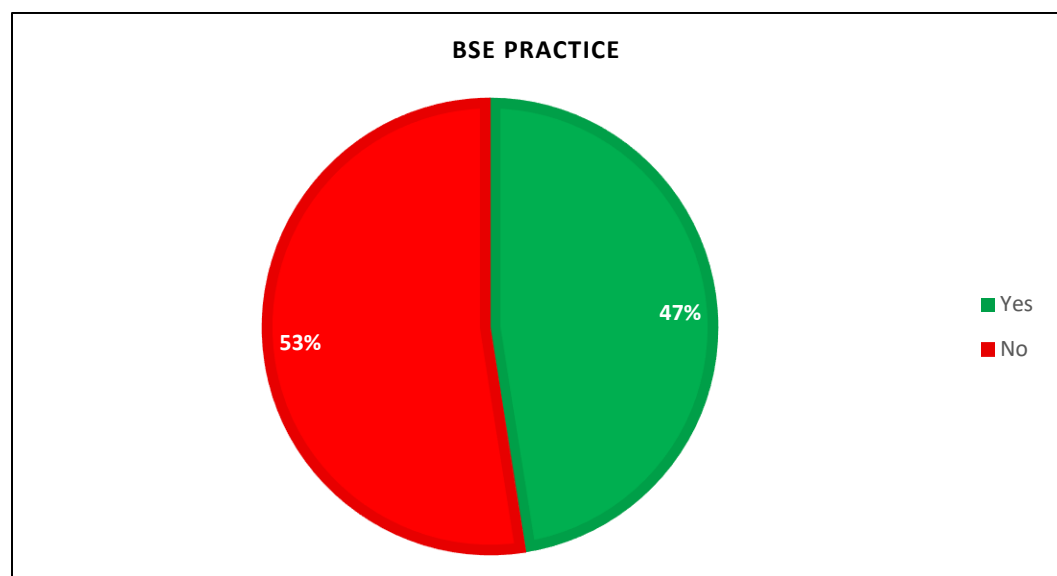


Figure 6.11: BSE Practice by Respondents

6.12 Sources of learning BSE

52% respondents learned BSE from the internet making it the most common source of information. 38% respondents learned BSE from a doctor or nurse.

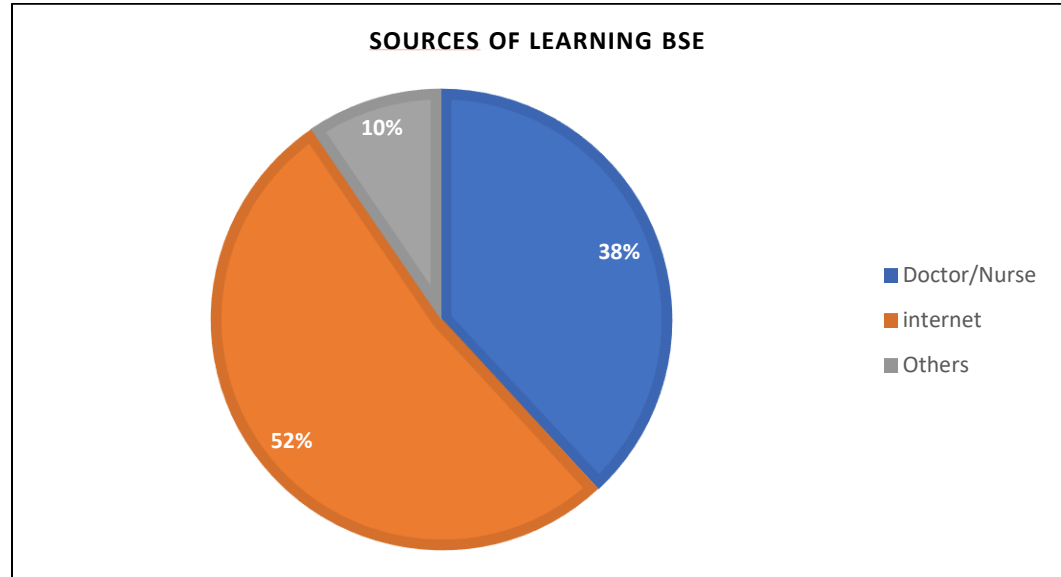


Figure 6.12: Sources of learning BSE

6.13 Frequency of practicing BSE

Only 32% respondents practice BSE monthly while 45% respondents practice BSE occasionally.

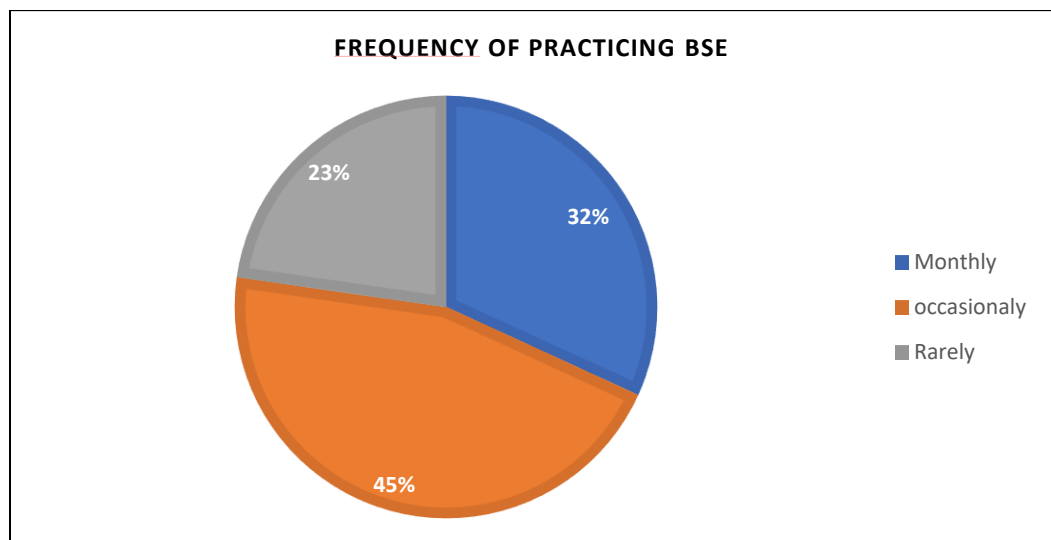


Figure 6.13: Frequency of practicing BSE

6.14 BSE practice by respondent's family members

Only 23% respondents have family member(s) who practice BSE.

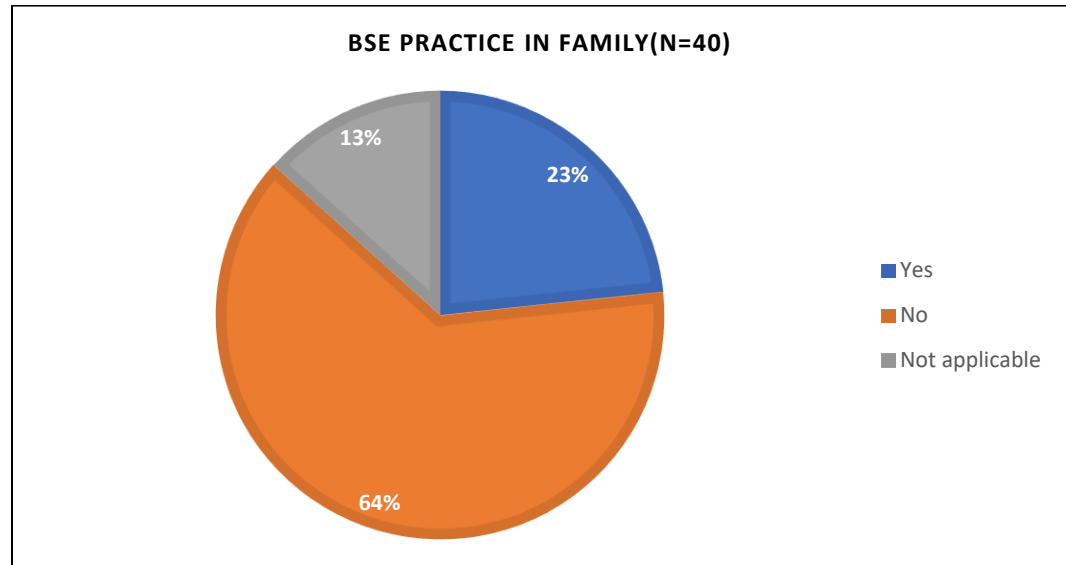


Figure 6.14: BSE practice by respondent's family members

6.14 Reasons for not practicing BSE

Most of the respondents stated that they do not practice BSE because of lack of awareness and knowledge. Other reasons were ignorance, forgetfulness and having time constraint etc.

Only 18% of respondents regularly practice BSE.

BSE PRACTICE	% OF RESPONDENTS
Regularly practicing BSE	18%
Irregular in practicing BSE	28%
Do not practice BSE	54%

Table 6.1 Percentage of respondents practicing BSE

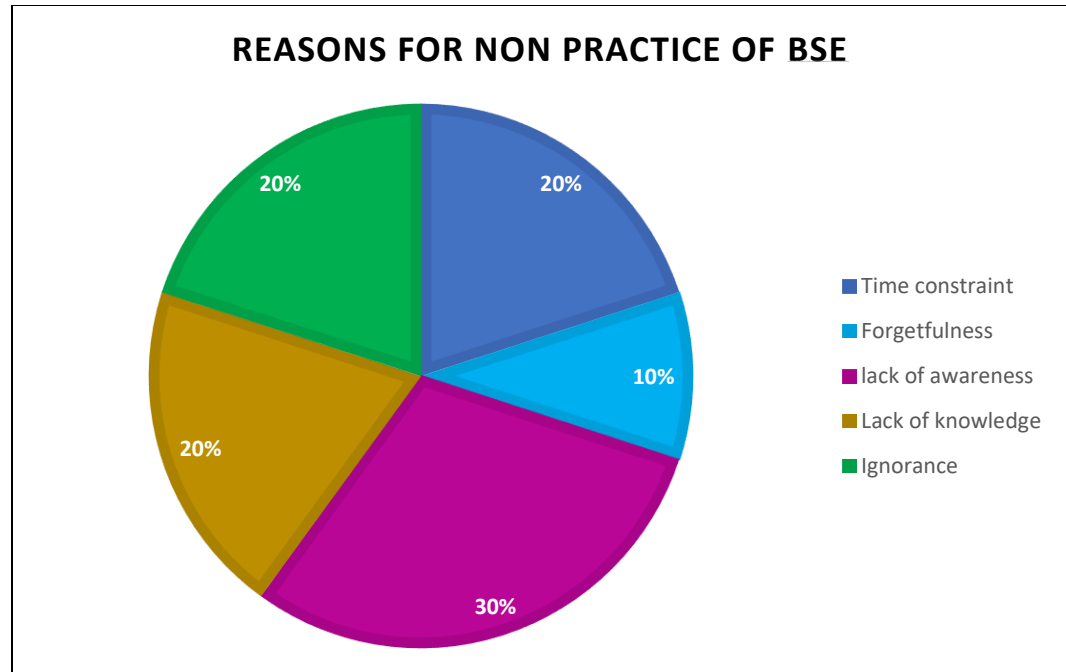


Figure 6.14: Reasons for not practicing BSE

7. Discussion and Conclusion

- The present study was conducted to assess the breast cancer awareness among females in a consulting firm based in Delhi NCR. Despite the fact 88% of females stated they were aware of breast self-examination (BSE), only 51% females stated that they practice BSE and only 17% females were practicing it every month, which showed that females were lacking adequate awareness regarding the benefits of early detection of breast cancer through BSE and how to properly perform BSE in a right way every month. This reflects that breast cancer awareness programs and campaigns are needed in the society to raise breast cancer awareness and teach women how to perform BSE

- Secondly, limited knowledge was found regarding breast self-examination. Despite the fact that 88% of females stated they were aware of breast self-examination (BSE), only 37% females know that the right age to start practicing BSE is from 20 years and only 46% females knew that it should be ideally performed a week after periods
- Only 18% women had their family members practice BSE which make it very important to have awareness programs regards breast cancer and BSE
- Evidence based knowledge provided by healthcare professionals, especially, doctors, pharmacists and allied health professional can play a significant role in raising breast cancer awareness through community awareness programs
- BSE is highly recommended for people living in developing countries where mammography based screening program are not performed on a regular interval. Therefore, it is suggested that population specific breast cancer awareness and breast self-examination programs should be designed to promote the level of knowledge in high risk populations
- The results reflects that breast cancer awareness programs and campaigns are needed in the society to raise breast cancer awareness and teach women how to perform BSE

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9. Appendix

Questionnaire used to conduct the survey:

1. What is the age group in which you belong?
 - A. 21-25 years
 - B. 26-30 years
 - C. 31-35 years
 - D. 36-40 years
 - E. 41-45 years
 - F. 46+years

2. What is your marital status?
 - A. Married
 - B. Single

3. What are your source (s) of information on breast cancer? Tick all that apply.
- A. Books/Newspaper/Magazine
 - B. Media (TV, Radio, Internet, Social Media sites etc.)
 - C. Hospital
 - D. Lecture/Conferences/seminars
 - E. Friends or Family
4. How often do you visit an obstetrician/gynecologist?
- A. Every 3 months
 - B. Every 6 months
 - C. Once in a year
 - D. Only when I feel sick
5. Have you heard of Breast Self-Examination (BSE)?
- A. Yes
 - B. No
6. Do you know that BSE is a useful tool for early detection of breast cancer?
- A. Yes
 - B. No
7. At what age should BSE be started?
- A. From puberty
 - B. From 20 years
 - C. From 30 years
 - D. After menopause
8. How often should BSE be done?
- A. Monthly
 - B. Yearly

- C. Not sure
- 9. What is the best time to do BSE?
 - A. During menstrual flow
 - B. A week after period
 - C. During pregnancy
 - D. During breast feeding
 - E. Not sure
- 10. Do you practice BSE?
 - A. Yes
 - B. No
- 11. If answer to 'Question 10' is Yes, who taught you?
 - A. Parents
 - B. Teacher
 - C. Doctor/ Nurse
 - D. Friend
 - E. Internet
 - F. Others
- 12. If answer to 'Question 10' is Yes, how often do you practice BSE?
 - A. Monthly
 - B. Occasionally
 - C. Rarely
- 13. If answer to 'Question 10' is no, why not? _____
- 14. Does anyone in your family practice BSE?
 - a. Yes
 - b. No
 - c. Not applicable