Pratima K Gudlanur and Asha H Bhatakhande

Abstract

A pre-experimental one group pre-test post test design was used. The sample size of 60 were selected by using Probability; simple random sampling technique. Data was collected from B.Ed students studying in KLE’s College of Education, Vidyanagar, Hubballi by means of Structured knowledge questionnaire. The reliability of tool was r=0.941 and analysis is done using descriptive and inferential statistics. The overall pretest knowledge scores of 60 B.Ed students. Majority of the subjects 38(63%) had average knowledge, 12(22%) had good knowledge and 9(15%) had poor knowledge, whereas in post test all the subjects 60(100%) had good knowledge scores. The calculated paired ‘t’ value (t_cal=7.66)* was greater than tabulated ‘t’ value (t_tab=2.662). Hence H1 was accepted. This indicates that gain in knowledge scores was statically significant at 0.05 levels. The study concludes that the STP on knowledge regarding BSE was effective to improve and update the knowledge of B.Ed students.

Keywords: Breast self examination, structured teaching programme, bachelor of education

Introduction

The Indian Cancer Society and Association for Research and Control, suggest that all asymptomatic 20-39 year old women should perform a BSE every month. Early detection helps in the treatment before metastasis and associated with excellent prognosis. Breast cancer screening was found to reduce the risk of mortality by 20%. Despite the presence of various screening method, majority of breast cases are detected by women themselves, stressing the importance of BSE [1]. Breast Self Examination (BSE) can be used as a measure to improve self-care among women. It is shown to increase the awareness regarding breast abnormalities and risk factors for breast cancer. Low awareness regarding breast cancer is one of the factors which reduce the effective use of screening tests. Raising awareness may also empower women to follow healthy behavior and health promotion activities. Health motivation and improving confidence are two factors which improve preventive health behaviors [2].

A study reports that among the participants only 160 (16%) respondents have heard about BSE, but none of them were practicing BSE. However, only 19 (1.9%) respondents knew correct facts about BSE (ideal age of start practicing, frequency, five step methods etc). Media was the major source of information (42.6%) followed by relative & health worker [3].

The Extent of review of literature reveals that there is lack of knowledge regarding breast self-examination. The present study aims at identifying the level of knowledge regarding breast self examination among B.Ed students who are the future impactful teacher, an educator who really connects with a student, is far more likely to inspire others to enter the teaching profession. As those new teachers begin their careers, they then have the ability to inspire others into teaching and can teach their students, neighbors, friends and family and help the people to detect breast cancer in early stage and which can serve as an effective means in preventing morbidity and mortality rates and also the researcher feels that knowledge can be improved by administrating structured teaching programme. Hence the above-mentioned factors motivated the investigator to undertake the study.

Objectives of the study

1. To assess the knowledge regarding breast self-examination (BSE) of B.Ed students in selected college.
2. To evaluate the effectiveness of structured teaching programme (STP) regarding breast self-examination in terms of gain in their knowledge scores.
3. To find out an association between pretest knowledge scores of B.Ed students regarding breast self-examination with socio demographic variables.

**Hypothesis**

**H1:** The mean post test knowledge scores of B.Ed students regarding BSE who have exposed to structured teaching programme (STP) will be significantly higher than the mean pre-test knowledge scores at 0.05 level of significance.

**H2:** There will be statistical association between pretest knowledge scores of B.Ed students with their selected socio demographic variables at 0.05 level of significance.

---

**Conceptual framework**

The present study aims at evaluating the effectiveness of structured teaching programme on knowledge regarding BSE among B.Ed female students.

In this study, Rosenstock & Becker’s Health Belief Model was selected. The Health Belief Model (HBM) was first developed in the 1950s by social psychological Hochbaum, Rosenstock & Keges working in the U.S Public Health Services. The model postulates that health seeking behavior is influenced by a person’s perception of a threat posed by a health problem and the reducing the threat. The HBM was spelled out in terms of four constructs representing (12).

1. Perceived Susceptibility
2. Perceived severity
3. Perceived Benefits
4. Perceived Barriers

---

**Fig 1:** Conceptual framework based on modified Rosenstock & Becker’s Health Belief Model (1997)
Materials and Methods
Research methodology refers to the master plan specifying the procedures for collecting and analyzing the needed information in a research study\[14\].

Research approach: An evaluative approach was considered appropriate for the present study.

Research design: The research design used for the present study is pre-experimental; one group pre-test, post-test design.

Variables
Independent variable: Structured Teaching Programme

Dependant variable: knowledge of B.Ed students regarding breast self examination

Attributive factors: Socio-demographic variables such as Age, Course of study, Marital status, Religion, Source of information, Family history of Breast cancer, Educational background, Have you ever performed BSE.

Research setting: The present study was conducted in K.L.E’S college of Education, Vidyanagar, Hubballi.

Population: In the current research study the target population refers to Female B.Ed students studying in K.L.E. Society’s College of Education, vidyanagar, Hubballi.

Sample: In the present study the sample consists of Female B.Ed students studying in K.L.E. Society’s College of Education.

Sample size: The sample size selected for the present study includes 60 B.Ed Female students.

Sampling technique: The researcher in the present study selected target population through probability simple random sampling technique.

Reliability of the tool
The reliability of the tool was computed using split half method and applying Karl Pearson’s co-relation co-efficient formula. The reliability coefficient of knowledge questionnaire was \( r = 0.941 \). Hence the tool was found to be reliable.

Results: The results are presented under the following sections:

Section I: Distribution of sample characteristics according to socio demographic variables
- Majority of the subjects 32(53%) belongs to the age group of 20-22 years, 26(43%) belongs to the age group of 22-24 years, 2(4%) belongs to the age group of 24-26 years.
- Majority of the subjects 33(55%) were studying in B.Ed –II\textsuperscript{nd} year, 27(45%) were studying in B.Ed-I\textsuperscript{st} year.
- Majority of the subjects 38(63%) were Unmarried, 22(37%) were Married.
- Majority of the subjects 31 (52%) belongs to urban area, 29 (48%) belongs to rural area.
- Majority of the subjects 38(63%) were from Hindu religion, 13(22%) were from Muslim religion, 6(10%) were from Christian and 3(5%) belongs to others religion.
- Majority of the subjects 18(30%) had source of information by electronic media, 16 (26%) by print media, 13(22%) by new age media, 7(12%) by health professionals and, 6(10%) by peer group.
- Majority of the subjects 49(82%) had no family history of Breast Cancer and 11(18%) were having family history of Breast Cancer.
- Majority of subjects 27(45%) were qualified with Bachelor of Science graduation, 21(35%) of subjects were qualified with Bachelor of Arts degree, 12(20%) qualified with commerce degree.
- Majority of the subjects 59(98%) did not performed BSE, only 1(2%) had performed Breast Self Examination.

Section II: Analysis of Knowledge scores of B.Ed students studying in K.L.E’S college of education who have participated in the study regarding Breast Self Examination.

Table 1: Mean, median, mode, standard deviation and range of knowledge scores of B.Ed students regarding breast self examination. N=60

<table>
<thead>
<tr>
<th>Area of analysis</th>
<th>Mean</th>
<th>Median</th>
<th>Mode</th>
<th>Standard deviation</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre test</td>
<td>19.25</td>
<td>20</td>
<td>20</td>
<td>4.300</td>
<td>21</td>
</tr>
<tr>
<td>Post test</td>
<td>34.4</td>
<td>34</td>
<td>34</td>
<td>2.293</td>
<td>11</td>
</tr>
<tr>
<td>Difference</td>
<td>15.15</td>
<td>14.5</td>
<td>14</td>
<td>2.007</td>
<td>10</td>
</tr>
</tbody>
</table>

Graph 1: The cylindrical diagram represents percentage of subjects according to knowledge scores.
Graph 2: The cone diagram represents percentage distribution of subject according to gain in knowledge scores.

Section III: Testing hypotheses

**H₁**: The mean post test knowledge scores of the B.Ed students of K.L.E’S college of Education receiving Structured Teaching Programme (STP) on Breast Self Examination (BSE) will be significantly higher than the mean pre test knowledge scores at 0.05 level of significance.

Table 2: Mean Difference (d), Standard Error (SE.d) and paired ‘t’ values of knowledge score of B.Ed students. n=60

<table>
<thead>
<tr>
<th>Mean difference (d)</th>
<th>Standard error of difference(SEd)</th>
<th>Paired ‘t’ values Calculated Tabulated</th>
</tr>
</thead>
<tbody>
<tr>
<td>15.15</td>
<td>0.647</td>
<td>7.66*</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.662</td>
</tr>
</tbody>
</table>

**H₂**: There will be statistical association between pretest knowledge scores of B.Ed students with their selected socio-demographic variables at 0.05 level of significance.

- The calculated chi-square value of age in years was 4.23 was less than tabulated chi-square value 9.49. Hence H₂₁ was rejected.
- The calculated chi-square value of course of study was 2.06, was less than tabulated chi-square value 5.99. Hence H₂₂ was rejected.
- The calculated chi-square value of marital status was 1.82, was less than tabulated chi-square value 5.99. Hence H₂₃ was rejected.
- The calculated chi-square value of habitat was 0.543 was less than tabulated chi-square value 5.99. Hence H₂₄ was rejected.
- The calculated chi-square value of religion was 4.07, was less than tabulated chi-square value 12.59. Hence H₂₅ was rejected.
- The calculated chi-square value of source of information was 10.2, was less than tabulated chi-square value 15.51. Hence H₂₆ was rejected.
- The calculated chi-square value of family history of breast cancer was 5.16 was less than tabulated chi-square value 5.99. Hence H₂₇ was rejected.
- The calculated chi-square value of educational background was 6.97, was less than tabulated chi-square value 9.49. Hence H₂₈ was rejected.
- The calculated chi-square value of have you ever performed BSE was 0.574, was less than tabulated chi-square value 5.99. Hence H₂₉ was rejected.

Conclusions

The overall study is to evaluate the effectiveness of structure Teaching programme on knowledge regarding Breast Self Examination (BSE) among B.Ed students of selected college Hubballi, enhancing in nursing education, practice, administration and research. Structure Teaching programme was effective in enhancing and upgrading the knowledge of B.Ed students. This chapter can thus guide the new learner to make an in depth study about this topic and compare their findings through it.

References

a teaching hospital in central India. Indian J Cancer [serial online] [cited 2017 Dec 9], 2016, 226-229.