

Breast Self-Examination: Knowledge, Attitude, and Practice Among Female Traders in Auta Balefi

Oroge Oluwanifemi Precious*, Aidan Usiju Salome, Nmesoma Divine Okorougo, Daniel Odlodzi Shalom, Israel Asade Akpasu, John Bimba

Department of Community Medicine and Primary Health Care

*Corresponding Author

ABSTRACT

Introduction: Breast cancer is the most prevalent malignancy among women in Nigeria, contributing to 22.7% of all new cancer cases and 18.1% of cancer-related deaths, with an age-standardized mortality rate of 25.5 per 100,000, the highest in Africa. Early detection through breast self-examination (BSE) is a low-cost, accessible method critical for improving survival rates in resource-limited settings like Nigeria, where delayed presentation and late-stage diagnosis are significant challenges. Female traders in semi-urban markets, such as those in Auta Balefi, Karu Local Government Area, Nasarawa State, face unique barriers to healthcare access due to socio-economic, cultural, and logistical constraints. Despite the importance of BSE, there is limited data on its knowledge, attitudes, and practices (KAP) among this population. This study aims to assess the KAP of BSE among female traders in Auta Balefi to identify gaps and inform targeted interventions for breast cancer awareness and early detection, contributing to Nigeria's public health efforts to reduce breast cancer morbidity and mortality.

Methodology: A descriptive cross-sectional study was conducted among 403 female traders aged 18 years and above in Auta Balefi, Karu Local Government Area, Nasarawa State, Nigeria. Participants were selected using a systematic random sampling technique. A structured questionnaire, was used to collect data on socio-demographic characteristics, knowledge, attitudes, and practices of BSE. Data were analyzed using IBM SPSS version 23, with results presented as percentages in tables and charts.

Results: The results showed that 49.1% of the participants had good knowledge on breast self-examination, although 53.1% reported to not have been taught how to perform BSE. 63.8% of participants had a positive attitude towards BSE with 70% of them agreeing that BSE should be carried out regularly among women. 65% of the respondents had a good practice of BSE although only 19.6% performed BSE monthly. Education level, religion, and number of children significantly influenced BSE practice, with higher education and 1–5 children linked to better engagement, aligning with findings from studies in Nigeria, Ethiopia, and Malaysia.

Conclusions: These results highlight the need for targeted, culturally sensitive health education programs to enhance BSE skills and adherence. Recommendations include integrating BSE training into market-based outreach, using reminder tools (e.g., SMS, calendars), and leveraging community health workers to address knowledge gaps and barriers, ultimately improving early breast cancer detection and reducing mortality in resource-limited settings like Auta Balefi.

