# ASSESSMENT OF THE SOURCE AND ADEQUACY OF INFORMATION ON BREAST CANCER TO WOMEN IN ANIOCHA SOUTH LOCAL GOVERNMENT, DELTA STATE.

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#### **Abstract**

The study is aimed at Assessment of the source and adequacy of information on breast cancer to women in Aniocha South local government, Delta State To achieve the objective of this study, the researcher adopted the survey method as the research design. The questionnaire was used as instrument to collect primary data. The data collected were subjected to empirical analyses using tables and simple percentages. Based on the data analyzed, the study found among other things that majority of the respondents is aware of the existence of breast cancer but, only a few are knowledgeable about its early indications and the fact that it can be prevented if diagnosed early. The study thus recommended that Community leaders and religious leaders as well as health workers should be encouraged to join hands with government and other concerned bodies in creating adequate information on this deadly but preventable disease.

**Keywords**: Breast Cancer information, Media Communication, Assessment, Breast Self Examination (BSE)

#### INTRODUCTION

Breast cancer is a major global public health challenge, ranking as the first most prevalent cancer among women in Nigeria. Where screening programmes are available, lack of awareness and poor knowledge can lead to poor attitude towards the utilization of such programmes. Deploying the mass media remains a viable health communication strategy in creating wide-spread awareness on breast cancer.

Particularly, with social media, being the most popular communication platform utilized by women, it can be effective in promoting early detection of breast cancer among Aniocha South women who are susceptible to the disease once sexually active. Therefore, this study examined the assessment of information source and adequacy of information on breast cancer to women in Aniocha South local government.

#### **BACKGROUND OF THE STUDY**

Proper information against is deadly disease that is associated with man and women is an important activity to be undertaken in order to promote health. It is the communication of information that enables people to make informed decisions on breast cancer. Breast cancer remains a leading cause of cancer-related deaths among women worldwide, with limited access to information and healthcare services exacerbating disparities in rural communities. Breast cancer is a malignant cancerous growth that begins in the tissues of the breast. It is the commonest cancer among women globally, including Nigeria (Oluwatosin & Oladepo, 2006). According to Afolayan, Olaoye, Adesina, and Saidu (2012, p. 29), breast cancer is a common non–communicable disease, one–third of which are preventable, another one–third are potentially curable if diagnosed early, while the remaining one–third are incurable...

Unfortunately, most of the cases are reported at health facilities during the late stage of the cancer in Nigeria.

Effective communication strategies are crucial in promoting breast cancer awareness, early detection, and timely treatment. Mass media, including traditional and digital platforms, offers unparalleled reach and potential for influencing health behaviors.

Rural communities most Aniocha south face significant challenges, including limited healthcare infrastructure, geographic isolation, lower health literacy, and cultural and socio-economic factors influencing health-seeking behaviors. Despite advancements in breast cancer research and treatment, these communities continue to lag behind in terms of awareness and screening rates.

The media communication messages play very significant roles in the public understanding of many health issues. The information relayed to the public through the media clearly increases knowledge and influences the behavior of the masses. Over the years, public health has become an issue of major discourse across the globe.

Breasts are the most prominent superficial structures of the anterior chest wall in man. They are modified sweat glands. Both men and women have breast, while that of the male are rudimentary and functionless, that of the female are well developed and adopted for lactation. During puberty (age 9-15years) the female breast normally enlarges due to glandular development and increased fat deposition.

The size and shape of one's breast can be determined by genetic, ethnic and dietary factors (Moore and Arthur, 2006). Some diseases affect the breast they could either be malignant or benign, congenital or acquired. Breast cancer is one of the most common cancers in women worldwide. It is a major cause of death among women aged 30 and above. Aside of Cervical cancer, breast cancer is one of the most common form of cancer among women in both high and low resource setting countries (WHO, 2004).

Breast cancer is said to be a major public health problem globally with over one million new cases diagnosed annually, resulting in over 400,000 annual death and about 4.4 million women living with the disease, in actual fact, one out of eight women will be affected during their lifetime (Okobia and Bunker, 2006)

#### STATEMENT OF PROBLEM

The level at which women lack adequate information on this is deadly disease known as cancel has become worrisome that the present cases of breast cancer at an advanced stage when little or no benefit can be derived from any therapy is the hallmark of this disease amongst Nigerian women. Recent global cancer statistics indicate rising global incidence of breast cancer and the increase is occurring at a faster rate in populations of developing countries that hitherto enjoyed low incidence of the disease.

Being worried by the prevailing situation on women as decision makers and health care givers in their families across the globe, makes the need to create awareness and screening programme necessary for early detection of the disease among the women of Aniocha South and here lies information adequacy that brings about behavior modification.

#### **OBJECTIVE OF STUDY**

The purpose of this study is to determine the assessment of the source and adequacy of information on the breast cancer to women in Aniocha South and Delta State in general However, specific purpose of this study include:

- 1. To determine the extent women in Aniocha South get their breast cancer knowledge from the mass media as opposed to other sources, such as interpersonal communication.
- 2. To know if the level of education of women in Aniocha South determine their knowledge of breast cancer from the mass media

- 3. To determine the extent of knowledge gap among literate and non-literate women in Aniocha South regarding breast cancer information from the media
- 4. To determine the extent of knowledge gap in breast cancer knowledge from the mass media between urban and rural women
- 5. To ascertain the relationship between media use and knowledge of breast cancer among women in Aniocha South.

#### LITERATURE REVIEW

Moore and Arthur (2006) described breast cancer as a malignant tumor in the glandular tissues of the breast. Such tumors are called Carcinomas. They form when the processes that control normal cell growth breakdown, enabling a single abnormal cell to multiply at a rapid rate. Carcinomas which tend to destroy an increasing proportion of normal breast tissue over time may spread or metastasize to other part of the body.

Breast cancer can strike men and women, although women are about 100 times more likely to develop the disease than men. Most cancer in female breast forms shortly before or after menopause with three quarter of all cases being diagnosed at age fifty (50), American cancer Society (2010).

According to Encyclopedia Britannica (2012) Breast cancer is the most common cancer among women worldwide ,in North America and Western Europe where life span are longer, the incidence is highest. In addition breast cancer is the leading cause of death among women age 20 to 59 in high income countries.

Harsh (2010) asserted that breast cancer is seen clinically as a solitary painless palpable lump that is detected quite often by breast self examination (BSE). The higher one's age, the more likely it is for breast lump to become cancerous, therefore all breast lumps no matter the age of the patient must be removed surgically.

Okobia and Bunker (2006) noted that cancer is a pan societal problem that affects two-third of the world population. Among them, breast cancer is the most common cancer diagnosed in women, both in developing and developed countries. It is the 2<sup>nd</sup> leading cause of death in women worldwide. Proximately one out of eight women develops breast cancer all over the world. The burden of the disease both in developed and developing countries is increasing and if no action is taken it will go beyond control. According to International Agency for Research on cancer 1.5 million new cases of breast cancer was diagnosed in 2002, and among them approximately 411,000 died. Based on current estimate of an average annual increase in incidence ranging from 0.5% to 3% per year, the projected incidence increase in 2011 was 1.4-1.5 million.

A risk factor is anything that increases an individual's chance of getting a disease. Example, smoking is a risk factor for cancers of the lung. Risk factors can be divided into risk determinants and risk modulations. Risk determinants cannot be changed or influenced, on the other hand risk modulants can be changed or influenced. Determinant risk factors include the following: gender, growing age, genetic predisposition, family history of breast cancer, personal history of breast cancer, race and early age at menarche and late menopause. Risk modulators (Lifestyle- related Breast Cancer Risk factors) they include: first birth at late age and low parity, hormone replacement therapy, alcohol consumption, obesity and high-fat diets (www.cancer.gov, 2008).

Early breast cancer is usually symptomless but there are some symptoms that develop as the cancer advances. Breast lump or breast mass is the main symptoms of breast cancer.

Breast cancer awareness: education and awareness alone may contribute in a favorable shift in the stage of breast cancer at presentation. WHO, 2007 stressed that education need to be culturally appropriated and targeted toward the individual population so that highest benefit can be gained it is also important to educate men as well as women because men can facilitate early detection in their partner and help to reduce the barrier to seek care. The important aspect of awareness is the dissemination of knowledge that breast cancer is curable, and if diagnosed early survival rate is good. Anderson (2008) asserted that with earlier stage at presentation and with good treatment facilities it is not a big problem.

According to Yarbro (2003) it is also important to educate health care providers especially those who came in regular contact with women, because evidence suggest that nurse for example can play an important role in providing the information regarding breast cancer in countries with limited resources.

Also breast self—examination (BSE) is a simple and cost effective method of breast cancer screening in limited resources countries. BSE is a formalized practice that a woman is taught to examine her own breast regularly (usually monthly after 20years). Anderson (2008) further explained that during the breast self—examination, a woman systematically inspect and palpate each of her breast using one of her hands to examine her breast and raise the other arm above her head. She performs her examination both in lying and standing position. Usually it is better to examine the breast in front of a mirror so that she can inspect any sort of asymmetry or dimpling.

The Breast Self Examination (BSE) is done in an attempt to find out breast cancer earlier and reduce mortality. Studies based on breast cancer patient's retrospective self reporting on their BSE have shown a positive relation with early detection of breast cancer, Stockton(2006). There are also evidences that most of the early breast cancer is self-discovered. On the other hand, evidence from recent studies has raised the question of the efficacy of teaching BSE. Two randomized control trial of BSE that was conducted in St. Petersburg, Russia (Semiglazov, et al 1999) and Shanghai, China (Thomas, etal 2002) showed no clear evidence to support the role of routine Breast Self Examination(BSE) cancer in women who were taught BSE. Based on their result and other multiple observational studies, by a working group of International Agency for Research on Cancer (IARC)(2002) concluded that there is inadequate evidence that BSE can reduce mortality from breast cancer.

However, other researchers do not agree on this issue. Their view is that "The absence of evidence of a benefit is not the same as evidence of no benefit. Anderson, (2008) reported that the global summit early detection panel did not positively recommend the BSE on the basis of current evidence but they also did not discourage to use it either. BSE may have great value in terms of awareness and motivating women to see a health care provider when they find a lump. And earlier response to symptoms may reduce the cancer stage at diagnosis. In addition, BSE may be an effective primary tool in breast health education.

For early detection of breast cancer mammography is the gold standard but there are 2 limitations which are; it's cost and another is its technical complexity. As a result mammography is not recommended for countries with limited resources.

The role of health education in creating breast Cancer Awareness cannot be over emphasized. Health education as a tool for health promotion is critical for improving the health of populations and promotes health capital. Health promotion is defined as the process of enabling people to increase control over and to improve their health. Health promotion is viewed as a combination of health education activities and the adoption of healthy public policies. Health education focuses on building individuals capacities through educational, motivational, skill- building and consciousness- raising techniques. Public health policies provide environmental support, encourage and enhance behavioral change.

According to the American cancer Society, quality health education programs delivered in schools can improve the well-being and health of students such as the female undergraduates of the University of Calabar. Therefore engaging in healthy behaviors such as participating in physical activity, healthy eating and avoiding the use of tobacco, has been linked to the reduction of chronic diseases like cancer.

The Joint Committee on National Health Standards (2007) indicated that health education programs can contribute directly to one's ability to successfully adopt and practice behaviors that protect and promote health and reduce health risk. Soni (2007) maintained that health and well-being of people is not a matter of luck, chance or random event, it must be a planned outcome. He further explained that, this calls for well-designed, well-resourced and sustained health education in schools. Because an improved health status is of economic value, preventive measures such as monthly self breast examination, not smoking, maintaining a healthy weight and regular exercise can reduce ones risk of having breast cancer.

#### MEDIA AND ADVOCACY AGAINST BREAST CANCER

Asuquo,(2015) added that there is need to create awareness on breast cancer disease through health education is of great importance in order to improve women health and save lives is also significant if there is going to be drastic reduction in the incidence of breast cancer in the future. Focusing on sources

of cancer impact, surveys of female students and their mothers indicate that exposure to breast cancer stories in news magazines is related to breast self examination and clinical screening (Dehman & Springston, 2006)

In a study which assessed the relationship between exposure to breast cancer content in broadcast news programs and fear of breast cancer, it was shown that there was a relationship between exposure to breast cancer coverage in broadcast news program and fear of breast cancer (Lemal & Bulck, 2018).

In the study which contained closed measures on demographics, breast cancer fear, television exposure and potential confounding variables such as trait anxiety, perceived risk and experience with breast cancer, it was shown that 80.66% of the women were moderately to be very afraid of being diagnosed with breast cancer.

#### THEORETICAL FRAMEWORK

The Health Belief Model (HBM) and the Agenda Setting Theory of the media were adopted for the study.

HBM is "a health behavior change and psychological model that was first developed in the 1950s by Hochbaum, Rosenstock and Kegels working in the US Public Health Services" (Karen Glanz, 2011). The model has been adapted to explore a variety of long and short—term health behaviors, including risk behaviors and the transmission of deadly ailments. It is generally used to explain and predict health behaviors by focusing on the attitudes and beliefs of individuals.

Health Belief Model has been applied to three broad areas of health behavior, including: (i) Preventive health behaviors, such as health—promoting (e.g. diet, exercise) and health risk (e.g. smoking) behaviors; (ii) Sick—role behaviors, which refer to compliance with recommended medical regimens, and (iii) Clinic use, which includes physician visits for a variety of reasons (Conner and Norman, 1996 cited by Glanz, 2011). It is predicated on the understanding that a person will take a health—related action. if that he/she feels that a negative health condition can be avoided; if he/she has a positive expectation that by taking a recommended action, he/she will avoid a negative health condition... and; if he/she believes that he/she can successfully take a recommended health action (Glanz, 2011). It is on the basis of the above assumptions that this study, among other things, examined how people's reaction to media messages could help them take essential actions that will alleviate the menace of breast cancer.

In the context of breast cancer communication in rural communities, the HBM suggests that mass media messages should focus on increasing awareness of breast cancer risks, emphasizing the importance of screening and early detection, and providing actionable information on accessing screening services. By framing messages in terms of perceived susceptibility, severity, benefits, and barriers, mass media campaigns can motivate rural residents to adopt healthy behaviors and seek necessary care.

On the other hand, Agenda Setting Theory propounded by Maxwell McCombs and Donald Shaw (1972) as cited by Ojobor (2002, p. 21) provides that "audience not only learn about public issues through the media, [but] also learn how much importance to attach to an issue or topic from the emphasis the mass media place upon it." Some agenda—setting scholars (McCombs, 1992; McCombs, Lopez—Escobar, & Llamas, 2000 in Kwansah—Aidoo & Mapedzahama, 2015, p. 5) have argued that not only do the media provide clues about the salience of certain topics and issues, but they also tell people how to think about these topics and issues.

According to them the way the media present an issue influences how the audience views it. The Agenda Setting Theory rests on the powerful influence of the mass media on audience, since they (media) determine and direct public attention to issues considered more important, by the emphasis and prominence given to the issues. In other words, mass media focus audiences' attention and influence their perceptions on the most important issues of the day. The Agenda–Setting theory of mass media has played a crucial role in determining how the media affects consumers (Ekeanyanwu, 2007); therefore, the media should play a responsible role in the society (Riaz, 2008).

The significance of Agenda Setting Theory to this study becomes very obvious so long as media men use appropriate media to play up the awareness of the breast cancer scourge, and on time, to their audience. It behooves media practitioners to re–examine their former strategies in breast cancer campaign and fathom how to frame effective media messages that would be understood by the women. Mass media campaigns on breast cancer can utilize Agenda Setting Theory by strategically framing

breast cancer messages to resonate with rural audiences, emphasizing local relevance, and leveraging emotive storytelling to make the issue more salient. By setting the agenda for public discourse around breast cancer, mass media can increase awareness, foster community engagement, and encourage individuals to take action. Furthermore, Agenda Setting Theory highlights the importance of considering the broader social and cultural context in which mass media messages are received, including existing health beliefs, cultural values, and socio-economic factors.

Together, the Health Belief Model and Agenda Setting Theory provide valuable insights into the design and implementation of effective mass media campaigns for breast cancer communication in rural communities. By integrating these theoretical frameworks, researchers and practitioners can develop evidence-based strategies for promoting breast cancer awareness, education, and screening behaviors among rural residents, ultimately contributing to improved health outcomes and reduced disparities.

#### RESEARCH METHOD

The study adopted survey method, The researcher chose this method because survey research works on the premises that help the researcher to select sampling techniques, instrument or data collected and allows the researcher to go into the field and select a sample size which is used conclusively on the entire population.

Questionnaire were used as the instrument data collections. 400 respondents were randomly selected within the various community that makes of Aniocha south.

From the self administer questionnaires within the study scope, the result of the analyzed data were presented through the use of simple percentage tables, the following findings will guide the study:

- 1. The study found that majority of the respondents are aware of the existence of breast cancer even though the level of commitment of mass media organization campaign on breast cancer is very little, only a few are knowledgeable about its early indications and the fact that it can be prevented if diagnosed early
- 2. The study showed that 60% of their respondents had poor knowledge of the disease

#### Conclusion

The study concludes that the use of the conventional mass media in dissemination of information on breast cancer may not be as productive, especially in rural areas which are made up of semi-literate and illiterate population. The study concludes that traditional communication channels such as friends, religious association meetings, town union meets etc are better channels for disseminating health education especially as it concerns breast cancer to the rural dwellers.

#### Recommendations

The following recommendations were made:

- 1. Community leaders and religious leaders as well as health workers should be encouraged to join hands with government and other concerned bodies in creating adequate information on this deadly but preventable disease.
- **2.** Health campaigns against breast cancer using above the line media should use more of the radio because it breaks barriers.

#### Reference

Abdelhamied, H. H. S. (2013). The effects of sales promotion on post-promotion behaviours and brand preferences in fast food restaurants. *tourismos*, 8(1), 93-113.

Attah, E.B.(2000). Human Pathology; Calabar: Nigeria Ibadan University Press. Pg273-288.

Adesina, and Saidu (2012). knowledge, Attitude and Practice Regarding Breast Cancer Among Medical Students of Borno state University. Thesis in Public Health.

- Global Journal of Applied, Management and Social Sciences (GOJAMSS); Vol.29, June 2024; P.312-319 (ISSN: 2276-9013)
- Anderson, B. (2008). Guideline Implementation for breast health care in low income and middle income Countries: *Overview of the Breast Health Global Initiative Global Summit*. Cancer,113,2221–43.
- Asuquo, I. (2015). The relationship between breast selfexamination and health belief model variable research in School of Nursing and Health Technology, Calabar. 10:375 382.
- Belal, A.(2006). Non–communicable disease prevention: The way to the rapidly growing public health problem in the developing world. *Sudanese Journal of Public Health*, 1(3), 230 234.
- Bray, F, Mac Carron P. and Maxwell,P (2013). The changing global patterns of female breast cancer incidence and mortality, *Breast Cancer Research*. Pg 229 239.
- Champion, V. (2001). The relationship between breast self examination and health belief model variable research in nursing and health. 10:375 382.
- Donatelle, R.(2009). Health: The basics. 8<sup>th</sup>edition. San Francisco, CA: Person Education, Inc. Encyclopedia Britannica Breast Cancer.
- Dehman, M.S. & Springston E. (2006). Mass Media Sensitization. Moscow: Progress publisher.
- Ekeanyanwu, N. T. (2007). The Nigerian Press Coverage of Political Conflicts in a Pluralisticsociety. *Global Media Journal African Edition, Vol. 1*. Retrieved from <a href="http://globalmedia.journals.ac.za/pub/article/view/46">http://globalmedia.journals.ac.za/pub/article/view/46</a>
- Haji–MahmoodiM.,MontazeriA.,JarvandiS.,EbrahimiM.(2002). Breastself–examination; Knowledge, attitude, and practices among female health care workers in Tehran, *Iran Breast Journal*, 8:222 225.
- Harsh, M. (2010). Textbook of Pathology: 6<sup>th</sup>edition. St Louis, USA Jay Pee brothers, Ltd.
- McKenzie, j., Neifer, B. and Thackeray, R(2009). planning, implementing and evaluating health promotion programme 5<sup>th</sup> edition. San Francisco, CAP Education, Inc.
- Moore, K.L., Arthur, F.D. (2006). Clinical Oriented Anatomy 5<sup>th</sup> edition. London ippincott William and Wilkins.
- Kumar, H., Singh, V. A., Isha, M., Mehta, S., Garg, R., & Shinu, P. (2018). Line Immunoassay: A Rapid Test for Screening TORCH Complex in Antenatal Patients with Bad Obstetric History. *Mymensingh medical journal:* MMJ, 27(3), 641-644.
- Kwansah–Aidoo, K. & Mapedzahama, V. (2015). Media Event, Racial Ramblings, or Both? An Analysis of Media Coverage of the Tamworth Council Sudanese Refugees Resettlement Case(2006). SAGE open. http://sgo.sagepub.com/content/5/4/21582440156 21600.
- Oluwatosin, A. & Oladepo, O. (2006). Knowledge of breast cancer and its early detection measures among rural women in Akinyele Local Government Area, Ibadan, Nigeria Retrieved from <a href="http://www.biomedcentral.com/1471-2407/6/271">http://www.biomedcentral.com/1471-2407/6/271</a>.
- Onyije, F. M., Waritimi, E. G. & Atoni, A. (2012). Comparative Study on the Knowledge of Breast and Cervical Cancer among Females in Rural and Urban Areas of Niger Delta. J. Life Sci. Biomed. 2(4):120–124. *Retrieved from:* <a href="http://jlsb.science-line.com/">http://jlsb.science-line.com/</a>
- Ouyang, Y. &Hu, X. (2014). The Effect of Breast Cancer Health Education on The Knowledge, Attitudes, and Practice: A Community Health Center.
- Okobia, M. and Bunker, C, (2006). Oestrogen metabolism and breastcancer risk: Areview. African Journal of

Reproductive Health, 10 (1), 13 – 15.

- Riaz, S. (2008). Agenda setting role of mass media. Global media journal, *Volume 1, Issue 11. Retrieved from www.aiou.edu.pk/gmj/article4(b)*.asp. Accessed on December 5, 2016.
- Soni,A(2007). Personal health behaviors for heart disease prevention among the US adult civilian non–institutionalized population, 2004 Statistical Brief 165. Agency for Healthcare Research and Quality.
- Stockholm, D. (2006). Retrospective study of reasons for improved survival in patient with breast cancer in East Anglia, earlier diagnosis or better treatment. *BMJ*,314:472-475.
- Yarbro, C.(2003). International nursing and breastcancer. Breast Journal; 9 (suppl2): S98–S100.47.