

Comments on Zohra Jabeen et al. (J Pak Med Assoc. Vol 71, No-9, September 2021)

Effect of health education on awareness and practices of breast self-examination among females attending a charitable hospital at North Karachi

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Madam, we have read the article, "Effect of health education on awareness and practices of breast self-examination among females attending a charitable hospital at North Karachi" (JPMA, Vol 71, No-9, September 2021) with support and agreement on the authors view that there is a growing need to disseminate practices that can play a role in decreasing the incidence and prevalence of not only breast cancer, but also other types of cancers. However, there are some equivocal points that require the attention and are hereby enlisted:

The introduction section couldn't give an idea about the magnitude of the research problem or an idea about the gap of knowledge the current study tried to cover. It couldn't address where knowledge is needed to advance, even the broad topic was not identified then narrowed down to the specific problem of study.

Regarding the research hypothesis, none was formulated however it ensures the entire research methodologies are scientific and valid moreover; helps to describe research study in concrete terms rather than theoretical terms.¹

The authors did not provide neither a rationale for selecting the study setting nor a selection procedure which may affect the generalisability of the results. Appropriate research setting selection and accurate description is crucial since the results and their interpretation may depend heavily on it.¹

Inclusion and exclusion criteria identify the study population in a consistent, reliable, uniform and objective manner.¹ These criteria may be confounders for the study outcome parameter. No inclusion or exclusion criteria for selecting the study sample were listed however having engaged in a previous educational programme could increase the participants' awareness and thus contaminate the results.

Piloting the data collection instruments was not done.

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Pilot study is a crucial element of a good study design and its conduction fulfil a range of important functions and can provide valuable insights for other researchers. Piloting would be important to test the clarity, applicability and time needed for filling in the instruments.¹

The validity testing of a data collection instruments is the degree to which it measures what it claims to measure. Reliability refers to the consistency of a measure in other words; whether the results can be reproduced under the same conditions.¹ The data collection instruments were not tested for both validity and reliability.

It would be better to make two sessions, one for the knowledge aspect and the other for practice. The allocated time for the educational session was only 05 minutes which is not enough for delivering knowledge part, display video, demonstrate and redemonstrate the needed skill.

Like any skill, breast self-examination needs a video to be with the study participants at home to be seen many times until mastering the skill like CD or sending the video through any social media program as the session would not be enough.

The monthly reminder of participants to perform breast self-examination was done at a fixed time for all of them regardless that some were at their fertility years and should perform the skill after their period end which might be 3 weeks after the phone call. It was better to make a group at any social media programme to facilitate communication.

As for the follow-up phase of data collection, nothing was mentioned regarding the way of meeting participants or the site of this meeting.

With reviewing the results and with considering "awareness" as a main study's variable; none was mentioned about educational contents delivered at the session like cancer breast, risk factor, signs, severity and value of early diagnosis. Such core contents should be measured at three points, first as a baseline, second immediately after the educational session and at finally at

the follow-up to test participants' retention.¹

No limitations were mentioned. The conclusion delivered the idea that participants experienced positive attitude regarding breast self-examination however attitude was not tested at all.

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Conflict of Interest: None.

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References

1. Polit, D.F. and Beck, C.T. (2017) Nursing Research: Generating and Assessing Evidence for Nursing Practice. 10th Edition, Wolters Kluwer Health, Philadelphia, 784 p. <https://doi.org/10.1016/j.iccn.2015.01.00>.