

Impact of cervical cancer counseling on the attitudes of fertile age women early detection in Padokan Lor Hamlet, Tirtonirmolo Village

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Abstract

Cervical cancer is the second most common cancer suffered by women in the world after breast cancer. In developed countries, the incidence of cervical cancer is around 4% of all cancer incidence in women, while in developing countries it reaches above 15% (Emilia, 2010). The purpose of this study was to determine the effect of cervical cancer counseling on the attitude of WUS to early detection (IVA) in Padokan Lor Hamlet, Tirtonirmolo Village. The type of research used is pre-experiment with the design of "one group pretest-posttest". Sampling using purposive sampling technique, the number of samples was 45 respondents. Bivariate analysis was carried out using the WoCoxon test statistical test. The results of Wilcoxon test obtained the value ($p = 0,000$) less than 0,05. Conclusion, there is an influence of cervical cancer counseling on the attitude of WUS to early detection (IVA) in Padokan Lor Village, Tirtnirmolo Village, 2015.

Keywords: *counseling, attitude, cervical cancer, IVA*

INTRODUCTION

Cervical cancer is the second most common cancer suffered by women in the world after breast cancer. In developed countries, the incidence of cervical cancer is about 4% of all cancer incidence in women, while in developing countries it reaches above 15%. The incidence of cervical cancer has decreased in the United States and Western Europe due to adequate allocation and health, good health promotion, and supporting prevention and treatment facilities (Emilia, 2010).

According to WHO, Indonesia is a country with the highest cervical cancer patients in the world. Cervical cancer ranks first of all cancer cases at 17.2% seen from the 1998 registration data of the Indonesian Doctors Association (IDAI) in 13 Indonesian hospitals. The highest prevalence of tumors / cancer is reported in the Province of DIY which is 9.6 per 1000 population. In other hand, the lowest in Maluku province which is 1.5 per 1000 population. The prevalence of tumors / cancers is generally higher in women, by 5.5 per 1000 population compared to men, by 2.9 per 1000 population (Rasjiidi, 2008). According to data from the Provincial Health Office of DIY the incidence of cervical cancer in 2012 was 1,185 people who were hospitalized and 694 people underwent outpatient care. Whereas in 2013 there were 1,025 hospitalizations and 434 outpatients (DIY Health ooffice, 2014).



Despite falling, it is still the highest compared to other regions in Indonesia. Human Papilloma Virus (HPV) infection is the main cause of most cervical cancer cases. HPV is found in 90-95% of cervical squamous cell carcinomas. HPV 16 and 18, resulting in more than 70% of cervical cancers in the Asia Pacific and the world. Meanwhile types 16, 18, 45, 52 and 31 are more causes of cervical cancer cases in Asia Pacific (Tilong, 2012). The prevalence of women against cervical cancer increases because of the tendency to marry at a younger age and the limitations of economic stability that make access to information and reproductive services limited (Purwati, 2008).

Recognizing the high level of cervical cancer in Indonesia, at the end of 2006 the Ministry of Health along with related professions had conducted a pilot project for early detection of cervical cancer in 6 districts. This policy is supported by the Decree of the Minister of Health of the Republic of Indonesia (Kepmenkes RI) Number 796 / Menkes / SK / VII / 2010 concerning Technical Guidelines for Breast Cancer and Cervical Cancer Control which are focused on women aged 30-50 years. In 2014 the Ministry of Health targeted 25 percent of regencies / cities in Indonesia to carry out early detection of cervical cancer with IVA and breast cancer with CBE (Clinical Breast Exam) (Depkes RI, 2010).

Early detection of cervical cancer is done using Visual Inspection method with Acetic Acid (IVA) and pap smear (smear method). National data states that the screening target in reducing morbidity and mortality due to cervical cancer is 85%. In DKI Jakarta has targeted the achievement of 1.4 million female residents to do early detection (IVA) of cervical cancer in 2017. And the average achievement of cervical cancer screening (IVA) from 6 regions (Medan, Padang, Palembang, Bandung, DIY, Surakarta) pilot projects especially DIY for the 5-year target are 11.64% (Aditama, 2010).

The wrong perception about cervical cancer is still a major obstacle in the effort of early detection of IVA. Indonesian people still perceive cancer as a deadly disease, a disease that is embarrassing, incurable and cannot be prevented and requires high costs for treatment. Reluctance of women to examine IVA due to embarrassment, doubts about the importance of the examination, and fear of feeling sick at the examination (Novel, 2010).

Increasing public awareness, it needs to be initiated with promotion and education efforts that must be done in the right personal way, and midwives are health workers who have the ability to do this one of them by the IVA method. Health facilities should also be provided which have a standard of early detection of cervical cancer, especially IVA examination (IBI, 2014).

Based on the results of a preliminary study carried out in Padokan Lor Hamlet in Tirtonirmolo Village on November 20, 2014 out of 10 mothers interviewed, 4 mothers said they did not do an IVA examination because they were embarrassed and thought the examination was not important if they did not show symptoms. Whereas the other 6 mothers considered that the IVA examination was taboo and mothers felt embarrassed to conduct an examination so they did not conduct an examination. Therefore, the authors are interested in conducting research on the effect of counseling on cervical cancer on the attitude of WUS in examining IVA in the village of Patuantor Tirtonirmolo-Bantul Village in 2015.

RESEARCH METHODS

The type of research used in this study was a pre-experimental study (pre-experiment design) with a design "one group pretest-posttest. Attitudes are measured before and after counseling. The number of population in this study there were 60 respondents. The sampling technique using purposive sampling technique is by taking samples in accordance with the criteria and obtained a sample of 45 respondents. This research instrument uses an attitude questionnaire about early detection of cervical cancer (IVA).

This research was conducted using the Wilcoxon test statistical test, which is included in the nonparametric test and used to test the comparative hypothesis of two paired samples if the data is ordinal. This test uses data collected from two interconnected samples, meaning that one sample will have two data. This design compares the average pretest and posttest mean of one sample. Provide an informed consent sheet before conducting research on the respondent then proceed with filling in the questionnaire by the respondent.

RESULTS AND DISCUSSION

Table 1. Distribution of attitude frequency before counseling

Attitude	N	%
Less	5	12,5
Enough	35	87,5
Good	0	0
Total	40	100

Based on Table 1 shows the attitude of WUS early detection of cervical cancer (IVA) before counseling (pre test) the majority have enough attitudes of 36 respondents (87,5%) and the least WUS who have less attitude of 6 respondents (12,5%).

Table 2. Distribution of attitude frequency after counselling

Attitude	N	%
Less	0	0
Enough	20	50
Good	20	50
Total	40	100

Based on the table shows the attitude of WUS early detection of cervical cancer after counseling (Post Test) the majority who have a good attitude of 20 respondents (50%) and enough 20 respondents (50%), while those who have the least attitude of 0 respondents (0 %).

Table 3. The effect of cervical cancer extension on attitudes was early detection (IVA)

Variabel	N	Mean rank	Sum of ranks	Z	P	
Attitude post test	Negative Ranks	0	0,00	0	-	0,00
	Positive Ranks	22	11,50	253	4,456	0
Ties	18		0			
Total	40					

Based on table 3, the attitude of WUS to early detection of cervical cancer (IVA) decreased, there was no attitude, while the attitude of WUS increased before and after counseling cervical cancer, there were 22 respondents and there were 18 respondents who had a fixed attitude before and after counseling cervical cancer. Wilcoxon Signed Ranks Test results obtained by the value of $Z = -4,456$ with a p value of 0.000. P is $0.000 < 0.05$ so it can be concluded that H_0 is rejected and H_a is accepted, meaning that there is an influence of cancer counseling on the attitude of WUS to early detection of cervical cancer (IVA) in Padokanlor Village.

The results of this study, there is a positive influence of cervical cancer counseling on the attitude of WUS to early detection of IVA cervical cancer in Padokan Lor Hamlet, Tirtonirmolo Village, Kasihan District, Bantul Regency. Health counseling is the addition of knowledge and ability of a person through learning practice techniques or instructions with the aim of changing or influencing human behavior individually, in groups and in society to be more independent in achieving the goals of healthy life (Depkes, 2007).

According to Azwar (2011), the attitude is influenced by factors such as the influence of others, namely the social components that influence a person's attitude and the influence of educational and religious institutions that have an influence on attitude formation because they both lay the foundation for understanding moral concepts in individuals. Understanding of good and bad, dividing lines of rules that may or may not be obtained are obtained from education and from religious centers and their teachings. This shows that counseling conducted by researchers succeeded in giving the influence of cervical cancer counseling on the attitude of WUS to early detection of cervical cancer (IVA). This is in accordance with Azwar (1983) in Machfoedz (2005) health education is a health education activity carried out by spreading the message, instilling confidence, so that the community is not only aware, knows and understands, but also wants and can make a recommendation that has to do with health.

The counseling provided was able to provide knowledge and information about cervical cancer to WUS who were given counseling so that it was expected that mothers would want to do an IVA examination as an early detection of cervical cancer and could improve reproductive health at WUS. The success of counseling is inseparable from a number of factors that are behind it, as stated by Notoatmodjo (2007) the success of a health education can be influenced by several extension factors, goals and counseling processes. The extension factor consists of careful preparation, mastery of material, convincing appearance, language used, use of LCD, use of images, use of leaflets. Target factor. consists of ages 20-35 years, education level is an average high school. Thus more information can be conveyed.

CONCLUSION

Based on the results of statistical tests that have been carried out by using the Wilcoxon Signed Rank Test, a significance value of 0,000 is obtained ($p < 0,05$), the Z value is -4.456 . From these results it is known that ($p < 0,05$), so it can be stated that there is a positive influence on cervical cancer counseling on the attitude of WUS to early detection of cervical cancer (IVA) in Padokan Lor Hamlet, Tirtonirmolo Village, Kasihan District, Bantul Regency, 2015.

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