Analysis of Factors Affecting the Participation women of childbearing age in Early Detection of Cervical Cancer

Mun Aminah [1]✉, I Made Sudana [2]

[1.] STIKES An Nur Purwodadi, Indonesia

[2.] Universitas Negeri Semarang, Indonesia

Abstract

Cancer disease is a disease with the highest prevalence in Indonesia. In the year 2013 increased to 114 patients and in 2015 a number 115 cervical cancer patients. Cancer often happens to childbearing-age women. The incidence of cervical cancer, in fact, can be suppressed by performing early detection. The purpose of this research is to know the effect of the counseling, husband's support and information source on early detection of cervical cancer and also the most dominant relative and effective contribution. This research is a quantitative research with cross sectional approach with random sampling technique using three predictor regression analysis. Population and sample in this research are the childbearing-age women in working area of Primary Health Survices Purwodadi I with 80 respondents by using random Sampling technique. The analysis that is used in this research is Regression analysis with 3 predictors. The result of F arithmetic is obtained that F table is based on dk denominator = 3 and dk denominator (80-3-1) = 76. For error level 5% = 2,74 because F count is greater than F table then the correlation coefficient tested is significant that dominant factor is husband's support. Relative contribution is 73,81% and effective contribution is 64,87%, counseling has 27,5% of relative contribution and 24,17% of effective contribution and information sources have -1,37% of relative contribution and -1,20 of effective contribution. The conclusion of the influence between husband support and counseling on early detection of cervical cancer

INTRODUCTION

Cervical Cancer is the highest type of cancer disease in Indonesia and the biggest cause of death in the world. There are 21 cases of cervical cancer occur in Indonesia every year that place Indonesia at the second rank as a country with the highest case of cervical cancer. Based on data from Dharmais Hospital, in 2012 cervical cancer patients, 86 patients detected as positive cervical cancers, in 2013 it increased to 114 patients and in 2015 increased to 115 people with cervical cancer.

Case data in the Province of Central Java from year to year showed a high figure, especially cervical cancer. Based on reports of health care agencies in Central Java, there are 1934 cases in 2013 and in 2014 there are 1213 cases and it is at the second rank in Indonesia with prevalence 8,06%.

The incidence of cervical cancer in the Regency of Grobogan increased from 17 patients in 2015 to 22 patients in 2016. The results of the research conducted by Ismarwati, et al in 2011 found that several factors that cause a woman do not do early detection; some of them are shame, worry / anxiety, feeling of unnecessary and fear of undergoing an early detection.

The results of the research conducted by Wahyuni (2013) concluded that husband support 3.05 times affect the early detection behavior of cervical cancer. 81.25% of respondents with good husbands support and 72.5% with good support from peers. The existence of support can improve the physical and psychological health of individuals with or without pressure. The purpose of this study is to determine the extent of influence of husband support and information sources on early detection of cervical cancer and most dominant relative and effective contribution.

METHOD

The type of the research used in this research was analytic correlation research with the cross-sectional approach. Population and samples in this study were childbearing age women who were in Public Health Services Purwodadi I work area, 80 respondents were selected by using purposive sampling technique. The analysis used in this research was regression analysis with three predictors.

RESULT AND DISSCUSSION

Table 1. Distribution Characteristics of Respondents

Characteristics	Frequency	Percentage (%)
Age (years)		
30-35	24	30.00
36-40	33	41.25
41-45	22	27.50
46-50	1	1.25
Education		
SD	7	8.75
SMP	19	23.75
SMA	35	43.75
University	19	23.75
Occupation		
Housewife	23	28.75
Labour	12	15.00
Farmer	15	18.75
Civil Servants	6	7.50
Entrepreneur	24	30.0
Husband's Occupation		
Labour	20	25.00
Farmer	17	21.25
Civil Servant	13	16.25
Entrepreneur	30	37.50
Total	80	100

Based on the results of the study, it is found that most respondents are 36-40 years old of 33 respondents and the least respondent is 45-50 years old of 1 respondent. This is in accordance with the theory of the Ministry of Health (2015) that cervical cancer is most common at the age of 30-45 years old, but it can also occur at the young age of 18 years old. At this age, women have begun experiencing a period of decreased hormonal levels and women

pay more attention to their health conditions. At that age women also still experience menstruation even though age is not in productive period, but the risk of cervical cancer at that age can still occur. Respondents are mostly housewives from middle to lower economic level. This can be seen from the occupation type of husbands who most of them are laborers and entrepreneur; this is in accordance with the results of research from Nurmana (2008) that cervical cancer occurs in low social groups. Based on the results of research from Chandana (2017) obtained the results that the prevalence of HPV infection in India most common in middle-aged women, low education level, early age during sexual intercourse and low socioeconomic status.

The Influence Of Counseling, Information Sources And Husband Support On Participation Of Childbearing Age Women To Do Early Cervical Cancer Detection Behavior

Table 2. Theinfluence of counseling, husband support and information sources on Early Cervical Cancer Detection Behavior

Variable		Total Counseling	Total Support	Total Information source	Eearly detection
Total Counseling	Pearson Correlation	1	.690**	.497**	.647**
	Sig. (2-tailed)		.000	.000	.000
	N	80	80	80	80
Total Support	Pearson Correlation	.690**	1	.595**	.634**
	Sig. (2-tailed)	.000		.000	.000
	N	80	80	80	80
Total Information source	Pearson Correlation	.497**	.595**	1	-.564**
	Sig. (2-tailed)	.000	.000		.000
	N	80	80	80	80
Eearly detection	Pearson Correlation	.647**	.634**	-.564**	1
	Sig. (2-tailed)	.000	000	.000	
	N	80	80	80	80

**. Significant correlation at the level of 0,01 (2-tailed)

The Influence Of Counseling On Participation Of Childbearing Age Women To Do Early Cervical Cancer Detection Behavior

Based on the results of research it is found that the respondents get counseling about early detection of cervical cancer of childbearing age women at Public Health Services Purwodadi I, respondents get counseling once, are 32 people (40.0%). Although only getting a one-time counseling, it has increased their knowledge about cervical cancer.

Counseling about early detection of cervical cancer can be given to the community in groups or individuals who usually are influencing the community to pay attention to what is delivered and expected by officers who provide counseling. Based on research from Finaninda (2016) entitled 'The Influence Of Health Education On Cervical Cancer On The Participation Of Women In The Examination Of Cervical Cancer' it is obtained the result of increased knowledge after health education about cervical cancer. Counseling does not only provide information but also provide activities that can make people more awareof making decisions about the health they experienced (Nursalam, 2008).

Counseling based on Piagam Ottawa (1986) in Soekidjo 2010 health promotion is a process to enable community efforts so that they are willing and able to maintain and improve their own health. The results show that 32 respondents (40%) of childbearing age women get counseling about cervical cancer once before finally doing the examination. This fact indicates that the counseling given by health professional can enrich respondents' knowledge about the importance of early detection of cervical cancer. According to Saraswati (2011) in research conducted on 58 respondents,it is found that health promotion can increase knowledge about cervical cancer and implementation of early detection of cervical cancer.

Based on the above table it is found that there is a positive correlation of 0.647 between counseling and early detection of cervical cancer. It means that the more often counseling

is given the greater chance to do early detection of cervical cancer will be. So it can be concluded that there is a positive relationship and the value of efficient correlation between counseling and childbearing age women participation in early detection of cervical cancer with the result r count is greater than r table.

According to Kharisma (2011) giving counseling in the form of health promotion by using media in any form can increase knowledge. According to Meliono (2007), the higher level of knowledge of a person, the more aware and healthy life behavior will be, including the participation of women in early detection of cervical cancer.

Based on the above results it can be concluded that the more often counseling about cervical cancer is given, the higher chance of childbearing age women to perform early detection of cervical cancer will be.

The Influence Of Husband's Support On Participation Of Childbearing Age Women To Do Early Cervical Cancer Detection Behavior

Based on the research results can be seen that most child-bearing age women at Public Health Services Purwodadi I get support from their husband to do early detection of cervical cancer, which are 41 people (51,2%). According to Dwikha (2014), the influence of social support from both husband or family and health professional show that it can improve the physical and psychological health of individuals with or without pressure.

Husband's support is the support that the husband provides for the wife, a form of support the husband can provide for example psychological assistance in the form of motivation, attention and acceptance. Husband's support is a helpful relationship that has special value for the wife as a sign of positive bonds. Husband's support will help the wife in gaining confidence and self-esteem as a wife. (Goldberger and Breznis, 1982).

Based on the above table,it is obtained that there is a positive correlation of 0.634 between husband support and early detection of cervical cancer. This means the greater the husband provides support, the greater chance the wife perform early detection of cervical cancer will be. Husband's support can be given in the form of motivation, permission, source of information, grant of examination fund and husband's willingness to accompany when the wife gets examined. Results of questionnaire analysis obtained data that the husband who supports the wife to perform early detection of cervical cancer is 41 people. The average husband provides support in the form of motivation /advice to the wife to perform early detection of cervical cancer. This can be seen from the relative contribution of 73.81% and the effective contribution of 64, 87%. While the support of the husband as an information provider is still lack. The role of the husband should be in a form of providing information either directly or indirectly about early detection of cervical cancer, so it will lead to motivation and awareness to the wife to perform early detection of cervical cancer (Klesia, 2016).

Husband's support can be in form of a psychological help either in the form of motivation, attention or acceptance. Husband's support and attention will help the wife gain confidence and self-esteem as a wife.

According to the results of questionnaires analysis,it is found that the most influence husbands' support on the implementation of early detection of cervical cancer is the support of finance, to fund early detection of cervical cancer. According to Mulyani (2013)the support of funds from husband will increase mother's confidence and feeling of beingloved and cared.

Based on the results of the above explanation it can be concluded that the more husbands provide good support, the higher the mother's motivation to perform early detection of cervical cancer will be.

The Influence Of Information Sourceon Participation Of Childbearing Age Women To Do Early Cervical Cancer Detection Behavior

Based on the above results it can be seen that the result of r count < r table is - 0,564 so it can be concluded that there is a negative relationship between information sources and

early detection of cervical cancer. This means that the more sources of information obtained, the less chance of women perform early detection of cervical cancer.

This is inversely related to the opinion of WHO. According to WHO, to change one's behavior, one of the ways is by providing information. Information sources provide about cervical cancer and its dangers; it will increase the level of knowledge that can affect one's behavior and attitude, in this case, is the participation of childbearing age women in implementing early detection of cervical cancer (Laras, 2009).

According to Soekidjo (2010), information source is a supporting factor that can increase one's knowledge. Information sources can be in the form of printed orelectronic media, leaflets, posters, television and verbal information. With the amount of information obtained, it is expected to affect women to make early detection of cervical cancer. Based on the results it is obtained that most respondents get information from more than 3 sources, so researcher assumes that the information sources obtained is good and able to affect childbearing age women to perform early detection of cervical cancer.

Sources of information in this study obtained the result that most respondents get information from magazines, brochures/leaflets, television, and internet while the information obtained from a healthprofessional is only in a small part. One of the things that cause communication to be ineffective is the communication process. Information sources can be obtained in several ways such as one-way information sources such as through printed and electronic media and two-way information source through counseling. The disadvantages of one-way information are: not giving satisfaction to the communicant, because the communicant does not have the opportunity to give a response or feedback, giving an authoritarian impression, can cause misunderstandings and unclear of information, that it can lead to prejudice, listeners can understand what is delivered by the speaker because the listenersdo not allow to

respond or give their response to the speaker, so the speaker does not know whether all the listeners understand the entire message or do not understand, although the listeners want to give a response, it is likely limited only for themselves, sometimes they do not care to what the speaker said because they feel bored (Yuliana, 2012).

Based on the results of the study, it is found that most respondents are 36-40 years old of 33 respondents. While the age of the respondent which is the least 45-50 years old age of 1 respondent. This is in accordance with the theory of Baughman (2004) that cervical cancer is most common in women at the age of 30-45 years old, but it can also occur at age as young as 18 years. At this age, women started experiencing periods of decreased hormonal levels and they pay more attention to their health conditions. At that age women also still experience menstruation even though they are not in a productive period, but the risk of cervical cancer at that age can still occur. Respondents are mostly housewives from middle to lower economic level. This can be seen from the occupation of husbands who are laborers and entrepreneur; this is in accordance with the results of research of Nurmana (2008) that cervical cancer occurs in low social class. It is related to nutrition and immunity.

Another factor that can cause information is not well received by the recipient of the information is the messenger media. Media must be tailored to the latest goals, objectives, benefits and information sources. It should also be considered the quality of the media used in accordance with the conditions and needs of the recipient of the message.

The media which is selected in the counseling process must fulfill the requirement; visible, interesting, simple, useful, accurate, legitimate, structure (VISUALS). The explanations of these terms are(1) Visible or easy to see, means that the media used must be able to provide legibility for others who see it, (2) Interesting, the media used must have the value of attractiveness. So that the viewer will be driven and encouraged to pay attention to the message presented through the media, (3)

Simple, the media used must also have the value of practicality and simplicity, so it won'tresultin in efficiency in learning, (4) Useful, the media used can be useful in achieving the expected learning objectives, (5) Accurate or correct, the selected media meet the characteristics of the material or learning objectives. in the other words the media is completely valid in process of making and its use in counseling, (6) Legitimate, media of information is designed and used for the benefit of counseling by the person or institution authorized, (7) Structure, it means learning media, either in process of making or use is an integral part of the material to be conveyed through the media (Putra, 2013).

It can be concluded that one-way communication has a negative impact that the information which is delivered can cause misunderstanding due to the absence of feedback between the speaker and the recipient of the information. It can be said the more sources of information about cervical cancer, the fewer childbearing age women perform early cervical cancer detection. In addition, the selection of selected information media must be tailored to the needs of the recipient of the information.

The Influence Of Counseling And Husband's Supporton Participation Of Childbearing Age Women To Do Early Cervical Cancer Detection Behavior

The result of F count is obtained that F table which is based on dk denominator = 3 and dk denominator (80-3-1) = 76. For error level 5% = 2,74 because F count is greater than F table then the correlation of coefficient tested is significant.

Based on the results of the calculation of the effective contribution and relative contribution obtained the results of counseling and support of husbands have positive support for the implementation of early detection of cervical cancer, while information sources have a negative effect on the implementation of early detection of cervical cancer.

According to research conducted by Nuur (2015), it said that the examination of early detection of cervical cancer was taken because of external factors such as counseling, husbands' support and information sources. So it can be assumed that those three factors can increase the willingness of respondents to perform early detection of cervical cancer.

The results obtained data that of the three variables tested in this study, the most dominant is husbands' support. It can be seen that the relative contribution of 73.81% and the effective contribution of 64.87%, are greater than other two factors. Husband's support is a support given to the wife in the form of psychological, such as motivation, attention, acceptance and financial support. Husband's support is helpful as a sign of positive bonds (Hasanah, 2014). Husband's support in this research which is the most influential is the husband willing to fund the examination of early detection of cervical cancer. According to the result of research, the smallest factor of influence is the source of information. The relative contribution data is 73.81% and the effective contribution is 64.87%. Based on the results,it can be assumed that the husband's support is the most influencing role in the implementation of early detection of cervical cancer. This is different from previous research by Sukamti (2013) which states that the most dominant factor in the implementation of early detection of cervical cancer is the knowledge factor, similar to the research conducted by Yudia (2010) the most dominant factor is knowledge of 71%.The results of this study are not in accordance with Green theory in Sukamti (2013) which says that the higher the education level of a person, the higher his or her knowledge will be, the higher the level of a person's knowledge the higher his or her awareness in changing behavior will be. However, with the support from other family members such as a husband who provides psychological, emotional, material support can affect the level of awareness of a person to perform early detection of cervical cancer.

CONCLUSION

There is a positive influence between counseling and husband's support on the implementation of early detection of cervical cancer.

SUGGESTION

Further study is needed to be conducted by doing research using variables that have not been revealed and using other methods.

REFERENCES

Ambarwati A. et al. 2016. Media leaflet, Video dan Pengetahuan Siswa SD Tentang Bahya Merokok 9 Studi pada Siswa SDN 78 Sabrang Lor Mojosongo Surakarta). Jurnal Kesehatan Mayarakat UNNES Vol 10. No 1,pp 7-13

Anggraini F D, 2013. Analisis Implementasi Program Deteksi Dini Kanker Servik Melalui pemeriksaan IVA (Inspeksi Viasual Asam Asetat) di puskesmas Wilayah Kota Surabaya. Jurnal Kesehatan Masyarakat UNDIP.pp.28-35

Dahlan, S., 2010. Besar Sampel dan Cara Pengambilan Sampel Dalam Penelitian Kedokteran dan Kesehatan, Jakarta: Salemba Medika.

Devkare V et all. 2017. CA Cervix Metastasising to the Abdominal Wall A Rare Case Repot. International Journal of Current Researchin Medical Sciences. Vol.3, No 6, pp.41-44

Dewi NMS, et all. 2013. Hubungan Tingkat Pengetahuan dan Sika[p Wanita Usia Subur dengan Pemeriksaan Inspeksi Visual Asetat (IVA) di Puskesmas Buleleng I. Jurnal Magister Kedokteran Keluarga Vol.1, No 1. pp.57-66.

Ekowati, D. et al. 2017. Hubungan Pengetahuan Dengan Persepsi Mahasiswa Dalam Penerimaan Vaksinasi HPV sebagai Upaya pencegahan Kanker Servik. Jurnal Kesehatan Masyarakat Volume 5, No.4.pp 334-341.ISSN : 2356-3346

Erniaty, W., & Handayani, O. W. K. 2017. Faktor Yang Mempengaruhi Keterlambatan Diagnosa Ca Serviks Penderita Masa Kuratif di Semarang. Public Health Perspective Journal Vol 2. No. 2. pp.111-116

Fadhila, E. D., Kuswardinah, A. and Rahayu, S. R. (2018) 'The Effect of The Perception of Unnes Public Health Study Program Students on Early Detection of Breast Cancer Using Bse (Breast-Self Examination). Public Health Perspective Journal, Vol.3 No.(1), pp. 38–44.

Fridayanti W, Laksono B. 2017. Keefektifan promosi Kesehatan terhadap Pengetahuan, Sikap dan Perilaku Tentang tes IVA Pada Wanita Usia Subur Usia 20-59 Tahun. Scientific Journal Of UNNES.pp.124-130

Finaninda. et al. 2015. Pengaruh Pendidikan Kesehatan Tentang kanker Servik Terhadap Keikutsertaan Pemeriksaan IVA (Inspeksi Visual Asetat) pada wanita Usia Subur (WUS) di Puskesmas Karya Mulia Pontianak. Jurnal Proners Vol 3 No 1

Gustina , Djanah SN. 2015. Sumber Informasi Dan pengetahuan Menstrual Higiene Pada Remaja Putri.Jurnal Kesehatan Masyarakat UNNES, Vol. 10, pp.147-152

Handayani ET, Ningtiyasari. 2014. Komitmen PUS Tentang Pelaksanaan Papsmear Untuk Mencegah kanker Servik DI Puskesmas Ngunut Kabupaten Tulungaggung. Jurnal Universitas Tulungaggung Bonoworo Vol. 2 No 1., pp 1-9.ISSN. 2339-0352

Holst S, et all. 2016. Cervical Cancer Screening in Greenland, 1997-2011 : Screening Coverage and Trend In The Incidence of High Grade Cervical Lesions. Jounal Elsevier Gynekology Oncology 143, pp.307-311.

Isni K.2016. Dukungan Keluarga, Dukungan Petugas Keseahtan dan perilaku Ibu HIV dalam pencegahan penularan HIV/AIDS Ke Bayi. Jurnal Kesehatan Masyarakat UNNES Vol.2, pp.xx-xx

Karisma larasati, L., 2011. Pengaruh promosi kesehatan terhadap pengetahuan tentang kanker serviks dan partisipasi wanita dalam deteksi dini kanker serviks. Jurnal Kesehatan UNS, pp.11-18

Kemenkes, R., 2015. Stop Kanker Informasi dan Pusat Data, ed., Jakarta Selatan.

Kusumawati Y, et all.2016. Pengetahuan, Deteksi Dini dan Vaksinasi HPV Sebagai faktor Pencegah Kanker Serviks Di Kabupaten Sukoharjo. Jurnal Kesehatan Masyarakat UNNES Vol 2 pp.204-213

Maharsie, L, Indarwati. 2012. Hubungan Pengetahuan ibu tentang kanker Servik dengan Keikutsertaan Ibu Melakukan IVA Tes Kelurahan Jebres Surakarta. Gaster, Jurnal Ilmu Kesehatan Vol 9 No 2. pp.1336–1344.

Meliasari, D.2015. Pengetahuan dan Dukungan Suami Terhadap pelaksanaan Pemeriksaan IVA Pada Pasangan usia Subur (PUS) di desa Sunggal Tahun 2014.Jurnal Ilmiah PANMED Vol 9 no 3, pp. 226-230

Mulyati S, et all. 2015. Pengaruh Media Film terhadap Sikap Ibu pada Deteksi Dini Kanker Serviks. Jurnal Kesehatan Masyarakat UNNES Vol 1. No. 1,pp.16-24.

Nursalam. 2008 . Konsep Dan Penerapan Metodologi Penelitian Ilmu Keperawatan , Pedoman Skripsi, Tesis, dan Instrumen Penelitian (edisi pertama). Jakarta : Salemba Medika.

Notoatmojo, S. 2007b. Promosi Kesehatan dan Ilmu Perilaku. Jakarta: Rineka Cipta.

Petersen,S, et all. 2018. Definitive Radiation Therapy for Cervical cancer: Nonwhite Race and Public Insurance Are Risk Factors for Delayed Completion, A Pilot Study . Journal Elsevier Gynecologi Oncology. pp. 102-105

Resa G A Lestari PK, Elisa. 2016. Faktor-faktor Keterlambatan penderita Kanker Payudara Dalam Melaksanakan Pemeriksaan Awan Ke Pelayanan Kesehatan. Jurnal Kesehatan Masyarakat UNNES.Vol 2.pp 56-68.

Rose, B.P.G. et al., 2017. Paclitaxel and Cisplatinas First - Line Therapy in Recurrent or Advanced Squamous Cell Carcinoma of the Cervix : A Gynecologic Oncology Group Study. , Vol.17. No. 9, pp.2676–2680.

Saraswati LK, 2011. Pengaruh Promosi Kesehatan Terhadap Pengetahuan tentang Kanker Servik dan partisipasi Wanita Dalam deteksi dini Kanker Servik. jurnal Kesehatan Keluarga. Universitas Negeri Surakarta

Sugiyono, 2010. Statistika Untuk Peneliian, Bandung: Alfabeta.

Sulistiowati, E. & Sirait, A.M., 2014. Pengetahuan Tentang Faktor Risiko, Perilaku Dan Deteksi Dini Kanker Serviks Dengan Inspeksi Visual Asam Asetat (Iva) Pada Wanita Di Kecamatan Bogor Tengah, Kota Bogor. Buletin Penelitian Kesehatan, Vol. 42. No. 3, pp.193–202.

Sukamti S. et al. 2013. Pendidikan Kesehatan dan Deteksi Dini Kanker Servik melalui Inspeksi Asam Asetat. Jurnal Ilmu dan teknologi Ilmu Kesehatan Vol 1 No. 1.pp 18-23

Try Umayana, H. and Hary Cahyati, W. (2015) 'Dukungan Keluarga Dan Tokoh Masyarakat Terhadap Keaktifan Penduduk Ke Posbindu Penyakit Tidak Menular Kesehatan Masyarakat, Vol.11. No.1, pp. 96–101. doi: 10.15294/. ISSN. 1858-1196

V Chandana, Gaguturu Rasheeda B, 2018. Prevalence and Determinants of High Risk Human Papiloma Virus in Hyderabad,India. International Journal of Reproduction, Contraception, Obstetri and Gynecology pp.1012-1018.

Wahyuni S. 2013. Faktor Yang Mempengaruhi perilaku Deteksi Dini Kanker Servik Di Kecamatan Ngampel Kabupaten kendal Jawa tengah. Jurnal kesehatan Maternitas. Vol 1 No.1.pp. 55-60