

## HEALTH PROMOTION ABOUT VIA TO INCREASING KNOWLEDGE RELATED TO CA CERVIX ON WOMEN

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### A B S T R A C T

Cervical cancer is the number 2 killer disease for women after breast cancer, and an estimated 270,000 women die each year. This is due to the insufficient knowledge of eligible women about cervical cancer, whereas cervical cancer can be detected through visual inspection of acetic acid (VIA) using 3-5% acetic acid. On the uterus' mouth's surface and in 1 minute in pre-cancerous lesions after being smeared, white patches called Aceto white epithelium are seen. This examination is very elementary does not require expensive costs. Of the 23 public health in Tanah Datar, Rambatan I health public, including those with little achievement in IVA screening. This study aims to determine the effectiveness of IVA health education on the knowledge of mothers of childbearing age couples about cervical cancer. Quasi-experimental research method with one group pre-test-post test design. The study was conducted in the kinawai sub-district health center in September 2019. The population was PUS mothers aged 15-49 years with a total sample of 33 people, random sampling. The instrument used was a questionnaire and analyzed by the Wilcoxon test. Univariate results are known to mothers' knowledge before health education means 19.30, and after health education means 22.55. The bivariate result is the effectiveness of IVA health education on understanding eligible women about cervical cancer ( $p = 0.0005$ ). It is expected that the staff of public health will provide health education to qualified women about early detection of cervical cancer through IVA.

## I. INTRODUCTION

Cervical cancer is abnormal cells in the cervix. Based on WHO data, cancer is the leading cause of death globally, where cancer is the second leading cause of death in the world by 13% after cardiovascular disease. Every year, 12 million people worldwide have cancer, and 7.6 million of them die. It is estimated that in 2030 the incidence can reach up to 26 million people, and 17 million dies from cancer, especially for poor and developing countries. The incidence will be faster (Ministry of Health, 2015).

In Indonesia, the prevalence of tumors/cancer is 1.4 per 1000 population. The highest cancer prevalence was in Yogyakarta (4.1%), followed by Central Java (2.1%), Bali (2%), Bengkulu, and DKI Jakarta with 1.9 per mile (Ministry of Health, 2015).

Cervical cancer is still the number two killer disease for women in Indonesia after breast cancer. Every day 40-45 women are diagnosed with cervical cancer. Of those diagnosed, about 20-25 died of cervical cancer. About 95% more cervical cancers are caused by infection with the HPV virus (Human papillomavirus) and an estimated death rate of 270,000 deaths each year. HPV infection is usually without symptoms, so that many people do not realize that they have cervical cancer. This is because there is still low awareness of early detection of their reproductive health, so that cervical cancer is the first killer disease for women in this country. It is even estimated that every 1 hour, one woman in Indonesia dies. Due to cervical cancer. Risk factors for cervical cancer are marriage at a young age, high sexual activity and frequent change of partners, poor hygiene of genital organs, women who smoke, history of venereal disease, frequent pregnancies, and the habit of using anti-septic soap (Samadi, 2010).

The government continues to improve cancer services employing control programs, early detection, and collaboration with the National Cancer Prevention Committee (NCPC). Cancer control programs with promotive and preventive efforts increase the public's knowledge about cancer prevention and risk factors, both through the media and community groups. The ministry is directly involved (Ministry of Health, 2015).

Therefore, knowing uterine cancer early needs to be anticipated, maybe even mandatory for women who are already stricken with pre-cancer, this deadly disease. Because knowing cervical cancer from an early age means that you have a huge chance to do prevention or self-medication because if it is known at an early stage, the healing can be 100%. After being infected with HPV, the effect will be felt after staying in the cervix for 10-20 years. So that women are unable to detect whether they are exposed to HPV or not. Even when it has mutated into cervical cancer, there are no typical symptoms or signs; symptoms will arise when cancer has reached stage 3, and the life expectancy is only 30% (Astrid Savitri, et al., 2015).

The IVA method (visual inspection of acetic acid) is a new alternative for early detection of cervical cancer, in addition to its benefits for detection of malignancy, evaluation of inflammation, identification of microorganisms, evaluation of hormonal cytosis, and further observation. The IVA methodology has long been known, but the unifying study that IVA is not too bad and easy to do was only carried out around 2004-2005. In Indonesia, the Indonesian Ministry of Health has also adopted the IVA method. A regional regulation has been issued in several Indonesian regions, which stipulates that an IVA examination will only cost five thousand rupiahs (Nuranna, 2008).

According to the West Sumatra Provincial Health Office (2016), an estimated 144,453 women aged 30 to 50 years in the province of West Sumatra must have an IVA check for cervical cancer. The head of the West Sumatra Health Office said that only 35,273 women were examined until now, or 24.42 percent. So that efforts are needed to find more to treat this disease because it has spread between three and 17 years—namely 4 to 5 percent. The highest achievement of the VIA examination was achieved by Payakumbuh, namely 223.72 percent of the set target, followed by Solok City with 111.76 percent, Padang City in third place, namely 72.16 percent. Tanah Datar was only 8.6% examined. The highest positive number was in the Mentawai Islands Regency with 11.11 percent, followed by Sijunjung 7.80 percent, Dharmasraya 7.96 percent, South Solok 6.82 Kota Pariaman 5.73 percent.

The West Sumatran provincial government has made various efforts through the health office, including as many as 171 out of 275 Community Health Center have been IVA training with both the state budget (APBN), regional budget (APBD), and BPJS health. The health office hopes that women who are sexually active and aged 25-49 years should be examined every three years. Meanwhile, women aged 50-64 years can be checked every five years. This examination is given free of charge. The first examination will save many lives because almost some cancers are found in conditions that have entered an advanced stage. The cure rate and life expectancy of cancer patients have not been as expected, even though cancer management has developed rapidly (Kasir, 2019).

That the most significant factor in the IVA examination is the community's ignorance, so it is necessary to make an effort, namely through counseling. The counseling aims to increase the knowledge of EFA mothers to understand cervical cancer, and the disease can be detected only in a simple way, namely utilizing detection through the IVA test. Extension techniques with the application of science and technology through lectures, discussions, and questions and answers. It is hoped that the public's knowledge after being given a course will increase knowledge and raise awareness for early detection of cervical cancer through the IVA test.

According to research by Miftah Furrahmi (2014) on the relationship between fertile-aged couples about the IVA method with early detection of cervical cancer in the work area of Padang Public Health, where 52.36 % were found to be highly knowledgeable, and 50.53 % had early detection of cervical cancer. It can be concluded that the knowledge of fertile age couples about the IVA method is associated with the early detection of cervical cancer.

The Tanah Datar district health office consists of 23 public healths, Public health spreading I including those with little IVA screening achievements in 2018. out of 2,692 the number of married women aged 30-50 years. Only 25 people have been screened, and from January to June 2019, the first health center, the screening achievement was 23 people (Dinkes Tanah Datar 2019). Rambat Public Health consists of 5 auxiliary Public Health; of the five public health assistants, the most fertile age couples are kinawai supplementary public health, amounting to 421 people.

Based on the initial survey on 20 June 2019, which was conducted in the auxiliary health center area. Researchers interviewed ten women of fertile age couples about their knowledge of the IVA method. 1 (10%) women (PUS) knew what the IVA method was and had already carried out early detection of cervical cancer using the IVA method. Five people just knew and did not want to do the examination. IVA because of fear and shame.

## II. METHODS

This research uses a quantitative approach. This type of research is a quasi-experimental or quasi-experimental research with a one-group pretest-posttest design.

The population in this study were 421 women of childbearing age who were married in the working area of Puskesmas Pembantu Kinawai. This study's sample was 33 respondents using nonprobability sampling techniques, namely purposive sampling.

This study's data collection measurement tool was a questionnaire sheet regarding women of childbearing age about the IVA test; as many as 25 questions were tested for validity and reliability first.

They were analyzed using the Shapiro Wilk normality statistical test with abnormally distributed data results and using the Wilcoxon test with a significance level of  $p < 0.05$  in bivariate analysis with SPSS 15 for Windows.

### III. RESULT

**Table 1.** The Effectiveness of IVA Health Education on WUS Knowledge about Cervical Cancer

Variable	N	Mean	SD	Mean rank	Sum of Rank	P-Value
pre test	33	19.30	3.670	15.00	435.00	0.001
Post test		22.55	1.121			

The results of the analysis of the level of knowledge of women with the IVA Test before and after cervical cancer, health education was carried out through counseling with the Wilcoxon test, p-value = 0.001. this means that there is the effectiveness of IVA Health Education on the knowledge of women with HIV about cervical cancer in the area of the Kinawai Auxiliary Health Center in 2019.

### IV. DISCUSSION

According to Maulana (2009), health education's objectives include making health something of value in society because it directs healthy ways of life to become people's daily life habits. It will help individuals be able to independently or in groups hold activities to achieve life goals fit. They were encouraging the development and proper use of existing health service facilities. Health education about the IVA test in this study was carried out through counseling. This counseling is carried out to convey the benefits of implementing the IVA Test. the IVA can detect pre-cancerous lesions (High-Grade Precancerous Lesions). It can be carried out at the first level of health service by trained officers. The costs required are relatively cheaper than the examination. others, such as the pap smear, do not require any tools/treatments other than a supply of acetic acid (vinegar), a speculum, and a light source (lamp/flashlight)

In line with Nisah et al.'s (2017) 's research results, they had an increase in attitudes before and after an average of 3.3 with the results of the t-test obtained p-value 0.000, which means that there is a significant effect on average. Average WUS attitudes regarding IVA test in the work area of Puskesmas Sukamerindu, Bengkulu City in 2017. Simultaneously, the research results conducted by Fridayanti (2016) note that from the difference between health promotion using leaflets and health promotion through motivation from community leaders in knowledge with a p-value of 0,000. Likewise, with the research results of Rusmiati & Silitonga (2018), it is known that based on the results of statistical tests with the Mc Nemar test, a p-value of 0.000 is

obtained, which means that health promotion activities carried out have a significant effect on knowledge.

According to the researchers' assumptions, from the research results obtained from research on health education's effectiveness, most of the knowledge after being given health education about the IVA test had increased. This significant increase was due to information sources, namely health education with targeted counseling, early detection of cervical cancer, and IVA tests. The respondents' knowledge increased in preventing cervical cancer for the better. But there are still 12% of respondents whose other experience is only 1 and 2 points, and there are 12% there is no difference in knowledge before and after IVA counseling. This could be because a person's knowledge is strongly influenced by the respondent's information, experience, and education. The results (output) expected from a health education are health behaviors or behaviors to maintain and improve health..

## V. CONCLUSION

There is the effectiveness of IVA Health Education on the Knowledge of PUS Women About Cervical Cancer in the Kinawai Community Health Center Area in 2019.

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