

Boosting Cervical Cancer Screening Through Knowledge and Attitude in Indonesia

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Abstract. Cervical cancer poses a significant health risk, especially for women aged 15-49, with high prevalence and mortality rates in Indonesia. Early detection is crucial but often hindered by a lack of awareness and unhealthy lifestyles. This study investigated the relationship between knowledge and attitudes towards early cervical cancer detection among women of childbearing age at the Mutiara Delta Clinic. Using a cross-sectional design, 30 respondents were sampled purposively and data were collected via questionnaires. Analysis with the chi-square test revealed a significant relationship ($p=0.022$) between knowledge and attitudes towards early detection. Enhanced knowledge and positive attitudes increased willingness for early detection, underscoring the need for health promotion initiatives and family support in improving screening uptake.

Highlights:

1. Significant relationship between knowledge and attitudes towards early cervical cancer detection.
2. Enhanced knowledge and positive attitudes increase willingness for early detection.
3. Health promotion initiatives and family support are crucial for improving screening uptake.

Keywords: Cervical Cancer, Early Detection, Knowledge, Attitudes, Health Promotion

Introduction

Cervical cancer is caused by a malignant tumor in the cervix area. Cervical cancer typically affects women of childbearing age between 15-49 years old. Therefore, women must take proper care of their intimate organs as they are very important, especially for women. Women of this age group also need to undergo early screening to avoid cervical cancer. However, cervical cancer remains a serious issue and requires public attention, particularly for women of reproductive age[1].

According to the World Health Organization (WHO), cervical cancer ranks second. In Indonesia, new cases of cervical cancer, according to Globocan 2022 data, amounted to 36,633 cases or 9.2% of the total cancer cases in Indonesia[1]. Data from the national central public hospital (RSUPN) Cipto Mangunkusumo Jakarta shows that 94% of cervical

cancer patients died within 2 years.[2] According to the Surabaya City Health Office, in 2020, cancer cases in Surabaya were relatively high, with 279 cases of cervical cancer. The study indicates that all women can be at high risk for cervical cancer regardless of age. One of the causes is an unhealthy lifestyle, such as smoking, early marriage, poor nutrition, and long-term contraceptive use. Women who are aware of the disease risk tend to make certain lifestyle changes to prevent the disease.[3]

A lack of knowledge leads to indifference towards reproductive health. Advanced stages of cervical cancer do not show early symptoms, causing women to be unaware of their condition until it is often too late for early treatment, leading to many deaths among women. Therefore, early detection of cervical cancer is necessary. If not done, there will be delays in diagnosis and treatment of advanced-stage cervical cancer, resulting in many cervical cancer patients dying, even though advanced-stage cervical cancer remains untreatable.[4]

Cervical cancer primarily affects women in the lower socioeconomic strata, one cause being limited access to information, reducing awareness of cervical cancer. Cervical cancer can be primarily prevented by avoiding risk factors and getting vaccinated. Secondary prevention involves screening tests to detect early changes in the cervix before cancer develops. One method of early detection of cervical cancer is through visual inspection with acetic acid (VIA).[5]

Attitude significantly influences early detection of cervical cancer. Attitude is a person's awareness of actual behavior and potential behavioral actions. Women of reproductive age with a positive attitude usually undergo cervical screening. The government provides cervical cancer treatment programs based on the Minister of Health Decree No. 29 issued in 2017 on breast and cervical cancer treatment. To address the increasing number of cervical cancer cases, promotive and preventive community services can be implemented. Advertisements can reach the public through print media, electronic media, social media, social and cultural gatherings, and religious assemblies. Meanwhile, preventive actions can include special protection, such as mass screening and early detection (Minister of Health Decree No. 29 of 2017). Additionally, another way to prevent HPV infection is by getting the HPV vaccine as a medical preventive measure. It is hoped that with increased public knowledge, especially among women,

they can change their lifestyle to be healthier and avoid other factors that cause cervical cancer, thus ensuring effective and efficient cervical cancer prevention.[6].

Method

This research method is a quantitative method with a cross-sectional approach. This study employs a correlational study aimed at determining the strength and direction of the relationship between the variables being investigated. The research was conducted on a population of women of childbearing age who visited the Delta Mutiara Clinic for examinations or as family planning (KB) acceptors. This study used 30 samples selected through purposive sampling and who met the research criteria, including women aged 15-45 years, able to read, and willing to be respondents. The instrument used in this study was a questionnaire, which was provided so that respondents only needed to select one option. The data were then analyzed using the chi-square test with SPSS.

Result and Discussion

Result

Based on the research conducted at the Delta Mutiara Clinic and Maternity Home, the research results are presented in the following table :

Table 1. Characteristics demographics Respondent (n=30)

Characteristics	Frequency (n)	Percentage (%)
Age		
15-19	2	6.7%
20-40	18	60%
41-45	10	33.3%
Education		
No School	0	0%
Education Base.	0	0%
Education JUNIOR HIGH SCHOOL	7	23%
Education SENIOR HIGH SCHOOL	18	60%
Education Tall	5	16.7%
Tota	30	100%

Based on table 1. States that part large (60%) respondents aged 20-40 years and some big (60%) educated SENIOR HIGH SCHOOL.

Table 2. Distribution Frequency Knowledge .

Knowledge	Frequency (n)	Percentage (%)
Good	22	73.3%
Enough	6	20%
Not enough	2	6.7%
Total	30	100%

Based on table. 2 state that part big (73.3%) respondents own knowledge Which Good about detection early cancer cervix .

Table 3. Distribution Frequency Attitude

Attitude	Frequency (n)	Percentage (%)
Positive	19	63.3%
Negative	11	36.7%
Total	30	100%

Based on table 3. state that respondents part large (63.3%) own attitude positive

Table 4. Analysis Connection knowledge to attitude detection early cancer cervix

Knowledge	Attitude		Total	P
	Positive	Negative		
Good	17 (77%)	5 (23%)	22	0.022
Enough	2 (33%)	4 (67%)	6	
Not enough	0 (0%)	2 (100%)	2	
Total	19	11	30	

Based on table 4. get is known that knowledgeable respondents Good part The majority (77%) behaved positive , whereas respondents Which knowledgeable not enough entirely (100%) own attitude Which negative . Based on bivariant test results show p value = 0.022 < 0.05 meaning exists connection between knowledge towards attitude in do detection early cancer cervix.

Discussion

The results of this study show a correlation between good knowledge and the formation of supportive attitudes toward early detection of cervical cancer. This research aligns with the theory discussed by previous researchers[7], that extrinsic motivation, or motivation obtained from external sources, is not only influenced by knowledge but also by other factors, such as encouragement to undergo early cervical cancer detection.

Knowledge is one way for individuals to understand and be willing to change, considering that early detection of cervical cancer is a preliminary preventive measure that can also serve as a means to prevent unhealthy daily habits.[8] Attitude refers to feelings of support (favorable) or lack of support (unfavorable). Negative attitudes tend to result in behaviors such as avoidance, dislike, and aversion to certain objects, while positive attitudes lead to approaching and liking specific objects.[9] Respondents' positive attitudes are due to their understanding of the benefits of early cervical cancer detection. Conversely, negative attitudes arise from a lack of understanding of the purpose and benefits of early detection. Attitudes are influenced by several factors, including personal experience, level of knowledge, and the influence of significant others, such as healthcare providers who offer health education. Knowledge plays a crucial role in shaping a person's attitudes and behaviors (overt behavior).[10]

The knowledge acquired by an individual significantly impacts their attitudes and actions, as people tend to have conformist attitudes aligned with their knowledge. Knowledge is a dominant factor in forming behavior. Attitudes are also shaped by cognitive components or knowledge. As explained in previous research, age and knowledge are dominant factors influencing women of childbearing age to undergo early cervical cancer detection.[11] Knowledge is a dominant factor in determining behavior because it creates a belief system that informs decision-making and shapes behavior towards specific objects.[12] Knowledge-based behavior tends to be more enduring than behavior not based on knowledge. Therefore, good knowledge should be accompanied by positive attitudes to facilitate the achievement of early cervical cancer detection goals and reduce cervical cancer cases.[13]

There are still many women of childbearing age with low knowledge and negative attitudes about early detection methods such as VIA (Visual Inspection with Acetic Acid), as observed in previous studies.[14] These studies also indicate that women of childbearing age with good knowledge and positive attitudes are more prevalent than those with poor knowledge. Factors such as education, experience, age, media, healthcare providers, or relatives can influence the knowledge and attitudes of women of childbearing age. Information provided by healthcare professionals can be delivered through outreach or health education, using various methods such as audiovisual aids, lectures, and leaflets.[15] Health education is an effective strategy for increasing knowledge levels and guiding the attitudes of women of childbearing age towards better health practices. Enhanced information dissemination can lead to improved knowledge, fostering awareness and positive attitudes towards early cervical cancer detection in line with the information received.[16]

This study demonstrates that knowledge significantly influences women of childbearing age to undergo early cervical cancer detection. Good knowledge supports positive attitudes, enabling individuals to easily obtain information. The level of understanding can determine women's attitudes towards behavioral change. Individuals with high levels of knowledge tend to have a more developed and logical mindset.

Conclusion

Conclusions of study This is There is connection knowledge with attitude woman age fertile to detection early cancer cervix. Good knowledge and positive attitude capable increase wishes and awareness For do detection early cancers cervix Because the more fast and early cancer detected so the more fast get handling beginning. For officer health expected increase promotion detection early cancer cervix to woman age fertile through approach family Because support family very important so that woman age fertile willing do inspection detection early cancer cervix.

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