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KNOWLEDGE AND MOTIVATION OF WOMAN IN REPRODUCTIVE AGE GIVEN HEALTH EDUCATION ABOUT EARLY DETECTION OF CERVICAL CANCER

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ABSTRACT

Background: *Cancer is a serious threat to public health because the incidence and its death rates is inarpasing to increase every year. Cancer of the cervix is one of the malignancies or neoplasms that occur in the cervix, which is the lowest part of the uterus that protrudes into the peak hole intercourse (vaginal). In to control cervical cancer, the government is targeting at least 80% of women aged 30-50 years old do early detection every 5 years. Early detection by using IVA (visual inspection with acetate acid) is not much known by the public One of the methods to expand the information about it is to provide health education wich can increase knowledge and motivation of woman in reproductive age to do for the early detection of cervical cancer. This study aimed to analyze the differences of knowledge and motivation woman in reproductive age before and after health education about cervical cancer early detection.*
Methode: *The study design used pre-experimentalpre-post test one group design with the intervention of health education. The population was all woman in reproductive in Sidomukti Village District of Semarang District Bandungan as many as 875 people. The Samples were 27 respondents using proportional random sampling technique. Measuring instrument used questionnaires. The data analysis used Wilcoxontest.*
Results: *The results showed thatthere caresignificantdifferences of knowledge and motivation of woman in reproductive age given before and after health education about early detection of cervical cancer in rural Sidomukti Bandungan district of Semarang district. which Wilcoxon test result showed* $p_{value} = 0{,}000 < \alpha\ (0{,}05)$.
Conclusion: *It is hoped than is more health education or disseminate information about early detection of cervical cancer with IVA (visual inspection with acetate acid) method. This can be done through the provision of information, such as counseling or providing information directly to the mother while visiting health facilities so that the incidence of cervical cancer can be lowered.*

Keywords: *Health education, Knowledge, Motivation, Cervical Cancer*

INTRODUCTION

Cancer is a serious threat to public health because of the incidence and death rates continue to increase from year to year. Because it is a major problem throughout the world where 12.5% of deaths caused by cancer, surpassing deaths from HIV/AIDS, Tuberculosis, and Malaria are merged into one [1]. Deaths due to cancer ranks second after death due to infection, cancer most commonly sufferers in the world, including Indonesia is a cancer of the cervix, breast, colon, nasopharynx, and lung. These cancers commonly known as the big five [2].

Cancer of the cervix is one of the malignancies or neoplasms that occur in the cervix, which is the lowest part of the uterus that protrudes into the peak hole intercourse (vaginal). Currently around the world is estimated at more than 1 million women suffer from cervical cancer and 3-7 million women have a high degree of precancerous lesions/high grade dysplasia [3]. How early detection of the simplest is IVA (visual inspection with acetate acid). By visual inspection after acetic acid or acetate shed 2% -5% in the cervix [4]. In cervical cancer control, the Government is targeting at least 80% of women aged 30-50 years of early detection every 5 years. The number of Indonesian women aged 30-50 years is approximately 35 million (35,950,765 people). Up to 2012 the number of women who had been screened by the method of IVA approximately 575.503 people. Showed as many as 25.805 people (4.5%) positive cervical cancer and cervical cancer suspected 666 people with a ratio of 1.2 per 1000. Scope This early detection can be improved with hard work, smart work, and innovation along the whole society [3].

Early detection efforts by way of an IVA(visual inspection with acetate acid) is not widely known by the public. One method to disseminate information about early detection is to conduct health education. Health information can be done with interactive lecture method is an effort that can be used in order to be able to guarantee an increase in knowledge, attitude and behavior change. This study aimed to analyze the differences of knowledge and motivation woman in reproductive age before and after health education about cervical cancer early detection.

METHODS

The study design used pre-experimentalpre-post test one group design with the intervention of health education. The population was all woman in reproductive in Sidomukti Village District of Semarang District Bandungan as many as 875 people. The Samples were 27 respondents using proportional random sampling technique. The dependent variable in this study is the knowledge and motivation of women of reproductive age and the independent variable is health education. The study was conducted in the Sidomukti Village District of Semarang because in these areas the incidence of cervical cancer is very high and the lack of knowledge about cervical cancer due to a lack of resources knowledge and education is very low. Calculation of minimum sample size was done using the difference between two test - to the 5% significance level, test the strength of 95% and a two-sided hypothesis test is calculated based on the formula of sample size. Topics to be used when the extension is on early detection of cervical cancer using IVA (visual inspection with acetate acid). Measurement of knowledge and motivation using a questionnaire, before doing the research questionnaire already tested the validity with characteristic the same place where the research. Classification of the value of knowledge and motivation with Low 0-55% categorization, Medium 56-75%, and High 76-100%. Measuring instrument used questionnaires. The number of questions either on the knowledge or motivation questionnaire was 15 items. The data analysis used Wilcoxontest.

RESULTS

Tabel 1. Frequency Distribution BasedKnowledge Women in Reproductive Age

Knowledge	Before Health Education		After Health Education	
	Frequency	Percentage	Frequency	Percentage
Low	14	51,9	3	11,1
Moderate	9	33,3	13	48,1
High	4	14,8	11	40,7
Total	**27**		**27**	

Tabel 2. Frequency Distribution Based Motivation Women in Reproductive Age

Motivation	Before Health Education		After Health Education	
	Frequency	Percentage	Frequency	Percentage
Low	18	66,7	2	7,4
Moderate	5	18,5	14	51,9
High	4	14,8	11	40,7
Total	**27**		**27**	

Table 3. Knowledge and Motivation Level Women in Reproductive Age before and after Given Health Education

Variabel	N	Mean Rank	Z	p-value
Knowledge pre education-post education	27	9,00	-4,025	0,000
Motivation pre education-post education	27	10,00	-4,065	0,000

*) performs by Wilcoxon's Test

Based on Wilcoxon's test was obtained p-value of 0.001. It is seen that the p-value 0,001 <α 0.05, this indicates that there is a significant difference level of knowledge women in reproductive age before and after given health education in the Village Sidomukti Bandungan District of Semarang District. The results of the Wilcoxon's test for motivation obtained p-value of 0.001. It is seen that the p-value 0,001 < α 0.05. this indicates that there is a significant difference level of motivation women in reproductive age before and after given health education in the Village Sidomukti Bandungan District of Semarang District.

DISCUSSION

Statistical analysis showed knowledge women in reproductive age before being given health education on early detection of cervical cancer with a lower category of 14 respondents (51.9%), moderate 9 respondents (33.3%), high 4 respondents (14.8%). While knowledge women in reproductive age after given health education on early detection of cervical cancer with a low category 3 respondents (11.1%), moderate 13 respondents (48.1%), high 11 respondents (40.7%). Thus women in reproductive age knowledge before and after health education about early detection of cervical cancer increased. Respondents had understanding on the definition, signs and symptoms, causes, prevention, treatment, understanding IVA(visual inspection with acetate acid) and benefit checks.

At the time of provision of health education there is a change of perception, so that respondents obtain new knowledge and experience. This is seen when the provision of health education, respondents seemed enthusiastic attention to the material provided. Given the attention it will bring a boost curiosity of self respondents who finally made the change in perceptions about the early detection of cervical cancer after a given health education. Curiosity is obtained due to the

stimulation of the provision of health education by way of interesting methods and languages easily understood by respondents [5].

Health education is a process where a person acquires the knowledge, capability and basic that makes them capable or not capable of being a member of a group. This understanding view of socialization as a learning process in which individuals learn and gain value from groups entered. The aim is to improve the knowledge women in reproductive age about early detection of cervical cancer is needed to establish a person's life in a society member.

Wilcoxon test results, obtained p-value of 0.000. It is seen that the p-value 0,000 < (0.05), this indicates that there is a significant difference women in reproductive age motivation levels before and after health education about early detection of cervical cancer in the Village Sidomukti Bandungan District of Semarang District. Lack of knowledge of mothers about early detection of cervical cancer by using an IVA(visual inspection with acetate acid) before getting health education due largely women in reproductive age had not received health education about early detection of cervical cancer. So the lack of this knowledge can have an impact on the lack of motivation to do the inspection IVA(visual inspection with acetate acid).

This study used the lecture method is a method that is easy to understand, to increase the motivation there are two ways or methods, the first using the direct method (Direct Motivation) where the direct method is to provide the material and non-material to the directly to meet the needs of a way to increase motivation. The second method of indirect (Indirect motivation) the provision of a facility or health facilities. Understanding already present women in reproductive age then cultivate an awareness to avoid cervical cancer. With these expectations respondents try to apply changes to act on yourself to get the desire to be achieved by starting with changes in self-motivation given after health education [5].

This is reinforced by the statement Fitriatul that the health education and health promotion is a form of intervention or efforts addressed to the behavior, so that the behavior conducive to health. In other words, the extension to strive for the behavior of individuals, groups and communities have a positive effect on maintaining and improving health.

CONCLUSION

There are significant differences between knowledge and motivation WUS before and after health education about early detection of cervical cancer by pvalue = 0,000 <α (0.05), with low knowledge category as many as three respondents (11.1%), while as many as 13 respondents (48.1%) and well as much as 11 respondents (40.7%), and low motivation categories as much as 2 respondents (7.4%), being as much as 14 respondents (51.9%) and well as much as 11 respondents (40.7%). It is hoped than is more health education or disseminate information about early detection of cervical cancer with IVA method. This can be done through the provision of information, such as counseling or providing information directly to the mother while visiting health facilities so that the incidence of cervical cancer can be lowered.

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