

LEVEL OF PREGNANT WOMEN'S KNOWLEDGE AND BEHAVIOR ON BREAST SELF-EXAMINATION (SADARI) AND ITS RELATIONSHIP WITH EARLY DETECTION OF BREAST CANCER

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ABSTRAK : TINGKAT PENGETAHUAN IBU HAMIL TENTANG SADARI DENGAN PERILAKU SADARI SEBAGAI DETEKSI DINI KANKER PAYUDARA

Latar Belakang : Data menurut WHO dari tahun 2019 sebanyak 58,256 kasus atau 16,7% dari total 348.809 dan di tahun 2020 sebanyak 396.914 kasus kanker, adanya peningkatan data kanker payudara di Indonesia dari tahun 2018 sebanyak 1,79 per 1.000 penduduk dan di tahun 2019 sebanyak 42,1 per 100.000 penduduk dan di tahun 2020 sebanyak 65.858 kasus kanker atau 30,8 per 10.000 penduduk yang terkena kanker payudara. adanya permasalahan mengenai ibu belum menyadari pentingnya melakukan SADARI karena kurangnya informasi mengenai SADARI, sebanyak 95% ibu hamil yang baru pertama kali mendengar tentang SADARI.

Tujuan : Mengetahui hubungan tingkat pengetahuan ibu hamil tentang SADARI dengan perilaku SADARI sebagai deteksi dini kanker payudara

Metodologi : Metodologi penelitian menggunakan *Observasional Analitik*, sample menggunakan *Total Sampling* sebanyak 40 ibu hamil. Instrumen yang digunakan adalah kuesioner dan Analisa bivariat menggunakan *Uji Chi – Square*

Hasil Penelitian : Diketahui bahwa ibu hamil dengan kategori pengetahuan kurang baik sebanyak 21 (52,5%). ibu hamil yang memiliki perilaku kurang sebanyak 23 (57,5%), Hasil analisa bivariat menunjukkan bahwa jumlah responden yang memiliki pengetahuan kurang baik dan memiliki perilaku kurang dengan jumlah sebanyak 14 orang (66,7%).

Kesimpulan : Ada hubungan yang signifikan antara tingkat pengetahuan ibu hamil dengan perilaku SADARI sebagai deteksi dini kanker payudara. ditunjukkan dengan uji korelasi chi square didapatkan nilai hasil Asymp sig (2 side) p-value yaitu 0,001 yang diartikan kurang dari 0,005, Ho ditolak Ha diterima

Saran : Pada ibu hamil diharapkan lebih meningkatkan lagi kepeduliannya terhadap kesehatan dan diharapkan lebih di tingkatkan lagi pengetahuan mengenai SADARI dan kanker payudara.

Kata Kunci : SADARI (Pemeriksaan Payudara Sendiri), Ibu hamil, Deteksi dini

ABSTRACT

Background: Data according to WHO from 2019 was 58,256 cases or 16.7% of the total 348,809 and in 2020 there were 396,914 cancer cases and an increase in breast cancer data in Indonesia from 2018 there was 1.79 per 1,000 population, in 2019 there was 42.1 per 100,000 population and in 2020 there was 65,858 cases of cancer or 30.8 per 10,000 population affected by breast cancer. and there a problem about the mother that hasn't realized the importance of doing BSE, lack information BSE,

Objective: To determine the relationship between the level of knowledge of pregnant women about BSE and BSE behavior as an early detection of

Methodology: The research methodology used was an Analytical Observation, the sample was total sampling of 40 pregnant women. The instrument used was questionnaire and bivariate analysis using the Chi - Square test

Results: It is known that the behavior of pregnant women with poor knowledge category was 21 (52.5%). results of the bivariate analysis showed that the number of respondents who had poor knowledge and had less knowledge were 14 people (66.7%).

Conclusion: There was a significant relationship between the level of knowledge of pregnant women with BSE behavior as an early detection of breast cancer. by chi square correlation test, the result value of Asymp sig (2 sides) p-value is 0.001. Ho is rejected and Ha is accepted.

Suggestion: Pregnant women are expected to increase their awareness of health and are expected to

increase their knowledge about BSE and breast cancer.

Keywords: BSE (Breast Self-Examination), Pregnant women, Early detection

INTRODUCTION

Changes in hormones during pregnancy can cause noticeable changes in the breasts. They may become more prominent and feel rubbery. Although many women tend to overlook these changes, it's crucial to detect any possible lump in the breast as early as possible. Unfortunately, many pregnant women are not aware of the importance of breast self-examination (SADARI). SADARI is a crucial first step in identifying any changes in the breast.

SADARI is an easy examination that every woman can perform to detect any abnormalities in the breast. The primary purpose of SADARI is to identify cancer at an early stage. Unfortunately, women are still less likely to undergo SADARI. (Dena, 2015)

Cancer is a leading cause of death worldwide. The most common type of cancer in women is breast cancer, which involves the growth of malignant tumors in fatty and connective tissues. Breast cancer often presents as a hard, irregular lump on the outside of the breast. (Lubis, 2017)

According to the World Health Organization's Global Cancer Observatory 2019 data, breast cancer is the leading cause of cancer, accounting for 16.7% of the total 348,809 cases, with 58,256 cases reported. In 2020, there were as many as 396,914 cancer cases. (WHO, 2020)

Based on the Basic Health Research (Riskesdas) conducted in Indonesia, the prevalence of cancer in 2018 was 1.79 per 1,000 population. In 2019, there was an increase to 42.1 per 100,000 population. Furthermore, in 2020, there was a significant increase in the number of cancer cases, with a total of 65,858 cases reported, which translates to 30.8 cases per 10,000 population. (Kemenkes RI, 2019)

It is estimated that the number of breast cancer cases in the province of Banten has increased from around 347,000 people in 2017 to 2,252 people in 2018. It should be noted that the incidence of breast cancer can increase with age, and even young individuals are not guaranteed to be exempt from this disease. (Riskesdas, 2018)

Pregnant women have not been aware of the significance of performing SADARI early on, hence lacking the motivation to do so. Several factors contribute to women's reluctance to perform SADARI, including fear of the disease they may have

and insufficient support from their partners, friends, and family. (Bashirian, *et al*, 2019)

The SADARI technique is a simple and inexpensive way to detect breast cancer early without requiring any complicated equipment. However, many pregnant women are not aware of its importance due to a lack of information and motivation to learn more about it. Furthermore, SADARI may also feel unfamiliar and uncomfortable to some, with up to 95% of women being unfamiliar with it when they first hear about it. (Anggrayni, 2017)

The reason for the low participation of Indonesian women, particularly pregnant women, in performing SADARI is the lack of information. This lack of awareness results in pregnant women not performing SADARI and not realizing the impact of not doing so. Failing to understand the importance of performing SADARI can lead to the detection of breast cancer at an advanced stage, which can be life-threatening. (Setiawan, 2012)

Breast cancer is a common disease that often leads to death. However, if the symptoms are detected early, the chances of curing it increase dramatically. To prevent breast cancer, adopting a healthy lifestyle and performing regular self-examination (SADARI) can be effective measures. (Monty, P.S & Aksan, H, 2012).

Due to the significant prevalence of breast cancer and its consequential impact, it is crucial to take measures such as providing public health counseling, as mandated by the Minister of Health Regulation No. 34 of 2015, which focuses on breast cancer prevention through early detection methods, such as breast self-examination (SADARI). (Kemenkes RI, 2015)

According to the research conducted at BPM Tati Karwati, there are some weaknesses in the counseling of breast self-examination (SADARI) and breast cancer awareness. This has resulted in a lack of awareness among pregnant women. Many of them are still unaware of the importance of SADARI and don't perform it regularly. On the other hand, the research has also highlighted some strengths. For instance, it has provided valuable knowledge about breast self-examination and early detection of breast cancer by distributing informative leaflets among mothers. This has been helpful for those who were not familiar with the SADARI techniques.

RESEARCH METHODS

The study used observational analytic research with a cross-sectional approach. The population consisted of 40 pregnant women who attended BPM Tati Karwati Tangerang. Total sampling was employed, meaning all pregnant women were included in the study. The research was conducted at BPM Tati Karwati Tangerang using a questionnaire as the research instrument. Bivariate analysis was performed using the Chi-Square statistical test.

RESEARCH RESULTS

Univariate Analysis

Table 1
Frequency Distribution of Respondent Characteristics at BPM Tati Karwati

Respondent Characteristics	Frequency	Percentage
Age		
20-35 years old	28	70,0
>35 years old	12	30,0
Parity		
Primipara	25	62,5
Multipara	15	37,5
Education		
Low	17	42,5
High	23	57,5
Occupation		
Unemployed	24	60,0
Employed	16	40,0

Table 1 shows the results of a survey conducted on the characteristics of respondents. The categories are based on age, parity, education level, and occupation. According to the data, the highest number of respondents, 28 people (70.0%), belong to the age group of 20-35 years. In terms of parity, the Primipara group has the most significant number, with a total of 25 people (62.5%). When considering the respondents' education level, 23 people (57.5%) have higher education (SMA-PT). Finally, the group with the largest number of respondents (24 people, 60.0%) is the one who is not currently working.

Table 2
Frequency Distribution of Respondents' Knowledge about SADARI at BPM Tati Karwati Tangerang in 2021

Knowledge Level	Frequency	Percentage
Poor	21	52,5
Good	19	47,5

According to Table 2, the level of understanding among pregnant women regarding SADARI as an early detection technique for breast cancer at BPM Tati Karwati Tangerang was poor for the majority of participants. Out of the total respondents, 21 people (52.5%) had poor knowledge, while 19 people (47.5%) had good knowledge.

Table 3
Frequency Distribution of SADARI Behavior regarding early detection of breast cancer at BPM Tati Karwati Tangerang in 2021

SADARI Behavior	Frequency	Percentage
Poor	23	57,5
Good	17	42,5

According to Table 3, out of the total number of pregnant women surveyed, only 17 people (42.5%) demonstrated good SADARI behavior, while 23 people (57.5%) had poor SADARI behavior. This indicates that the majority of pregnant women have inadequate SADARI behavior. However, it is worth noting that even though the number of respondents with poor SADARI behavior is higher, a significant number of respondents, specifically 17 people (42.5%), displayed good SADARI behavior.

Bivariate Analysis

Table 4 above shows that 14 respondents (66.7%) have less knowledge and less behavior. The chi-square test analysis resulted in a p-value of 0.001 (p-value<0.005). This indicates that the null hypothesis (Ho) is rejected, and the alternative hypothesis (Ha) is accepted. Therefore, it can be concluded that there is a significant relationship between pregnant women's knowledge and their behavior in performing SADARI as an early detection of breast cancer at BPM Tati Karwati Tangerang in 2021.

Table 4
The Relationship Between Pregnant Women's Knowledge and SADARI Behavior for Early Detection of Breast Cancer at BPM Tati Karwati Tangerang in 2021

Knowledge Level Category	SADARI behavior						P-Value f (%)
	Good		Poor		Total		
	f	%	f	%	f	%	
Good	16	84,2	3	15,8	19	100	0,001
Poor	7	33,3	14	66,7	21	100	

DISCUSSION

Univariate Analysis

Respondent Characteristics at BPM Tati Karwati

According to the univariate analysis, the survey respondents can be classified based on various characteristics such as age, parity, education level, and occupation. Among these, the highest number of respondents, i.e., 28 people (70.0%), fall into the age group of 20-35 years. In terms of parity, the Primipara group has the most significant number of respondents, with a total of 25 people (62.5%). Similarly, the respondents with higher education (SMA-PT) are the largest group, with 23 people (57.5%). Finally, among the occupation categories, the non-working group has the most significant number of respondents, with 24 people (60.0%).

Age, occupation, and education influence respondents' characteristics. High education and work broaden experience. As people age, they tend to gain more experience. This is in line with the findings of Rizky Hafidzah's 2017 research on SADARI knowledge and behavior. The study revealed that 142 (67.9%) of the respondents were aged between 20-21 years, and 91 (43.6%) had a higher education. Additionally, 30 (60.0%) of the respondents belonged to the primipara category.

It is assumed by researchers that mothers aged between 20-35 years find it easier to absorb information than mothers aged over 35 years. Mothers with higher education tend to get more information from social media or seminars they attend. First-time mothers, also known as primiparous mothers, tend to know less about SADARI as they have never given birth before and are rarely educated about it. They may also be afraid to do SADARI as they have never tried it before. Working mothers tend to get more information as they use social media or get information from their colleagues at work, compared to non-working mothers.

Pregnant Women's Knowledge about SADARI

After conducting a univariate analysis, it was found that 19 pregnant women (47.5%) had good knowledge, while 21 (52.5%) had poor knowledge.

According to Budiman and Riyanto (2013), several factors influence knowledge. These include an individual's age, education level, and exposure to information. Higher education can broaden one's experience and lead to better knowledge. Similarly, as a person grows older, their experience tends to increase. The more sources of information a person has access to, the better their knowledge, attitude, and behavior become.

This is in line with the research conducted by Rizky Hafidzah in 2017. There is a significant relationship between SADARI knowledge and SADARI behavior. The study found that a majority of the respondents (24.9%) had insufficient knowledge about SADARI. The analysis revealed a p-value of 0.003 (<0.005), thereby confirming the significant association between SADARI knowledge and SADARI behavior.

The researcher believes that a lack of knowledge may affect a mother's behavior, leading to a lack of motivation to undergo SADARI examination. On the other hand, if the mother has good knowledge about SADARI, she will be more aware of its importance and will be motivated to undergo it as an early detection measure for breast cancer.

SADARI Behavior Among Pregnant Women

According to the univariate analysis, 23 pregnant women (57.5%) exhibited poor behavior while 17 (42.5%) had good behavior. SADARI behavior is a self-examination method to detect breast cancer. Human behavior refers to actions like walking, talking, laughing, crying, working, writing, and reading.

This is in line with the study conducted by Rizky Hafidzah in 2017. There is a correlation between SADARI knowledge and SADARI behavior. The study revealed that out of the respondents, 104 individuals (49.8%) exhibited poor behavior towards SADARI, while only 14 individuals (6.7%) demonstrated good behavior.

The researcher assumes that mothers may exhibit poor behavior towards SADARI due to a lack of information. However, if they are provided with

more information about SADARI, their behavior is likely to improve and they will be more motivated to perform SADARI.

Bivariate Analysis

According to Table 4, out of all the respondents surveyed, 14 people (66.7%) showed poor knowledge and poor behavior. After analyzing the data using the chi-square test, the p-value was found to be 0.001, which is less than the significance level of 0.005. This indicates that the null hypothesis (Ho) can be rejected and the alternative hypothesis (Ha) can be accepted. Therefore, it can be concluded that there is a significant relationship between the knowledge level of pregnant women and their behavior towards SADARI as early detection of breast cancer at BPM Tati Karwati Tangerang in 2021.

Behavior can be defined as the actions or activities of a living organism. It is observed from a biological perspective, as all living things, including plants, animals, and humans, exhibit behavior through their own activities. Human behavior encompasses a wide range of actions and activities, such as walking, talking, laughing, crying, working, writing, reading, and many more. In essence, human behavior refers to all activities and actions performed by humans, whether they are visible to others or not. (Notoatmodjo, 2014).

This is in line with Rizky Hafidzah's 2017 research on SADARI knowledge and behavior, which found that the majority of respondents (24.9%) had insufficient knowledge about SADARI. Furthermore, almost half of the respondents (49.8%) exhibited negative behavior towards SADARI. The analysis showed a p-value of 0.003 (<0.05), indicating a significant relationship between SADARI knowledge and behavior. This means that having knowledge about SADARI is important in promoting positive behavior towards breast self-examination.

The researcher assumes that mothers with poor knowledge will have negative behavior towards SADARI examination, while mothers with good knowledge will have positive behavior.

CONCLUSION

- 1) The majority of participants (52.5%) of pregnant women at BPM Tati Karwati Tangerang had poor knowledge about SADARI.
- 2) The majority of participants (57.5%) of pregnant women at BPM Tati Karwati Tangerang had poor SADARI behavior.
- 3) At BPM Tati Karwati Tangerang in 2021, there is a significant relationship between pregnant women's knowledge level and SADARI

behavior. The chi-square correlation test shows a p-value of 0.001, indicating a strong correlation.

SUGGESTIONS

Pregnant women should increase their awareness and knowledge about SADARI and breast cancer to practice it correctly and regularly.

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