# Journal of Universal Community Empowerment Provision

Vol. 2, Issue 2, 2022

Page 39-44

DOI: https://doi.org/10.55885/jucep.v2i2.165

# Women's Reproductive Health for Housewives in the Work Area of the Passo Health Center, Ambon City

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Abstract. Reproductive health for housewives in the work area of the Passo Health Center is carried out based on problems from the partner group, namely low knowledge and minimal information about women's reproductive health, especially cervical cancer and breast cancer as well as skills in practicing or performing the BSE method resulting in low awareness of the importance women's reproductive health, this is shown through the low behavior of early detection carried out by housewives both the IVA test for early detection of cervical cancer and the application of the BSE method for early detection of breast cancer. With the aim of increasing the knowledge, skills and health of housewives in the target group regarding reproductive health, especially cervical cancer and breast cancer as a prevention effort. As well as increasing the knowledge of mothers about basic clinical information on cervical cancer and breast cancer, methods of detection as prevention and treatment methods, the number of mothers who are detected and can be treated. The solutions applied to the above problems are (1). Counseling to increase the knowledge of housewives about women's reproductive health (cervical Ca and breast Ca); (2). perform early detection of cervical cancer and early detection (screening) of breast cancer. The method used for the implementation of the solution is (1). Lectures, questions and answers and discussions both audio (sound) and visual (pictures and video) to increase mothers' knowledge about women's reproductive health; (2). Visual inspection method with acetic acid, also known as visual inspection with acetic acid (IVA test) for early detection of cervical cancer in housewives of the target group; Evaluation is carried out for each implementation of activities to encourage understanding of housewives to behave healthily towards reproductive health.

Keywords: Iva, Realize, Cervical Cancer, Breast Cancer, Women's Reproductive Health

Received: August 19, 2022 Received in Revised: September 3, Accepted: September 17, 2022 2022

#### **INTRODUCTION**

Reproductive health problems, especially women's reproduction, continue to increase from year to year. The 2020 Global Burden of Cancer (GLOBOCAN) on cancer incidence and mortality produced by the International Agency for Research on Cancer pointed out that female breast cancer has overtaken lung cancer as the most frequently diagnosed cancer, with an estimated 2.3 million new cases (11.7 %) with an estimated mortality (6.9%). Death rates for female breast and cervical cancer are much higher in transitional countries. According to Hanna & Kangolle (2010) efforts to build a sustainable infrastructure for the dissemination of cancer prevention measures and the provision of cancer care in transition countries are essential for global cancer control.

ISSN: 2776-1142 (online) ISSN: 2776-1134 (print)
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Bray et al (2018) states that countries in Asia have the largest contribution to cancer cases worldwide, this could be because some countries with large populations such as China, India and Indonesia are in Asia.

Nationally, breast cancer and cervical cancer are the most reported main types of cancer. Based on data sourced from the Dharmais Cancer Hospital in 2018, it showed that the most cases of cancer were breast cancer at 19.18% and cervical cancer at 10.69%. where this type of cancer also has better early detection coverage than other types of cancer. Various efforts have been made by the government through the Ministry of Health. One of the preventive efforts that have been carried out is screening through the Acetic Acid Visual Inspection (IVA) method, pap smear, and clinical breast examination (Sadanis) (Azriful et al., 2022). The screening effort is one of the prevention efforts carried out for women aged 30-50 years (Aoki et al., 2020). Based on data on the percentage of cervical and breast cancer early detection examinations in women aged 30-50 years in Indonesia until 2018 it shows that the largest percentage is the Bangka Belitung Islands province, namely 25.42% with a national average percentage of 7.34%, for Maluku province by 7.10%, this shows that in Maluku province there is still a need to improve early detection of breast cancer and cervical cancer for women as an effort to prevent and control cases of breast cancer and cervical cancer in the community (Realita & Aisyaroh, 2022).

The Passo Health Center is a partner of the Community Partnership Program (PKM) which is categorized as economically unproductive with a working area of 9000 m2, the number of villages is two with latitude coordinates -3.736072 and longitude 128.250977 located in Passo Village Teluk Ambon Baguala District with a distance from the Campus of the Indonesian Christian University Maluku to Passo Village is 16.6 km, has supporting facilities such as 3 Pustu buildings, 4 buildings Poskesdes, 12 groups of elderly Posyandu, 33 groups of UKBM Posyandu KIA consisting of 12 middle schools and 5 status full moon. The target group for this community service activity is housewives who are members of a women's group (alliance group) in the congregation (women's group service area) (community fellowship) Passo Anugerah, Passo Village, Teluk Ambon Baguala District. Passo Village consists of 13 RWs and 63 RTs with the type and classification of the village being independent, with a total population of 20,852 people. Based on data from the Passo Health Center, the number of WUS (women of childbearing age) was 4519 people with the number of PUS (couples of childbearing age) totaling 3129 people. For IV tests and breast Ca, no examination of this condition could raise women's reproductive health problems in Passo Village.

Based on the results of interviews and direct observation of partners, several priority issues were obtained, including the lack of knowledge of housewives in the target group about women's reproductive health, especially cervical cancer and breast cancer, the IVA test had never been carried out as an early detection of cervical cancer for housewives target group, there has never been early detection of breast cancer with the BSE method and the lack of skills of the target group's housewives in carrying out the BSE method.

This service activity is more targeted at non-productive communities with the aim of increasing the knowledge, skills and health of housewives in the target group in partner work areas related to reproductive health, especially cervical cancer and breast cancer as a prevention effort (Yeung, 2015). The objectives to be achieved from making this program are as follows; (1) Increased knowledge of housewives about women's reproductive health, especially cervical cancer and breast cancer including; basic clinical information on cervical cancer and breast cancer, methods of detection as a means of prevention and treatment; (2) Improving the skills of housewives to carry out the BSE method (Breast Self-Examination) as a form of early detection of breast cancer regularly and continuously properly and correctly and the number of mothers who are detected or confirmed to have breast cancer early and can be treated based on the number screening ones; (3) Examination (srenning) Iva Test and Realize to housewives by health workers (midwives) community service partners.

#### **METHODS**

## **Preparation Of Activities**

The first preparatory activity carried out was an application for a permit to carry out the activity and determining the location of the community service activity which was carried out at the GPM Jati Church by bringing a letter of implementation of the activity to the Chairperson of the GPM Passo Congregational Council, then coordinating with the Midwife for the Mother and Child Health Program as a Resource Person and the Health Examiner Team reproduction of women, preparation for the implementation of socialization which will take place on 24 September 2022.

# **Implementation of Activities**

The Women's Reproductive Health service for housewives in the Work Area of the Passo Health Center, Ambon City, was carried out on Saturday, September 24, 2022, from 09.00 - 13.00 WIT. This activity was attended by 20 participants (attendance list attached). In general, this socialization activity uses material presentations by resource persons and discussions and questions and answers for socialization participants. The schedule of activities is as follows:

# **Deployment of Pre Test and Post Test**

The distribution of pretest and posttest aims to measure the level of public knowledge before and after the socialization given by the informants in the hope that there will be an increase in the knowledge of housewives about the importance of cervical cancer prevention and breast self-examination so that prevention efforts can be carried out properly.

## **Response of Training Participants**

Participants were very enthusiastic about participating in the training, especially when the discussion session opened on the causes of cervical and breast cancer and early detection for housewives. The resource person answered all the questions raised along with solutions that could be implemented to solve the problems faced by marine fisheries as well as public knowledge about early detection of breast and cervical cancer. Submission of material is carried out using language that is simple and easy for participants to understand, so that training and discussions run smoothly and hit the desired goals and objectives.

## **Feedback from Participants**

This feedback is the most important part of socialization on Women's Reproductive Health for housewives whose aim is to find out the extent of participants' understanding and assessment of the training material provided (Barker et al., 2010). This feedback will be used as evaluation material for service implementers to develop the following service plans.

In this feedback session, each participant was asked to convey his impressions and messages represented by the pastor of the GPM Passo Congregation who gave a positive response, where the material presented added to the insight and knowledge of housewives

#### **RESULTS AND DISCUSSION**

The reproductive health Community Partnership Program (PKM) activities for housewives in the Passo Health Center work area were carried out on September 24 2022 at the Jati GPM Passo Church. The target group for this community service activity is housewives, totaling 20 people who are members of a women's organization (alliance group) in the Passo Anugerah congregation, Passo Village, Teluk Ambon Baguala District. The aim of the activity is to increase the knowledge, skills and health of the target group of housewives regarding reproductive health, especially cervical cancer and breast cancer as a prevention effort (Brownstein et al., 1992). Breast cancer and cervical cancer are diseases that can be prevented and controlled by means of early detection, several methods that can be carried out by a woman as a form of early detection of breast cancer are the Breast Self Examination (BSE) method and screening using the Inspection method. Visual Acetic Acid (IVA) as a form of early detection for

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| 41

cervical cancer (Muhith et al., 2020). As a result of this community service activity, 20 housewives received socialization about the importance of early prevention of cervical cancer and breast cancer by health workers at the Passo Health Center as PkM implementation partners while also carrying out VIA examinations and examinations by trained midwives. With this PkM activity, more comprehensive and sustainable efforts are needed to prevent cervical cancer and breast cancer with the BSE method as part of increasing health coverage for women of childbearing age in the work area of the Passo Health Center and increasing screening for women's reproductive health for risk groups.



Figure 1. Cervical and Breast cancer outreach activities by PkM partners

Source: 2022 PkM Team Documentation

In the socialization activity the participants were willing to fill out the pretest and posttest questionnaires and the results of the analysis can be seen in the table below: Differences in knowledge about understanding, causal factors and prevention of cervical cancer and breast cancer before being given socialization to housewives in the Passo Congregation in the working area of the Passo Health Center can be seen in the pretest and posttest diagrams below.

# **Pre-test Diagram**

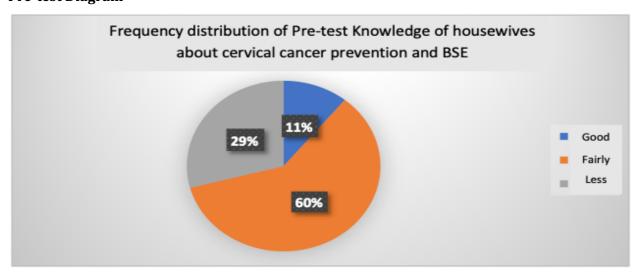


Figure 2. Frequency Distribution Level of knowledge of housewives about cervical cancer prevention and BSE in the work area of the Passo Health Center

Source: Primary Data, 2022

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Diagram 1 shows that at the pretest before socialization, most of them had sufficient knowledge, namely 12 respondents (60%) about women's reproductive health.

## **Post-test Diagram**

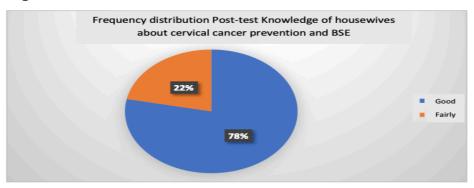


Figure 2. Posttest Frequency Distribution Level of knowledge of housewives about cervical cancer prevention and BSE in the working area of the Passo Health Center

Source: Primary Data, 2022

Diagram 2 shows the Posttest after being given socialization as large as having good knowledge, namely 17 respondents (78%) and while respondents who have sufficient knowledge are 8 respondents (22%). This was proven after the enthusiastic outreach of housewives during the IVA Test by midwives and breast examinations were carried out well.

In addition to outreach to housewives, the PkM team and partners also carried out an IVA test (Visual Acetate Infection) which is an examination to detect cervical cancer early. While BSE (Breast Self-Examination) is an examination to detect breast cancer early for PkM participants. IVA is a simple way to detect cervical cancer as early as possible. The WHO consultation report states that IVA can detect pre-cancerous lesions with a sensitivity of around 66-69% and a specificity of around 64-98%. While the positive predictive value and negative predictive value are between 10-20% AND 92-97%, respectively. The IVA examination is a scrennig examination of the pap smear because it is usually cheap, practical, very easy to carry out and the equipment is simple and can be carried out by other gynecologists.



Figure 3. Completion of the Willingness form for Iva and Sadari's examination

Source: 2022 PkM Team Documentation

#### **CONCLUSION**

It is hoped that the implementation of community service carried out by screening the Iva Test and Realizing as well as counseling about cervical and breast cancer for housewives in the Passo Health Center work area is running well and smoothly carried out by lecturers and students

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of the Ambon UKIM Health Faculty. households should understand that this community service activity is for the benefit of lecturers at tertiary institutions but also in the interest of housewives of reproductive age in the working area of the local puskesmas as a motivation that helps prevent problems related to female reproduction so that community participation is expected in every community service activity. It is recommended for the work area of the Passo Health Center as a partner in implementing Community Service, namely: More comprehensive and sustainable efforts are needed to prevent cervical cancer and breast cancer with the BSE method as part of increasing health coverage for women of childbearing age in the work area of the health center and increasing reproductive health screening Women for the risk group.

## **THANK-YOU NOTE**

Thanks to (1) The Chancellor of UKIM through the UKIM Community Pending Institute, the Rector provided financial support for this research; (2) The Dean of the Faculty of Health Who Encouraged UKIM Health Faculty Lecturers in improving the Tridharma of PT; (3) The Head of the Passo Community Health Center and the Passo Congregational Women's Service Group as partners in implementing PkM activities; (4) All parties who have helped the completion of writing this research that cannot be mentioned one by one.

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| 44

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