

**POSYANDU CADRE BEHAVIOR TOWARDS IVA EXAMINATION  
AT THE WEST KUNDUR COMMUNITY HEALTH CENTER**

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**Abstract**

Background : In Indonesia, it is estimated that 15,000 new cases of cervical cancer occur each year, while the death rate is estimated at 7500 cases per year (Emilia, 2010). Frequent delays in treatment have resulted in many cervical cancer sufferers dying, even though cervical cancer can be treated if it has not reached an advanced stage, of course by knowing in advance whether it is infected or not by using several early detection methods, including the Pap smer method, IVA ( Visual Inspection with Acetic Acid), Thin Prep, and Colposcopy, vicography, papnet (computerized). (Nugroho, 2010). The purpose of this study was to determine the behavior of posyandu cadres towards iva examination at the Kundur barat public health center.

Method : This research design is descriptive. The research was conducted at the West Kundur Community Health Center. Population is a generalization area consisting of objects (objects) / subjects (people) that have certain qualities and characteristics that are determined by the researcher for research and conclusions are drawn (Sulistyaningsih, 2011). In the study, the population was the posyandu cadres in the West Kundur Community Health Center (Puskesmas) as many as 214 cadres. In taking the sample in this study using purposive sampling technique, namely purposive sampling in accordance with the requirements / sample criteria required. The type of instrument used in this study was a questionnaire, in the form of a written question addressed to the respondent to be answered. Univariate analysis is used to explain or describe the characteristics of each variable under study by presenting a description of the frequency distribution. The instrument used for knowledge is a questionnaire, the form of questions used is a true or false statement for the assessment of the respondent's answer, if the respondent answers correctly each question item is given a value of 1 and if it is wrong it is given a value of 0.

Result : The results and conclusions in this study are: know the behavior of posyandu cadres regarding IVA examinations at the West Kundur Puskesmas in 2018 the majority never conducted IVA examinations, namely 38 respondents (55.9%) out of 68 respondents.

Congclusions : It is known that the behavior of posyandu cadres regarding the IVA examination at the West Kundur Puskesmas in 2018 the majority never conducted an IVA examination, namely as many as 38 respondents (55.9%) out of 68 respondents

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**Keywords: Behavior, Cadres, Posyandu, IVA**

**PRELIMINARY**

According to the World Health Organization, the risk of developing cervical

cancer in developing countries is getting higher and remains large in number. This happens because the habits and behavior of the people

are accustomed to having free sex from an early age outside of marriage. (YKI, 2013)

According to data from the World Health Organization (WHO) in 2013, the incidence of cancer increased from 12.7 million cases in 2008 to 14.1 million cases in 2012. Meanwhile, the number of deaths increased from 7.6 million people in 2008 to 8.2 million people a year. 2012. (Ministry of Health, 2014)

Based on the 2013 Basic Health Research (Risksedes) data, the prevalence of cancer in Indonesia is 4.1 per 1000 population, or around 330,000 people. The highest number of Indonesian cancers in women are breast cancer and cervical cancer. Based on the estimation of Globol 17 per 100,000, the International Agency for Research an Cancer (IARC) in 2012, the incidence of breast cancer was 40 per 100,000 women, and cervical cancer was 17 per 100,000 women. (Ministry of Health, 2014)

Developed countries, the incidence of cervical cancer is about 4% of all cancer incidence in women, while in developing countries it reaches over 15%. United States and Western Europe, the incidence of cervical cancer has decreased. This is due to the allocation of adequate health funds, good health promotion, and supporting means of prevention and treatment. (Emilia, 2010)

Cervical cancer ranks highest in developing countries, and ranks 10 in developed countries or the order of 5 globally. In Indonesia, cervical cancer ranks 10th second out of 10 most cancers based on data from anatomical pathology in 2010 with an incidence of 12.7%. According to current estimates by the Indonesian Ministry of Health, the number of new women with cervical cancer ranges from 90-100 cases per 100,000 population and every year there are 40 thousand cases of cervical cancer.

In Indonesia, it is estimated that 15,000 new cases of cervical cancer occur each year, while the death rate is estimated at 7500 cases per year (Emilia, 2010). Frequent delays in treatment have resulted in many cervical cancer sufferers dying, even though cervical cancer can be treated if it has not reached an advanced stage, of course by knowing in advance whether it is infected or not by using several early detection methods, including the Pap smer

method, IVA ( Visual Inspection with Acetic Acid), Thin Prep, and Colposcopy, vicography, papnet (computerized). (Nugroho, 2010)

Seeing the development of the number of sufferers and deaths due to cervical cancer, it is estimated that about 10% of women in the world have been infected with the Human Papilloma Virus (HPV), the fact appears that all women have a risk of contracting HPV infection. The type of HPV is certainly the main cause of cervical cancer. Meanwhile, someone who is infected with this infection has almost 20-100 times the chance of getting cervical cancer. (Emilia, 2010)

Community social constraints related to the concept of taboo. As we all know, cervical cancer is a cancer that attacks the sensitive and closed parts of women. It is not an easy thing to encourage women to open up and allow examinations to be carried out by male doctors or paramedics. For people with sufficient knowledge, it will not be a problem, but what about rural and even rural communities whose level of knowledge is still lacking. In addition, the aspect of public trust in doctors and paramedics is still not evenly distributed. (Emilia, 2010)

Knowledge and education of mothers about cervical cancer will form a positive attitude towards the low early detection of cervical cancer. This is also a dominant factor in early detection of cervical cancer. The knowledge and education possessed by women of childbearing age will lead to mother's confidence about early detection of cervical cancer. In addition to the factors of knowledge and education, economic status also affects the low early detection of cervical cancer. The spread of different health problems based on economic status in preventing disease and the differences in attitude to life and behavior that a person has. (Martini, 2013)

According to Artiningsih's (2011) research, attitudes greatly influence the behavior of fertile aged women in early detection of cervical cancer. Women refuse to have pap smears because of shame and unwanted by their husbands. This shows that women are reluctant to do a pap smear examination because it is a very taboo matter and must first obtain approval

from the family (husband). The strong tradition in the family affects the use of health services.

Health cadres who are around the community are required to have a high level of knowledge about health that occurs in the community. Health cadres are the right target in implementing health programs because they are considered as the first referral point for health services. Health cadres are trained and serve as monitors, reminders and supporters to promote health (Wang et al, 2012). These cadres are an extension of the puskesmas or the Health Office to the community in their working area. Cadres are considered as a reference in handling various health problems (Trisnawati et al, 2008). The participation and activeness of posyandu cadres is influenced by knowledge, occupation, income level and participation with other organizations. (Suryatim, 2011)

Based on data from the Karimun District Health Office in 2017 in the Disease Prevention and Control Sector (P2P), the number of women who underwent IVA examinations was 1007. Positive IVA as many as 30 people, suspicious of cancer 2 people.

From the data from the Kundur Barat Health Center in 2017, there were 6 people who had performed IVA examinations. Based on the low IVA examination data in the work area of the West Kundur Community Health Center with the number of PUS 3287. The purpose of this study was to determine the behavior of posyandu cadres towards IVA examinations at the West Kundur Community Health Center.

### **RESEARCH METHODS**

This research design is descriptive. The research was conducted at the West Kundur Community Health Center. Population is a generalization area consisting of objects (objects) / subjects (people) that have certain qualities and characteristics that are determined by the researcher for research and conclusions are drawn (Sulistyaningsih, 2011). In the study, the population was the posyandu cadres in the West Kundur Community Health Center (Puskesmas)

as many as 214 cadres. In taking the sample in this study using purposive sampling technique, namely purposive sampling in accordance with the requirements / sample criteria required. The type of instrument used in this study was a questionnaire, in the form of a written question addressed to the respondent to be answered. Univariate analysis is used to explain or describe the characteristics of each variable under study by presenting a description of the frequency distribution. The instrument used for knowledge is a questionnaire, the form of questions used is a true or false statement for the assessment of the respondent's answer, if the respondent answers correctly each question item is given a value of 1 and if it is wrong it is given a value of 0

### **RESEARCH RESULT**

**Table 1 Posyandu Cadre Behavior Towards IVA Examination at Kundur Barat Puskesmas**

<b>No</b>	<b>Behavior</b>
1	Yes
2	Not
<b>Total</b>	

The distribution of posyandu cadres' behavior towards IVA examination at the West Kundur Community Health Center in 2018, the majority never conducted an IVA examination, were 38 respondents (55.9%) out of 68 respondents

### **DISCUSSION**

It can be seen that the majority of respondents (55.9%) do not want to do IVA examinations. From the biological aspect, behavior is an activity or activity of the organism or living creature concerned. The behavior itself is a response or reaction of someone to a stimulus or stimulation from outside (Notoatmodjo, 2012). Meanwhile, according to Lawrence Green, willing behavior can be influenced by various factors such as predisposing factors, where the mother's knowledge and attitude are one of the reasons why the mother does not want to do IVA examinations.

In line with the limitations of behavior according to Notoatmodjo (2012), health seeking behavior is a person's response to stimuli or objects related to health, illness, and factors that affect health. From this research it can be concluded that posyandu cadres do not yet know that IVA examination is an attempt to maintain or maintain health so as not to get sick or an attempt to prevent before getting sick.

Knowledge or cognitive is a very important domain for the formation of one's actions (over behavior). This means that someone's knowledge of cervical cancer is very important to want to do an IVA examination. A person's knowledge is influenced by several factors, including education, information sources, socio-culture, economy, environment, experience, and age. In addition, according to Notoatmodjo, knowledge is divided into 6 levels, where the higher one's knowledge, the more influential in one's behavior. In this study, the education level of respondents was still in the stage of knowing and understanding about cervical cancer, this can be seen from 31 respondents whose knowledge was good, only 30 respondents wanted to do IVA examinations.

This is in line with research conducted by Retno Wahyu Wulandari (2017) concerning the Relationship between Cervical Cancer Knowledge and Conduct of IVA or Pap Smears in Mothers aged 25-50 years in Greges Donotirto Kretek Kretek Bantul Yogyakarta with 84 respondents. Research shows that the level of knowledge about cervical cancer in mothers with moderate knowledge is 44 (52.4%) of respondents, the behavior of mothers towards IVA examinations or pap smears has closed behavior by 52 (61.9%) respondents and has open behavior as many as 32 (38.1%) respondents. There is a relationship between the level of knowledge about cervical cancer and mother-mother behavior, from the results of statistical tests with Chi-Square obtained a p-value of 0.027 <0.05.

In this study, the majority of respondents had already received knowledge about cervical cancer from counseling both in the community and in the mother's class, knowledge about cervical cancer was influenced by many factors. The quality and quantity of

information is one of the factors that affect the level of knowledge. Likewise, the level of knowledge of mothers about cervical cancer is influenced by the quality and quantity of information obtained by the mother.

Human behavior that affects health can be classified into two categories, namely behavior that is manifested intentionally or consciously, and behavior that is intentionally or unintentionally harmful or unintentionally brings benefits to health, both for individuals who carry out these behaviors and society. On the other hand, there are behaviors that are intentional or unintentional to harm the health of both the individual and the community (Notoatmodjo, 2010).

## **CONCLUSION**

It is known that the behavior of posyandu cadres regarding the IVA examination at the West Kundur Puskesmas in 2018 the majority never conducted an IVA examination, namely as many as 38 respondents (55.9%) out of 68 respondents

## **SUGGESTION**

It is hoped that respondents can add insight and knowledge, especially about cervical cancer and IVA examinations by attending counseling, seminars and seeking information through print and electronic media so that mothers know, understand, understand and are committed to routine IVA examinations. Thus, respondents can apply and become an example for women to want to do IVA examinations so that they can detect cervical cancer early

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