

# The Relationship of Women's Knowledge and Attitudes with Pap Smear Examination at Bhayangkara Hospital Makassar

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## ABSTRACT

According to WHO (2011), cervical cancer is one of the leading health problems for women throughout the world with an estimated 529,409 new cases and around eighty-six percent (86%) in developing countries. In Indonesia, it is estimated that every day 40-45 new cases appear, 20-25 people die, meaning that every 1 hour it is estimated that 1 woman dies due to cervical cancer. The aim of the research was to determine the relationship between women's knowledge and attitudes with pap smear examinations at Bhayangkara Hospital Makassar. This research uses analytical research methods. The population is women who come for check-ups at Bhayangkara Hospital Makassar Family Planning Polyclinic. The sample studied was 39 people using accidental sampling technique. The research started from March 7 to April 7 2016. Data was collected using a questionnaire and then statistical analysis was carried out using the chi square test with the alternative Fisher's exact test with a significance level of  $\alpha < 0.05$ . The research results showed that the majority of respondents had insufficient knowledge, namely 29 people (74.4%). Based on attitudes, the majority of respondents with a negative attitude were 32 people (82.1%), and the majority did not have a pap smear, namely 27 people (69.2%). The results of the Fisher's exact test obtained a value of  $p = 0.004 < 0.05$ , and  $p = 0.002 < 0.05$ . Based on the research results, it was concluded that there was a relationship between women's knowledge and pap smear examinations, and there was a relationship between women's attitudes and pap smear examinations. It is recommended that health workers, considering the low level of public behavior regarding the importance of Pap smears, need to take several steps to increase people's knowledge, attitudes and behavior regarding the importance of Pap smears.

Keywords: Knowledge, Attitude, Pap Smear Examination

## INTRODUCTION

Reproductive health is a state of complete physical, mental and social well-being, not just free from disease or disability in all aspects related to the reproductive system, its functions and processes (Romauli and Vindari, 2012).

Reproductive health in women is a very important thing and is of common concern because the female reproductive organ is a tool for producing offspring. For this reason, it must be protected from various diseases. One type of disease that can attack the reproductive parts of women is cervical cancer. Cervical cancer is a disease in women that can cause death. In general, all women are at risk of developing cervical cancer, especially women who are prostitutes, multipara, low socio-economic levels, marry and give birth at a young age, women who smoke, women with HIV, etc.

According to WHO (2011), cervical cancer is one of the leading health problems for women throughout the world with an estimated 529,409 new cases and around eighty-six percent (86%) in developing countries, even according to WHO, Indonesia is the country with the highest number of cancer sufferers. the highest cervix in the world (Rahayu and Ochoa, 2015).

In Indonesia, it is estimated that every day 40-45 new cases appear, 20-25 people die,

meaning that every 1 hour it is estimated that 1 woman dies due to cervical cancer. It is estimated that almost 99% of cervical cancer cases are caused by Human Papillomavirus (HPV) infection, the risk of experiencing cervical cancer is 50-100 times greater than those who are not infected (Romauli and Vindari, 2012).

Research conducted by several hospitals in Indonesia found that the incidence of type 16 infection was 44%, type 18 was 39%, and type 52 was 14%. The remaining 14% detected multiple HPV infections.

Based on WHO data estimates in 2008, only 5% of women in developing countries received pap smear services. Meanwhile, in developed countries, almost 70% of women undergo pap smears. Pap smear is the most frequently performed screening test (Wardhani, 2012).

In the United States, 50 million Pap smear tests are carried out every year and this has succeeded in reducing the incidence of cervical cancer by up to 70%. Several world health bodies such as the American Cancer Society, the American Congress of Obstetricians and Gynecologists, and the American Institute for Clinical Systems Improvement recommend that those of you aged 21 years start taking Pap tests. It doesn't stop there, you are required to do Pap tests regularly, namely every 3 years because these potential cancer cells in the cervix will have the potential to become cervical cancer cells in the next 10 to 15 years (Darnindro, et al, 2010).

The high number of cases in developing countries is due to limited access to screening and treatment. There are still many women in developing countries, including Indonesia, who lack information and services regarding cervical cancer. This is caused by low economic levels and women's lack of knowledge about pap smears (Wicaksono, 2013).

Cervical cancer can actually be detected more quickly so that the fatality rate can be reduced. One of the problems is ignorance and perhaps even ignorance about early detection of cervical cancer. How to detect cervical cancer early by doing a pap smear. Examination with a pap smear can reduce the death rate due to cervical cancer.

Data from the Anatomy Pathology Laboratory at Cipto Mangunkusumo Hospital, in 2003 2580 pap smear tests were carried out and 2537 in 2004. The still high incidence of cervical cancer in Indonesia is apparently caused by the awareness of married women in Indonesia to check themselves with a pap smear test as a detection effort. Early onset of cervical cancer is still low (Wicaksono 2013).

One of the reasons for the development of cervical cancer is due to the low coverage of early detection of cervical cancer, such as pap smears in Indonesia (Vamale.com, 2013).

Detecting the presence of cancer cells in the cervix early using a test. Furthermore, mayoclinic.com reported that usually this pap test is carried out at the same time as a pelvic test. In women over 30 years of age, this pap test is usually combined with a test to determine the presence of HPV or human papillomavirus, which causes sexually transmitted diseases (Vamale.com, 2013).

The pap smear test is currently a reliable screening tool. 50% of new cervical cancer patients never have a pap test. Pap tests are recommended when starting sexual activity or after marriage. After three pap tests per year, the examination interval can be longer (every 3 years). For groups of women who are at high risk (HPV infection, HIV, social life at risk) it is recommended to have a Pap test every year.

The low level of knowledge also creates a fear of having a pap smear so that they do not know or even realize that they actually have cervical cancer. Currently, we can see that there is still low interest among residents in having pap smears. This is because they don't know, are embarrassed, afraid, and don't even know about cervical cancer (Eka Sari, 2014).

The results of a preliminary study at Bhayangkara Hospital Makassar regarding five people visiting pap smears in 2012, two people in 2013, two people in 2014 and 15 people in 2015, because of the free pap smear examination program held by the hospital. the number of women undergoing pap smears increased by 110 people. For this reason, as a first step in improving pap smear coverage, it is necessary to know the extent of women's knowledge and attitudes regarding

pap smear examinations.

## METHODS

This research design uses analytical research methods with a cross sectional study approach, namely to determine the relationship between women's knowledge and attitudes and pap smear examinations at the Bhayangkara Hospital Makassar in 2016. This research was carried out at the Bhayangkara Hospital Makassar. The population referred to in this study were women who came for check-ups at Bhayangkara Hospital Makassar Family Planning Polyclinic. Sampling in this study used a non-probability sampling method with an accidental sampling technique, namely by selecting respondents who happened to be present/encountered at the time of the research and met the inclusion criteria previously set by the researcher. The number of samples studied was 39 people.

## RESULTS

This research design uses analytical research methods with a cross sectional study approach. This research was carried out at the Bhayangkara Hospital Makassar, from March 7 to April 7 2016. The population in this study were women who came for check-ups at the Bhayangkara Hospital Makassar. The number of samples studied was 37 respondents using the nonprobability sampling method with accidental sampling technique. Based on the results of data processing, the following will present univariate analysis and bivariate analysis.

### Respondent Characteristics

#### Age

Table 1. Distribution of Respondents Based on Age at Bhayangkara Hospital Makassar

Age (Year)	n	%
< 20	1	2,6
20-25	8	20,5
26-30	16	41,0
30-35	11	28,2
> 35	3	7,7
<b>Total</b>	<b>39</b>	<b>100,0</b>

Source: Primary Data

Table 1 shows that the largest age group of respondents was the 26–30-year age group, namely 16 people (41.0%), and the least was the <20-year age group, namely 1 person (2.6%).

#### Work

Table 2. Distribution of Respondents Based on Occupation at Bhayangkara Hospital Makassar

Work	n	%
Housewife	18	46,2
civil servants	4	10,3
Private sector employee	7	17,9
Self-employed	10	25,6
<b>Amount</b>	<b>39</b>	<b>100,0</b>

Source: Primary Data

Based on table 2, it shows that the majority of respondents were domestic workers with a total of 18 people (46.2%), and the least were civil servants, namely 4 people (10.3%).

## Education

Table 3. Distribution of Respondents Based on Education at Bhayangkara Hospital Makassar in 2016

<b>Education</b>	<b>n</b>	<b>%</b>
elementary school	6	15,4
JUNIOR HIGH SCHOOL	11	28,2
SENIOR HIGH SCHOOL	15	38,5
College	7	17,9
<b>Total</b>	<b>39</b>	<b>100,0</b>

Source: Primary Data

Table 3 shows that the highest level of education of respondents was high school, namely 15 people (38.5%), and the least was elementary school, namely 6 people (15.4%).

## Univariate Analysis

### Knowledge

Table 4. Distribution of Respondents Based on Knowledge at Bhayangkara Hospital Makassar

<b>Knowledge</b>	<b>n</b>	<b>%</b>
Not enough	29	74,4
Enough	10	25,6
<b>Amount</b>	<b>39</b>	<b>100,0</b>

Source: Primary Data

Table 4 shows that there were 29 respondents with insufficient knowledge (74.4%), while there were 10 respondents with sufficient knowledge (25.6%).

### Attitude

Table 5. Distribution of Respondents Based on Attitudes at Bhayangkara Hospital Makassar

<b>Attitude</b>	<b>n</b>	<b>%</b>
Negative	32	82,1
Positive	7	17,9
<b>Total</b>	<b>39</b>	<b>100,0</b>

Source: Primary Data

Table 5 shows that there were 32 respondents with negative attitudes (82.1%), while there were 7 respondents with positive attitudes (17.9%).

### Pap smear examination

Table 6. Distribution of Respondents Who Undertook Pap Smear Examinations at Bhayangkara Hospital Makassar in 2016

<b>Pap smear examination</b>	<b>n</b>	<b>%</b>
No Treatment	27	69,2
Treatment	12	30,8
<b>Total</b>	<b>39</b>	<b>100,0</b>

Source: Primary Data

Table 6 shows that 27 people (69.2%) did not have a pap smear, while 12 people (30.8%) did a pap smear.

## Bivariate Analysis

### Relationship between Women's Knowledge and Pap Smear Examination

Table 7. Relationship between Women's Knowledge and Pap Smear Examination at Bhayangkara Hospital Makassar in 2016

Knowledge	Pap smear examination				Total		p Value
	No Treatment		Treatment		n	%	
	n	%	n	%			
Not enough	24	82,8	5	17,2	29	100,0	0,004
Enough	3	30,0	7	70,0	10	100,0	
<b>Amount</b>	<b>27</b>	<b>69,2</b>	<b>12</b>	<b>30,8</b>	<b>39</b>	<b>100,0</b>	

Source: Primary Data

Table 7 shows that there were 29 respondents with less knowledge, 24 people who did not have a pap smear (82.8%), and 5 people who did a pap smear (17.2%). Meanwhile, there were 10 respondents with sufficient knowledge, 7 people did a pap smear (70.0%), and 3 people did not do a pap smear (30.0%).

After carrying out the chi square test with the alternative Fisher's exact test, the value of  $p = 0.004 < 0.05$  was obtained, which means that there is a significant relationship between women's knowledge and pap smear examinations.

### The Relationship between Women's Attitudes and Pap Smear Examinations

Table 8. Correlation between Women's Attitudes and Pap Smear Examinations at Bhayangkara Hospital Makassar

Attitude	Pap smear examination				Total		p Value
	No Treatment		Treatment		n	%	
	n	%	n	%			
Negative	26	81,2	6	18,8	32	100,0	0,002
Positive	1	14,3	6	85,7	7	100,0	
<b>Total</b>	<b>27</b>	<b>69,2</b>	<b>12</b>	<b>30,8</b>	<b>39</b>	<b>100,0</b>	

Source: Primary Data

Table 8 shows that there were 29 respondents with a negative attitude, 26 people did not have a pap smear (81.2%), and 6 people did a pap smear (18.8%). Meanwhile, there were 7 respondents with a positive attitude, 6 people who had a pap smear (85.7%), and 1 person who did not have a pap smear (14.3%).

After carrying out the chi square test with the alternative Fisher's exact test, the value of  $p = 0.002 < 0.05$  was obtained, which means that there is a significant relationship between women's attitudes and pap smear examinations.

### Relationship between Women's Knowledge and Pap Smear Examination

Knowledge is the result of knowing and occurs after sensing an object so that knowledge is an important factor in forming a person's behavior.

The results showed that 29 respondents with less knowledge did not have a pap smear examination, 24 people (82.8%), 5 people did a pap smear examination (17.2%). This was due to the doctor's recommendation after examining the respondent and requiring the respondent to undergo a pap smear to confirm the next diagnosis. Meanwhile, there were 10 respondents with sufficient knowledge, 7 people (70.0%) did pap smears, 3 people (30.0%) did not do pap smears. Respondents who did not undergo pap smear examinations were due to the low level of public knowledge regarding the importance of pap smear examinations and cervical cancer which was caused by a lack of information, as well as fear of being diagnosed with cervical cancer after carrying out the examination, this was indicated by a recapitulation of respondents' knowledge of

cervical cancer. . Respondents did not know the definition, symptoms and risk factors that could cause cervical cancer.

The results of statistical tests using the chi square test with the alternative Fisher's exact test obtained a value of  $p = 0.004 < 0.05$ , which means that there is a significant relationship between women's knowledge and pap smear examinations. Theoretically, it was stated by Budiman & Riyanto A (2013), that knowledge is the result of knowing and occurs after sensing an object so that knowledge is an important factor in the formation of a person's behavior. Knowledge can be obtained either directly or indirectly and the knowledge gained will influence the development of a person's behavior. If a person's knowledge is low, such as knowledge about the benefits of a pap smear, this will influence their attitude about not having a pap smear.

This is in accordance with research conducted by Nikko Darnindro (2010), with the research title "Knowledge of Married Women's Behavioral Attitudes Regarding Pap Smears and Related Factors in Klender Jakarta Flats 2006" with the results showing that of the 107 respondents studied Data on respondents' knowledge regarding Pap smears was obtained. Most respondents had inadequate knowledge about Pap smears (46.7%). Meanwhile, 40.2% of respondents had sufficient knowledge and only 13.1% of respondents had good knowledge about Pap smears.

Knowledge is the result of knowing and occurs after people sense a particular object. Sensing occurs through the five human senses, namely the senses of sight, hearing, smell, taste and touch. Most human knowledge is acquired through the eyes and ears. Knowledge is a very important domain for the formation of a person's behavior. Behavior that is based on knowledge will be more lasting than not based on knowledge (Budiman & Riyanto A, 2013).

A low level of knowledge will lead to fear of having a pap smear so that they do not know or even realize that they actually have cervical cancer. Currently, we can see that there is still low interest among residents in having pap smears. This is because they don't know, are embarrassed, afraid, and don't even know about the benefits of having a pap smear (Eka Sari, 2014).

Based on the discussion presented above, the researchers concluded that knowledge will influence women's attitudes in maintaining their reproductive health, one of which is by doing a pap smear examination..

### **The Relationship between Women's Attitudes and Pap Smear Examinations**

Attitude is an individual's mental predisposition to evaluate a certain thing in some degree favorable or unfavorable. Attitude is closely related to a person's level of knowledge. A person's attitude towards an object shows the person's knowledge of the object in question.

The research results showed that 29 respondents with negative attitudes, 26 people (81.2%) did not have a pap smear, 6 people (18.8%) did not have a pap smear. This is due to the lack of knowledge of respondents regarding the benefits of pap smear examinations. In the research, it was also found that respondents had less knowledge but still had pap smears, this was due to the doctor's recommendation which required respondents to have pap smears to confirm the diagnosis. Meanwhile, there were 7 respondents with a positive attitude, 6 people (85.7%) had a pap smear examination, 1 person (14.3%) did not have a pap smear examination. This is due to the respondent's fear that they will be diagnosed with cancer if they have a pap smear.

The results of statistical tests using the chi square test with the alternative Fisher's exact test obtained a value of  $p = 0.002 < 0.05$ , which means that there is a significant relationship between women's attitudes and pap smear examinations. Theoretically stated by Evennett, 2003 in Martini (2013), that most women are reluctant to have a pap smear, usually because they are afraid that the pap smear will reveal that they have cancer, so they prefer not to know and avoid it, there is also a group of anxious women who are too embarrassed, worried or anxious about having a pap smear.

This is in accordance with research conducted by Natalia Elok Kusumawardani (2013), with the research title "Factors Associated with the Practice of Pap Smear Examinations in Working Women (Case Study at the Semarang City Health Service in 2012)". shows that from 70

respondents it was found that the majority of respondents had a good attitude of 52.9%. Thus, the attitude of the majority of respondents towards pap smear examinations can be said to be good. The results of statistical tests with a significance level of 5% obtained a p value of 0.010 ( $p < 0.05$ ), so that  $H_0$  was rejected and  $H_a$  was accepted, which means there is a relationship between attitudes about pap smears and the practice of pap smear examinations. This can happen because attitudes cause humans to act in a unique way towards their objects. Attitude really determines a person's direction for the better.

Kendler stated that attitude is a tendency to approach or avoid or do something, either positively or negatively towards an institution, event, idea or concept. This opinion is in line with Sarwono's opinion, which states that attitude is a person's readiness to act on certain things (Febry, 2011 in Martini, 2013).

Efforts that can be made to form this attitude can be realized through empowering health workers to provide an understanding of the importance of regular Pap smear examinations to the public. A positive attitude will give rise to good behavior in female couples of childbearing age (PUS) in carrying out pap smears.

## CONCLUSION

Based on the discussion presented above, the researcher concluded that sufficient knowledge will produce a positive attitude, the better a person's knowledge about pap smears, the more positive his attitude will be.

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