

Community Empowerment through the Cervical and Breast Cancer Early Detection Program with the Formation of Srikandi Cadres (Early Cancer Awareness) in Kangean Islands, Sumenep Regency

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Abstract: Cervical cancer and breast cancer are cancer that often occur in women and have a high mortality rate. However, there are still many people who do not know about the early detection of breast and cervical cancer to prevent diseases. This community service aims to educate the community about the dangers of breast and cervical cancer. The subjects of this community service program assistance were women in Kangean Islands, Sumenep Regency. The method used in community research (Community Based Research) to develop early detection programs for breast cancer and cervical cancer. The findings showed 91.1% of respondents did not know about early detection of IVA test, screening test on 90 respondents, one respondent with a cervical lesion. SRIKANDI (Sadar Kanker Sejak Dini) Cadre was formed to increase public awareness. Srikandi's cadres have knowledge about cervical and breast cancer, equipped with a book on breast self-examination (BSE). They invited the public to increase awareness of cervical and breast cancer by being able to do breast self-examination to reduce the incidence of cervical and breast cancer.

Keyword: Cervical Cancer, Breast Cancer, Srikandi, Community Based Research (CBR)

Introduction

Cancer is one of the biggest contributors to death in the world. Based on the results of Basic Health Research (Riskesdas) in 2018 in Indonesia, the prevalence of cancer increased from 1.4% in 2013 to 1.8% in 2018. Cervical cancer and breast cancer are the largest cancers that cause death in women. Data presented by Schiffman et al. (2007) from the results of his research showed that cervical cancer is the cancer with the highest incidence (> 80%) in developing countries.

Cervical and breast cancer could be prevented by reducing behavioural risk factors, namely by engaging in healthy living behaviours. Cancer can be cured if known early and get the

¹ Badan Penelitian dan Pengembangan Kesehatan, *Riskesdas 2018* (Jakarta: Kementerian Kesehatan RI, n.d.).

² Mark Schiffman, *Journal of the National Cancer Institute*, vol. 99, no. 10, pp. 800-807, 2007.

treatment. However, based on research in 2017, it was found that Indonesian women's awareness of risk factors for breast cancer is still low

Some steps that can be done for early detection of cervical cancer by doing Inspection with Acetic Acid (IVA), as well as early detection of breast cancer by doing Breast Self Examination (BSE) and Clinical Breast Exam (SADANIS)⁴. Prevention of this cancer can also be done by vaccinating HPV (Human Papilloma Virus) to prevent infection in young women (18 years), and detection of carcinogenic HPV in older women.⁵ (30 years) the cases that occur, the women do not know of any indications that he had cervical cancer so that he experienced late diagnosis so that cancer continues to develop in the body

In 2016 in Jawa Java Province, the number of women examined and found breast lumps were 1,059 women (0.55%). Then until 2017, there were 634,710 women (3.81%) were positive with 9,494 women (1.49%). Until now, there are no data that describe the prevalence of cervical and breast cancer in the Kangean Islands

The number of women who have been examined for the early detection of cervical cancer and breast cancer is still low. It is necessary to increase the program for early detection of cervical cancer and breast cancer, especially for regions with remote geographical conditions and far health access such as in the Kangean Islands.

Kangean Islands is part of the Sumenep Regency. Kangean Islands has located 12 km from Sumenep Regency and takes about 10 hours if the weather is good. The considerable distance to higher health facilities means that people in the Kangean Islands cannot get health services. Besides, access to information is also minimal because of the availability of electricity and the internet is not always available. Even some areas do not have power and internet access

Early marriage in the Madura area is still a lot. This happens because the age of marriage

³ Aira Putri Mardela, Khomapak Maneewat, and Hatha. Indonesian women at moderate to high risk. *Nursing and Health Science* 19 (2017): 3806.

⁴ Eva Sulistiowati and Anna Maria Sirait, "Pengetahuan Kanker Serviks dengan Inspeksi Visual Asam Asetat (Iva) Pada Wanita." *Buletin Penelitian Kesehatan* 42 (September 2014): 10.

⁵ Isabel C. Scarinci et al., "Cervical Cancer: New Prevention Strategies." *CA: A Cancer Journal for Clinicians* 110 (2010): 111-117.

⁶ Jacquelyn Reid, "Women's Knowledge of Pap Smears and Cervical Cancer." *Journal of Obstetric, Gynecologic & Neonatal Nursing* 30 (May 2001): 309-319.

⁷ Tim Riset Penyakit Tidak Menular. *Laporan Riset Penyakit Tidak Menular Tumor Payudara dan Lesi Prakanker* (Jakarta: Kementerian Kesehatan RI, December 2016).

⁸ E. Kathleen Adams, Nancy Breen, and Peter J. Joski. Early Detection Program on Mammography and Pap Test Utilization among White, Hispanic, and African American Women: 1998-2000. *Cancer* 109, no. 2 (January 15, 2007): 209-216.

in Madura is not limited, so there are many underage marriages. Marrying children who are not of age is still a tradition in the Sumenep area. Most young married women are 15-19 years old. In Sumenep District, the total early marriages was 45,089.

Sexual relations that are active at a young age less than 20 years can increase the risk of cervical cancer 10 times greater than those married at the age of 20 years. This happens because at that age, the maturation of epithelial cells in the cervix is not perfect, so it is susceptible to damage during intercourse and increases the risk of invasion of HPV.

The community service activity is expected to raise Kangean community awareness especially Arjasa District. The initial step in early detection of breast cancer and making Arjasa District a pilot project for periodic other districts in Sumenep Regency in the Srikandi Kangean Kader program to promote early detection of cervical and breast cancer as a first step to reduce the incidence of cervical and breast cancer.

Methods

The strategy used in community service is *community based research (CBR)*¹². The technique used because it is following the community service plan in the context of developing an early detection program for communicable diseases of breast cancer and cervical cancer. CBR method is used because the research conducted can explore and collect data about health conditions in the community, so that community service activities that will be carried out can be adjusted to the conditions of the community. Research community service is carried out on commitments from the community (society, community leaders and health workers).

There are four stages in the CBR method, namely

1. Laying the foundation

At this stage, researchers, together with communities in the Kangean Islands, carry out discussions, convey research and dedication to be carried out. The activities included:

⁹ Masthuriyah Sa'dan, "Maklumi Dengarsi Bukalawati Praktek A M 14, no. 2 (2015).

¹⁰ Esti Yunitasari, Retnayu Pradanie, and Ayu Susilana, "Maklumi Dengarsi Bukalawati Praktek A M 14, no. 2 (2016): 6.

¹¹ Tim Riset Penyakit Tidak Menular, "Laporan Riset Penyakit Tidak Menular Tumor Payudara dan Lesi Prakanker Serviks".

¹² Mohammad Hanafi et al., *Community Based Research Sebuah Pengantar* (Surabaya: LP2M UIN Sunan Ampel Surabaya, 2015). The use of research strategies in community service with *community based research (CBR)* approaches has also been carried out by (2018). Perubahan Perilaku Open Defecation Free (ODF) melalui Program Sanitasi Total Berbasis Masyarakat (STBM) di Desa Batad Kedungadem Kabupaten Bojonegara. *Engagement Jurnal Pengabdian Kepada Masyarakat* 9.

research team and the community discussed the aims of the study, about community service activities to be carried out in the Kangean Islands; (2) Focus group discussion with the Head of the Arjasa District Health Center and local health workers. The condition of the Kangean Islands community related to the condition of cervical and breast cancer in the Kangean Islands, utilization of health facilities for IVA and SADANIS examinations, health workers delivery, and availability of health facilities available at the Arjasa Health Center and Supporting Health Center; (3) FGD with the Head of Puskesmas and community leaders about the condition of the Kangean Islands region. Also, the number of districts and the condition of the area that can be reached for activities.

2. Research planning

At this stage, it is determined and chosen the main priority to be used as research, the methods and analysis. The research team conducted a research planning discussion that was carried out with community leaders, the Head of the Puskesmas health worker, and community cadres related to (1) Determine the location of research and community service activities. The Head of the Puskesmas and community prepare a place that allows events to be carried out to the availability of inspection facilities and the condition of the community; (2) Arrangement of schedule and format of activities. Each party conveys a timeline of events that allow for research and service activities. Community leaders and health workers participate in the preparation of schedules and activities for the implementation of activities. They adjust the time of the Puskesmas visit and Supporting activities; (3) Community leaders together with local cadres ask the community to attend research and community service activities; (4) Preparation of tools and materials for an examination of IVA and SADANIS held by the Head of the Puskesmas and health workers.

3. Information gathering and analysis

This stage is the process of meaning and learning through collecting, analyzing, and interpreting data. Data collection was carried out in the Arjasa Health Center and Pajanangger Village to see issues related to reproductive health, risk factors for breast cancer and cervical cancer using a questionnaire. The data collected with questionnaires from 100 respondents. Also, the detection of cervical cancer with IVA and early detection of breast cancer with SADANIS by health workers from the Arjasa Health Center. Data collection was carried out within three days: one day at the Arjasa Health Center, and two days in Pajanangger Village. The data that has been collected is then analyzed to determine risk factors for cervical and breast cancer in the Subdistrict community.

4. Acting on findings

Next, the results of the research that have been carried out and can be used as knowledge for the community. The results of this study can be utilized for the community findings from the data analysis discussed with the community for further action. The research team, together with the community, formed the SRIKANDI cadre. Srikandi's given material about cervical and breast cancer, was given training on how to do early detection (BSE) and was provided with a pocketbook.

The cadre job was providing education to the public about cervical and breast cancer awareness to do early detection of cervical cancer using IVA and early detection of breast cancer BSE. Furthermore, Cadre Srikandi will deliver the material obtained in training activities to the community.

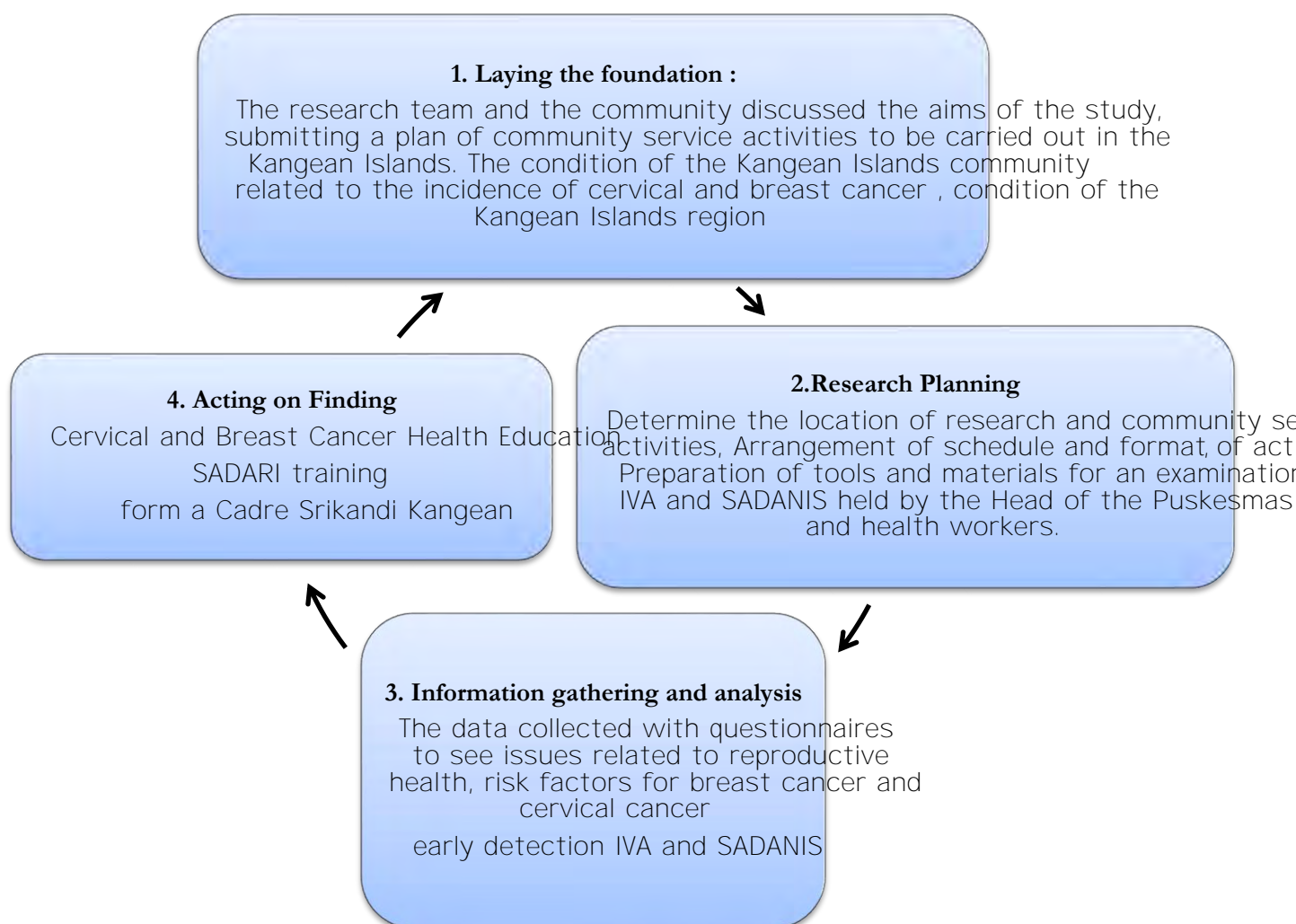


Figure 1. Four Stages of CBR

Results and Discussion

Implementation of the FGD with the community found that there was no data related to the incidence of cervical and breast cancer. The Head of the Puskesmas said that the Puskesmas in the Kangean Islands had provided services for IVA and SADANIS examinations. Still, not many people were interested in having a check-up. In 2018, only ten people had examined IVA at the Arjasa Health Center. According to health workers at the Arjasa Community Health Center, the facilities used for examinations are very limited, where there are only six speculum instruments for IVA examination. Sterilization in the form of an autoclave to sterilize the equipment is very limited and difficult to use in remote areas of Arjasa District, where most of the area has not yet been electrified. Based on the discussion, the research team and the community agreed to hold health education related to cervical and breast cancer and carry out SADANIS examinations. The research team will help provide a disposable speculum to make it easier for health workers to use it for examinations because it does not need to be sterilized.

The Kangean Islands consist of 3 subdistricts, namely Arjasa, Kangean and Sapeken. Arjasa Subdistrict has 19 villages with conditions that target the largest island in the Kangean Islands. Transportation access in Arjasa Subdistrict is more likely to be reached because it is traversed by land with better road conditions compared to Kangean and Sapeken districts. Transportation access can support the research and service activities that will be carried out.

Based on the results of the FGD with the community, it was decided that the community service and research activities were carried out in two places, namely Arjasa Health Center and Pajanangger Village. Arjasa Public Health Center has a strategic location and can be reached from nearby villages namely Arjasa, Laok, Kalikatak, Sambakati, Forces, Duko, Paseraman, Bilis Bilis, Kalisangka, Anggon, Pandeman and Sumberangka.

Pajanangger Village was chosen for research and service activities because the village is located in a remote location. This village is located in the southernmost district of Arjasa, along with 4 other villages. According to the Midwife and Pajanangger Village, the Pajanangger community has the wrong understanding of cervical cancer. This understanding is obtained from health product sellers who claim to be able to treat cervical cancer, but unfortunately, the efficacy and safety of these health products have not been clinically tested. This triggers public misconceptions about the treatment of cervical cancer instantly, as well as misconceptions in paying attention to reproductive health. So there needs to be a correct understanding of cervical and breast cancer for the Pajanangger Village community.

Research activities related to cervical and breast cancer are carried out by taking

through questionnaires and IVA and SADANIS examinations. The activity was carried out from July 26, 2019, to July 31, 2019. First research and service activity was carried out at the Arjasa Community Health Center for one day to 40 respondents. The research team collected questionnaire data from respondents, while midwives conducted IVA and SADANIS examinations at the Arjasa Health Center. Questionnaire data contains an overview of reproductive health and risk factors for cervical and breast cancer. The respondents who were interviewed continued the IVA and SADANIS examination activities

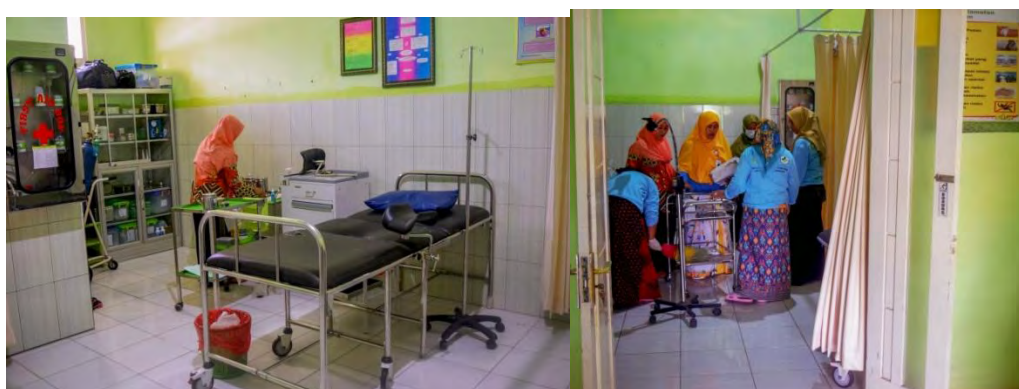


Figure 2. Preparation of IVA inspection at Arjasa Health Center

Data collection was then carried out in Pajanangger Village, Arjasa District for consecutive days. Pajanangger Village located in the southern part of Kangean Island, with a travel time of approximately 2 hours from Arjasa Health Center. The research team and health workers from the Arjasa Community Health Center had to take a pretty difficult road to reach Pajanangger Village. The condition of the road is badly damaged and if residents can not pass during rainy season, residents must pass by sea. Electricity in the village is not available 24 hours but only exists from 5 pm to 5 am. The location used for the activity is the Pajanangger Health Center

The research team took the questionnaire data in a local language because when conducting the data collection, some respondents could not speak Indonesian, and some could not read and write. The IVA and SADANIS examinations were carried out by midwives from the Arjasa Community Health Center and the Pajanangger Village Health Support Center, which was coordinated by the Head of the Arjasa Health Center. The number of respondents who attended was 60 people

IVA and SADANIS examinations are performed on women who are already sexually active and are not menstruating, so respondents who are menstruating are asked to do an

SADANIS examination at another time. Of the 100 respondents taken at the Arjasa Puskesmas and Pajanangger Village, as many as 90 respondents were able to undergo SADANIS examinations.



Figure 3. Data collection in Pajanangger Village

The data that has been collected is then analyzed to find out the risk factors for cervical and breast cancer that mostly occur in the Arjasa District. The results of data collection obtained as much as 91.1% of respondents did not know about early detection of IVA and SADANIS. Knowledge of IVA and SADANIS will influence the behaviour of women to conduct IVA and SADANIS examinations in health workers. The results of questions and answers with respondents found that some respondents had a wrong understanding of the prevention of cervical cancer by using health products that have not clinically tested. Even the use of these products which must be entered into female reproductive organs will actually be at risk for their health.

Besides, 7.7% of respondents had a family with a history of breast cancer, and 2.2% had a family with a history of cervical cancer. Women who have a family history of cervical cancer or breast cancer have a risk of 2 to 3 times higher for cervical cancer and breast cancer so women with a family history of cancer need early detection to be known if cancer cells appear.

Many of the respondent had their first pregnancy at a young age.

¹³ Elisabet Surtani, "Hubungan Riwayat Ketiduran Pada Ibu Di RSUD Terjaya H. Adam Maja Jurnal Praktek (April 2013): 15.

pregnancy will lead to other health complication such as pre-eclampsia and others. Therefore many of respondent, use contraceptives of hormonal contraceptives on respondents with an installation time of five years is 20% of respondents. Prolonged use of hormonal contraception can increase the risk of cervical cancer 17.9 times compared to women who do not use contraceptives. A similar study found that the use of hormonal contraception has a risk of cancer 0.18 higher compared to non-hormonal ones. The use of hormonal contraceptives also has a significant relationship with the occurrence of breast cancer in women in Dr. Soetomo Hospital. Women who use hormonal contraception for more than 10 years need to do early detection early with IVA and SADANIS.

Early age marriage less than 20 years was found as many as 61.1% of the respondents studied. Early marriage is related to cervical cancer. Sexual intercourse that is too early can cause damage to epithelial tissue in the walls of the vaginal cavity and cervix. If the cervical cells are not yet mature, they will experience changes and damage to the cervical cells.

The results of IVA screening of 90 respondents, there were 10 positive IVA precancerous lesion, while in the SADANIS examination, no positive results found. Women who had positive IVA results were found in Pajanangger Village, then given a referral letter to Arjasa Health Center to get further therapy.

Cervical and breast cancer can be prevented by recognizing cancer risk factors and doing early detection of breast and cervical cancer. Therefore it is necessary to increase knowledge about cervical and breast cancer as well as early detection with IVA and SADANIS in the Arjasa District community. Early detection with IVA can detect early on the presence of cells so that treatment can be done immediately so as not to develop into cancer cells. Likewise, early detection of breast cancer with BSE and SADANIS. Examination of breast self-examination conducted by women can detect any abnormalities in the breast, then a test of breast

¹⁴ Irul Hidayati and Esti Novi Andiarini, "View of Pregnancy Age with Maternal Anemia", *Journal of Health* (n.d): 417.

¹⁵ Wahyu Eka Ekasari, "Pengaruh Umur Ibu, terhadap Kehamilan Asfiksia Bayi Pada Ibu Pakek amsia Berat" (Tesis, Universitas Sebelas

¹⁶ Muthiah Rissa Pratomo, "Pengaruh Pemakaian Alat Kontrasepsi Berbasis Estrogen terhadap Kejadian Kanker Leher Rahim Di RSUD Dr. Moewardi Surakarta" (Tugas Akhir (Fakultas Kedokteran: Universitas Sebelas Maret Surakarta, 2009), digilib.uns.ac.id.

¹⁷ Sarwenda Abdullah, Jeavery Bawotong, and Rivelino, "Hubungan Penggunaan Kontrasepsi Hormonal Dan Non Hormonal Dengan Kejadian Kanker Serviks Di Rukun Warga 1 (August 2013).

¹⁸ Gusti Ayu Triara Dewi and Lucia Yovita Hendrati, "Pengaruh Penggunaan Kontrasepsi Hormonal Dan Non Hormonal Terhadap Kejadian Kanker Serviks Di Rukun Warga 1 (January 2015): 12.

¹⁹ Rita Darmayanti, "Faktor-faktor yang Berhubungan dengan Kanker Leher Rahim Di RSUD Ulin Banjarmasin" (October 2015): 172.

be done by health workers. Early detection can prevent the spread of breast cancer cells

Based on this, it is necessary to increase public knowledge about cervical and breast and early detection that can be done to prevent disease. This knowledge enhancement can be more effective if it involves the community as a mobilization of the regional languages of the research team

Formation of health cadres had previously done by ²⁰ Dewi et al. community service activities in Garut Regency. The involvement of health cadres in these activities can help the community recognize breast cancer and how to detect it early

Community involvement in efforts to increase knowledge about health is very effective used, for example, in the community service that forms exclusive breastfeeding ambassador reproductive health. The presence of the health ambassador can increase public knowledge and community interest in conducting early detection. ²¹ SADR. Other services performed by ²² Kusworo et al. The involvement of religious leaders/activists are essential in changing outlook, mindset, attitude and behaviour of the people towards HIV.

Based on that, the research team, together with the local community, agreed to form a Cadre Srikandi Kangean. The heroine is short for Cancer Awareness Early. It is hoped that becoming a cadre of Srikandi Kangean, people, especially women in the Kangean area, will be more aware of the dangers of cervical and breast cancer. Cadre Srikandi is a native of District who plays an active role in various community activities. By people from Arjasa Subdistrict as Srikandi Kangean who have the enthusiasm and commitment as cadre to guarantee the sustainability of the ²³ program

Cervical and Breast Cancer Health Education

Providing health education or counselling in the form of lectures, demonstrations, and practices. This form of activity was chosen because based on Wantini's research in

²⁰ Dewi, Nurdiamah, and Achadiyahani, "Pembentukan Kadus Kemampuan Melakukan Deteksi Dini Kanker yang Sering Terjadi Pada Wanita di Desa Sukamanah dan D Cihaurkuning, Kecamatan Malangbong Kabupaten Garut Aplikasi Ipteks untuk Masyarakat (November 2013): 784.

²¹ Ana Zumrotun Nisak et al., "Upaya Peningkatan Kualitas Duta Asi Eksklusif dan Keluarga: Jurnal Pengabdian kepada Masyarakat (April 11, 2019): 61.

²² Nyoko Adi Kusworo et al., "Penguatan Peran Faith Community dalam Penanggulangan HIV dan DS melalui Peran Aktif Young Engagers (November 2018): 17.

²³ Ibid.

counselling activities in the form of lectures, presentations and training will affect the increase in knowledge about health, especially reproductive health, cervical and breast cancer

Health education about cervical and breast cancer was carried out by the research team at Arjasa Health Center by inviting 40 prospective cadre Kangean. In this health education, the material delivered related to cervical and breast cancer. The results of the health education observed through interactive discussions between participants and the research team. In the discussion, participants actively conveyed the problems they experienced related to reproductive health. The research team conducted a question and answer session with the research team. At the end of this health education, it produced participants who were able to explain risk factors, causes, early detection, and management of cervical and breast cancer. Through this activity, it was also generated a commitment from participants to conduct early detection of cervical cancer with IVA and conduct breast self-examination for early detection of breast cancer. This is consistent with previous research that increased knowledge about cervical and breast cancer can increase women's awareness to conduct early detection of IVA and SADARI



Figure 4. Health Education about Cervical and Breast Cancer

Breast Self-Examination (SADARI) Training

Breast Self-Examination training for participants was carried out by the research team at Arjasa Health Center. Participants taught how to do SADARI, characteristics of normal and abnormal breast conditions. Each participant practiced SADARI and immediately evaluated by a research team. The training was conducted by trained health workers from the Arjasa Community Health Center. The participants were

²⁴ Nonik Ayu Effendi, Promosi Kesehatan Terhadap Pengetahuan Kanker Payudara Pada Wanita Di Dusun Terongan, Desa Kebonrejo, Jurnal Medika Resa (2018): Banyuwangi

enthusiastic in participating in this activity, seen from the high participation of participants in conducting SADARI practices

Health education, accompanied by demonstrations or practices is very effective in increasing knowledge about health. This can also be seen in the dedication made by Khairunnisa (2018), where participants were more enthusiastic and active when attending counseling demonstrations²⁵

As a result of SADARI training, participants are able to practice the SADARI steps correctly. Participants are able to recognize the condition of normal and abnormal breasts by checking themselves. When practicing SADARI, participants will remind if something is wrong in practicing SADARI



Figure 5. SADARI training (Breast self-examination)

Giving a Pocket Book

Each cadre of Srikandi Kangean provided with a pocketbook "Recognize Breast Cancer and Cervical Cancer Early". The book contains about cervical and breast cancer, starting from understanding, causes, risk factors, early detection and treatment. This book is used by cadres as a medium to convey to other communities about cervical and breast cancer and SADARI steps as an early detection step for breast cancer

²⁵ K K a m i d a h , " S A D A R I S e b a g a i t a l p a y a s K E M A S S K A : j u r n a l A n g k a P e n g a b d i a n K e p a d a M a s y a r a k a t (December 26, 2018): 129.



Figure 6. Book "Recognize Breast Cancer and Cervical Cancer Early"

Cadre Srikandi Kangean delivered material on cervical and breast cancer to the community in various community activities such as Posyandu, PKK activities, and community gathering. The role of cadre Srikandi Kangean is crucial in raising public awareness and early detection of cervical cancer with IVA and carrying out BSE. Cadre Srikandi Kangean from the community facilitated the process of delivering cervical and breast cancer material following the conditions of the local community. This is because when cadres explain about cervical and breast cancer to the local community using the Kangean language more easily accepted and understood by the community.

Enthusiastic community to conduct early detection with IVA and SADANIS increased after this community service held. Many residents who previously did not attend early detection are now interested in conducting examinations at the Puskesmas. Increased public awareness to perform early detection of cervical and breast cancer with IVA and SADANIS is expected to reduce the occurrence of cervical and breast cancer.

The use of local language and local culture in community service activities can increase community participation in conducting an early examination of cervical cancer through IVA and SADANIS. Furthermore, community involvement in every service activity can guarantee the continuity of the planned program or activity so that the objectives of the action can be achieved.



Figure 7. Research Team with Cadre Srikandi Kangean

Conclusion

Community service by providing reproductive health education can increase public knowledge about reproductive health. Besides, BSE training and IVA examinations was an increase public awareness to conduct early detection of cancer. The formation of Cadre Kangean as a form of community empowerment in District Sumenep to increase public awareness to perform early detection of cervical cancer and breast cancer.

It is hoped that the formation of the Cadre Srikandi Kangean could be carried out in other areas so that more and more people are aware to conduct early detection of breast and cervical cancer. Increased public awareness is expected to reduce the risk of cervical cancer.

References

Abdullah, Sarwenda, Jeavery Bawotong, and Rita Hormonal Dan Non Hormonal Dengan Kejadian Kanker Serviks Di Ruang D Atas BLU, Prof. Dr. R. D. E. Kraha Kepulauan (August 2013).

Adams, E. Kathleen, Nancy Breen, and Peter J. Cancer Early Detection Program on Mammography and Pap Test Utilization among White, Hispanic, and African American Women. *2009 Cancer*, no. S2 (January 15, 2007): 3458.

Badan Penelitian dan Pengembangan Kesehatan *Riskesdas 2018*: Kementerian Kesehatan RI, n.d.

Darmayanti, Rita, Hap-fakstarhyang Berhubungan Dengan Kanker a .

Leher Rahim Di RSUD Kesehatan B. 2 (October 2015):172-177.

Dewi, Gusti Ayu Triara, and Luyadaya Berdastara Heri. "Riwayat Pemakaian Kontrasepsi Uteral Berbasis *Epidemiologi*. 1 (January 2015): 12.

Dewi, Nurdiamah, and Achadiyani. "Pembentukan Pengetahuan dan Kemampuan Melakukan Deteksi Kanker yang Sering Terjadi Pada Wanita di Desa Sukamanah dan Desa Cihaurkuning, Kecamatan Malangbong Kabupaten Garut *Jurnal Aplikasi Ipteks untuk Masyarakat* (November 2013): 478.

Eksari, Wahyu Eka. "Pengaruh Dan Bermita Lahir Bayi Rendah Terhadap Asfiksia Bayi Pada Ibu Premsia Berat." Tesis, UIN 2015.

Hanafi, Mohammad, Nabila Naili, Nadhir Salahudin, and A. Komar Rizki. *Sebuah Pengabdian*. Surabaya: LP2M UIN Sunan Ampel Surabaya, 2015.

Hidayati, Irul, and Esti Novi Andiarini. "V Parities and Pregnancy Age with Maternal Anemia | *Journal of Health Science Prevention*" 2, -470. 1 (April 2018): 42.

Kamidah, K. "SADARI Sebagai Upaya Menurunkan GEMASSIKA: *Jurnal Pengabdian Kepada Masyarakat* (December 26, 2018): 129.

Kusworo, Nyoko Adi, Zainul Ahwan, Mukhid Ma. Peran Faith Based Organizations (FBO) dalam Pencegahan dan Penanggulangan HIV/AIDS melalui Peran Aktif Young Releligio *Engagement Jurnal Pengabdian Kepada Masyarakat* (November 2018): 17.

Mardela, Aira Putri, Khomapak Maneewat, and among Indonesian women at moderate health *Nursing and Health Science* (2017): 301306.

MuhidA., Sumarkan, Rakhmawati, Fahri (2018). Perubahan Perilaku Open Defecation Free (ODF) melalui Program Sanitasi Total Berbasis Masyarakat (STBM) di Desa Bab Kecamatan Kedungadem Kabupaten Bojonegara *Engagement Jurnal Pengabdian Kepada Masyarakat* (1), 99-119.

Nisak, Ana Zumrotun, Subiwati Subiwati, Muhammad Abdur Rozaq, Noor Azizah, and Atung Wi gati. "Upaya Peningkatan Kualitas Kesehatan Asi Eksklusif dan Keselamatan *Engagement Jurnal Pengabdian Kepada Masyarakat*, no. 1 (April 11, 2019): 61.

Pratiwi, Muthiah Risa. *Pengaruh Pemakaian Alat Kontrasepsi Kombinasi Progesteron Estrogen Terhadap Kejadian Kanker Leher Rahim Di RSUD Dr. Moewardi Surakarta*. Fakultas Kedokteran: Universitas Sebelas Maret Surakarta, 2009. digilib.uns.ac.id.

Reid, Jacquelyn. "Women's Knowledge of Pap Cervical *Journal of Obstetric, Gynecologic & Neonatal Nursing* (May 2001): 299305.

- Sa'dan, Masthuriyah. "Menakar Tradisi *Jurnal* *Musawat*, no. 2 (2015).
- Scarinci, Isabel C., Francisco A.R. Garcia, Erin Kobetz, Edward E. Partridge, Heather M. Bran Maria C. Bell, Mark Dignan, Grace X. Ma, e L. Daye, and Philip Cancer Prevention: *NCMJ* (2010):INA. and Old Barr
- Schiffman, Mark, Philip E. Castle, Jose Jeronimo, Ana C. Rodriguez, and Sholom Wachold "Human Papillomavirus *The Lancet*, no. 9590 (2007):90
- Sulistiowati, Eva, and Anna Maria Sirait. "Deteksi Dini Kanker Serviks Dengan Inspeksi Visual Asam Asetat (Iva) Pada Wanita Kecamatan Bogor *Beletipenelitian Kesehatan* (September 2014): 10.
- Surbakti, Elisabet. "Hubungan Riwayat Pada Kue Turu Di RSUP H. *Adajurnal* (April 2013): 15. "
- Tim Riset Penyakit Tidak Menular *Penyakit Tidak Menular Tumor Payudara dan Lesi Prakanker Serviks*. Jakarta: Kementerian Kesehatan RI, December 2016.
- Wantini, Nonik Ayu. "Efek Promosi Kesehatan Wanita Di Dusun Terongan, Desa Kebonrejo, Kalibaryu wangi, *Jurnal wa Ti Medika Respati*(2018): 8.
- Yunitasari, Esti, Retnayu Pradanie, and Ayu Nursing Di Desa Kara Kecamatan *unra/Var*, no. 2 (2016): Sam 6.