

FACTORS AFFECTING THE USE OF PAPSMEAR AMONG FEMALE PARTICIPANTS OF THE NATIONAL HEALTH INSURANCE PROGRAM IN CENTRAL TAPANULI, NORTH SUMATERA

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ABSTRACT

Background: A pap smear is a quick and simple method of cervical screening to detect change in the cervix that may lead to cervical cancer in women. Using the pap smear as a screening test to health detect any abnormal change earlier can have significant positive benefit on the patients, as treatment can be undertaken in the early stage of the conditions, which is more likely to be effective. This study aimed to examine factors affecting the use of pap smear among female participants of the national health insurance program in Central Tapanuli, North Sumatera.

Subjects and Method: This was an observational analytic study with cross-sectional design conducted at Pinangsori Community Health Center, Central Tapanuli, North Sumatera. A total of 196 housewives participating in the National Health Insurance (Jaminan Kesehatan Nasional) and visiting the community health center was selected for this study. The dependent variable was use of Pap smear. The independent variable included knowledge, attitude, and family income. The data were analyzed using multiple logistic regression.

Results: The likelihood of using Pap smear increased with better knowledge (OR= 24.06; 95% CI= 4.22 to 28.42; p=0.003), positive attitude (OR= 29.37; 95%CI= 6.45 to 316.44; p= 0.001), and higher family income (OR=9.35; CI= 0.82 to 1.64; p= 0.001).

Conclusion: The likelihood of using Pap smear increases with better knowledge positive attitude, and higher family income.

Keywords: national health insurance, cervical cancer, pap smear, housewife

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BACKGROUND

Maternal and Child Mortality Rates are two indicators of the Millennium Development of Goals (MDG's) that are directly related to women's reproductive health. Reproductive health problems faced by women at this time are increasing infections in the reproductive organs, which in turn causes cancer, one of which is cervical cancer which is the second leading cause of death in women. The number of sufferers in Indonesia is also quite

high. Every day there are 40 new cases, 20 of them die. This means that every hour one woman dies of cervical cancer. Moreover, cervical cancer is usually not accompanied by special symptoms in its early stages, so that patients only feel sick if the cervical cancer they have has reached an advanced stage (Wijaya and Delia, 2010).

The World Health Organization (WHO) (2014) states that every year more than 270,000 women die from

cervical cancer, more than 85% of these deaths are in low- and middle-income countries or developing countries. More women die of cervical cancer in developing countries than in developed countries. Indonesia is in sixth place out of 50 countries in the world with the most deaths from cervical cancer, which is 7,493 people.

Cervical cancer screening is testing for pre-cancerous and women who are at risk of developing cancer, most of which occur without the onset of symptoms. At a minimum, screening is recommended for every woman aged 30-49 years at least once in her lifetime. Based on routine data from the Cancer Sub-Directorate of the Directorate of Non-Communicable Diseases, the Directorate General of Disease Control and Environmental Health, the Indonesian Ministry of Health, until 2013, the early detection program for cervical cancer and breast cancer was only held in 717 health centers out of a total of 9,422 health centers in 32 provinces.

A study by Darnindro (2007) in Klender Jakarta found that out of 107 respondents only 33.7% had a Pap smear and there was a significant relationship between the age of the respondent and the Pap smear. Knowledge, attitudes and behavior of married women about papsmer are still low. According to Candraningsih (2011) several factors hindered pap smear examination, including the behavior of housewives participating in the Social Security Administration for Health (BPJS) who were reluctant to be examined due to lack of knowledge about pap smears, shyness and fear of examining cervical reproductive organs to health workers, the cost

factor, especially for the weak economic group, sources of information and facilities or health services that are still minimal to carry out a pap smear examination.

There are still housewives who do not do pap smears and it is also found that housewives do not know about pap smears, so the researcher wants to know what factors are related to pap smear examinations on housewives participating in the Social Security Administering Body (BPJS) Health Health in the working area of the Puskesmas Pinangsori, Pinangsori District, Central Tapanuli Regency in 2016.

This study aims to determine the factors related to Pap smear examination on housewives participating in the Social Security Administering Body (BPJS) for Health in the work area of the Pinangsori Health Center, Pinangsori District, Central Tapanuli Regency in 2016.

SUBJECTS AND METHOD

1. Study design

This was an analytical observational study with a cross sectional design.

2. Population and sample

The population in this study were all housewives in the working area of the Pinangsori Health Center (*Puskesmas*), Pinangsori District, Central Tapanuli Regency and who had visited the Puskesmas. The sample selection method in this study was purposive sampling, namely housewives aged 35 to 60 years, willing to become respondents, and become participants of the Health Social Security Administration (BPJS), data analysis using univariate, bivariate and multivariate analysis.

RESULTS

Table 1 characteristics of respondents

Characteristics	(N)	(%)
Age		
35-49 years	190	97
50-60 years	6	3
Education		
Low (<senior high school)	181	92.3
High (college)	15	7.7
Occupation		
Working	33	16.8
Unemployed	163	83.2
Income		
<Rp 2,500,000	48	24.5
>Rp 2,500,000	148	75.5
Parity		
Primi gravida	0	0
Multi gravida	181	92.3
Grande multi gravida	15	7.7
Age when married		
Risky (< 20 years or > 35 years)	29	14.8
Not risky (20-35 years)	167	85.2

Table 2. Frequency distribution of knowledge, attitude, and behavior on pap smear examination

Variable	n	%
Knowledge		
Good	135	68.9
Poor	61	31.1
Attitude		
Positive	135	68.9
Negative	61	31.1
Behavior		
Yes	101	51.5
No	95	48.5

1. Univariate Analysis

The results showed that the majority of respondents had good knowledge about pap smear examination in the work area of the Pinangsori Public Health Center, Pinangsori District, Central Tapanuli Regency in 2016 the majority of respondents had good knowledge, the attitude of respondents about Pap smear examination in the

work area of the Pinangsori Public Health Center, Pinangsori District, Central Tapanuli Regency in 2016 the majority had a positive attitude, the act of Pap smear examination in the area The work of the Pinangsori Health Center, Pinangsori District, Central Tapanuli Regency in 2016 the majority of them carried out inspections.

Table 3 Relationships of age, education, occupation, income, parity, age of marriage, knowledge, and attitude and Pap smears uptake

Variable	Pap Smear				RP	95% CI		p
	Yes		No			Lower limit	Upper limit	
	n	%	n	%				
Age (year)								
30-40	19	54.3	16	45.7	1.25	0.82	1.89	0.317
41-50	102	63.4	59	36.6				
Education								
High	91	61.9	56	38.1	1.01	0.76	1.45	0.932
Low	30	61.2	19	38.8				
Occupation								
Working	23	69.7	10	30.3	1.16	0.89	1.50	0.302
Unemployed	98	60.1	65	39.9				
Income								
>Rp 2,500,000	97	91.5	9	8,5	3.43	2.42	4.88	0.001
<Rp 2,500,000	24	26.7	66	73,3				
Parity								
Multi	80	55.2	65	44.8	2.29	1.28	4.10	0.001
Grande	41	80.4	10	19.6				
Age at married								
Not risky	67	58.8	47	41.2	1.21	0.83	1.18	0.314
Risky	54	65.9	28	34.1				
Knowledge								
Good	119	84.4	22	15.6	23.21	5.94	90.64	<0.001
Poor	2	3.6	53	96.4				
Behavior								
Positive	119	90.8	12	9.2	29.52	7.54	115.67	<0.001
Negative	2	3.1	63	96.9				

2. Bivariate Analysis

Table 3 showed that there is no relationships between age, education, occupation, parity, age at marriage,

and income on the Pap smear examination. There was a relationships between knowledge and good behavior on Pap smear examination.

Table 4. Result of Multiple Logistics Regression

Variable	OR	95%CI		p
		Lower limit	Upper limit	
Attitude	171.43	22.89	1283.74	<0.001
Constant	0.002			<0.001

3. Multivariate Analysis

Table 4 showed that positive attitude increased the likelihood of Pap smear

uptake and it was statistically significant (OR= 171.43; p< 0.001).

DISCUSSION

1. Relationship of Age and Pap Smear Uptake

The results of this study are not in accordance with Darnindro (2007) in Klender Jakarta, which found that out of 107 respondents only 33.7% had a pap smear and there was a significant relationship between the age of the respondent and the pap smear. Age affects the perception and mindset of a person. The older they get, the more their grasping power and mindset will develop, so that the knowledge they gain is getting better. At middle age, individuals will play a more active role in society and social life and make more preparations for the success of efforts to adapt to old age, in addition middle age people will spend more time reading. Intellectual abilities, problem solving, and verbal abilities are reported to have almost no decline at this age.

2. Relationship of Education and Pap Smear Uptake

The results of this study are not in accordance with the results of research conducted by Pratiwi (2015), regarding factors related to pap smear examination on women. Parity, as well as the relationship of external factors, namely health insurance, access to health services, husband's support, knowledge and attitudes.

Education is a process of changing attitudes and behavior of a person or group of people in an effort to mature humans through teaching and training efforts. Women's low education will complicate the process of teaching and providing information, so that knowledge about early detection of cervical cancer is also limited.

Knowledge is very closely related to education where it is expected that someone with higher education will have wider knowledge. However, it should be emphasized that a person with low education does not mean absolutely low knowledge. Increased knowledge is not absolutely obtained in formal education, but can also be obtained in non-formal education, a person's knowledge with an object also contains two aspects, namely positive and negative. These two aspects will ultimately determine a person's attitude towards a particular object. The more positive aspects of an object that are known, the more positive attitudes towards the object will grow.

3. Relationship of Income and Pap Smear Uptake

Economic status is the level of family income per month. Economic status is closely related to work, family income, area of residence, living habits, and economic status is also closely related to psychological factors in society (Noor, 2008). Income is a measure that is often used to measure social economy among community. The better the condition of the community's economic status, the higher the percentage used for health services. Health survey data in 1992, showed that the average use of health services was associated with an increase in income, both for men and women.

4. Relationship of Parity and Pap Smear Uptake

Parity with the number of children more than two people or the delivery distance is too close has a risk of changes to abnormal cells in the cervix. If the number of children causes abnormal cell changes from the

epithelium of the cervix which can develop in malignancy.

5. Relationship of age at marriage and pap smear uptake

Married age less than 20 years has a greater risk of experiencing changes in cervical cells. This is because at a young age the uterine cells are still immature. So these cells are not susceptible to chemicals carried by sperm and all kinds of changes. If it is not mature, when there is stimulation, the cells that grow are not balanced with the dead cells, so that excess cells can turn into cancer cells.

6. Relationship of Knowledge and Pap Smear Uptake

The results of this study are in accordance with Trisnawati (2014) showed that knowledge ($p= 0.005$), attitude ($p= 0.003$), perceived benefit ($p= 0.033$) were correlated with pap smear uptake. Good knowledge greatly influences a person in taking health action. A person's actions are strongly influenced by knowledge or cognitive. A person's behavior will be more lasting and lasting if it is based on good knowledge.

The respondent's lack of knowledge is because housewives still lack information about pap smears and mothers still don't get counseling about pap smears and it is hoped that health workers and related agencies will improve further counseling to increase respondents' knowledge about pap smears.

7. Relationship of Attitude and Pap Smear Uptake

The results of this study are in accordance with the results of research conducted by Salmah (2012) regarding

the dominant factors related to the behavior of the Pap smear examination in women of childbearing age, the behavior of the Pap smear examination in Wus at Graha Prima Housing, Bekasi Regency in 2010. The results showed a relationship which means by Pap smear examination on income, knowledge, attitudes and social support. The most dominant factor is social support.

REFERENCES

- BPJS (2015) Badan Penyelenggara Jaminan Sosial (Social Security Administrator) From: www.bpjs-kesehatan.go.id.
- Candraningsih (2011). Hubungan tingkat pengetahuan WUS tentang kanker serviks dengan praktik deteksi dini kanker serviks di BPS IS Manyaran Semarang [Relationships women of childbearing age level of knowledge about cervical cancer with cervical cancer early detection practices in BPS IS Manyaran Semarang. From <http://ejournal.ac.id/index.php/ilmukeperawatan/search>.
- Damalia (2014) Jurnal Penelitian. Upaya Preventif Permasalahan Kesehatan Reproduksi Perempuan Lapas (Preventive Efforts on Women's Reproductive Health Problems in Prisons). <http://ojs.akbidylpp.ac.id>.
- Departemen Kesehatan RI (2007). Petunjuk teknis pencegahan-deteksi dini kanker leher rahim dan kanker payudara (Technical guidelines for prevention-early detection of cervical cancer and

- breast cancer). Jakarta: Departemen Kesehatan RI.
- Dinkes Tapanuli Tengah (2016) Laporan PUS yang melakukan Papsmer
- Eka P (2015) Faktor yang berhubungan dengan pemeriksaan papsmer pada ibu-ibu PKK Dusun Tajek Sleman (Factors related to Pap smear examination for PKK women in Tajek Sleman Hamlet) ejournal.litbang.depkes.go.id/-index.php
- Fitria (2007) faktor yang berhubungan dengan papsmer (Pap smear-related factors) From Undip.ac.id
- HPV Information Center (2014) Human Papillomavirus and Related Disease Report: Indonesia. From: <http://www.bpjs-kesehatan.go.id/bpjs/dmdocuments>.
- Sjamsudin (2010) Cermin Dunia Kedokteran: pencegahan dan deteksi dini kanker serviks (Mirror of the World of Medicine: prevention and early detection of cervical cancer) From: <http://www.kalbe.co.id>.
- Sukaca (2011). Pengetahuan ibu tentang kanker serviks (Mother's Knowledge About Cervical Cancer) From : eprints.undip.ac.id.
- Twain (2009). Minat melakukan papsmer ditinjau dari persepsi tentang kesehatan (Interest in doing Papsmer in terms of Perceptions about Health). From: [eprints. Unika.ac.id](http://eprints.Unika.ac.id).
- Wahidin (2014) Faktor Yang Mempengaruhi Peserta Bpjs Memeriksa Kesehatan (Factors Affecting BPJS Participants Check Health) From: etd.eprints.ums.ac.id.
- WHO (2014). Cancer cntrol knowledge into action From: <http://www.e-jurnal.com>.
- Wijaya dan Delia (2010). Cegah Dan Deteksi Kanker Serviks (Prevent and Detect Cervical Cancer). Jakarta: Elex Media Komputindo.
- Wulan (2010). Faktor-faktor yang berhubungan dengan perilaku pemeriksaan pap smear pada wanita usia subur di Puskesmas Kecamatan Makasar (Factors relating to the behavior of pap smear examination in women of childbearing age at the Makassar District Health Center), From: <http://ejournal.unud.ac.id>.