Knowledge and Attitudes about Breast Self-Examination (BSE) in Women of Childbearing Age (WCA) in Sigulang Village, Padangsidimpuan District

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Article Info	ABSTRACT
  Corresponding Authors: Dewi Aminasty Siregar Midwifery Diploma Three Study Program, STIKES Darmais Padangsidimpuan, Indonesia E-mail: dewiaminasty65@gmail.com	According to *the World Health Organization* (WHO) 8-9% of women will experience breast cancer, this makes breast cancer the most common type of cancer in women. The purpose of this study was to determine "the relationship between knowledge and attitudes about breast self-examination (BSE) in women of childbearing age (WCA) in Sigulang Village". This research is descriptive in which a sample of 30 respondents obtained using a questionnaire was processed by editing, coding, tabulating, scoring and then presented in the form of a frequency distribution table. From the research results obtained frequency distribution based on the knowledge of the majority of less knowledgeable 24 respondents (80%). Based on the age, the majority of respondents lack knowledge of 21 (69 ,72 %) with the age of 20-40 years. Based on education, the majority of respondents lack knowledge of 18 (60%) with high school education. Based on the occupation, the majority of respondents are less knowledgeable than 18 respondents (60%) with the occupation of housewives. Based on information sources, the majority of respondents lack knowledge of 18 (60%) from electronic media. It can be concluded that the knowledge of women of childbearing age about breast self-examination is still lacking.

1. INTRODUCTION

According to the *International Agency for Research on Cancer* (IARC), there were 12.7 million new cases of cancer in the world in 2008, which in 2030 is estimated to continue to increase to 21.4 million. Deaths from cancer also increased from 7.6 million in 2008 to 13.2 million in 2030. The latest data from the American Cancer Society has calculated that in 2013, there were 2240 new cases of breast cancer in men with a mortality rate of 410. Meanwhile approximately 39,620 women die each year from breast cancer.

This cancer continues to increase and has claimed many lives. Cancer is the second leading cause of death in the United States after heart disease, and the sixth leading cause of death in Indonesia. Many types of cancer can be avoided, namely with early detection and prevention, so that the incidence of cancer can be reduced [5].

According to the World Health Organization (WHO) 8-9% of women will experience breast cancer, this makes breast cancer the most common type of cancer in women. Every year more than 250,000 or every hour there are 28 new cases of breast cancer diagnosed in Europe and approximately 175,000 or every hour there are 19 new cases of breast cancer diagnosed in the United States. In addition, according to the NCI (*National Cancer Institute*) there are estimates of new cases of 232,340 women and 2,240 men, while the number of deaths from breast cancer is 39,620 women and 410 men [10].

The main problem with the high mortality rate of breast cancer is the lack of public knowledge and low awareness of early detection of breast cancer. As a result, most cancers are found at an advanced stage and difficult to treat, thus placing a great burden on cancer patients and their families [2].

Patients who are positive for breast cancer are increasing every year, therefore prevention efforts are needed in the form of early detection and screening of breast cancer, because early detection and screening can reduce breast cancer mortality by 25-30% [22]

Women who do early detection of breast cancer can be said to be still few. Whereas the importance of breast examination early on is to find out a woman's breasts are normal or not. The problem that occurs is that cancer treatment in Indonesia is still not optimal, because almost 70% of new cases are found in stage three and stage four. Cancer cure is determined by the condition of breast cancer when it was first discovered. Cancer found in stage I has an 80–90% chance of cure. In stage II where the cancer begins to spread to the lymph nodes around the breast, the chance of cure decreases to 60-70%. The probability of recovery decreases in patients with stage III, which is 30-40%. The worst is stage IV with less than 10% chance of cure [17].

From an initial survey conducted on October 24 – 26, 2021, researchers found 10 women of childbearing age. In Sigulang Village, Padang Sidempuan District, Southeast 10 people said they did not know how to do breast self-examination and found a case of breast cancer on behalf of Mrs. N, the mother had gone to a health worker and the doctor suggested surgery to remove the right breast and according to the family 's information a few months later the mother's illness recurred, the doctor suggested surgery to remove both breasts, and a few months later the mother died in 2021 ago, in connection with this, the researcher was interested in taking the title " The Relationship of Knowledge and Attitude About Breast Self-Examination (BSE) in women of childbearing age (WUS) in Sigulang Village, Padang Sidempuan District, Southeast .

Knowledge is the result of knowing, and this occurs after people have sensed a certain object. Sensing occurs through the five human senses , namely the senses of sight, hearing, smell, taste, and touch. Most of human knowledge is obtained through the eyes and ears [11].

According to Arikunto [1], one's knowledge can be known and interpreted with a qualitative scale. The measurement categories are:
a. Good   : if the subject is able to answer the questions correctly as many as 16-20 questions , that is 76-100% of all questions have good knowledge .
b. Enough : if the subject is able to answer the question correctly 12-15
   questions that is 56-75% of all questions knowledgeable enough .
c. Less   : if the subject is able to answer the questions correctly as much as < 12 questions , namely 0-55 % of all questions with less knowledge [9]

Women of Childbearing Age (WCA) are women who enter the age of 15-49 years without taking into account their marital status, who have reproductive organs that are still functioning properly, [8]. Women of childbearing age are women aged 18-49 years with reproductive organs functioning properly, either with unmarried, married or widowed status [8]. According to the Ministry of Health, fertile women are women aged 15-49 years with reproductive organs functioning properly, either unmarried, married or widowed.

Breast is an organ that plays a role in the lactation process in women while in men this organ is not developed and has no function [22]. The breast is an organ located under the skin and above the chest muscles [16]. Breast self-examination (aware), all women over the age of 20 years should be aware of it every month and immediately consult a doctor if a lump is found. Breast self-examination (BSE), it is very important to be recommended to the community because almost 86% of lumps in the breast are found by the sufferer themselves. The American Cancer Society in the breast cancer screening project recommends the following in women even though there are no complaints [22].
a. Women < 20 years do BSE every three months.
b. Women > 35 years – 40 years do mammography.
c. Female > 40 years check up to a specialist.
d. Female > 50 years check up routine / mammography every year.
e. Women who have high risk factors (for example, there is a family who suffers from cancer) checks with the doctor more routinely and more often.
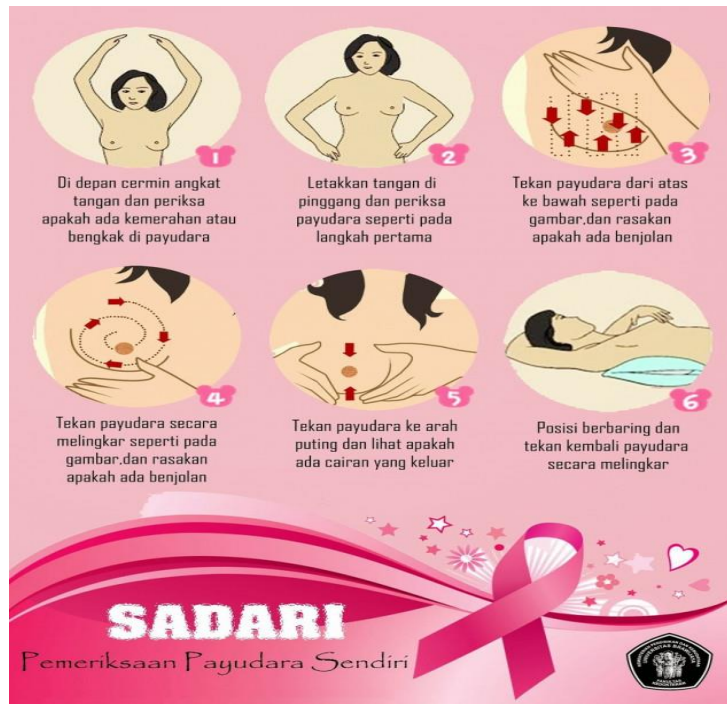
Figure 1. BSE Technique

2. METHODS

The research location is in Sigulang Village, Padang Sidempuan Southeast District in 2021. The study chose the research location because it filled the research sample, because there were still many women of childbearing age who did not know about breast self-examination. This research is a type of descriptive research, namely by using primary data directly collected through a questionnaire. Descriptive is a research method carried out with the aim of knowing the relationship between knowledge and attitudes about breast self-examination (BSE) in women of childbearing age (WCA) in Sigulang Village, Padang Sidempuan District, Southeast. The population is the entire research subject. (Arikunto, 2006). The population in this study were all women of childbearing age in Sigulang Village, Padang Sidempuan Southeast District, amounting to 180 people. The sample is part or representative of the population under study [1]. The samples in this study were women of childbearing age (WCA) in Sigulang Village, Padang Sidempuan Southeast District in 2021, totaling 30 people.

sampling technique in this study is by means of a simple random system *(Simple Random Sampling)* because the sampling of members of the population is carried out randomly without regard to the existing strata in the population. The data collected is primary data and secondary data obtained by using a tool in the form of a questionnaire which aims to determine the knowledge of women of childbearing age (WCA) about breast examination which consists of 20 questions and data collection from midwives in Sigulang Village. Data collection was carried out by giving questionnaires to respondents by first asking the respondent's consent by signing a letter of agreement, then the researcher gave a brief explanation to the respondent how to fill out the questionnaire, so that data collection went well and thoroughly, the researcher supervised or accompanied the respondent. After the respondent finished filling out the questionnaire, the questionnaire was returned to the researcher.

Data analysis was carried out descriptively in the form of distribution, frequency, and narrative tables and then compared with existing theories [14]. Giving a score for each answer given by the respondent, the correct answer is given a score.

1. The wrong answer score is 0 (the maximum score of each aspect of the answer is associated with a score) 0 x 20 = 0
2. The correct score is 5 (the maximum score of each aspect of the answer is related to the number of scores) which is 5 x 20 = 100

According to Notoatmodjo (2010), the formula for data analysis techniques is

$$P = F/N \times 100\%$$

Description: P = Percentage of respondents answered
F = Number of correct answers
N = Number of questions

3. RESULTS AND DISCUSSION
3.1. Results
Based on the results of research that has been carried out on 30 respondents "The Relationship of Knowledge and Attitudes About Breast Self-Examination (BSE) in Women of Childbearing Age (WCA) in Sigulang Village, Southeast Padang Sidempuan District in 2021". Obtained data from 30 respondents and the results are included in the frequency distribution as follows:

3.1.1. Respondent's Knowledge Level

Table 1
Frequency distribution of the relationship between knowledge and attitudes about breast self-examination (BSE) in women of childbearing age (WCA) based on knowledge

No	Knowledge	Frequency	Percentage (%)
1	Well	0	0%
2	Enough	6	20%
3	Not enough	**24**	**80%**
	Amount	30	100%

Based on table 1, the results obtained that the knowledge of respondents regarding breast self-examination is the majority of whom have less knowledge as many as 24 people (80%), while the minority have sufficient knowledge of 6 people (20%).

3.1.2. Knowledge Level of Respondents by Age

Table 2
Frequency distribution of the relationship between knowledge and attitudes about breast self-examination (BSE) in women of childbearing age (WCA) by age

No	Age	Well		Enough		Not enough		Amount	
		F	%	F	%	F	%	F	%
1	< 20	-	-	2	6.5%	2	6.5%	4	13%
2	20-40	-	-	4	13.2%	**21**	**69.8%**	25	83%
3	>40	-	-	-	-	1	4%	1	4%
	Amount	-	-	6	19.78%	24	80.22%	30	100%

Based on table 2, the results obtained that the respondents' knowledge about breast self-examination based on age, the majority were less knowledgeable with the age of 20-40 as many as 21 people (69.8 %), and the minority had less knowledge with age >40 as many as 1 person (4%).

3.1.3. Respondent's Knowledge Level Based on Education

Table 3
Frequency Distribution of the Relationship between Knowledge and Attitude About Breast Self-Examination (BSE) in Women of Childbearing Age (WUS) Based on Education

No	Education	Well		Enough		Not enough		Amount	
		F	%	F	%	F	%	F	%
1	SD	-	-	-	-	2	7%	2	7%
2	JUNIOR HIGH SCHOOL	-	-	-	-	4	13%	4	13%
3	SENIOR HIGH SCHOOL	-	-	6	20%	**18**	**60%**	24	80%
4	Graduated College	-	-	-	-	-	-	-	-
	Amount	-	-	6	20%	24	80%	30	100%

Based on table 3, the results obtained that knowledge of women of childbearing age about breast self-examination based on education, the majority with knowledge lacked high school education as many as 18 people (60%), and the

minority with knowledge with less education graduated from elementary school as many as 2 people (7%).

3.1.4. Respondent's Knowledge Level Based on Occupation

Table 4
Frequency distribution of the relationship between knowledge and attitudes about breast self-examination (BSE) in women of childbearing age (WUS) based on occupation

No	Work	Knowledge						Amount	
		Well		Enough		Not enough			
		F	%	F	%	F	%	F	%
1.	farmer	-	-	-	-	1	3%	1	3%
2.	civil servant	-	-	-	-	-	-	-	-
3.	Self-employed	-	-	6	20%	5	17%	11	37%
4.	IRT	-	-	-	-	**18**	**60%**	18	60%
	Amount	-	-	6	20%	24	80%	30	100%

Based on table 4, the results show that the knowledge of women of childbearing age about breast examination based on work is the majority with knowledge of less than 18 people working as domestic workers (60%), and the minority with knowledge of less working as farmers as much as 1 person (3%).

3.1.5. Respondent's Knowledge Level Based on Information Source

Table 5
Frequency distribution of the relationship between knowledge and attitudes about breast self-examination (BSE) in women of childbearing age (WUS) based on information sources

No	Resources	Knowledge						Amount	
		Well		Enough		Not enough			
		F	%	F	%	F	%	F	%
1.	Print media	-	-	-	-	2	7%	2	7
2.	Electronic Media	-	-	-	-	**18**	**60%**	18	60%
3.	Health workers	-	-	6	20%	4	13%	10	33%
	Amount	-	-	6	20%	24	80%	30	100%

Based on table 5, the results show that the knowledge of women of childbearing age about breast self-examination is the majority of knowledgeable people who lack sources of information from electronic media, as many as 18 people (60%), and a knowledgeable minority who lack information sources from print media as many as 2 people (7%). .

3.1.6. Attitudes About Breast Self-Examination (BSE) To Respondents
Table 6
Attitudes About Breast Self-Examination (BSE) To Respondents

Attitude	Number of Respondents	Percentage
Positive	27	90%
Negative	3	10%

Based on table 6, the results show that the attitude of women of childbearing age about breast self-examination is the majority positive as many as 27 people (90%), and the minority being negative as many as 3 people (10%).

3.2. Discussions
Based on the results of "The Relationship of Knowledge and Attitudes About Breast Self-Examination (BSE) in Women of Childbearing Age (WCA) Based on Knowledge in Sigulang Village, Padang Sidempuan Southeast District in 2021" the following results were obtained:

3.2.1. Knowledge of women of childbearing age about breast self-examination based on knowledge
In accordance with the results of the study, it was found that knowledge of women of childbearing age about breast self-examination based on good knowledge did not exist, 6 people (20%) had sufficient knowledge and 24

people (80%).

Knowledge is the result of knowing and this happens after someone makes a sense of a certain object. Sensing occurs through the five human senses, namely the senses of sight, smell, taste and touch. Most of human knowledge is obtained through the eyes and ears [11]

Based on the results of research that has been carried out that knowledge of women of childbearing age about breast self-examination still needs to be improved because there is still a lot of knowledge of women of childbearing age who lack knowledge about breast self-examination techniques. This could be due to age, education, occupation and sources of information, for this reason it is necessary to provide counseling about breast self-examination techniques so that the knowledge of women of childbearing age increases. And from the results of research conducted also obtained that respondents with higher education have a better level of knowledge than respondents with low education. This is in accordance with the theory that the higher a person's education, the better his knowledge.

3.2.2. Knowledge of Women of Childbearing Age About Breast Self-Examination Based on Age

Based on the results of the study, it was found that the knowledge of respondents about breast self-examination techniques based on age was <20 years old, good knowledge was not available, 2 people had sufficient knowledge (6.5%), less knowledge was 2 people (6.5%), based on age 20-40 years old with no good knowledge, 4 people with sufficient knowledge (13,2%), 21 people with less knowledge (69,8%) And based on age >40 with good knowledge none, not enough knowledge, less knowledge 1 person (4%) .

According to Notoatmodjo [11], Age is a variable that is always considered in epidemiological investigations. The morbidity and mortality rates in almost all circumstances show a relationship with age.

According to the results of research conducted by researchers, it is not in line with the theory because the older a person gets, the more knowledge he gets. This is because one's thinking in receiving something both information and others can be influenced by age. According to the assumptions of researchers found in the field that women of childbearing age >40 years of age have lower knowledge than those aged 20-40 years, this is due to the fact that those <40 years old have reduced memory and assume they are in good health and do not have breast cancer. fertile women feel that they do not need to be aware, and because of the lack of concern for women of childbearing age and feel there is no time to carry out breast self-examination.

3.2.3. Knowledge of Women of Childbearing Age About Breast Self-Examination Based on Education

Based on the results of the study, it was found that the respondents' knowledge of breast self-examination techniques based on education that graduated from elementary school with good knowledge did not exist, lacked sufficient knowledge, lacked knowledge as many as 2 people (7%), based on education graduated from junior high school with good knowledge, none, moderate knowledge not Yes, there are 4 people with less knowledge (13%), based on high school graduate education with good knowledge none, 6 people with sufficient knowledge (20%), 18 people with less knowledge (60%), and based on tertiary education graduates with good knowledge not there is, knowledgeable enough does not exist, knowledgeable less does not exist.

According to Notoatmodjo [11], education in general is all efforts that are planned to influence other people, whether individuals, groups, or communities so that they do what is expected by education actors.

According to Sugiarto [25], education means guidance given by one person to another in order to understand something. It is undeniable that the higher a person's education, the easier it is for them to receive information, and in the end the knowledge they have the easier it is for them to receive information, and in the end the knowledge they have will be more and more, on the contrary if someone has a low level of education, it will hinder development of the person's attitude towards the acceptance of newly introduced information and values.

From the results of the study, it was found that the research was not in line with the theory, because respondents with higher education had lower knowledge than respondents with lower education. This is because at the level of education that has finished high school, the respondents are less aware about breast self-examination, and because of a lack of awareness about science in the surrounding environment and lack of awareness.

3.2.4. Knowledge of Women of Childbearing Age About Breast Self-Examination Based on Occupation

Based on the results of the study, it was found that the respondent's knowledge of breast self-examination techniques based on farmer's work with good knowledge, none with sufficient knowledge, 1 person with less knowledge (3%), based on the work of civil servants with good knowledge, none with sufficient knowledge, lack of knowledge, no Yes, based on work Self-employed with good knowledge none, with sufficient knowledge as many as 6 people (20%), with less knowledge as many as 5 people (17%), based on work as housewives with good knowledge none, with sufficient knowledge none, lack of knowledge 18 people (60%).

According to Sugiarto [25], the work environment can make a person gain experience and knowledge, either directly or indirectly.

According to Notoatmodjo [10], work is something that is done to earn a living and the livelihood of the community. Job factors also affect the knowledge of someone who works, his knowledge will be wider than someone who does not work, because by working someone will have a lot of information.

From the results of the research conducted, the results are in line with the theory, because respondents who have jobs as housewives tend to have little information. However, some of the housewives studied in this case get

more information from the surrounding environment, due to the lack of awareness and concern for women of childbearing age when health workers provide counseling about breast self-examination techniques so that there are still many mothers who lack knowledge. In contrast to respondents who work, they will get health information seen from their workplace because they interact more often with other people, the more information that adds to their knowledge and more experience that is passed by respondents who work compared to housewives who only work in the workplace. house.

3.2.5. Knowledge of Women of Childbearing Age About Breast Self-Examination Based on Information Sources

Based on the results of the study, it was found that respondents' knowledge about breast self-examination based on information sources at the print media level with good knowledge, none with sufficient knowledge, 2 people with less knowledge (7%), based on electronic media level information sources with good knowledge, none, sufficient knowledge none, with less knowledge as many as 18 people (60%), based on the level of information sources of health workers with good knowledge do not exist, with sufficient knowledge as many as 6 people (20%), with less knowledge as many as 4 people (13%).

Notoatmodjo (2003), information obtained from various sources will affect a person's level of knowledge. If someone gets a lot of information then he tends to have broader knowledge .

According to Sugiarto [25] , Information is the ease of obtaining information that can accelerate a person to acquire new knowledge.

From the results of research conducted, it is found that the majority of women of childbearing age obtain information from electronic media. This is in accordance with the theory because many women of childbearing age are less knowledgeable due to a lack of awareness and ignorance about the latest information from electronic media and because better information is obtained from information sources from health workers because it is clearer and more accurate.

3.2.6. Relationship between Knowledge and Attitude of Women of Childbearing Age About Breast Self-Examination

Based on the results of table 4.1, it is found that knowledge of women of childbearing age about breast self - examination (BSE) is still lacking with a frequency of 24 people 80%. If it is connected with the attitude of women of childbearing age about breast self-examination (BSE) in table 4.6, it is very contrary to the positive attitude with a frequency of 27 people, 90%. This can happen because of the different attitudes of respondents , this is also due to various factors that influence attitudes, namely personal experience, culture, the influence of other people who are considered important, mass media, educational institutions and emotional factors.

4. CONCLUSION

From the results of research on the relationship between knowledge and attitudes about breast self-examination (BSE) in women of childbearing age (WCA) in Sigulang Village, Padang District after being able to Southeast Asia in 2021 , the following conclusions can be drawn:

1. Research results Based on the knowledge of women of childbearing age from 30 respondents, the majority of respondents had less knowledge as many as 24 people (80%) and a minority with sufficient knowledge as many as 6 people (20%).
2. Research results Based on the knowledge of women of childbearing age from 30 respondents, the majority of respondents with less knowledge aged 20-40 were 21 people (69.72%), and the minority had less knowledge as much as 1 person (4 %).
3. Research results Based on the knowledge of women of childbearing age, the majority of respondents had less knowledge based on education as many as 18 people (60%), and a minority with less knowledge as many as 2 people (7%).
4. The results of the study Based on the knowledge of women of childbearing age from the majority of the 30 respondents with less knowledge based on work, as many as 18 people (60%), and the minority with knowledge of less knowledge as much as 1 person (3%).
5. The results of the study Based on the knowledge of women of childbearing age, the majority of respondents had less knowledge based on electronic media, namely 18 people (60%), and a minority with less knowledge as many as 2 people (7%).
6. The results of the study were based on the knowledge and attitudes of women of childbearing age about breast self-examination, namely lack of knowledge, namely as many as 24 people (80%) with a positive attitude, namely 27 people (9 ( )%).

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