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The Effect of Breast Self-Examination Health Education on Knowledge and Motivation to Perform Breast Self-Examination in Adolescent Females at The SMAN 2 Way Tenong

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ABSTRACT

Background & Objective: In Indonesia, the number of breast cancer patients is estimated to increase by around 65,000 new cases each year, with 70% of new cancer patients visiting the doctor at the final stage. One of the causes of the high number of breast cancer cases is a lack of knowledge, motivation, and desire to undergo early detection examinations. SADARI is a self-breast examination to detect any abnormalities in the breasts. This study aims to determine the effect of health education about SADARI on knowledge and motivation to perform SADARI among female adolescents at SMAN 2 Way Tenong. **Method:** This study is a pre-experimental study using a one-group pretest-posttest design. The population consists of 31 female adolescents at SMAN 2 Way Tenong. The sample used is 31 female adolescents at SMAN 2 Way Tenong. The sampling technique used is total sampling. The instrument used was a questionnaire, and the study was conducted on November 13, 2024, with data analyzed using the Wilcoxon Signed Rank Test. **Result:** The average knowledge about SADARI before the intervention was 48.3% (low knowledge), while the average after the intervention was 91.1% (good knowledge). The average motivation to perform SADARI before was 32.9% (low motivation), while the average after was 90.5% (high motivation). There was an effect of SADARI health education on knowledge with a p-value of 0.000 > 0.05. **Conclusion:** There is an effect of SADARI health education on motivation to perform SADARI, with a p-value of 0.000 > 0.05. It is hoped that this research can provide information about SADARI to adolescent girls, serve as a reference for education and counseling for high

schools and health workers, become a source of publication and literature, and be used as a reference for Aisyah Pringsewu University.

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Introduction

A non-communicable disease, cancer is characterised by extremely fast, unchecked cell and tissue growth and development. This growth has the potential to spread between cells and other tissues and interfere with metabolic functions. A malignant tumour (abnormal lump) that develops in breast tissue is called breast cancer, or *Carcinoma Mammae*. Mammary glands, glandular ducts, and supportive breast tissue (fat tissue or breast connective tissue) can all harbour this tumour. It's also possible for this tumour to spread to other bodily parts. Metastasis is the term for its spread (Ketut S & Kartik., 2022).

According to data from the World Health Organisation (WHO), 670,000 people died from breast cancer worldwide in 2022, while 2.3 million women received a diagnosis. Every country in the world has breast cancer, which can strike women at any age after puberty, though the prevalence rises with age. According to Globacon data, 68,858 new cases of breast cancer (16%) out of 396,914 new cases of cancer were reported in Indonesia in 2020. In the meantime, over 22,000 cases resulted in fatalities. According to data, there are an estimated 65,000 new instances of breast cancer diagnosed in Indonesia year. According to the Ministry of Health (2022), 70% of new cancer patients arrive near the end of their disease. The working area of Pajar Bulan Publ Health Center in 2022-2023 recorded 4 cases of breast cancer. One of the causes of the high number of cases of breast cancer with late stages is the lack of understanding, motivation and desire to undergo breast cancer screening as early as possible.

Although not a primary reproductive organ, breasts are a secondary sex characteristic that marks a woman's biological maturity. During puberty, breast tissue experiences rapid growth due to the influence of estrogen and other hormones. These changes make breasts an important part of women's health, so they need special attention. Therefore, performing a Breast Self-Examination (BSE) routinely becomes an important step in early detection of abnormalities or changes that are potentially dangerous, including the risk of breast cancer (Ayu et al., 2024). Breast Self-Examination (BSE) is the process of examining one's own breasts to look for any abnormalities. BSE arises when a woman becomes concerned about the state of her own breasts. This action is a means of learning about changes that take place in the breasts and is equipped with specific methods to detect breast cancer early. By examining the breasts from the front, left, and right sides, looking for lumps, changes in skin tone, scaly nipples, and pus and blood discharge, BSE is mostly used to identify breast cancer (Deswita, 2023).

According to WHO in 2021, there were 19.3 million women who routinely performed early detection of breast cancer with BSE. Countries that routinely perform BSE are the United States (42%), South Korea (40%), while Iran (6%) performs BSE every month (WHO 2021). Research on non-communicable diseases (PMT) 2016 stated that public behavior in early detection of breast cancer is still low. It was recorded that

53.7% of the public had never performed BSE, while 46.3% had performed BSE (Ministry of Health 2017).

Awareness of the importance of understanding cancer is very important because early detection and understanding can identify early symptoms of this disease, thus allowing early cancer treatment, treatment becomes effective and efficient, so that it is not too dangerous and can even be treated completely. BSE can enable early detection of breast cancer, BSE is very simple and can be done at home. The better you do a breast examination, the better you know it and the easier it is to find something wrong with the breast. This procedure is very important because almost 85% of breast lumps are found during BSE (Herman & Hinga, 2019). This examination should be understood and carried out as early as possible starting from adolescence.

Teenagers are those aged between 10 to 20 years, teenagers have 3 stages, early teenagers from 10 to 14 years old, middle teenagers from 15 to 16 years old, late teenagers from 17 to 20 years old. Physical changes in teenagers occur very quickly, in girls it is marked by enlarged breasts, widened hips, and hair growth in the armpits and around the genitals, increased weight and height, menarche is the peak of reproductive organ maturity.

A crucial first step in the early detection of breast cancer, which can improve prognoses and lower death rates, is early breast screening. However, there is a pressing need for efficient interventions because adolescents frequently lack sufficient information about this practice. The goal of health promotion is to persuade people to embrace healthy lifestyle choices. Operationally, health education and promotion encompass a range of initiatives meant to enhance community awareness, attitudes, and behaviour towards preserving and enhancing health. The main objective is to raise awareness and broaden individual and group understanding of the importance of maintaining the quality of health of oneself, family, and the surrounding environment (Ramli et al., 2023). Health education (Penkes) has emerged as a potential method to increase understanding, awareness, and motivation of adolescents towards early breast examination. Health education can be an effective tool in increasing adolescent knowledge and motivation about early breast examination. Penkes aims to provide accurate information, form positive attitudes, and improve practical skills and motivation in maintaining health. (Listiyorini et al, 2020).

Objective

The preliminary study conducted by the researcher found that female students of SMAN 2 Way Tenong had never received education about Breast Self-Examination (BSE) and the female students had never performed BSE. Based on this background, the author is interested in conducting research on the influence of health education about BSE (Breast Self-Examination) on knowledge and motivation to perform BSE in female adolescents at the SMAN 2 Way Tenong.

Method

The research type is quantitative with pre-experimental design with one group pretest - posttest design. In this study, counseling intervention was given and knowledge and motivation were assessed before and after treatment. The purpose of this study was to determine the effect of health education about BSE (Breast Self-Examination) on knowledge and motivation to do BSE in adolescent girls at SMAN 2

Way Tenong. The population in this study were adolescent girls who attended SMA N 2 Way Tenong, totaling 31 adolescent girls. The sampling technique in the study used a non-probability sampling technique, namely total sampling. Data collection in this study was carried out on November 13, 2024 using a questionnaire research instrument distributed to adolescent girls who met the inclusion criteria. Data were analyzed using the Wilcoxon Signed Rank Test.

Results

Univariate analysis in this study was conducted to determine the frequency distribution of respondents based on early childhood violence, parental knowledge, parental past experiences, parental parenting patterns and the number of children at the Aisyiyah Kindergarten, Gisting Sub-District in 2023.

TABLE 1. The average value of knowledge about BSE before and after BSE health education was given to adolescent girls at SMAN 2 Way Tenong.

No	Knowledge	N	Mean	Min	Max	Sdt. Deviation
1	Before	31	48,3	30,8	69,2	10,51
2	After	31	91,1	76,8	100	7,41

Notes. *N*'s range from 31 to 31 due to occasional missing data. * $p < .05$.

According to table 1, the average level of BSE knowledge among teenage girls was 48.3% prior to receiving BSE health education, indicating inadequate knowledge, and 91.1% following the BSE health education, indicating strong knowledge. When someone knows something, it's referred to as knowledge. Knowing and being known, along with being conscious of what they wish to know, are always components of something that becomes their knowledge. As a result, knowledge always involves an object—something that is faced—and a subject—something that is aware enough to know about something. According to Rachmawati (W.C., 2019), knowledge can be defined as the outcome of human knowledge about something or all human acts to comprehend a given object.

The process of examining one's own breasts to look for any abnormalities is known as breast self-examination, or BSE. BSE is the result of a woman's growing anxiety over the state of her own breasts. This procedure is designed to identify abnormalities in the breasts and includes specific measures to detect breast cancer early. BSE is primarily used to identify breast cancer by looking at the breasts from the front, left, and right sides, looking for lumps, changes in skin tone, scaly nipples, and pus and blood discharge (Deswita, 2023).

A crucial first step in the early detection of breast cancer, which can improve the prognosis and lower mortality, is an early breast examination. However, there is a pressing need for efficient interventions because adolescents frequently lack sufficient information about this practice. One promising strategy for raising teenagers' knowledge, awareness, and motivation for early breast exams is health education. Teenagers' awareness and enthusiasm for early breast exams can be raised with the help of health education. Health education aims to provide accurate information, form positive attitudes, and improve practical skills and motivation in maintaining health (Listiyorini et al, 2020).

The findings of this researchs are consistent with Dhawo et al.'s 2019 study. The 18 questions in the Pre and Post test are identical and fall under the purview of C1 and C2, which are about learning and comprehending the BSE-related content. The Mann-Whitney test was used to analyse the Pre and Post findings. The study's findings demonstrated that SMP Anggrek pupils' knowledge had significantly increased. The

mean value before counseling was 10,62 and the mean value after counseling was 12.74. Another study conducted by Pitaloka, et al (2021) The results of the study obtained an average (mean) knowledge score before being given health education using videos of 4,88. The average (mean) knowledge score after being given health education using videos was 9,81.

TABLE 2. The average value of motivation to perform BSE before and after being given BSE health education to female adolescents at SMAN 2 Way Tenong

No	Motivation	N	Mean	Min	Max	Sdt. Deviation
1	Before	31	32,9	20,8	62,6	10,73
2	After	31	90,5	79,2	100	5,67

Notes. N's range from 31 to 31 due to occasional missing data. * $p < .05$.

It is clear from table 2 that teenage girls' average motivation to perform BSE was 32.9% before receiving BSE health education, indicating low motivation, and 90.5% after receiving BSE health education, indicating strong motivation. A human's conscious or unconscious desire to take action towards a specific objective is known as motivation. As is well known, human behaviour is impacted by motivation or the desire to pursue interests that satisfy personal needs. The psychology of behavioural modification examines and modifies human behaviour (Siregar, 2020).

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The results of this study are in line with research conducted by Tauho et al (2023), showing that 2.1% of respondents had good motivation before being given health education and increased to 19.1% after being given health education who were successful in carrying out the BSE technique well.

According to a different study by Fatmawati & Prastiwi (2020), 69.1% of respondents were already aware of BSE, and 57.4% of those who were already aware of sadari had performed sadari. According to the findings of the 2019 study by Deska et al., 9.37% of respondents were highly motivated prior to receiving health education, and this percentage rose to 100% following the delivery of health education.

TABLE 3. The influence of BSE health education on knowledge about BSE in adolescent girls at SMAN 2 Way Tenong

Knowledge	N	Mean	Improvement	Z	P-Value
Before	31	48,3	42,8	-4,875	0,000
After	31	91,1			

Notes. N's range from 31 to 31 due to occasional missing data. * $p < .05$.

Based on table 3, the results of knowledge before and after being given BSE health education have an average increase of 42.8%. After conducting the Wilcoxon Signed Rank Test analysis, a p-value (0.000> 0.05) was obtained, which means that there is an effect of BSE health education on knowledge about BSE in female adolescents at the SMAN 2 Way Tenong.

Early detection of breast cancer can be achieved effectively and efficiently using Breast Self-Examination (BSE). Women perform breast self-examinations by hand, or BSE, in an attempt to identify breast cancer early (Asmalinda et al, 2022). Early

detection of breast problems is one advantage of BSE. Breast sizes and forms vary among women. Women can assess their breast health each month following their period if they inspect their breasts on a regular basis (Ministry of Health of the Republic of Indonesia, 2021).

The results of this study are in line with the research conducted by Dhawo, et al (2019) The results of the statistical test showed a P-Value of 0.000 which means <0.05 then Ho is rejected so that there is a difference in the influence of knowledge about BSE before and after being given counseling. Another study conducted by Pitaloka, et al (2021) The results of the study showed that there was an effect of health education using videos on knowledge about BSE in the Work Area of the Sragi Inpatient Health Center, South Lampung Regency in 2020 with a p value of 0.000 (p value <α = 0.05).

TABLE 4. The influence of BSE health education on the motivation to perform BSE in adolescent girls at SMAN 2 Way Tenong

Motivation	N	Mean	Improvement	Z	P-Value
Before	31	32,9	57,6	-4,869	0,000
After	31	90,5			

Notes. *N*'s range from 31 to 21 due to occasional missing data. * $p < .05$.

Based on table 4, the results of the motivation to perform BSE before and after being given BSE health education have an average increase of 57.6%. After the Wilcoxon Signed Rank Test analysis, a p-value (0.000> 0.05) was obtained, which means that there is an effect of BSE health education on the motivation to perform BSE in female adolescents at the SMAN 2 Way Tenong.

The goal of breast self-examination (BSE) is to identify any abnormalities or changes in the shape of one's own breasts as soon as possible so that swift action can be taken to improve treatment outcomes (Ministry of Health of the Republic of Indonesia, 2021). Breast self-examination (BSE) should be performed on days 7–10, calculated from the first day of menstruation (when the breasts are no longer painful and hard). This is because the hormones progesterone and oestrogen have very little effect at that time, and the tissue of the breast glands is not swollen, making it easier to feel abnormalities or changes in the shape of the breasts (Ministry of Health of the Republic of Indonesia, 2021).

With a paired t-test value of P = 0.001, the bivariate analysis's findings indicate that counselling via audiovisual materials has an impact on adolescent girls' understanding of breast self-examination. increasing awareness of breast self-examination (BSE) through audiovisual medium in order to diagnose cervical cancer early (Fanny et al., 2024).

The importance of audiovisual media as a means of health education, especially in breast self-examination, is increasingly relevant when aimed at individuals with visual impairments. Training videos equipped with audio descriptions have been shown to improve self-examination skills for women. Efforts to provide educational materials in the form of videos with audio narration are a strategic step in supporting learning about breast self-examination, especially for those with visual impairments (Celik & Calim, 2023). The findings of this study are consistent with those of a study by Choirunnasihi (2019), which found that 19 respondents (50.0%) were successful in performing the BSE technique well and that there is a relationship between motivation and the success of performing the BSE technique in Women of Reproductive Age (WRA) with a p-value of 0.000. Another study by Sari et al. (2024) examined the

connection between teenage girls' motivation towards breast cancer and their practice of breast self-examination. The study's findings demonstrated that the majority of participants were sufficiently motivated. The chi-square test revealed a p-value of 0.000 (sig 0.05), indicating a substantial correlation between BSE examination practice and knowledge.

According to the researcher's findings, female adolescents are more likely to wish to undertake breast self-examination the more motivated they are. Increased motivation for medical care for BSE exams demonstrates that a person who is dedicated to preserving their health is capable of engaging in health-related self-care practices.

Discussion

Based on the analysis of health education researchers (penkes) as a potential method to improve adolescent knowledge, add adolescent information to knowledge about BSE. From the results of this study, the average respondent previously did not know about BSE in detail after being explained through the BSE health education method, there was an increase in adolescent knowledge about BSE.

According to the researcher's analysis, prior to receiving BSE health education, respondents lacked motivation because they did not see the need for or the advantages of undergoing a SADARI examination because no abnormalities were discovered in their breasts. They also lacked the self-motivation and family support to undergo the examination.

The researcher's analysis indicates that it is critical for health workers to educate adolescent girls about breast self-examination (BSE) in order to increase their knowledge and enable them to correctly perform early breast cancer detection through healthcare education. Knowledge-based behaviour will always be superior to ignorance-based behaviour. If someone is informed about anything that can alter their behaviour, their behaviour will change.

Conclusion

Adolescent girls' average level of BSE knowledge was 48.3% before receiving BSE health education, indicating poor knowledge, and 91.1% after receiving BSE health education, indicating strong knowledge. This indicates an increase in knowledge between the two periods. Adolescent girls' average motivation to perform BSE was 32.9% before receiving BSE health education, indicating low motivation, and 90.5% after receiving BSE health education, indicating strong motivation. This indicates that there was an increase in motivation before and after. There is an influence of BSE health education on knowledge about BSE in female adolescents at the SMAN 2 Way Tenong, obtained a p-value (0.000 > 0.05). There is an influence of SADARI health education on motivation to do BSE in female adolescents at SMAN 2 Way Tenong, obtained a p-value (0.000 > 0.05).

It is anticipated that the findings of this study will provide female adolescents with information on BSE, enabling them to regularly perform BSE checks at home and become more sensitive to their bodies. The findings of this study are anticipated to serve as a guide for educators in delivering health education on BSE, establish BSE as a regular activity in health education schools as soon as feasible, and enable the school to support its students' access to BSE health education. It is anticipated that the findings of this study will motivate healthcare professionals to be vigilant in offering

BSE counselling or health education sooner. Additionally, they can provide information services for female students to enable them to access and receive health worker information. In the form of theses and scientific papers, the study's findings can contribute to the advancement of educational science at the Aisyah University of Pringsewu and serve as a source of literature for additional research. It is envisaged that this study can be expanded into an experimental cohort study with many variables, such as the attitudes and roles of health workers regarding BSE health education, and that the findings would contribute to the literature references.

A bigger sample size might be used in future research to improve the validity and dependability of the findings. This can enable the detection of smaller effects and assist boost statistical power. It is advised that future researchers employ a cohort study design in order to gather more detailed data regarding the link between the variables under investigation over an extended period of time. Research subjects' growth and changes can be better understood with the use of a cohort design.

To learn more about the subject being studied, future research can think about employing the same research design with other variables. This could lead to more thorough results and a better understanding of the connections between various variables.

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