

RESEARCH ARTICLE

The Correlation between Medical Personnel's Attitude and Pap Smear Examination Practice at Islamic Sultan Agung Hospital Semarang

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ABSTRAK

Pendahuluan: Kanker serviks masih menempati urutan pertama penyakit yang banyak terjadi pada wanita di Indonesia. Diperkirakan terjadi 41 kasus baru setiap hari, dan sekitar 20 orang setiap hari meninggal dunia. Kanker serviks semakin berkembang, disebabkan oleh cakupan deteksi dini atau skrining melalui pemeriksaan pap smear yang rendah.

Tujuan: Penelitian ini bertujuan untuk mengetahui hubungan antara sikap tenaga medis dengan praktik pemeriksaan pap smear di Rumah Sakit Islam Sultan Agung (RISA) Semarang.

Metode: Penelitian observasional menggunakan rancangan *cross sectional* dengan jumlah sample 38 tenaga medis yang diambil secara random dari 273 populasi di RISA Semarang. Pengambilan data menggunakan kuesioner dan wawancara kepada responden, data yang diperoleh dianalisis dengan uji univariat dan bivariat, menggunakan uji *chi-square*, dengan tingkat kemaknaan <0.05 .

Hasil: prosentase tenaga medis yang melakukan praktik pap smear rutin lebih tinggi pada tenaga medis dengan sikap baik (66,7%) dibandingkan dengan yang bersikap buruk (17,6%). Analisis data dengan uji statistik *Chi Square* menunjukkan perbedaan yang bermakna, $p = 0,003$.

Kesimpulan: hasil penelitian ini menunjukkan bahwa pap smear lebih banyak dilakukan oleh tenaga medis yang bersikap baik dibanding dengan mereka yang bersikap buruk.

Kata kunci: Sikap, praktik tentang pap smear, pemeriksaan pap smear, kanker.

ABSTRACT

Introduction: Cervical cancer is still ranked in the first place of those diseases most commonly developing in Indonesian women. It is predicted that 41 new cases occur every day, and around 20 people every day pass away of it. Cervical cancer keeps increasing because the coverage of screening through pap smear examination is low.

Objective: This research aims at discovering the correlation between medical personnel's attitude and practice of pap smear examination at Rumah Sakit Islam Sultan Agung (RISA) Semarang.

Methods: The study is observational research using *cross sectional* design with a sample of 38 medical personnel taken randomly from 273 personnel as its population in RISA Semarang. The data are taken using questionnaire and interview with respondents, and the obtained data are analyzed using univariate and bivariate tests, using *chi-square* test, at a significance level < 0.05 .

Result: the percentage of medical personnel having regular pap smear practice is higher in medical personnel with good attitude (66.7%) compared to those with poor attitude (17.6%). The data analysis using *Chi Square* statistic test indicates a significant difference, $p = 0.003$.

Conclusion: the results of this reseach show that pap smear is more commonly done by those medical personnel with good attitude than those with poor attitude.

Keywords: Attitude, practice of pap smear, pap smear examination, cancer.

INTRODUCTION

Cancer may attack everyone in the society of whatever social status, age or sex. This disease may as well attack both the rich and the poor and both highly-educated or non-educated people. Children, adolescents and adults cannot escape from being targeted by cancer (Sukaca, 2009). One cancers commonly found in women is cervical cancer. It is a malignancy disease which

creates a serious health problem mainly in developing countries such as Indonesia. Currently, cervical cancer is still ranked in the first place of those diseases developing in most women in Indonesia, while its prevalence in the world is just second to breast cancer (Wijaya, 2010). The high prevalence of cancer in Indonesia needs preventive action and early detection, particularly by medical personnel in health service providers. Finding cancer

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case in its early stadium and quickly and appropriately treating it proves to be able to give recovery and longer life expectancy. Therefore, it is imperative that a periodic, regular examination is performed as a preventive effort and cancer early detection (Kementrian Kesehatan RI, 2015).

The high incidence and mortality of cervical cancer patients is because it is not detected early, leading most patients to come for medication at advanced stadium. To suppress that incidence, there is a need for early prevention through regular pap smear examination, particularly by medical personnel as the officer of health service front line. Pre-cancer primary prevention is an important attempt for prevention, before cervical cancer develops further and even becomes metastasis. This can be done by delaying marriage at adolescence, limiting number of partners and doing safe sexual intercourse. Meanwhile, the secondary prevention can be made by performing cervical cancer screening. The screening can be done through pap smear examination or VIA (Visual Inspection with Acetic acid). American College of Obstetrician and Gynecologists (ACOG), American Cancer Society (ACS) and US Preventive Task Force (USPSTF) issue a guideline suggesting that every woman should undergo Pap smear for cervical cancer screening within the first 3 years of sexual activity or when they are 21 years old. Pap smear is a method of examining cells taken from cervix under a microscope for any change or abnormality of such cells (Wijayanti, 2009). Pap smear test has some advantages for it can be easily done, is painless and inexpensive, has higher specificity, and does not take too much time (Aziz, 2006).

What causes women's low awareness to have themselves screened is their worry and fear if the pap smear examination results suggest they are suffering from cervical cancer. In turn, they choose to avoid it. In addition to worry and fear, it may also result from their shame or anxiety to undergo a pap smear examination (Evvenett, 2003). Pap smear treatment is accomplished well when there is internal family and social support, such as that from husband as the leader of their family (Rasjidi, 2007). Medical personnel's awareness to undergo regular pap smear examination for cervical cancer screening is still fairly low. Even though some medical personnel has been financially sufficient to undergo pap smear and has adequate knowledge on pap smear, in reality many are hesitant to have regular pap smear examination, i.e. at least once a year. Someone adopt new behavior through 3 stages, namely knowledge, attitude and action. Any behavior which is based on knowledge would last longer

than the one with no knowledge ground. According to Notoatmodjo (2012) one's knowledge is influenced by education. Nurhasanah (2008) suggests that education is the most dominantly influential variable on pap smear examination practice. The research aims at proving the correlation between attitude and practice of pap smear examination in medical personnel at Rumah Sakit Islam Sultan Agung Semarang.

METHOD

This study is observational research with cross sectional design. The dependent variable is pap smear examination practice, i.e. the behavior the respondents do in undergoing pap smear examination practice. The independent variable is attitude towards pap smear, i.e. the reaction or response given by the respondents to pap smear examination practice. Pap smear examination practice is classified into 2, namely regular (at least once in a year) and irregular (performed irregularly, occasionally, or never at all). The population is all female medical personnel working for Islamic Sultan Agung Hospital Semarang amounting to 273 women. The sample is calculated based on Nursalam's (2003) minimum sample size formula which amounts to 38 women who meet the inclusion and exclusion criteria. The inclusion criteria of all female medical personnel in RSISA are married and willing to be respondents, while any female medical personnel who is absent when the research is conducted is included in the exclusion criteria. The sampling technique used is simple random sampling (Sastroasmoro, 2014). All research respondents are asked to sign an inform consent form as a proof of their willingness to be samples. The data on attitude and pap smear examination practice are obtained through questionnaire and interview performed by researchers to the respondents. The questionnaire instrument used consists of 8 question items, where 2 questions is unfavorable and 6 questions are favorable. The scores for favorable questions are 4 (strongly agree), 3 (Agree), 2 (disagree), and 1 (strongly disagree); meanwhile the scores for unfavorable questions are 1 (strongly agree), 2 (agree), 3 (disagree) and 4 (strongly disagree). From the results of instrument validity test to 20 female medical personnel, it is found that t calculation $>$ t table (t calculation: 0.563; t table: 0.444) and alpha cronbath is 0.965, thus, this instrument is declared valid and reliable. Attitude towards pap smear, i.e. the reaction or respons the respondents given to pap smear examination practice, is classiefied into 2 (two) namely good if the total score $>$ mean and poor if the total score \leq mean. The pap smear examination practice is the behavior performed by the respondents in undergoing pap smear

Table 1. Frequency Distribution of Respondent's (n=38) Answers Based on Attitude Questions

No	Questions	Frequency								SUB-TOTAL SCORE
		SA	SCORE	A	SCORE	DA	SCORE	SDA	SCORE	
1	I have actively engaged in sexual intercourse, thus, it is important for me to have pap smear examination	15 (40%)	4	15 (40%)	3	8 (21.1%)	2	-	1	121
2	I have no children so far, hence, I do not need to have any pap smear examination (*)	-	1	15 (40%)	2	20 (52.6%)	3	3 (7.9%)	4	102
3	When I cease to have menstrual period, I will continue to have pap smear examination	10 (29%)	4	20 (53%)	3	6 (15.8%)	2	2 (2.6%)	1	114
4	I never change my partner, thus, I do not need to have any pap smear examination (*)	3 (7,9%)	1	11 (29%)	2	22 (57.9%)	3	2 (5.3%)	4	99
5	I think pap smear examination should be done at least once a year	8 (21%)	4	23 (61%)	3	7 (18.4%)	2	-	1	115
6	A healthy-looking woman still needs to have pap smear examination	14 (37%)	4	22 (58%)	3	2 (5.3%)	2	-	1	126
7	When I have smelly and itchy white vaginal discharge, I have to immediately have pap smear examination	22 (58%)	4	10 (26%)	3	5 (13.2%)	2	1 (2.6%)	1	129
8	I am willing to have pap smear examination because pap smear examination is easy and safe	22 (58%)	4	14 (37%)	3	2 (5.3%)	2	-	1	134
TOTAL SCORE										912
MEAN										24

(*) unfavorable questions

- SA : Strongly Agree
- A : Agree
- DA : Disagree
- SDA : Strongly Disagree

examination practice. Pap smear examination practice is classified into 2, namely regular (at least having pap smear examination once in a year) and irregular (pap smear is performed irregularly, occasionally, or never been performed at all).

The obtained data are analyzed using univariate test descriptively and bivariate test with chi square test at a significance level < 0.05 (Dahlan, 2014).

RESULTS

The results are obtained from questionnaire completion and researcher's interview with 38 respondents regarding the attitude towards Pap Smear and Pap Smear Examination Practice at Rumah Sakit Islam Sultan Agung Semarang. The results are as follows:

1. Univariate Analysis

The attitude towards pap smear variable is classified into poor and good, while the cut off point is based on the mean of total score of all respondents. The mean total score of respondents' answers is 24, thus, any respondent with a total score >24 has good attitude, and total score ≤24 has poor attitude (see table 1).

Table 2. Frequency Distribution of Attitude and Pap Smear Examination Practice Variables

Variable	Frequency	Percentage (%)
Attitude towards		
Pap Smear		
• Poor	17	45
• Good	21	55
Pap Smear Examination Practice		
• No	21	55
• Yes	17	45

From table 2 it can be seen that the respondents with poor attitude towards pap smear are 17 (45%) and

Table 3. Correlation between Attitude towards Pap Smear and Pap Smear Examination Practice

Attitude towards Pap Smear		Pap Smear Examination Practice		Total	<i>p value</i>
		Irregular	Regular		
Poor	F	14	3	17	0,003
	%	82%	18%	100%	
Good	F	7	14	21	
	%	33%	67%	100%	

those with good attitude are 21 (55%). There are 21 (55%) respondents who do not have regular pap smear practice, and 17 (45%) respondents have regular pap smear examination practice.

2. Bivariate Analysis

Correlation between Attitude towards Pap Smear and Pap Smear Examination Practice

Based on table 3, it is found that respondents with poor attitude towards pap smear mostly (82%) irregularly have pap smear examination, while respondents with good attitude towards pap smear mostly (67%) regularly have pap smear examination. From statistical test using chi square test, a highly significant result is obtained, $p = 0.003$, meaning in $\alpha 5\%$ there is a correlation between attitude towards pap smear and pap smear examination practice.

DISCUSSION

In the current study, it is stated that there is a correlation between attitude towards pap smear and pap smear examination practice. It indicates that women's attitude towards pap smear examination can improve their behavior to have pap smear. Attitude describes one's reaction or response to an object. A good attitude is born from one's response to certain object and vice versa, thus, it is expected that a good attitude would make someone ready or willing to act or perform something. Attitude is not an action or activity just yet, rather it is a predisposition of an action or behavior. In determining this intact attitude, knowledge, thought, belief and emotion play important roles. Attitude in real indicates a connotation of appropriate reaction to certain stimulus. Attitude constitutes an emotional reaction to social stimulus. The cause that only a few women have pap smear examination is the anxiety if the examination results states that they are suffering from cancer, leading them to choose to avoid it. It is expected that one's attitude to a given stimulus will result in increasingly better response or, in this case, someone will be more motivated to have a pap smear examination.

The research results indicate that most respondents (55%) have good attitude. Therefore,

it is safe to say that most respondents have a good attitude to pap smear examination. It can be seen from these questions "when I have smelly and itchy white vaginal discharge, I have to immediately have pap smear examination" (57.9%) and "I am willing to have pap smear examination because pap smear examination is easy and safe" (57.9%). Good attitude towards pap smear can improve pap smear examination practice in female medical personnel. Nevertheless, there are several matters about pap smear treatment that have not been responded to well, such as the question "When I cease to have menstrual period, I will continue to have pap smear examination" (2.6%). This research is supported by Notoatmodjo's theory which states that an attitude is not necessarily automatically realized into an action; for an attitude to get realized into a real action supporting factors or conducive situations are necessary, including facilities, support from others like husband, parents or parents in law and so forth.

The measurement of practice or action can be performed indirectly through interview about the activities that have been done (recall) or directly through observation of respondents' actions. The measurement of practice can be done from the result of such behavior (Notoatmodjo, 2012). When someone, after knowing a stimulus or health object, reviews or evaluates what he/she has known, it is expected that the next phase would be the practice of what he/she has known or of what he/she has finally embraced a certain attitude towards (what he/she deems good), and this is the so-called practice (Notoatmodjo, 2012). Knowledge is a highly important domain for the formation of one's action because experience shows that any behavior which is based on knowledge will last longer than that with no knowledge ground. One's belief to health is mostly formed by intellectual variable which consists of knowledge on various functions of body and disease, educational background and past experience. Cognitive ability will form one's way of thinking, including forming the ability to understand those factors related to health and to use the knowledge he/she possesses to maintain their own health.

Research on correlation between knowledge about cervical cancer and pap smear practice finds

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that most women with less knowledge tend to not have any pap smear practice and that there is a correlation between knowledge about cervical cancer and pap smear practice (Chamani, 2012). The study conducted by Bakheit (2004) suggests that some respondents have sound knowledge on pap smear, yet only a few of them who practice or undergo pap smear examination.

Attitude is a reaction or response which is still covert of someone to a stimulus or object. Attitude is not an action just yet, rather it is a predisposition of a behavior. To realize an attitude into a real action, supporting factors such as facilities and supports are necessary. Women's good or positive attitude to pap smear should be supported by their husbands and there should be readily accessible pap smear facilities (Notoatmodjo, 2012). One of the factors that influences one's action/behavior/practice is knowledge. Individual and public knowledge constitutes a predisposing factor which can facilitate a change of behavior (Nuryanti, 2013).

CONCLUSION

There is a correlation between attitude towards pap smear and pap smear examination practice in medical personnel at Rumah Sakit Islam Sultan Agung Semarang in 2014.

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