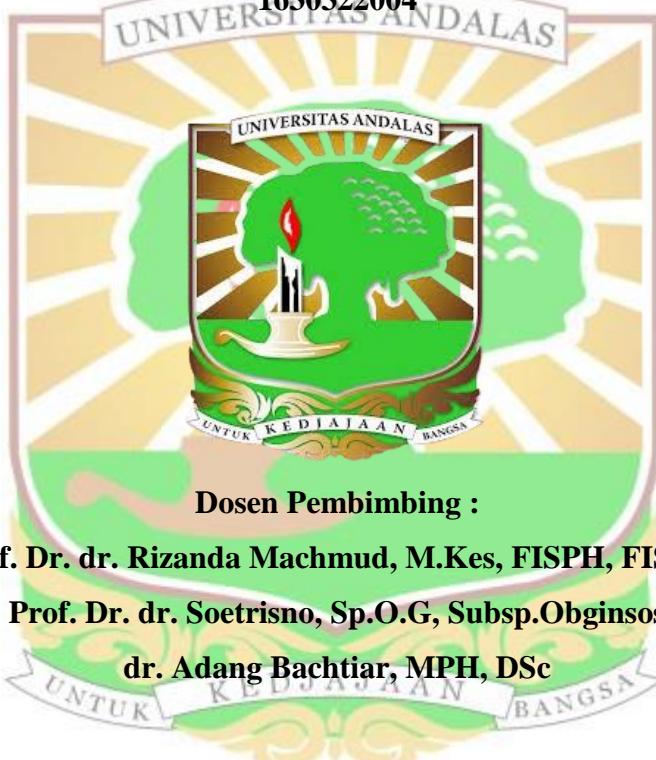


**MODEL OBEDIENT MALE PARTNER IN HEALTH
EDUCATION AND ENGAGEMENT FOR VISUAL INSPECTION
WITH ACETIC ACID EXAMINATION (OMPHE-IVA) DALAM
DETEKSI DINI KANKER LEHER RAHIM**

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ABSTRAK

MODEL OBEDIENT MALE PARTNER IN HEALTH EDUCATION AND ENGAGEMENT FOR VISUAL INSPECTION WITH ACETIC ACID EXAMINATION (OMPHE-IVA) DALAM DETEKSI DINI KANKER LEHER RAHIM

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Latar Belakang

Di Indonesia, kanker leher rahim merupakan penyakit kanker pada perempuan kedua setelah kanker payudara. Pada tiga dekade terakhir, kasus kanker leher rahim meningkat pada usia lebih muda atau dibawah 30 tahun. Berdasarkan data Riskesdas, prevalensi kanker di Indonesia adalah 1,4 per 1000 penduduk, sedangkan prevalensi kedua tertinggi di Indonesia sebesar 0,8% atau sekitar 98.692 penduduk.

Metode

Penelitian ini menggunakan *mixed method* (studi kualitatif dan kuantitatif). Penelitian dilakukan di Kota Padang dengan empat tahap. Tahap 1 dan 2 untuk mengidentifikasi masalah dan kebutuhan dengan studi kualitatif dan kuantitatif dengan desain *crossectional* menggunakan uji *chi square*, tahap 3 membangun model dan menyusun modul OMPHE-IVA, serta tahap 4 implementasi dan evaluasi modul menggunakan *t-test* untuk melihat perbedaan nilai rata-rata pre-test post-test dan *Uji N-Gain* untuk melihat keefektivitasan modul.

Hasil

Penelitian tahap 1 dan 2 diketahui bahwa faktor-faktor yang terlibat dalam tindakan pemeriksaan IVA adalah faktor pengetahuan, dukungan suami, persepsi kerentanan, persepsi keseriusan, persepsi manfaat, dan persepsi hambatan. Secara statistik adanya hubungan yang bermakna ($p\text{-value}\leq0.05$) antara dukungan suami, pengetahuan, dan persepsi kerentanan terhadap pemeriksaan IVA oleh wanita usia subur (WUS). Sebaliknya, persepsi keseriusan, persepsi manfaat dan persepsi hambatan tidak terdapat hubungan yang signifikan dengan pemeriksaan IVA oleh WUS. Faktor yang paling dominan terhadap pemeriksaan IVA adalah pengetahuan. Semua variabel memiliki perbedaan nilai rata-rata sebelum dan sesudah dilakukannya edukasi menggunakan modul. Aplikasi modul cukup efektif untuk meningkatkan pengetahuan dan dukungan suami akan tetapi tidak efektif dalam meningkatkan persepsi WUS.

Kesimpulan

Model OMPHE-IVA ini menggambarkan faktor-faktor yang berpengaruh terhadap pelaksanaan deteksi dini kanker leher rahim, sedangkan modul terdiri dari 2 sesi pendidikan kesehatan, yaitu sesi 1 membahas tentang deteksi dini kanker leher rahim dan pemeriksaan IVA dan sesi 2 tentang peran dari dukungan suami. Pada evaluasi modul didapatkan peningkatan nilai rata-rata pengetahuan, dukungan suami, persepsi kerentanan, persepsi keseriusan, persepsi manfaat, dan persepsi hambatan sebelum dan sesudah diaplikasikannya modul. Harapannya implementasi ini dapat didukung dengan kerjasama yang baik antara PUS, petugas kesehatan, keluarga dan *stakeholder*.

Kata Kunci: Kanker, Leher Rahim, IVA, PUS, Model OMPHE-IVA, Kota Padang

ABSTRACT

MODEL OBEDIENT MALE PARTNER IN HEALTH EDUCATION AND ENGAGEMENT FOR VISUAL INSPECTION WITH ACETIC ACID EXAMINATION (OMPHE-IVA) IN EARLY DETECTION OF CANCER CERVIX

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Background

In Indonesia, cervical cancer is the second cancer in women after breast cancer. In the last three decades, cervical cancer cases have increased at younger ages or under 30 years. Based on Riskesdas data, the prevalence of cancer in Indonesia is 1.4 per 1000 population, while the second highest prevalence in Indonesia is 0.8% or about 98,692 population.

Method

This study uses a mixed method (qualitative and quantitative studies). The research was conducted in the city of Padang in four stages. Stages 1 and 2 are to identify problems and needs with qualitative and quantitative studies with cross-sectional design using the chi square test, stage 3 to build a model and develop the OMPHE-IVA module, and stage 4 to implement and evaluate the module using t-test to see the difference in the mean scores. the average pre-test post-test and N-Gain Test to see the effectiveness of the module.

Results

Research stages 1 and 2 are known that the factors involved in the VIA examination are factors of knowledge, husband's support, perception of vulnerability, perception of seriousness, perceived benefits, and perceived barriers. Statistically, there was a significant relationship ($p\text{-value} \leq 0.05$) between husband's support, knowledge, and perception of vulnerability of VIA examination by women of childbearing age (WUS). On the other hand, the perception of seriousness, perceived benefits and the perception of obstacles did not have a significant relationship with the WUS examination of VIA. The most dominant factor in the VIA examination is knowledge. All variables have different mean values before and after education using the module. The module application is effective in increasing husband's knowledge and support but is not effective in increasing the perception of WUS.

Conclusion

The OMPHE-IVA model describes the factors that influence the implementation of early detection of cervical cancer, while the module consists of 2 health education sessions, namely session 1 discussing early detection of cervical cancer and VIA examination aimed at WUS and session 2 about the role of cervical cancer. From the husband's support aimed at the husband. In the evaluation of the module, it was found that the average value of knowledge, husband's support, perception of vulnerability, perception of seriousness, perception of benefits, and perception of obstacles before and after the module was applied. It is hoped that this implementation can be supported by good cooperation between EFA, health workers, families and stakeholders.

Keywords: Cancer, Cervical, VIA, EFA, OMPHE-IVA Model, Padang City