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THE RELATIONSHIP BETWEEN THE LEVEL OF KNOWLEDGE AND ATTITUDES TOWARDS EARLY DETECTION OF CERVICAL CANCER WITH THE LEVEL OF PARTICIPATION IN PAP SMEAR TEST ON FEMALE **EMPLOYEES IN MEDICAL FACULTY OF UNIVERSITAS BRAWIJAYA**

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CERTIFICATION PAGE FINAL ASSIGNMENT

THE RELATIONSHIP BETWEEN THE LEVEL OF KNOWLEDGE AND ATTITUDES TOWARDS EARLY DETECTION OF CERVICAL CANCER WITH THE LEVEL OF PARTICIPATION IN PAP SMEAR TEST ON FEMALE EMPLOYEES IN MEDICAL FACULTY OF UNIVERSITAS BRAWIJAYA

To fulfill the Requirement for Degree of Bachelor of Medicine

By: Gajendren A/L Mohan 155070108121019

Has been examined on: Day: Friday Date: 20th December 2019 And has passed:

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ABSTRAK Mohan, Gajendren. 2019. Hubungan Tingkat Pengetahuan Dan Sikap Terhadap Deteksi Dini Kanker Serviks Dengan Tingkat Partisipasi Tes Pap smear Pada Universita Karyawan Wanita Fakultas Kedokteran Universitas Brawijaya. Tugas Akhir, tas Brawijaya Program Studi Kedokteran, Fakultas Kedokteran Universitas Brawijaya. Pembimbing: (1) dr. Nurrahma Wahyu Fitriyani, MMedEd. (2) dr.Ahmad Dian Wahyudiono Sn.T.H.T.K.I. (K) Wahyudiono, Sp.T.H.T.K.L.(K). Kanker serviks terjadi di sel serviks yang berada di bagian bawah rahim yang menghubungkan vagina. Human Papillomavirus (HPV) Infeksi adalah penyebab utama 90% dari kasus kanker serviks invasif di seluruh dunia. Banyak orang yang menderitas Brawijaya Uni kanker di Indonesia untuk segala usia di tahun 2013 memiliki persentase 1,4% atau tas Brawijaya 347.792 orang. Di Yogyakarta prevalensinya memiliki penyakit kanker tertinggi dengan jumlah 4,1%, sedangkan untuk Jawa Tengah adalah 68.638 orang dan Jawa Timur 61.230 orang. Kanker serviks memiliki salah satu prevalensi tertinggi di Indonesia pada tahun tas Brawijaya 2013. Untuk mengetahui hubungan antara tingkat pengetahuan dan sikap tentang deteksisitas Brawijaya dini kanker serviks dengan partisipasi tes Pap smear pada wanita yang bekerja di fakultas kedokteran Universitas Brawijaya menggunakan lembar kuesioner dengan populasi 129 karyawan wanita di fakultas kedokteran Universitas Brawijaya. Data diambil 100 karyawan das Brawijaya wanita di fakultas kedokteran Universitas Brawijaya. Hasil penelitian menunjukkan tidak tas Brawijaya ada hubungan yang signifikan. Berdasarkan Uji Chi-Square menunjukkan tingkat pengetahuan dan sikap terhadap deteksi dini pap smear (p = 0,131). Di antara alasan lain untuk partisipasi rendah dalam tes Pap smear termasuk wanita tidak menganggap diri tas Brawijaya mereka rentan terhadap kanker serviks karena mereka tidak memiliki gejala penyakit dan servitas Brawijaya ini semakin diperkuat karena informasi yang tidak memadai dan pengetahuan tentang pentingnya skrining Pap smear. Kesimpulannya hasil ini menunjukkan bahwa tidak ada Uni hubungan yang signifikan antara sikap terhadap deteksi dini kanker serviks dan tingkat itas Brawijaya partisipasi dalam tes Pap smear.

Kata kunci : Human papillomavirus, kanker serviks, Pap smear, Pengetahuan, Attendude, Cas Brawijaya Partisipasi.

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ABSTRACT The Relationship Between The Level Of Knowledge Mohan, Gajendren. 2019. And Attitudes Towards Early Detection Of Cervical Cancer With The Level Ofsitas Brawijaya Universita Participation In Pap Smear Test On Female Employees In Medical Faculty Ofsitas Brawijava Universitas Brawijaya. Final Assigment, Medical Program, Faculty of Medicine, awijaya Brawijaya University. Supervisors: (1) dr. Nurrahma Wahyu Fitriyani, MMedEd. (2) ersita dr.Ahmad Dian Wahyudiono, Sp.T.H.T.K.L.(K). Versitas Brawijaya Universitas Brawijaya awijaya awijaya awijaya awijaya Cervical cancer occurs at the cervix cell which is at the lower part of the uterus as Brawlaya which connects the vagina. Human papillomavirus (HPV) Infection is the main cause for the Brawijaya awijaya 90% of invases cervical cancer cases worldwide. The people that have cancer in Indonesia awijaya for all ages in the year of 2013 have the percentage of 1.4% or 347 792 people. In awijaya Yogyakarta the prevalence has the highest cancer disease with the number of 4.1 %, it as Brawijaya meanwhile for Jawa Tengah is 68 638 people and Jawa Timur 61 230 people. Cervix tas Brawijaya awiiava cancer have one of the highest prevalence in Indonesia in 2013. To find out the relationship awijaya between the level of knowledge and attitudes about early detection of cervical cancer with awijaya Unithe participation of Pap smear tests on women who work in Universitas Brawijaya's medical itas Brawijaya faculties using questionnaire sheets with a population of 129 female employees in the tas Brawijaya awijaya medical faculty of Universitas Brawijaya. Data taken 100 female employees in the faculty awijaya of medicine Universitas Brawijaya. The results showed no significant relationship. Based awijaya on Chi-Square Test shows the level of knowledge and attitudes towards early detection of itas Brawijava pap smears (p = 0.131). Among other reasons for low participation in Pap smear test awijaya included women not perceiving themselves as being susceptible to cervical cancer awijaya because they had no symptoms of illness and this is further strengthened because of itas Brawijaya inadequate information and knowledge about the importance of Pap smear screening. Insitas Brawijava awijaya conclusions these results indicate that there is no significant relationship between attitudes awijaya toward early detection of cervical cancer and the level of participation in Pap smear tests.

> Keyword: Human papillomavirus, Cervical cancer, Pap smear, Knowledge, Attidude, Participant.

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tas Brawijaya Universitas Brawijaya CHAPTER 1 INTRODUCTION 1.1 Background awijaya awijaya Cervical cancer occurs at the cervix cell which is at the lower part of the awijaya awijaya uterus that which connects the vagina. Human papillomavirus (HPV) and cervical awijaya cancer link was first demonstrated at the beginning of 1980 by German virologist awijaya awijaya named Harold zur hausen. With the association between smoking and lung cancer, awijaya awiiava HPV and cervical squamous cell carcinoma is higher. HPV has been implicated for it as Braw awijaya 99.7% of cervical squamous cell cancer cases worldwide (Burd, 2003). awijaya awijaya The most common cancers in women is cervical cancer with the number of awijaya awijaya 440 000 new cases annually and 80% these happen in developing and awijaya awijava Un underdeveloped countries. Human papillomavirus (HPV) Infection is the mainsitas awijaya cause for 90% of invases cervical cancer cases worldwide (Wong, 2009). It's the awijaya awijaya 3rd most common malignancy in women worldwide, and still stands as a leading awijaya cause of cancer-related death in women in developing countries. Cervical cancer awijaya awijaya is the 2nd most common cancer in developing countries, it's the 10th most common awijava awijaya Unin developed countries. In United States, cervical cancer is common, since 2004 Itas Braw awijaya the rates have decreased by 2.1% per year in women younger than 50 years age awijaya awijaya and above. This trend has been attributed to mass screening with Pap smear test, awijaya awijaya cervical cancer is continuously increase in developing countries. (Boardman, awijaya 2018). The people that have cancer in Indonesia for all ages in the year of 2013 have the percentage of 1.4% or 347 792 people. In Yogyakarta the prevalence has Un the highest cancer disease with the number of 4.1 %, meanwhile for Jawa Tengah it as Braw is 68 638 people and Jawa Timur 61 230 people. Cervical cancer have one of the

highest prevalence in Indonesia in 2013. Yogyakarta has high cervical cancer which is 1.5%. Based on the estimation Jawa Timur and Jawa Tengah has cervical cancer and breast cancer the most number (Kemenkes, 2015). awijava awijaya The age-adjusted yearly cases of cervical cancer to occur is 6.6 cases per awijaya awijaya 10 000 women, based on the data from 2008. It is predicted that 12 200 new cases awiiava awijaya of cervical cancer and 4210 death in the United States in the year of 2010. Death awijaya due to cervical cancer in the United States have reduced a lot since the awijaya awijaya implementation of cervical cancer screening is spread. In most cases women who awiiava Uni has cervical cancer has not been properly screened. Women who follow up their it as Brawi awijaya awijaya screening results in reducing cervical cancer incidence and mortality is better in awijaya awijaya the United States (Moyer, 2012). awijaya awijaya In general, 5-year survival rate: Stage 1 - >90%, Stage 2 - 60%-80%, awijava Stage 3 – approximately 50%, Stage 4 - <30%. American Cancer society predicted awijaya awijaya 4220 women die due to cervical cancer in United States in 2012 (Boardman, 2018). awijaya awijaya Uni The risk factors for cervical cancer include smoking, infection with HIV, lack of awijaya previous screening and multiple sexual partners (Obalase et al, 2017). awijaya awijava There are a few myths that the society still believe until today. One of them awijaya are cervical cancer can't be cured. Next, some people think they are too young to awijava Uniget cervical cancer and old people are only can get it. Furthermore, some people it as Braw awijaya believe that if they do not have intercourse with their partner then there no need awijaya for HPV vaccines and they also believe after taking HPV vaccine they do not need Uni Pap smear test. Finally, some of the society thinks that they are too old to take Papartas smear test. These are one of the reasons why pap smear test are not properly taken at appropriate time and delayed of the test may result in late diagnose of the cancer which leads to more health complications (Destriyana, 2015).

Many patient are diagnosed with late stage due to high level of illiteracy among women and their problematic health seeking behaviour for gynaecological signs and symptoms are responsible for the late stage of diagnosis of cervical awijaya cancer in Nepal. Prevention interventions must be focused on raising awareness awijaya awijaya of gynaecological symptoms and improving health seeking behaviour in women tas Braw awijaya (Gyenwali, 2013). The problem that rises are late reporting, ignorance and cultural awijaya awijaya issues relating to cervical cancer screening are main factors influencing the Univers awijaya Uni disease control in Nigeria. The prevalent rates are very high in low resources rural itas Braw awijaya awiiava places of the country based on the variable statistic in the country (Obalase et al, awijaya awijaya 2017). Some research are been conducted on why women are not getting screen awijaya and the results are because of lack access to care, having no usual source of care awijaya awiiava or having higher urgent demands on their conditions. Educations, poverty, lower awijaya awijava socioeconomic status or even cultural issues may contribute why women do not awijaya regularly do screening (Bucco, 2017). awijaya awijaya As early as 21 years old women can get screened for every 3 years awijaya awijaya substantially lessen cervical cancer incidence. Women younger than age 21 years, awijaya In screening women below 21 years old doesn't reduce cervical cancer incidence and awijava awijaya mortality compared with beginning screening at age 21 years old (Moyer, 2012). awijaya awijaya To screen cervical cancer we can use Pap smear test which is scraping awijaya awijaya and brushing cells from cervix and is sent to lab to be examine. Next is HPV DNA awijaya Unitest which is cells are collected from the cervix for infection with any of the types of itas Braw awijaya HPV that are most likely to lead to cervical cancer which are recommended for Uni women age 30 and older. Versitas Brawijaya Universitas Brawijaya Universita The education status has a significant influence on knowledge of cervical status brawlaya cancer screening and control. When there are services for screening available, tas Brawi

many women are not aware of the services due to the location of the services which are mainly available in some secondary and tertiary health facilities and the cost is attached to the services provided, thus they are not accessible and tas Brawlava awijaya affordable to many women. Cervical cancer is a preventable disease if the awijaya awijaya Uniprecancerous lesions are identified and are treated at an early stage. Screening is it as Braw awijaya the most acknowledged to be the most effective approach to controlling this type awijaya awijaya of cancer. Cervical cancer can be reduce by changing lifestyle such as reducing awijaya Un the number of partners, avoiding early initiation of sexual intercourse, HPV it as Brawn awijaya awiiava vaccination and screening for precancerous changes (Obalase et al 2017). awijaya awijaya Based on a recent study conducted in Nigeria on knowledge and awijaya awijaya awareness of cervical cancer screening among women of reproductive age, there awijaya In is no significant difference in the influence of knowledge of cervical cancers as Brawn awijaya awijava screening among the respondents on parity. There is significant difference awijaya awijaya between the mean score of family type on knowledge of cervical cancer screening, the Brawlaya awijaya parity, economic status and family type were implicated in the factors responsible awijaya awijaya for the causes of cervical cancer. Educational status has significant influence on awijaya Uni knowledge of cervical cancer screening and control (Obalase et al, 2017). Universitas Brawijaya awijava awijaya Universita Medical Faculty of Universitas Brawijaya employees are estimated 129 itas Brawijaya awijaya awijaya people working which are in reproductive age, respectively. This group are prone awijaya awijaya to cervical cancer but there is not much information regarding knowledge and the Brawlaya awijaya Un awareness of cervical cancer among female employees in Medical Faculty of tas Brawijava awijaya Universitas Brawijaya. Thus, we would like to conduct this research.

1.2 Problem statement What is the relationship between knowledge and attitudes towards early detection of cervical cancer with the participation of Pap smear tests on female it as Brawlaya awijaya employees in Universitas Brawijaya's medical faculty? awijaya awijaya awijaya awijaya 1.3 Objective of Research awijaya awijaya Universita This research has 2 outline purposes, which is a general purpose and a star Brawijava awijaya AWIJ RI awiiava specific purpose. awijaya awijaya awijaya awijaya 1.3.1 General Purpose awijaya awijaya To find out and analyse the relationship between the level of knowledge awijaya awijaya and attitudes about early detection of cervical cancer with the participation of Papsitas Brawlaya awijaya smear tests on women who work in the medical faculty of Universitas Brawijaya. awijaya awijaya awijaya awijaya 1.3.2 Specific Purpose awijaya awijaya Knowing the relationship between the level of knowledge about early awijaya awijaya detection of cervical cancer with the level of participation in Pap awijaya awijaya Universitas Brasmear tests. Versi awijaya Universitian b. Knowing the relationship between attitudes about early detection of awijaya cervical cancer with the level of participation in Pap smear tests. awijaya Universitas Brawijaya Universitas Brawijaya 1.4 Significance of Research This research has two outline significance.

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awijaya awijaya awijaya Universi **Scientific Significance** awijaya a. To provide information about the effect of knowledge and attitudes on Brawijaya awijaya awijaya Universitas Brcervical cancer prevention behaviour with a Pap smear test. awijaya Universitian b. Become the basis of research on the factors associated with cervical managements awijaya Universitas Brawing and subsequently early detection. awijaya awijaya awijaya awijaya 1.4.2 Practical Significance awijaya awijaya a. As a basis for planning health promotion programs related to the transmutation awijaya awijaya

spread of cervical cancer and its detection in general and among

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Universitas Brawijaya's citizens in particular.

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CHAPTER 2 UniverLITERATURE REVIEWersitas Brawijava awijaya Un 2.1 Cervical cancer awijaya awijaya awijaya Uni 2.1.1 Definition of Cervical cancer and Pap smear rsitas Brawijaya awijaya awijaya Universita Cervical cancer is a cancer which starts in the cervix, a narrow opening into itas Brawijaya awijaya the uterus from the vagina. The normal ectocervix which is the portion of the uterus tas Brawlava awijaya awiiava extending into vagina, it is a healthy pink colour and is covered with flat, thin cells awijaya awijaya called squamous cell. The cervical canal is made up from columnar cells. The area awijaya which these cells meet are called transformation zone (T-Zone) and is the most awijaya awijaya likely location for abnormal or precancerous cells to occur. The most cervical awijaya awijaya Un cancer that occur which is 80% to 90% are squamous cell cancers. It as Brawi awijaya Adenocarcinoma is the second most common type of cervical cancer, it develops awijaya awijaya from the glands that produces mucus in the endocervix (Ramondetta, 2013). awijaya Papillomaviruses come from papovaridae family. It is small, non-enveloped virus, awijaya awijaya it has diameter of 55nm. It also have two capsid proteins which are L1 and L2. In awijava awijaya Unleach virion capsid has a few copies (around 12 per virion) of the minor capsid it as Brawl awijaya protein, L2. It resembles a golf ball when it is seen under an electron microscope. awijaya awijaya The HPV genome has a single molecule of double stranded, circular DNA which awijaya Un has 7900 bp associated with histones (Burd, 2003). Versitas Brawijaya awijaya awijaya awijaya Universitalif there is suspected cervical cancer the doctor will use colposcopy to it as Brawijaya examine abnormal cells, to collect the cell the doctor may use punch biopsy which the Braw is by using sharp tool to pinch off small sample of cervical tissue or endocervical curettage which uses a small spoon shaped tool or a thin brush to scrape off some and Brawlaya

awijaya tissue sample from the cervix. Other technic can be use are electrical wire loop or awijaya cone biopsy. To diagnose the staging of the cervical cancer, the doctor may it as Brawijaya perform imaging test such as x-ray, CT scan or MRI. Visual examination of bladdersitas Brawijava awijaya and rectum also can determine the stage of cervical cancer. awijaya awijaya Papanicolaou test is known as Pap smear, developed in 1940 by Georgios awijaya awijaya Papanikolau. It includes exfoliating cells at the transformation zone of the cervix to the Brawlaya awijaya enable examination of these cells microscopic observation. When abnormal cells awijaya awijaya are formed in the Pap test, diagnostic testing colposcopy is often indicated. awiiava awijaya Evidence proves that almost 99%-100% of cervical cancer are related to infection that Brawlaya awijaya by high-risk types of the human papillomavirus. HPV is double-stranded, circular awijaya awijaya DNA viruses that can infect skin or mucosal cells, including oral cavity and can be awijaya Un transmitted easily by sexual intercourse or direct contact (Boardman, 2018). The tas Brawlaya awijaya awijaya accuracy of Pap test are very accurate and by regular Pap screenings can reduce awijaya awijaya Univervical cancer rates and mortality by 80 percent. It may feel uncomfortable but a sites Brawlaya awijaya brief discomfort can help to ensure a good health in the future (Weber, 2017). awijaya awijaya awijaya awijava awijaya Univ2.1.2 Epidemiology awijaya awijaya The most common cancers in women is cervical cancer with the number of awijaya Univ440 000 new cases annually and 80% these happen in developing and sitas Brawijaya awijaya awijaya underdeveloped countries. Human papillomavirus (HPV) Infection is the main awijaya awijaya Unincause for 90% of invases cervical cancer cases worldwide (Wong, 2009). It's the sitas Brawijaya Initard most common malignancy in women worldwide, and still stands as a leading it as Brawijava cause of cancer-related death in women in developing countries. In US is Universitas Brawijaya Universitas Univuncommon. Cervical cancer is the 2nd most common cancer in developingsitas Brawijaya

countries, it's the 10th most common in developed countries. In US, cervical cancer, is common, since 2004 the rates have decreased by 2.1% per year in women^{sitas Braw} Univolution younger than 50 years age and above. This trend has been attributed to mass that Braw awijaya screening with Pap smear test, cervical cancer is continuously increase in univers awijaya Unideveloping countries (Boardman, 2018). The people that have cancer in Indonesia Itas Braw awijaya for all ages in the year of 2013 have the percentage of 1.4% or 347 792 people. In awijaya awijaya Yogyakarta the prevalence has the highest cancer disease with the number of 4.1 Universitas Bra awijaya Univ%, meanwhile for Jawa Tengah is 68 638 people and Jawa Timur 61 230 people.sitas Brawi awijaya awiiava Cervix cancer have one of the highest prevalence in Indonesia in 2013. Yogyakarta awijaya awijaya has high cervix cancer which is 1.5%. Based on the estimation Jawa Timur and awijaya Jawa Tengah has cervix cancer and breast cancer the most number (Kemenkes, sitas awijaya 2015). HPV transmission happens mainly by skin to skin contact. Sexual activity awijaya awijava Unitinfluences the role of getting genital HPV infection and cervical cancer. HPV is heat a Braw awijaya resistant and resistant to desiccation and nonsexual transmission by fomites too awijaya awijaya can by prolonged exposure to share contaminated clothing. Having multiple sexual awijaya Univpartners increases the risk sexual activity at early stage places the person at risksitas Braw awijaya 5311 awijaya too. By using condom may not adequately protect that person from expose to HPV awijaya since it can be transmitted by contact with infected labial, scrotal, or anal tissuesitas Braw Unithat are not protected by condom. By using oral contraceptives for a long time hasitas Braw awijaya a significant risk factors for high grade cervical disease. Smoking is the most Uninimportant risk factor independent of HPV infection for greater grade of cervical sitas Braw disease. A crucial factor in development of cervical neoplasia is the role of HPV variants differ in biological and chemical properties and pathogenic (Burd E M, 2003). The incidence of cervical cancer has a link with early onset of sexual activity, it as Brawl

multiple sexual partners, smoking, low socioeconomic status, poor nutrition, oral contraceptive uses, and immunosuppression (Person, 2018). Brawijaya awijaya 2.1.3 Risk Factor of Cervical cancer awijaya awiiava About 20 to 25 percent of women diagnosed with ovarian cancer have a awijaya awijaya hereditary tendency to develop the disease. The most significant risk factor for awijaya ovarian cancer is an inherited genetic mutation in one of two genes: breast cancer awijaya awiiava gene 1 (BRCA1) or breast cancer gene 2 (BRCA2). These genes are responsible awijaya awijaya for about 10 to 15 percent of all ovarian cancers. Women with a grandmother, awijaya mother, daughter or sister with ovarian cancer but no known genetic mutation still awijaya awijaya have an increased risk of developing ovarian cancer. The lifetime risk of a woman awijaya awijava Uni who has a first degree relative with ovarian cancer is five percent (the average it as Braw awijaya woman's lifetime risk is 1.4 percent). All women are at risk of developing ovarian awijaya awijaya cancer regardless of age however ovarian cancer rates are highest in women aged awijaya 55-64 years. The median age at which women are diagnosed is 63, meaning that awijaya awijaya half of women are younger than 63 when diagnosed with ovarian cancer and half awijava awijaya are older. Women who use menopausal hormone therapy are at an increased risk and brawn awijaya for ovarian cancer. Recent studies indicate that using a combination of estrogen awijaya and progestin for five or more years significantly increases the risk of ovarian awijaya awijaya cancer in women who have not had a hysterectomy. Ten or more years of estrogen that a start awijaya use increases the risk of ovarian cancer in women who have had a hysterectomy. Various studies have found a link between obesity and ovarian cancer. A 2009 study found that obesity was associated with an almost 80 percent higher risk of the Brawlave

ovarian cancer in women 50 to 71 who had not taken hormones after menopause (Ocra, 2019). awijaya awijaya **Etiology and Pathophysiology** awijaya awijaya Human papillomavirus (HPV) is the most vital etiologic factor in cancer awijaya awijaya cervix with most 99.7% tumours having HPV DNA. HPV-16 and HPV-18 are the 2 awijaya most common high-risk types found in more than 70% of malignancies. Other High-stas Brawijava awijaya awiiava risk types includes 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68, 73, and 82. The peak awijaya awijaya infection incidence is at late teens and early 20s but in 80% of patients, the infection³ awijaya resolves in 12-18 months with median duration of infection of roughly 8 months. awijaya awijaya After the infection resolves, the risk of cervical cancer returns to baseline. Cervical awijaya awijaya Unilcancer in the absence of demonstrable HPV infection does occur, but it is notiitas Braw awijaya common, and HPV testing appears to be more sensitive than and superior to awijaya awijaya standard Pap smear screening (Person, 2018). awijaya awijaya Basal cell of stratified squamous epithelium may be infected from HPV. The awijaya Unireplication of HPV has not been successfully. Some epithelial cells lives derived tas awijava awijaya from HPV-infected patients, W12E cells harbouring HPV-16 and CIN 612-9E cells awijaya awijaya harbouring HPV-31b, have been with great success cultured on rafts. HPV raft awijaya Uni cultures, the epithelial cell lives which has latent HPV are produce with collagenatas Brawijaya awijaya awijaya matrix remain on a firm support. By creating a based composed of bovine tendon awijaya type 1 collagen, the raft culture systems are prepared. Differentiating suprabasal it as Brawijaya cell permits the replication of HPV. It is predicted that HPV replication cycle starts the replication of HPV. by the entry of virus into the cell of the stratum germination of the epithelium. It is In thought that HPV infection off basal layer requires mild abrasion or micro traumations Brawlaya

of the epidermis. HPV-16 and HPV-33 attach to the host cells by cell surface heparan sulfate. There is also secondary receptor or stabilizing proteoglycans involve in the attachment of HPV. Cellular factors necessary for virion uptake are awijaya not known. After it enters the, HPV replicates as the basal cell differentiate and awijaya Unigoes to the surface of the epithelium. At the basal layer, viral replication is accepted that Braw awijaya to be non-productive and the virus establishes itself as low copy number episome awijaya awijaya by using the host DNA replication machinery to synthesis its DNA on average once awijaya upper cell cycle for differentiated keratinocytes of the suprabasal layer of the tas Braw awijaya awiiava epithelium, the virus changes to a rolling circle mode of DNA replication, amplifies awijaya awijaya its DNA to High copy number, synthesis capsid proteins and causes viral assembly awijaya to happen. awijaya awijava HPVs encode only eight to ten proteins, they must employ host cells to awijaya awijava regulate viral transcription and replication. It begins by host cell factors which awijaya awijaya communicates with LCR part of HPV genome and starts transcription of viral E6 awijaya and E7 genes. E6 and E7 gene product deregulates the host cell growth cycle by awijaya awijaya attaching and inactivating tumour suppressor proteins, cell cyclins and cyclin awijaya awijava Undependent kinases. E6 and E7 gene functions as the subverting the cell growthat as awijaya regulatory pathways and cellular environment in order to alter facilitate viral replication in a cell that terminally differentiate and has exited the cell cycle. Cell awijaya awijaya growth is conducted mainly by two cellular proteins which are the tumour awijaya suppressor protein, p53 and the retinoblastoma gene product, pRB. P53 in cervical cancer is wild type and doesn't mutate. The product of HPV E6 binds to p53 and targets it for rapid degradation by a cellular ubiquitin ligase, it has the equal effect as in inactivating mutation. Resulting in normal activities of p53 which governs G1 arrest, oppotosis, and DNA repair are abrogated. In low risk HPV E6 proteins tas Braw

doesn't bind to p53 at detectable levels and have no effect on p53 stability in vitro. The HPV E6 protein able to form complexes with minimum six other cellular proteins which are not well characterised. The HPV E7 gene product attaches to itas Brawijava awijaya hypophosphoylated form of the RB family of proteins. awijaya awijaya The attachment ruins the complex between pRB and cellular transcription awijaya awijaya factor E2F-1, producing liberation of E2F-1 that lets transcription of genes whose awijaya product are needed for the cell to go to S phase of the cell cycle while E7 gene awijaya awijaya product can associate with other mitotically interactive cellular proteins for example awiiava awijaya cyclin E. this results in stimulation of cellular DNA synthesis and cell proliferation tas brawn awijaya E7 attach to pRB with decreased affinity while E5 gene product enhances the awijaya awijaya mitogen-activated protein kinase activity, thus stimulating cellular response to awijaya Un growth and differentiation factors. This leads to proliferation and delayed tas Brawli awijaya awijava differentiation of the host cell. E1 and E2 gene products are synthesised next. E2 awijaya awijaya ^{Unin}gene product is DNA binding proteins which blocks transcription of E6 and E7^{11,00} Brawl awijaya genes and lets E1 gene product to attach to the viral origin of replication located awijaya awijaya within the LCR. The attachment stimulates replication of the viral genome as awijaya awijava In extrachromosomal elements in the S phase of cell cycle genome copy number it as Brawl awijaya remains at the same level in these cells, and a low level of transcripts is expressed. awijaya awijaya Universita The E2-mediated down-regulation of E6 and E7 transcription makes the it as Brawi awijaya awijaya release of p53 and pRB proteins and the normal differentiation process of the host awijaya awijaya cell is allowed to continue. Viral particles are assembled in nucleus and complete virions are released as the cornified layers of the epithelium are shed. When replication process happens, the viral DNA become established throughout the whole thickness of the epithelium but intact virions are found only in upper layers of tissues. Viral replication is connected with proliferation of all epidermal layers

except the basal layers in warts or condylomata. This leads to acanthosis, parakeratosis, hyperkeratosis and deepening of rete ridges, creating the typically papillomatous cytoarchitecture seen in histologically.ersitas Brawijaya awijaya ersita Cervical cancer is a good example on how a viral infection moves forward awijaya awijaya to become malignancy. The infection with high-risk HPV types disrupts the function awijaya awijaya of the cell proteins and with expression of cellular gene products. By using awijaya microarray analysis of the cell infected with HPV-31 shows 178 cellular genes are awijaya awijaya up-regulated and 150 cellular genes are down-regulated by HPV (22). For downawiiava awijaya regulated are primarily included in regulation of cell growth, some keratinocyteawijaya specific genes, and interferon (IFN)-response genes. For benign lesions due to awijaya awijaya HPV, the viral DNA is located extrachromosomally in nucleus. HPV DNA is awijaya In generally integrated into the host genome. The integration of HPV DNA interferes it as Brawn awijaya awijava or deletes the E2 ORF, leads to loss of its expression creating loss of function of awijaya awijaya E2, which normally down-regulates the transcription of E6 and E7 gene and leads awijaya to increase of expression of E6 and E7. They both have high affinity to p53 and awijaya awijaya pRB in high-risk-HPV. When the binding is distributes it can give rise to increase awijaya awijava proliferation rate and genomic instability. Creating, host cell accumulates more and task awijaya more damaged DNA that can't be repaired. Mutations accumulates that leads to awijaya full transformation to cancerous cells. Effect of activated oncogenes and awijaya awijaya chromosome instability, which may lead to transformation include methylation of awijaya viral and cellular DNA, tolerance activation, and hormonal and immunogenetic awijaya factors. It may take 10 -20 years to progress into cancer but some lesions become Uni cancerous rapidly maybe within a year or two years (Burd, 2003).

2.1.5 Clinical Manifestation of sexually transmitted infections Sexually transmitted HPV infections leads to one of three possible outcome. First is anogenital warts (condyloma acuminatum) on or around the awijaya Unigenital and arms in both gender. It is generally associated with HPV-6 and HPV-sitas Brawijava awijaya awijaya 11 and do not lead to cancer. They are mostly asymptomatic and may resolve awijaya awijaya within three to four months by its own. Second, is latent or inactive infection, some tas Brawlaya awijaya person might know if they have contracted the infection due to the noticeable many awijaya awijaya symptoms are less likely to occur and infected area appears some cytologically awiiava awijaya fine as usual. Finally the third is an active infection that is related with greater risk that brawlaya awijaya of HPV types by the virus changes in infected cells resulting in penile, urethral, the Brawijava awijaya awijaya bladder, vaginal, vulva or cervical intraepithelial neoplasia. Studies shows that 15 awijaya Uni to 28% women in whom HPV DNA was detected developed SIL within two years it as Brawijaya awijaya awijaya while only one to three percentage of women in whom HPV DNA was not detected. awijaya awijaya The risk of progression for HPV-16 and -18 was greater compared to other HPV it as Brawijaya awijaya types (Burd, 2003). awijaya awijaya awijaya awijaya awijaya 2.1.6 Cervical cancer stages awijaya awijaya After the patient is diagnosed with cervical cancer, the next step is to awijaya Uni determine the cervical cancer stage to give treatment accordingly. To determine it as Brawijava awijaya **Universitas Brawij** awijaya the cancer's stage after a cervical cancer diagnosis, the doctors will find how far awijaya awijaya has the cancer grown into the cervix and has the cancer reach the nearby tas Brawlaya structures and also has the cancer spread to nearby lymph nodes or to distant Brawn organs. The stage is one of the most important factors in deciding how to treat the Cancer and determining how successful treatment might be. The FIGO as Brawijaya

(International Federation of Gynecology and Obstetrics) staging system is used most often for cancers of the female reproductive organs, including cervical cancer. For cervical cancer, the clinical stage is used and is based on the results of the stars Brawn awijaya doctor's physical exam, biopsies, imaging tests, and a few other tests that are done awijaya awijaya In some cases, such as cystoscopy and proctoscopy. It is not based on what is that Braw awijaya found during surgery. If surgery is done, a pathologic stage can be determined awijaya awijaya from the findings at surgery, but it does not change the clinical stage. The treatment awijaya plan is based on the clinical stage. The American Joint Committee on Cancer tas Braw awijaya awiiava (AJCC) TNM staging system is another staging system based on 3 key pieces of awijaya awijaya information, T describes how far the main (primary) tumour has grown into the awijaya cervix and whether it has grown into nearby tissues, N indicates any cancer spread awijaya awijaya to lymph nodes near the cervix. Lymph nodes are bean-sized collections of awijaya awijava Unimmune system cells, to which cancers often spread first, M indicates if the cancer tas Braw awijaya has spread (metastasized) to distant sites, such as other organs or lymph nodes awijaya awijaya that are not near the cervix. FIGO stages are the same as AJCC stages. Numbers awijaya Uni or letters after T, N, and M provide more details about each of these factors. Higher it as Braw awijaya awijaya numbers mean the cancer is more advanced. Once a person's T, N, and M awijava awijaya Categories have been determined, this information is combined in a process called that Brawle awijaya stage grouping to assign an overall stage. Cervical cancer has a few stages which it as Brawijava awijaya awijaya is stated as in the table below. awijaya awijaya awijaya awijaya

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it	awijaya awijaya	Universitas	Table 2.1	Shows sta	ging of Cervica	al Cancer (Falco,	2017)		Brawijaya
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a second s	awijaya	Univ	Diawijaya	Universit	as biawijaya	Universitas Di	awijaya U		Brawijaya
	awijaya	Univ Stage	Stage	FIGO	Stage descri	ption			Brawijaya
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	awijaya	Univ			of the cervix	into deeper tissu	les of the ce	ervix sitas	Brawijaya
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	awijaya	Univ			The cancer m	nay also be grow	ing into the l	•	Brawijaya
	awijaya	Univ	MO		of the uterus	, but it has not g	rown outside	- 4l	Brawijaya
	awijaya	Univ			or the dicrus,	, but it has not g		รแสร	Brawijaya
	awijaya	Univ			uterus (T1).				Brawijaya
	awijaya	Uni Uni							Brawijaya
	awijaya awijaya	Uni			It might or mig	ght not have not	spread to ne	arov	Brawijaya Brawijaya
	awijaya	Uni			lymph nodes	(NO)			Brawijaya
	awijaya	Uni			lympii nodes	(110).			Brawijaya
	awijaya	Univ			It has not sor	ead to distant site	ae (M0)		Brawijaya
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	awijaya	Univ IA	T1a	IA	There is a ve	ry small amount	of cancer, a	nd it sitas	Brawijaya
	awijaya	Univ			can be seen o	only under a micr	oscope (T1a	1).	Brawijaya
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la.	awijaya	Univ			1/8-inch) deep	and less than 7 mr	n (about 1/4-		
	awijaya	Univ	Any N				,	sitas Braw	-
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	awijaya	Univ IA2	T1a2	IA2	The area of e	ancer invasion is be	twoon 2 mm	alter Duard	
	awijaya	Univ	TTAL	IAZ				sitas Braw	
	awijaya	Uniy	Any N		and 5 mm (ab	out 1/5-inch) deep a	and less than		
	awijaya	Uni			7 mm (about 1	/4-inch) wide (T1a2))	sitas Braw	/ijaya
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	awijaya	Univ			7 mm (T1b).			sitas Braw	
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	awijaya	Uni	1102	102		Sitas	s Brawijaya
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	awijaya	Univ	MO			9 0.0000 (100		sitas Brawijaya
	awijaya	Univ			urine from the	e kidneys to the blade	der) (T3).	sitas Brawijaya
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	awijaya	Univ IIIA	Т3а	IIIA	The cancer h	as spread to the low	er part of the	
	awijaya	Univ			vaging or the	walls of the pelvis.	The enner	sitas Brawijaya
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Universitas Brawijava Universitas Brawijaya (called Any N causing kidney problems hydronephrosis) (T3b). M0 awijaya It might or might not have not spread to nearby awijaya lymph nodes (N0). awijaya awijaya It has not spread to distant sites (M0). awijaya awijaya awijaya awijaya IVA T4 IVA The cancer has spread to the bladder or rectum awijaya awijaya or it is growing out of the pelvis (T4). Any N awijaya awijaya It might or might not have not spread to nearby M0 awijaya awijaya lymph nodes (N0). awijaya awijaya It has not spread to distant sites (M0). awijaya awijaya awijaya IVB Any T The cancer has spread to distant organs awijaya awijaya beyond the pelvic area, such as distant lymph Any N awijaya nodes, lungs, bones or liver. (M1) awijaya M1 awijaya awijaya awijaya awijaya awijaya Univ2:2sita Early detection niversitas Brawijaya Universitas Brawijaya awijaya awijaya Universitas Brawijaya Universitas Brawijaya awijaya There a few test available to screen women for cervical precancers and the Brawijaya Universitas Brawijaya Universitas Brawijaya Uni cancers. Each test has its own ups and downs, it depends on the setting in whichs tas Brawijaya it is to be used.

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Cytology-based screening programs continue to be the mainstay of cervical cancer prevention worldwide and have been demonstrated of reduction in the cervical cancer incident and mortality, particularly in organized program settings it as Brawijava awijaya with good-quality screening, adequate coverage, and with optimal frequency. awijaya awijaya Pap test with conventional cytology it involves obtaining of cells gently awijaya awijaya scraped from the ectocervix and endocervix, either with a spatula or brush and itas Brawijaya awijaya preparing their smears. It is then examine under the microscope for abnormalities. awijaya awijaya It has total of low sensitivity ranging between 37.8 and 81.3% at atypical squamous awiiava awijaya cells of undetermined significance (ASCUS) threshold with an average of 64.5%, stas brawle awijaya but very high specificity varying from 85.7 to 98.5% with a mean of 92.3%. The test awijaya awijaya is highly specific, however false-negative rates have always been an area of awijaya concern in cytology-based programs, wherein premalignant or malignant cells awijaya awijaya have been misdiagnosed as normal. awijaya awijaya Visual examination of cervix, there are a few methods such as unaided awijaya awijaya visual inspection, visual inspection after application of acetic acid (VIA), VIA with awijaya Uni magnification (VIAM), visual inspection after application of Lugol's iodine (VILI).sitas Brawij awijaya awijava For unaided visual inspection or visual inspection or down staging, it is naked eye awijaya awijaya visualization of the cervix without acetic acid but has been shown to perform poorly. It as Brawl awijaya Uni Visual inspection after application of 3 to 5% acetic acid, it is naked eye visual it as Braw awijaya awijaya inspection of the cervix after application of 3 to 5% acetic acid. The application of awijaya awijaya 3 to 5% acetic acid causes a reversible coagulation or precipitation of the cellular set Braw awijaya proteins. Based on the accuracy of VIA to detect cervical neoplasia it has been extensively studied and found to be satisfactory the sensitivity of VIA ranges between 66 and 96% and specificity between 64 and 98%. Visual inspection after the Brand application of 3 to 5% acetic acid and under magnification devices which has the

similarity and specificity as compared with VIA and does not have any added benefit over VIA. Visual inspection after application of Lugol's iodine, precancerous lesions and invasive cancer does not take up iodine due to the absence of glycogen stars Brawi awijaya and appear as well-defined, thick, mustard or saffron yellow areas. The sensitivity awijaya Unhand specificity of VILI was 87.2% and 84.7%.a Universitas Brawijaya awijaya awijaya awijaya Universita A colposcope is a low-power, stereoscopic, binocular field microscope it as Brawlava awijaya having a powerful light source, used for magnified visual examination of uterine awijaya awijaya cervix to diagnosis cervical neoplasia. It is painless and have no side effect and awiiava awijaya can be perform safely throughout pregnancy. It allows the examiner to take tissue tas Brawl awijaya samples from specific areas which are abnormal. A curette is used to scrape the awijaya awijaya endocervical canal and get the tissue lining. awijaya awijaya Cervicography has distant evaluation of photographs of the cervix awijava awijaya "cervicograms," taken with a specialized 35-mm camera, after application of acetic tas Brawl awijaya acid. It does not need experience in colposcopy and the photographs taken awijaya awijaya resemble a low-magnification colposcopic photograph. Cervicography can't be awijaya In recommended for universal screening, however it may have a role in the follow-up it as Brawn awijaya awijava of patients with a mildly abnormal cervical smear. awijaya awijaya Human papillomavirus DNA test, the sample obtained is similar to Pap, with test awijaya awijaya a cervical swab from the transformation zone and placed into transport medium. awijaya awijaya The test detects whether a person is infected with one or more of the 13 high-risk awijaya HPV viral types (types 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, and 68). It is used as a routine screening test for women above 30 to 35 years in many regions un and is especially useful to evaluate women with equivocal Pap test. The sensitivity it as Brawn of HPV testing for detecting CIN 2-3 lesions varied from 45.7 to 80.9% across

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different study sites in India the specificity varied from 91.7 to 94.6%. HPV testing requires sophisticated laboratories and is currently unaffordable in less-developed it as Brawijaya Uni countries (Mishra, 2011), iversitas Brawijaya Universitas Brawijaya awijaya awijaya awijaya awijaya 2.2.2 Specific early detection (Pap Smear test) ersitas Brawlaya awijaya awijaya Universita Pap test using liquid-based cytology, the cells are collected similar to it as Brawliava awijaya conventional Pap, but using a brush instead of a spatula. The head of the brush is that Brawlava awijaya awiiava vigorously shaken or broken off into a small pot of liquid containing preservative awijaya awijaya solution. The sample is then filtered or centrifuged to remove excess blood and awijaya debris. The cells are then transferred to the slide in a "mono" layer. The test is more awijaya awijaya expensive compared to conventional cytology and it needs additional supplies and awijaya awijaya Un sophisticated equipment. In a meta-analysis comparing conventional Pap with the Braw awijaya LBC, there is no difference found in the relative sensitivity. A lower pooled awijaya awijaya specificity was found for LBC when presence of ASCUS was the cut-off (ratio, 0.91; awijaya 95% confidence interval, 0.84-0.98). Automated pap smears attempts to reduce the Bran awijaya awijaya errors by using computerized analysis to evaluate Pap smear slides. In AutoCyte awijaya awijaya Uni Screen, many cells images are presented to a human reviewer, which then decides it as Brawi awijaya whether a manual review is required. awijaya awijaya Universita The preparation for Pap smear test is done when the patient isn't in hersitas Brawijava awijaya awijaya menstruating period. The patient also should avoid vaginal intercourse, douching, awijaya awijaya use of tampons, use of medicinal vaginal cream or contraceptive cream for 24-11as Brawlaya 48hours prior to cervical screening. Ideally, pre-existing cervicitis should be treated treas Braw prior to cervical screening. It should proceed in the presence of bleeding or cervicitis, as these symptoms may be related to cervical dysplasia or neoplasm, as Brawlaya

awijaya awijaya which may be detected with cervical screening. The equipment used are examination table with foot supports, examination light, metal or plastic speculum, sitas Brawijaya examination gloves, cervical spatula and cytobrush, Liquid-based cytology tas Brawijaya container or glass slide and fixative. The position of the patient should be as the awijaya awijaya awijaya Uni following:Brawijaya awijaya awijaya awijaya awijaya awijaya awiiava awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya Figure 1 Position of Pap smear test (Karjane, 2018). awijaya awijaya A metal or plastic speculum is placed in the vagina to examine the cervix.sitas Brawijava awijaya awijaya Lukewarm water can be used to lubricate and warm the speculum for patient awijaya awijaya Uni comfort. To have an optimum sample is obtained, the surface anatomy of the cervix sitas Brawijaya awijaya Unimust be fully visualized, including the squamous epithelium of the ectocervix, sitas Brawijaya awijaya awijaya squamocolumnar junction, and the external os. The transformation zone of the awijaya awijaya

cervix is the region where squamous epithelium replaces glandular epithelium in a process called squamous metaplasia. Due to HPV has predilection at this area, screening is focus on sampling the cells at the transformation zone to adequately

detect the presence of dysplasia. Discharge covering the cervix may be removed carefully using a large swab, ensuring that the cervix is minimally traumatized. To

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Universitas Brawijaya awijaya collect specimen, a cervical broom or cervical spatula is applied to the surface of the cervix and turned in a single direction to achieve an adequate sample for the Brawliava un cytology, making sure to rotate it at least 360 ° for the spatula and 5 rotations for the s awijaya the broom. If the spatula is used, a cytobrush is additionally needed and must be awijaya awijaya inserted into the cervix so that the outermost bristles are still visible at the external tas Brawijaya awijaya os. The brush is then rotated one half turn in a single direction to achieve an awijaya awijaya adequate cytology sample. awijaya awijaya awiiava awijaya awijaya awijaya awijaya awijaya awijaya awijaya

Figure 2 Procedure of Pap smear test (Karjane, 2018).ava

awijaya awijaya Universita The specific protocol for specimen transfer varies depending on the test awijaya Uni used. For Sure Path, after the cervical broom or cervical spatula and cytobrush are it as Brawijava awijaya removed from the cervix, they are placed specimen side down into the liquid awijaya awijaya Unicytology vial, each removable head is snapped off, and the vial is labelled and sent it as Brawijaya awijaya to pathology. For ThinPrep, the spatula and brush are to be swirled vigorously in the spatula and brush are to be swirled vigorously in the vial 10 times to release the specimen and then discarded. Similarly, if the Un broom is used, it is to be pushed into the bottom of the vial 10 times and then it as Brawijaya

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swirled vigorously and discarded. When conventional cytology is to be performed, the specimens are smeared on a glass slide and subsequently sprayed with fixative or placed in 90% alcohol solution. Although the FDA-approved protocol for the awijaya cervical broom does not require use of the cytobrush, some practitioners use the awijaya cytobrush following the broom in an attempt to improve the likelihood of obtaining the Brown awijaya an endocervical component in the sample. Small studies show no significant awijaya awijaya difference in acquiring endocervical cells between the broom and spatula plus awijaya Unicytobrush however other studies have shown the spatula/cytobrush method to be it as Braw awijaya awiiava better at sampling endocervical cells than the broom alone. Two much larger awijaya awijaya studies found that the broom/cytobrush combination improves sampling of the awijaya endocervix compared to the broom alone. Whether these potential sampling awijaya awijaya differences affect the sensitivity of cervical cytology for detecting moderate or awijaya awijava severe dysplasia or cancer is unclear however, based on the available data, using these awijaya the cytobrush to obtain endocervical cells in addition to the spatula or the broom is awijaya awijaya reasonable. awijaya awijaya For complications to occur are extraordinarily rare and include minor awijaya awijava Uni bleeding and infection. The patient must be educated on the likelihood of vaginal it as Braw awijaya spotting immediately after a pap smear is performed, as this is considered normal. Although the Pap smear is one of the best screening tests in medicine and its awijaya implementation has decreased the incidence of cervical cancer by over 50%, it as Brawlava awijaya does have its limitations. First, the sensitivity of one Pap smear for cervical dysplasia ranges from 30-87%. Plus, the intraobserver and interobserver In reproducibility is poor and ranges from approximately 43-68% at best. Nearly half it as Bra of all new cervical cancers are found in women who have never had cervical cytology screening prior to diagnosis. Unfortunately, false-negative Pap smears

are associated with up to 30% of all new cervical cancer diagnoses. HPV DNA testing has improved sensitivity over cervical cytology but lower specificity. For women age 30 years and older, the sensitivity and specificity of the HPV DNA test awijaya for detecting CIN 2 or worse are roughly 95% and 87%, respectively. For younger awijaya Uni women who are more likely to have transient HPV infections, the specificity is much it as Braw awijaya lower (Karjane, 2018). awijaya awijaya University For screening, the patient population under consideration, it applies to all awijaya awijaya female who has cervix, not looking at sexual past. This statement do not apply awiiava awijaya females who have already get diagnosed of high-grade precancerous cervical awijaya lesions or cervical cancer, females with utero to diethylstibestrol, or women are awijaya awijaya immunocompromised (HIV Patients) awijaya awijaya Screen test, recent studies indicates that there are no clinically important awijaya awijaya differences between liquid-based cytology and conventional cytology. The las Braw awijaya USPSTF (U.S preventive services task force) noticed that the choices of cytology awijaya awijaya method may not be under the diet control of the clinician considers cytology screen awijaya Un in suitable age groups at suitable intervals tube of substantial not benefits, not it as Braw awijaya awijava containing the method used. HPV testing using Digene Hybrid capture 2 (HC2) awijaya (Qiagen, Germantown, Maryland) is usely used in the U.S, HC2 and polymerase that Brawl Uni chain reaction-based methods has been evaluated in effectiveness trials. Universitas Brawi awijaya awijaya awijaya The screening intervals, age 21-65 years old need to screen every 3 years. The screening intervals, age 21-65 years old need to screen every 3 years. awijaya For female age 30-65 years, HPV testing combination with cytology (co-testing) every 5 years is preferred for reasonable alternative for women in this age group who would prefer to extend the screening intervals. Treatment of lesions which it as Braw would otherwise fix by their own is harmful because it makes to procedures with

unwanted side effects. Females who choose co-testing to increase their screening internal must be aware that positive screening results are more likely with HPV-stas Brawlaya based strategies than with cyotology alone and that some females may requires tas Brawijava awijaya prolonged surveillance with additional frequent testing if they have persistently awijaya Uni positive HPV results. Universitas Brawijaya Universitas Brawijaya awijaya awijaya awijaya Universita The time screening, cervical cancer is not common before the age 21 years it as Brawlaya awijaya old. There is that screening earlier than age 21 years old, regardless of sexual transmission awijaya awijaya history, would lead to even greater harm compared to benefits it's because awiiava awijaya abnormal test results are likely to be transient and to resolve on their own, plus tas Brawl awijaya treatment may have an adverse effect on childbearing. awijaya awijaya Assessment risk, females who have had hysterectomy with removal of the tras Brawn awijaya awijaya cervix and who doesn't have past of a high-grade precancerous lesion or cervical awijaya awijaya Cancer are not at risk for cervical cancer and shouldn't be screened. Females that that awijaya had their cervix removed by surgery for ovarian or endometrial cancer are not at awijaya awijaya high risk of cervical cancer and would benefit from screening (Mayer, 2012). awijaya awijaya awijava awijaya 2.2.3 Treatment, Management and Prevention awijaya awijaya University Almost all HPV-induced cervical cells changes are transient and 90% tas Brawi awijaya awijaya regress spontaneously within 12-36 months as the immune system removes the awijaya awijaya virus. The main immune response to HPV infection is cell-mediated response awijaya induced at local lymph nodes. Humoral immune responds develops, but local levels of HPV-specific immunoglobulin G (IgG) and IgA in tissue doesn't correlate Universitas Brawijaya un with the removal of virus. For systemic levels of HPV-specific IgA were correlated it as Brawijava with virus clearance while systemic levels of HPV-specific IgG were detected more

frequently in patients with persistent HPV infection. Only a small amount of mild and moderate cervical disease develop into invasive cancer, but the risk of progression from severe cervical cellular abnormality to invasive carcinoma is at the Braw least 12%. Gene predisposition, frequency of reinfection, intratypic genetic awijaya awijaya awijaya Univariation with HPV type, coinfection with more than one HPV type, hormone levels it as Braw awijaya and immune response may influence the ability to clear HPV infection. awijaya awijaya With cryotherapy, abnormal tissue and the surrounding 5mm is frozen awijaya awijaya using super cooled probe. A single freeze is usually not enough to create necrosis, awiiava awijaya thus the area is allowed to thaw and is frozen once again. Ablation of tissue with the brawn awijaya carbon dioxide laser beam is as effective as cryotherapy, and tissue has healing awijaya awijaya time, but the procedure is expensive. Loop electrosurgical excision procedures are awijaya Uninow considered to be chosen treatment for non-invasive squamous lesions. awijaya awijaya awijaya For micro invasive cancer which is less than 3mm in size are managed it as Brawijaya awijaya conservatively by excisional cone biopsy. Early invasive cancer uses radical awijaya awijaya hysterectomy or external-beam high-energy radiotherapy and implants to treat it. awijaya Uni This is to destroy malignant cells in the cervix, para cervical tissues and regional it as Brawn awijaya awijava lymph nodes. For local advanced cancers are managed with radiotherapy to the awijaya awijaya main tumour and potential sites of regional spread. Surgical and cytodestructive tas Brawl Uni procedures, several antiviral and immunomodulatory agents have been evaluated it as Braw awijaya awijaya as treatment for HPV-associated cervical lesions. Podophyllin a cytotoxic agent awijaya awijaya that arrest mitosis in metaphase, in together with vidarabine, a DNA polymerase inhibitor, suppressed HPV gene expression and cell growth in cervical cancer cell lines. Combined topical therapy with podophyllin and vidarabine ointments in 28 patients with mild to moderate CIN resulted in regression of lesions and successful eradication of HPV-16 and HPV-18 DNA in 81% patients. IFNs and intravaginal 5-

flourouracil have shown variable response in clinical and in vitro studies (Burd, Universitas Brawijaya For the management, women with ASC-US HPV testing is suggested if awijaya negative, repeat co-testing in 3 years, if positive perform colposcopy. Repeat it as Braw awijaya cytology in 1 year is acceptable, if negative repeat cytology in 3 years, if ASC or awiiava awijaya greater perform colposcopy. Women aged 21-24 years with ASC-US, repeat awijaya cytology in 12 months, if repeat cytology is ASC-H, AGC, or HSIL, perform awijaya awijaya colposcopy, otherwise repeat cytology in another 12 months. Women aged 20 awiiava awijaya years or younger with ASC-US or LSIL, HPV infection and minor abnormal cytology awijaya results common in adolescents but invasive cancer is rare. Pregnant women with awiiava awijaya ASC-US, managed same as non-pregnant women and Endocervical curettage awiiava In (ECC) is contraindicated in pregnant women and should not be collected if awijaya awijava colposcopy is performed. For Management of women with ASC-H, perform awijaya awijaya colposcopy regardless of HPV status. For Management of women with LSIL, awijaya women aged 25 years or greater with LSIL perform colposcopy. Women aged 21awijaya awijaya 24 years with LSIL, repeat cytology in 12 and 24 months, follow guidelines for ASCawijaya awijava UN US. Pregnant women with LSIL, managed same as non-pregnant women. It as awijaya Postmenopausal women with LSIL, acceptable options include reflex HPV testing, repeat Pap at 6 and 12 months and colposcopy. Management of women with HSIL awijaya refer to colposcopy regardless of age. Pregnant women with HSIL, managed same awijaya as non-pregnant women. Management of women with AGC, women with AGC including ASC-NOS, AGC-favour neoplasia and AIS, refer to colposcopy with endocervical sampling. Women with atypical endometrial cells, perform endometrial biopsy and endocervical sampling. If no pathology found, proceed with colposcopy. Management of women age 30 years and older who are Pap negative

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awijaya awijaya and HPV positive, repeat cytology and HPV DNA testing in 12 months, if cytology awijaya negative, HPV negative, repeat co-testing in 3 years, if cytology abnormal with any itas Brawijaya HPV result perform colposcopy, if cytology negative, HPV positive, perform tas Brawijava awijaya colposcopy. Another option would be to perform HPV 16 and 18 testing, if 16 or 18 awijaya awijaya positive, perform colposcopy, if 16 and 18 negative, repeat co-testing in 12 months, and Brawlaya awijaya if cytology negative, HPV negative, repeat co-testing in 3 years, if cytology awijaya awijaya abnormal with any HPV result, perform colposcopy, if cytology negative, HPV awijaya Unipositive, perform colposcopy (Karjane, 2018). awijaya awiiava awijaya For prevention measures the main approaches is to prevent HPV infection it as Brawliava awijaya include both risk reduction and development of HPV vaccines. Use latex condoms and Brawinava awijaya awijaya and spermicide can reduce HPV contraction vaccines directed against HPV are in awijaya Uniphase 1 and phase 2 clinical trials but are not recently commercially available. HPVs tas Brawijaya awijaya awijaya vaccines normally has virus-like particles, which are empty virus capsid which has awijaya awijaya Unimajor HPV capsid antigen and maybe the minor capsid antigen but lacking viral itas Brawijaya awijaya DNA. The vaccine are produced by expressing the L1 or L1 and L2 ORFs in awijaya awijaya eukaryotic cells. They afterwards self-assemble to VLPs that are highly awijaya awijaya Un immunogenic. Optimal vaccines would have a cocktail of VLPs of the most tas Brawijaya awijaya common high-risk HPV subtypes (Burd, 2003). awijaya awijaya awijaya awijaya awijaya Uni 2.3 Health seeking behaviour correlation with education and knowledge versitas Brawijaya awijaya awijaya Universita In considering the determinants of health, it's important to know that low it as Brawijaya physical circumstances are not the only factors harmful to health. Lack of sitas Brawijaya education for example can lead to reduced ability to find, understand and use awijaya

health information. Thus, education is an important determinant of health status in both the developed and developing world. ava Universitas Brawijaya The high health returns to investing in the education of women are awijaya indisputable. Well educated individuals experience better health than the poorly it as Brawijava awijaya awijaya educated, as indicated by high levels of self-reported health and physical awijaya awijaya functioning and low levels of morbidity, mortality, and disability. In contrast, low levels Brawlaya awijaya educational attainment is associated with "high rates of infectious disease, many may have awijaya awijaya chronic non-infectious diseases, self-reported poor health, shorter survival when awiiava awijaya sick, and shorter life expectancy". awijaya awijaya The exact mechanism of education's impact on health is not known, it has awijaya been suggested that educating women alters the traditional balance of powers as Brawn awijaya awijaya within the family, leading to changes in decision making and allocation of resources awijaya awijaya within the household. Therefore, educated mothers are more likely than tas Brawlaya awijaya uneducated women to take advantage of modern medicine and comply with awijaya awijaya recommended treatments. awijaya awijaya Furthermore, education may change mothers' knowledge and perception awijaya awijaya Uniof the importance of modern medicine in the care of their children. In a study of it as Brawl awijaya child nutrition in the Philippines, access to healthcare services benefited childrensitas Brawi awijaya awijaya of educated mothers more than children of mothers with less schooling, a finding awijaya awijaya which suggested that educated mothers were more likely to take advantage of the Brand available awijaya available public health services. awijaya For example, findings from numerous studies of infant and child mortality as Brawlava conducted in developing countries over the last decade show a nearly universal positive association between maternal education and child survival. Education can tas Brawlaya

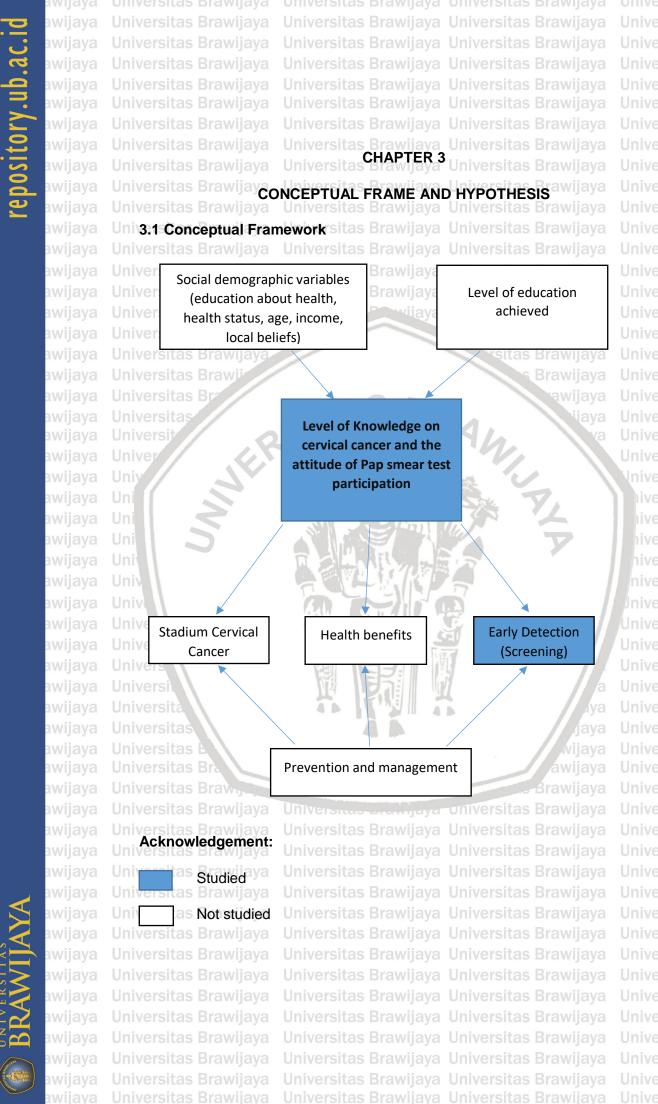
modify women's beliefs about disease causation and thus influences both childcare practices and the use of modern healthcare services. These facts reveal thas Brawl that women are important promoters of health education and practices within the stas Brawilava awijaya home and the benefits of their education extend to their children and others. awijaya awijaya Just as mothers are important providers of health information in the home, awijaya awijaya teachers serve as role models and can play a valuable role in health promotion in the Brawlaya awijaya the classroom. In order for teachers to promote health practices, they must be awijaya awijaya "health literate". Teacher health literacy may be defined as "the capacity of awiiava awijaya teachers to obtain, interpret, and understand basic health information and services that brawly awijaya with the competence to use such information and services in ways that enhance awijaya awijaya the learning of health concepts and skills by school students." awijaya awijaya School health education may be delivered in a variety of ways, with varying awijava awijaya University of the second se awijaya other health professionals must be prepared to address the complex social, awijaya awijaya developmental, and health-related issues that youth bring to the classroom. awijaya Un Continued effort should be made to maximize the learning of critical issues and it as Brawn awijaya awijava concepts in child and adolescent health. awijaya awijaya University In the developed world, school teachers are instructed in health education tras awijaya awijaya around several theme which is to teach health pedagogy skills, to provide health awijaya awijaya information from the 10 traditional health content areas (community health, awijaya consumer health, environmental health, family health, mental health, injury awijaya prevention/safety, nutrition personal health, diseases and substance abuse), to examine the six adolescent risk behaviour categories identified by the Centers for the Brawlava

Disease Control and Prevention, and also to describe the eight components of a coordinated school health program (Staple-clark, 2015). People with high educational level will differ significantly on their health awijaya tas Brawijaya Un seeking behaviour from those with low educational level. The result showed that it as Brawijava awijaya awijaya educational level is statistically significant on health behaviour. seeking awijaya awijaya Specifically, participants with high educational level reported higher score on tas Brawlava awijaya health seeking behaviour. The study by (Monazza and Greta 2010) found that as Brawlava awijaya awijaya better educations were positively related to attitudes toward health (Ahmed, et al, awijaya awijaya 2009) revealed that level of schooling was found as important determinants of these Brawlaya awijaya malaria knowledge and practices of malaria prevention. (Houston, et al, 1996) awijaya awijaya found out that level of education influences health seeking behaviour. (Carolyn, et awijaya Un al, 2010) found that people with low educational level had longer time to delay instas Brawlaya awijaya awijaya seeking help when they noticed some symptoms unlike the better educated which awijaya awijaya Uni had a faster response. From the above, it is accepted that education is a factor it as Brawlaya awijaya which influence ones response to issues patterning to health (Ihaji, 2014). awijaya awijaya awijaya awijava awijaya awijaya awijaya

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3.2 Conceptual Framework Description Social demography variables and level of education achieved has correlation to the knowledge about cervical cancer and having Pap smear test to awijaya check their health status. Women are not getting screen and the results are tas Braw awijaya awijaya because of lack access to care, having no usual source of care or having higher awijaya awijaya urgent demands on their conditions. Educations, poverty, lower socioeconomic tas Braw awijaya status or even cultural issues may contribute why women do not regularly do awijaya awijaya screening (Bucco, 2017). Many patient are diagnosed with late stage due to high awiiava awijaya Investor illiteracy among women and their problematic health seeking behaviour for the seeking behaviour for the sector is a sector of the sector of the sector is a sector of the sector of th awijaya gynaecological signs and symptoms are responsible for the late stage of diagnosis awijaya awijaya of cervical cancer (Gyenwali, 2013). Women younger than age 21 years, screening awijaya women below 21 years old doesn't reduce cervical cancer incidence and mortality it as Brawn awijaya awijaya compared with beginning screening at age 21 years old (Moyer, 2012). To screen awijaya awijaya cervical cancer we can use Pap smear test which is scraping and brushing cells awijaya from cervix and is sent to lab to be examine. Prevention interventions must be awijaya awijaya focused on raising awareness of gynaecological symptoms and improving health awijaya awijava Uniseeking behaviour in women (Gyenwali, 2013). To prevent this from happening westas Braw awijaya can prevent it by reduction of risk and vaccines, latex condom or spermicides. The awijaya awijaya education status has a significant influence on knowledge of cervical cancer awijaya awijaya screening and control (Obalase, et al, 2017). awijaya 3.3 Research hypothesis ersitas Brawijaya Universitas Brawijaya awijaya ersita There are relationship between the level of knowledge and attitude towards the Brawl early detection of cervical cancer with the level of participation in Pap smear test tas Braw on women who work in the faculty of medicine in Universitas Brawijaya.

3.4 Behaviour Frame Universitas Brawijaya Universitas Brawijaya Knowledge awijaya awijaya awijaya awijaya awijaya awijaya awijaya

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Universitas Brawijaya **Behaviour**

Attitudes

People with high educational level will differ significantly on their health seeking behaviour compared with low educational level people. The result showed that educational level is statistically significant on health seeking behaviour. Specifically, participants with high educational level reported higher score on the states health seeking behaviour. The study by (Monazza and Greta 2010) found that better educations were positively related to attitudes toward health. (Ahmed, et al, Uni 2009) revealed that level of schooling was found as important determinants of it as Braw malaria knowledge and practices of malaria prevention. (Houston, et al, 1996) found out that level of education influences health seeking behaviour. (Carolyn, et Uni al, 2010) found that people with low educational level had longer time to delay insit as Brawijava seeking help when they noticed some symptoms unlike the better educated which had a faster response. From the above, it is accepted that education is a factor tas Braw which influence ones response to issues patterning to health (Ihaji, 2014). Healthy tas Brawijava conditions can be achieved by changing behaviour from unhealthy to healthy Un behaviour and creating a healthy environment at home. Attitudes towards health as tas Brawijaya

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Universitas Brawijaya healthy attitude starts with oneself by paying attention to health needs in the body

repository.ub.ac.id awijaya awijaya awijaya 4.1 Research Design awijaya Universitas Brawıjaya To learn about level of knowledge and attitudes of cervical cancer and its awijaya awijaya awijaya Universitionship with Pap smear screening participation among female employees insitias Brawijaya awijaya the Universitas Brawijaya Medical School by using observational analytic methods Brawijaya awijaya awijaya with cross sectional planning approach. awijaya awijaya awijaya awijaya 4.2 Research Population and Samples awijaya awijaya 4.2.1 Population awijaya awijaya Target population of overall population of female employees in Universitas it as Brawliava awijaya awijaya Brawijaya in medical faculties is 129. awijaya awijaya awijaya awijaya 4.2.2 Random sampling awijaya awijaya Universita The data taken is 100 female employees in Universitas Brawijaya medical itas Brawijaya awijaya awijaya faculties. awijaya awijaya awijaya awijaya awijaya awijaya awijaya

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CHAPTER 4

UniverRESEARCH METHODersitas Brawijava

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4.2.3 Research subjects Universit Rumus Slovin: awijaya awijaya awijaya awijaya awijaya

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Universitas 1. Inclusive Criteria

Universitas Brawijaya Female employees of the Faculty of Medicine, Universitas Brawijaya

who agreed to continue with the questionnaire.

2. Exclusive Criteria

Female employees who carry out the surgical removal of the uterus are done permanently and female employees who leave the questionnaire it as Brawijaya or do not complete the questionnaire.

Uni 4.2.4 Sampling techniques

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Universitias The researcher uses the Slovin formula for sampling the Slovin formula rsitas Brawijaya

 $1 + N(e)^{2}$ Universitas Brawijaya Population size Brawijaya Universitas Brawijaya Universitas Brawije = percent allowance awijaya Universitas Brawijaya



Sampling of data is done by purposive sampling with random sampling techniques with a confidence level of 95%. The number of samples obtained Universit by researchers is 98 samples. Brawijaya Universitas Brawijaya awijaya awijaya awijaya Universitas Brawijava Universitas Brawijava awijaya awijaya awijaya 4.3.1 Independent Variables awijaya The level of knowledge and attitude about cervical cancer towards early awijaya awiiava Universitas Brawijava detection of cervical cancer to take Pap smear tests among female itas Brawijaya awijaya awijaya employees in the medical faculty of Universitas Brawijaya awijaya awijaya awijaya awijaya Uni 4.3.2 Dependent variables awijaya awijaya awijaya The behaviour is manifested in the Pap smear participation rate. awijaya awijaya awijaya awijaya 4.4 Location and time of research awijaya 4 1 In Universitas Brawijaya's medical faculty, September 2019 to November awijaya awijaya Universitas Brawijaya awijaya Universit2019 awijaya awijaya awijaya 4.5 Research instrument awijaya awijaya **Universitas Brawijaya** This study uses a research instrument using a questionnaire that has Universit questions related to Pap smear tests and cervical cancer for female tas Brawijaya Universitemployees in the medical faculty of Brawijaya University.

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awijaya	Universitas Brthe Guttr	man scale b	y giving a sign	(√) on the av	ailable choice		
awijaya	Universitas Brawijaya		-		s Brawijaya	Universitas	Brawijaya
awijaya		Table 4.1 P	ositive and ne	gative ques	tion score	Universitas	
awijaya	Universitas Br		C D		yawijaya	Universitas	
awijaya	Universitas Positive qu	estions	Score	N	egative Ques	Universitas	
awijaya	University		00010		va	Universitas	Brawijaya
awijaya	Univer Alternative	answers		A	Iternative ans	wersversitas	Brawijaya
awijaya	Univ		(NA) (Brawijaya
awijaya	Uni Correct			TAX N	rong		Brawijaya
awijaya	Wrong	5.	0	C	orrect		Brawijaya
awijaya	Uni						Brawijaya Brawijaya
awijaya awijaya	Univ						Brawijaya
	Univ	E. H		11	/		
awijaya awijaya		444	STALL				
awijaya	Univer For the c	uestioner w	ill be given to t	he sample is	as in the atta	chment. Sitas Universitas	Brawijaya
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awijaya				4	ava .	Universitas	
awijaya	4.6 Data collection	methods	AA	P	iava	Universitas	
awijaya	Universitas B				wijava	Universitas	
awijaya	Universita Data collection	on used is pr	imary data. Pri	mary data is	data obtained	from the sitas	Brawijaya
awijaya	results of questionn	aires by reg	pondonte usir	na o chocklin	Brawijava	Universitas	Brawijaya
awijaya	Universitas Brawijaya			ig a checking	s Brawijaya	Universitas	Brawijaya
awijaya	Univariables namely kno	owledge of c	ervical cancer	and participa	tion to take Pa	ap smears it as	Brawijaya
awijaya	Universitas Brawijaya	Universit	as Brawijaya	Universitas	s Brawijaya	Universitas	Brawijaya
awijaya	tests among female						
awijaya	Universitas Brawijaya		as Brawijaya			Universitas	
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awijaya	Universitas Brawijaya		as Brawijaya			Universitas	
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awijaya	4.7 Definition of op					Universitas	
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Universitas 1. Level of knowledge Universitas B Measured by a questionnaire consisting of 23 question items with the Brawijava weights per item (0, 1 and 2). The level of knowledge will be classified awijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijay Universitas Brinto three good categories: High 33-46 and moderate: 17-32 and low:sitas Brawijava awijaya **Universitas Brawijava** awijaya Universitas Brawl awijaya awijaya Universitas 2. Attitude awijaya awijaya Universitas BrAttitudes toward early detection. Measured using a 4-scale Likert scale tas Brawijava awijaya awiiava questionnaire (STS-TS-S-SS). Good attitude is above average and awijaya awijaya bad attitude is below average. The scoring are classified as the Brawlaya awijaya categorised very good (16-20): good (11-15): moderate (6-10): low (0awijaya awijaya 5). awijaya awijaya 3. Behaviour awijaya awijaya Conduct a Pap smear test for early detection of cervical cancer. awijaya awijaya Measured with a right or wrong questionnaire. awijaya 4. Female staff in the medical faculty, they were chosen because they awijaya awijaya niversitas Brawijaya awijaya were optimal for the research studies to be carried out. ava awijaya awijaya awijaya awijaya 4.8 Techniques of collecting data awijaya **Universitas Brawijaya** awijaya The data collected mainly uses observations with questionnaire sheets awijaya Universit made related to the research conducted. Universitas Brawijaya

4.9 Research procedures

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Female employee at the Medical faculty of Universitas Brawijaya.

 Data from 100 female employees used the questioner survey.
 Data from 100 female employees used the questioner survey.

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 Universitas
 Brawijava

 The level of knowledge and attitudes towards early detection of cervical cancer with the level of Pap smear test participation in female employees in the Universitas Brawijava.
 Brawijava

Universitas Brawijaya

This research is specifically for female employees of Universitas Brawijaya, totalling around 100 and each of them will be given a questionnaire and data will be collected. This research is mainly to find out the level of knowledge about cervical cancer and Pap smear tests among female employees in the Universitas Brawijaya Medical School.

The preparation phase is to conduct a research proposal afterwards when the research proposal has been approved, the proposal is then registered by the secretary for the final project. Next is validating the test and questionnaire. The stage taken is to collect data using a questionnaire that has become a validity test. The management phase is to use computer statistical software after interpreting data and compiling data.

Universitas Brawijaya Universitas Brawijaya

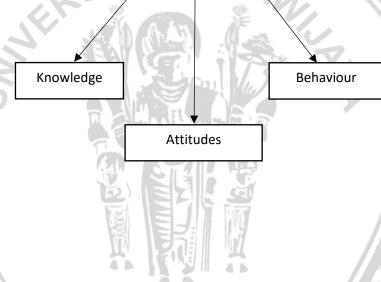
awijaya knowledge and attitudes towards early detection of cervical cancer with the Brawing a Universit behaviour of conducting a Pap smear test. Universitas Brawijaya Universitas Brawijaya awijaya 4.11 Instrument research tests awijaya awijaya sitas Brawijaya Universitas Brawijaya awijaya Questioners in research are used as analytical tools awijaya awijaya awijaya BRAW awijaya 4.12 Research awijaya awijaya awijaya Summary of research procedures: awijaya registration, sitas Brawijaya awijaya 1. Preparation, teaching research proposals, research awijaya research validity tests. awijaya awijaya 2. Implementation of research using a questionnaire that has been tested it as Brawijaya awijaya awijaya for validity. awijaya awijaya 3. Analysis of management research data and organizing research results tas Brawijaya awijaya awijaya

awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya

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Questionnaires related to the level of knowledge and attitudes towards early detection of cervical cancer with the level of participation in Pap smear test on female employees in medical faculty of Universitas Brawijaya



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awijaya Universitas Brawijaya Universitas Brawijaya awijaya Table 4.3 Research Planning awijaya Planningijava Universitas Brawijaya Number Month Univq awijaya October 2018 Looking for research sources awijaya Univ 2 sitas B November 2018 SI Preparation for Semester proposal ava awijaya awijaya December 2018 Semester proposal Universitas awijaya Univa sitas Braugust 2019 awijaya **Research Ethics** awijaya Univ 5 sitas B September 2019 Start Experiment awijaya Universitas B awijaya November 2019 Analyse data Universit awijaya Univqrs awijaya December 2019 Final assignment presentation awijaya

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Universitas Brawijaya <u>iversitas</u> Brawijaya

CHAPTER 5 Universitas Brawij RESEARCH RESULTS AND DATA ANALYSIS awijaya Uni 5.1 Testing Research Instruments rawijava Universitas Brawijava awijaya awijaya The questionnaire that will be used as a data collection tool is first tested by awijaya awijaya a research instrument. Tests conducted are testing the validity and reliability. This it as Brawlava awijaya test is intended to measure the level of accuracy and reliability of the questionnaire awijaya awijaya as a data collection tool. The results of the validity and reliability test of the research awijaya NUN awijaya questionnaire can be explained as below: awijaya awijaya awijaya 5.1.1 Testing Instrument Validity awijaya Un 5.1.1.1 Testing the Validity of Attitude Variable Instruments awijaya awijaya Testing the validity of the attitude variable instrument is done by correlating awijaya awijaya Univeach item score to the total score using the Pearson Correlation technique (Product Itas Brawijaya awijaya Moment), testing criteria using the Pearson Correlation technique states if the Brawlava awijaya correlation coefficient (riT) ≥ table correlation (rtable) means the questionnaire awijaya awijaya awijaya Unitems are declared valid or capable measure the variables it measures, so it can be Brawlaya awijaya be used as a data collection tool. The summary of validity testing results is as the awijaya awijaya following table: awijaya awijaya awijaya awijaya awijaya

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awijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
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awijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
awijaya	Table 5.1 Validity of Attitude Variable Instruments	Universitas Brawijaya
awijaya	Variable Item Correlation coefficient Informa	ation Brawijaya
awijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
awijaya	Univer Attitude wijaya Q4 versitas Brawij0.822 niversitas Brawij Vali	dUniversitas Brawijaya
awijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	
awijaya	Universitas Brawijaya Q9iversitas Brawij0,724Iniversitas BrawijVali	^d Universitas Brawijaya
awijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
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awijaya		d ^{Universitas Brawijaya}
awijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawij Q15 0.544 Brawij Valio	Universitas Brawijaya
awijaya		Universitas Brawijaya
awijaya	Universitas Q19 0.637 UValio	dUniversitas Brawijaya
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awijaya	Univer 🖇 🔅 🖉	Universitas Brawijaya
awijaya	Based on a summary of the results of testing the validity of the	Universitas Brawijaya
awijaya	Uni	niversitas Brawijaya
awijaya	Univariables note that all items have the value of the item correlation coeffic	ient withsitas Brawijaya
awijaya		hiversitas Brawijava
awijaya	a total score (riT)> correlation table value (0.361). Thus the questionnaire	items on Versitas Brawijaya
awijaya	Unit the attitude variables are declared valid or able to measure these variab	lesniversitas Brawijaya
awijaya	Univ	Iniversitas Brawijaya
awijaya	can be used as a data collection tool in this study.	Universitas Brawijaya
awijaya		Universitas Brawijaya
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awijaya	Uni 5.1.1.2 Testing the Validity of Instrument Variables for Actions	Universitas Brawijaya
awijaya	Universita	Universitas Brawijaya
awijaya	Universita Testing the validity of the instrument of action variables is	done by sitas Brawijaya
awijaya	correlating each item score to the total score using the Biserial Point te	
awijaya	Universitas Bra	Universitas Brawijaya
awijaya	Uni Test criteria state if the correlation coefficient (riT) ≥ correlation table (rtable	e) mėanssitas Brawijaya
awijaya	the questionnaire items are declared valid or able to measure the	Universitas Brawijaya
awijaya	the questionnaire items are declared valid or able to measure the	valiabies sitas Brawijaya
awijaya	measured, so that it can be used as a data collection tool. The summary o	of validity sitas Brawijaya
awijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
awijaya	Uni testing results is as the following table: wijaya Universitas Brawijaya	Universitas Brawijaya
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Universitian Brable 5.2 Validity of Instrument Variables for Actions Va Univ Variable rawijava Item ersit Correlation coefficients Brainformation ersitas Brawijava Universitas Brawijaya awijaya Q10 versitas Brawii 0.700 niversitas Brawii Valid Universitas Brawii ava Univers Action awijava awijaya awijaya Q12 0.700 Valid awijaya awijaya Universitas Brawijava <u>Univer</u>sitas Brawijava awijaya Universit Based on a summary of the results of testing the validity of research variables tas Brawlava awijaya awijaya note that all items have the value of the item correlation coefficient with a total awiiava awijaya score (riT)> table correlation values (rtable = 0.361). Thus the questionnaire items that Brawlaya awijaya on the action variables are declared valid or able to measure these variables, so awijaya awijaya that it can be used as a data collection tool in this study. awijaya awijaya awijaya 5.1.2 Instrument Reliability Testing awijaya awijaya 5.1.2.1 Instrument Reliability Test Attitude Variables awijaya The attitude variable reliability testing is intended to determine the reliability awijaya awijaya and consistency of the research instrument as a tool to measure the variables it awijaya awijaya measures. Reliability testing uses the Cronbach's Alpha technique. The test criteria das Brawlaya awijaya state that the Cronbach's Alpha coefficient ≥ 0.6 means that the questionnaire awijaya awijaya items are declared to be reliable or consistent in measuring the measured awijaya awijaya variables. The summary of reliability test results is as the following table: awijaya Table 5.3 Reliability Test Attitude Variables awijaya awijaya Variable Information Cronbach's Alpha Universition Brawijaya 0.822 itas Brawij Reliable versitas Brawijaya

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wijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
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wijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
wijaya	Based on a summary of the results of testing the reliability of	Universitas Brawijaya
wijaya	instruments note that the attitude variable produces Cronbach's Alpha va	
wijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
wijaya	Thus the questionnaire items on the attitude variable are stated to be re	
wijaya	consistent in measuring the variable, so that it can be used as a data of	collection
vijaya		
wijaya	Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
wijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
wijaya	Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
wijaya	5.1.2.2 Testing Instrument Reliability Variable Actions	Universitas Brawijaya
wijaya	Universitas Brawij	Universitas Brawijaya
wijaya	Universita The reliability test of the action variable is intended to determ	
wijaya	University and consistency of the research instrument as a tool to mea	Universitas Brawijaya
wijaya		
wijaya	variables it measures. Reliability testing uses the Split-Half technique.	The test
wijaya	University of the Spilled-Half coefficient ≥ 0.6 means the questionnaire i	Universitas Brawijaya
wijaya		
wijaya wijaya	declared reliable or consistent in measuring the measured variables. The	summary
vijaya		hiversitas Brawijaya
vijaya	of reliability test results is as the following table:	niversitas Brawijaya
vijaya	Table 5.4 Reliability Variable Actions	Jniversitas Brawijaya
vijaya		
vijaya	University Variable Spill-Half Coefficient Informa	tion Universitas Brawijaya Universitas Brawijaya
vijaya		Ile ^j niversitas Brawijaya
vijaya	Universi	Universitas Brawijaya
vijaya	Universita Aya	Universitas Brawijaya
vijaya	Universitas a lava	Universitas Brawijaya
vijaya	Universita Based on a summary of the reliability test results of the research	Universitas Brawijaya
wijaya	Universitas Bra awijaya	Universitas Brawijaya
vijaya	In instruments it is known that the action variable produces a value of the S	pil t-Hal frsitas Brawijaya
wijaya	coefficient> 0.6. Thus the question / question item on the action variable	universitas Brawijaya
wijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
wijaya	Unideclared reliable or consistent in measuring the variable, so it can be use	dasiaersitas Brawijaya
wijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Universitas Brawijaya
wijaya	Uni data collection tool in this study as Brawijaya Universitas Brawijaya	Universitas Brawijaya
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awijaya Universitas Brawijaya Universitas Brawijaya 5.2 Characteristics of Respondents 5.2.1 Characteristics of Respondents by Age inversitias Brawijaya awijaya Universit The respondent's identity based on age can be seen through the followingsitas Brawijaya awijaya table and explanation: awijaya awijaya awijaya Table 5.5 Characteristic Of Respondent By Age awijaya Universitas Brawijaya awijaya Percentage Frequency Unive Age as Brav awijaya awijaya awijaya 21 - 25 Years 5% awijaya awijaya 21% 26 - 30 Years 21 awijaya awijaya 31 - 35 Years 37 awijaya awijaya 36 - 40 Years 23 23% awijaya awijaya 9% 41 - 45 Years 9 awijaya awijaya Univ 46 - 50 Years 3 3% awijaya awijaya Univ 51 - 55 Years awijaya 2 2% awijaya A 8 awijaya Universital 100 100% awijaya awijaya awijaya awijaya Based on the above table, it is known that of the 100 female employees in awijaya awijaya

Universitas Brawijaya's medical faculty, who were involved in this study at most tas Brawijaya Unive 37% of respondents had an age interval between 31-35 years. Furthermore, the tas Brawijaya second highest amount of 23% of respondents had an age interval between 36-40 years. Then the third most amounted to 21% of respondents had an age tas Brawlaya

interval between 26-30 years. While at least 2% of respondents had an age

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BRAWIJAYA

awijaya	Universitas Brawijaya	Universitas Brawijaya Univ		Universitas Brawijaya
wijaya	Universitas Brawijaya	Universitas Brawijaya Univ		Universitas Brawijaya
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awijaya	Universitas Brawijaya	Universitas Brawijaya Univ	ersitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ		Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ		Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ		Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ	ersitas Brawijaya	Universitas Brawijaya
awijaya	Universiterval between 5	1 - 55 years. This shows that m		ipioyees Sitas Brawijaya
awijaya	Universitas Brav	wijaya's medical faculty, who we	ere involved in this st	udy, had sitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ	ersitas Brawijaya	Universitas Brawijaya
awijaya	Univeran age interval be	tween 31 - 35 years. jaya Univ	ersitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ	ersitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ	ersitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ	ersitas Brawijaya	Universitas Brawijaya
awijaya	5.2.2 Characteristics	s of Respondents Based on E	ducation rawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	University	ersitas Brawijaya	Universitas Brawijaya
awijaya	Universit The identity of	respondents based on educati	on can be seen thro	udhithesitas Brawijaya
awijaya	Universitas Brawji		Brawijaya	Universitas Brawijaya
awijaya	Univerfollowing table and	explanation:	rawijaya	Universitas Brawijaya
awijaya	Universitas	ATAS BA	tiaya	Universitas Brawijaya
awijaya	Universit Table 5.6 Cha	aracteristics of Respondents	Based on Education	Universitas Brawijaya
awijaya	Univer	*		Universitas Brawijaya
awijaya	Univ Education	Frequency	Percentage	viniversitas Brawijaya
awijaya	Uni	in equal by	Tertornage	niversitas Brawijaya
awijaya	Uni		004	niversitas Brawijaya
awijaya	High School	6	6%	hiversitas Brawijaya
awijaya	Unit			hiversitas Brawijaya
awijaya	Univ		11%	niversitas Brawijaya
awijaya	Univ		/	Jniversitas Brawijaya
awijaya	Bachelor Degree	58	58%	Universitas Brawijaya
awijaya	Univer		//	Universitas Brawijaya
awijaya	Master's Degree	22	22%	Universitas Brawijaya
awijaya	Universit			Universitas Brawijaya
awijaya	Univ Doctoral Degree	3	3% va	Universitas Brawijaya
awijaya	Universitas		jaya	Universitas Brawijaya
awijaya	Universitals B	100	100% vijava	Universitas Brawijaya
awijaya	Universitas Bra	100	awijaya	Universitas Brawijaya
awijaya	Universitas Brawn		Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universities standary Univ		Universitas Brawijaya
awijaya				
awijaya	Based on th	e above table, it is known that o	of the 100 female en	nployees Universitas Brawijava
awijaya		wijaya's medical faculty, 6% of i		
awijaya		Universitas Brawijaya Univ	•	
awijaya	Univerhaving a high scho	ool / vocational high school educ	cation. Furthermore,	as many _{sitas} Brawijaya
awijaya		dents had Diploma final educati		
awijaya	Universitas Brawijaya	dents had Diploma final educati	on. Then as many as ersitas Brawijava	Universitas Brawijaya
awijaya		final education Bachelor deg		
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ		Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ		Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ		Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ		Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ		Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya Univ		Universitas Brawijaya

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respondents had Master's degree education. While as many as 3% of respondents had final education Doctoral degree. This shows that most of the tas Brawlaya Unive female employees in Universitas Brawijaya's medical faculties, who were tas Brawijaya awijaya involved in this research, had bachelor's degree. awijaya awijaya awijaya awijaya 5.2.3 Characteristics of Respondents Based on Occupation awijaya awijaya Universitas The identity of respondents based on occupation can be seen through the tas Brawijava awijaya awiiava following table and explanation: awijaya awijaya Table 5.7 Characteristics of Respondents Based on Occupation awijaya awijaya Occupation Frequency Percentage awijaya awijaya awijaya hiversitas Brawijava Private employees 46 46% awijaya awijaya Univ Lecturer 18 18% awijaya Universite Staff awijaya 13 13% awijaya awijaya Admin 12% 12 awijaya awijaya 9 9% Government employees awijaya awijaya 2 2%3rawijaya awijaya Univ Analyst Brav awijaya University and staff rawijaya Universitas Brawijaya Universita%Brawijaya awijaya awijaya Universitans Brawijaya Universitas 700 wijaya Universit 100% awijaya awijaya Universitas Brawijaya Universitas Brawijaya Based on the above table, it is known that out of 100 female employees

Unive in the Universitas Brawijaya medical faculty, the most involved in this study it as Brawijaya

amounted to 46% of respondents had jobs as private employees. Furthermore, the second most amounted to 18% of respondents had job as a lecturer / tas Brawijaya Unive teacher. Then the third most amounted to 13% of respondents had jobs as it as Brawijava awijaya employees / staff. While at least 1% of respondents have jobs as laboratory awijaya awijaya assistants. This shows that most of the female employees in Universitas as Brawlaya awijaya Brawijaya's medical faculty involved in this study had jobs as private employees. awijaya awijaya awijaya awijaya 5.2.4 Characteristics of Respondents Based on Married Status awiiava awijaya Respondent's identity based on married status can be seen through the itas Brawijaya awijaya awijaya following table and explanation: awijaya awijaya Table 5.8 Characteristics of Respondents Based on Married Status iversitas Brawijava awijaya awijaya niversitas Brawijaya awijaya **Marriage Status** Frequency Percentage awijaya awijaya Univ Married Universitas Brawijaya 85% 85 awijaya awijaya Single 15 15% awijaya awijaya Total A 100 100% awijaya awijaya Universitas Brawijaya awijaya awijaya Universitas Based on the above table, it is known that out of 100 female employees it as Brawijaya awijaya awijaya in Universitas Brawijaya's medical faculty, 85% of respondents were married. awijaya awijaya Unive While as many as 15% of respondents were single. This shows that most of the tas Brawlaya Unive female employees in Universitas Brawijaya's medical faculty involved in this tas Brawijaya study were married. Universitas Brawijaya Universitas Brawijaya

awijaya	Universitas Brawijaya	Universitas Brawijaya	universitas Brawijaya	Universitas Brawijaya
🗢 awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
is awijaya	5.3 Descriptive Ana	lysis Oniversitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijava	Universitas Brawijava	Universitas Brawijava	Universitas Brawijava
e awijaya	5.3.1 Descriptive Ai	nalysis of the Level of Kn	owledge about Early L	Detection _{sitas} Brawijaya
awijaya	of Cervical Cancer	Universitas Brawijaya	Universitas Brawijaya	
awijaya	Universitas Brawijaya	Universitas Brawijaya		
awijaya	Universitas Brawijava Descriptive	analysis of the level of kn	owledge about early de	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	
awijaya	Universicancer can be kr	nown as the following table:	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Unive	Iniversitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Table 5.9 Level of kno	-	
awijaya	Universitas Brawii		s Brawijaya	Universitas Brawijaya
awijaya	Level of Knowledg	Frequency	Percentage	Universitas Brawijaya
awijaya	Universitas	CIAS BA	tiaya	
awijaya	Low (0-16)	0	0%	Universitas Brawijaya
awijaya	Chive			Universitas Brawijaya
awijaya	Univ Moderate (17-32)	36	36%	Universitas Brawijaya
awijaya			50%	hiversitas Brawijaya
awijaya	Uni High (22,46)	64	640/	hiversitas Brawijaya
awijaya	Uni High (33-46)	04	64%	hiversitas Brawijaya
awijaya	Unit		4000/	hiversitas Brawijaya
awijaya	Univ Total	100	100%	niversitas Brawijaya
awijaya	Univ			Universitas Brawijaya
awijaya awijaya	Unive Univer		J /	Universitas Brawijaya Universitas Brawijaya
awijaya				
awijaya	Universit Based on th	e above table, it is known t	hat out of 100 female e	mployees Universitas Brawijaya
awijaya		awijaya's medical faculty	involved in this study.	
awijaya	Charles and the second			University - Describered
awijaya	respondents had s	sufficient level of knowledge	e about early detection of	of cervical Brawijava
awijaya		of respondents had high		
awijaya	Universitas Braw	or respondents had high	Brawijaya	
awijaya	Unive detection of can	cer cervix. This shows t	hat most female emp	
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	aya's medical faculty involv	reu in this study had hig	Universitas Brawijaya
awijaya	Univerknowledge about	early detection of cervical c	ancer rsitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya		
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya		
awijaya	Universitas Brawijaya	Universitas Brawijaya		
awijaya	Universitas Brawijaya	Universitas Brawijaya		
≥ <mark>⊘</mark> awijaya	Universitas Brawijaya	Universitas Brawijaya		
awijaya	Universitas Brawijaya	Universitas Brawijaya		
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya		
awijaya awijaya	Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya		Universitas Brawijaya	Universitas Brawijaya

awijaya	Universitas Brawijaya	Universitas Brawijay	a Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijay	va Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya		a Universitas Brawijaya	
awijaya	Universitas Brawijaya		a Universitas Brawijaya	
awijaya	Universitas Brawijaya		a Universitas Brawijaya	
awijaya	Universitas Brawijaya		a Universitas Brawijaya	
awijaya	Universitas Brawijaya Universitas Brawijaya		va Universitas Brawijaya va Universitas Brawijava	
awijaya awijaya			oward Early Detection of	Cervical Brawijaya
awijaya	Universitas Brawijaya		a Universitas Brawijaya	
awijaya	Universitas Brawijaya		a Universitas Brawijaya	
awijaya			ds early detection of canc	
awijaya	Universitas Brawijaya	alysis of attitudes towar	ds early detection of cance	er can be Universitas Brawijaya
awijaya			a Universitas Brawijaya	
awijaya	Universitas Brawijaya	-	a Universitas Brawijaya	
awijaya	Universitas Brawijaya	Table 5.10 Level o	f Attitudesitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Unive	Universitas Brawijaya	Universitas Brawijaya
awijaya	Univ Attitudes awijaya	Frequency	Percentage	Universitas Brawijaya
awijaya	Universitas Brawii		s Brawijaya	Universitas Brawijaya
awijaya	Low (0-5)	12AS D	1%	Universitas Brawijaya
awijaya	Universitas	CIAS B	R iiaya	
awijaya	Moderate (6-10)	16	16%	Universitas Brawijaya
awijaya	Universite (6-10)	JA A AR	J. A.	Universitas Brawijaya
awijaya awijaya	Good (11-15)	78	78%	Universitas Brawijaya Niversitas Brawijaya
awijaya	Uni			niversitas Brawijaya
awijaya	Uni Very good (16-20)	5	5%	niversitas Brawijaya
awijaya	Unit			niversitas Brawijaya
awijaya	Univ Total	100	100%	niversitas Brawijaya
awijaya	Univ			Jniversitas Brawijaya
awijaya	Unive			Universitas Brawijaya
awijaya	Univer		<u>e</u>	Universitas Brawijaya
awijaya	Univers Based on the a	above table, it is known	that out of 100 female emp	olovees in ^{sitas} Brawijaya
awijaya	Universit		a	Universitas Brawijaya
awijaya		vijaya's medical facult	y involved in this study	
awijaya	Universitas respondents had	less attitude towards ea	rly detection of cervical car	Universitas Brawijaya
awijaya				
awijaya awijaya	16% of responder	nts had sufficient attitud	e towards early detection of	I I a la ser la ser Deserve la serve
awijaya		of respondents had go	od attitude towards early de	
awijaya				
awijaya	cervical cancer, w	hile 5% of respondents	had very good attitude tow	ards early
awijaya			hat most of the female emp	
awijaya	Universitas Brawijaya	Universitas Brawijay	a Universitas Brawijaya	Universitas Brawijaya
awijaya			volved in this study had goo	
awijaya	Universitas Bravila dete	ection of cervical cancer	va Universitas Brawijaya va Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijay	a Universitas Brawijaya	
awijaya	Universitas Brawijaya		a Universitas Brawijaya	
awijaya	Universitas Brawijaya		a Universitas Brawijaya	
awijaya	Universitas Brawijaya		a Universitas Brawijaya	
awijaya	Universitas Brawijaya		a Universitas Brawijaya	
awijaya	Universitas Brawijaya		a Universitas Brawijaya	
awijaya awijaya	Universitas Brawijaya Universitas Brawijaya		va Universitas Brawijaya va Universitas Brawijaya	
awijaya	Universitas Brawijaya		a Universitas Brawijaya a Universitas Rrawijaya	

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BRAWIJAY

	awijaya	Universitas Brawijaya	Universitas Brawijaya Ur	niversitas Brawijaya	Universitas Brawijaya
σ	awijaya	Universitas Brawijaya	Universitas Brawijaya Ur	niversitas Brawijaya	Universitas Brawijaya
	awijaya	Universitas Brawijaya	Universitas Brawijaya Ur	niversitas Brawijaya	Universitas Brawijaya
ອ	awijaya	Universitas Brawijaya	Universitas Brawijaya Ur	niversitas Brawijaya	Universitas Brawijaya
<u> </u>	awijaya	Universitas Brawijaya	Universitas Brawijaya Ur	niversitas Brawijaya	Universitas Brawijaya
n.	awijaya	Universitas Brawijaya	Universitas Brawijaya Ur	niversitas Brawijaya	Universitas Brawijaya
	awijaya	Universitas Brawijaya	Universitas Brawijava Ur	niversitas Brawijava	Universitas Brawijaya
0	awijaya	Ilniversitas Brawijava	Ilniversitas Brawijava Ilr	niversitas Brawijava	Ilniversitas Brawijava
Si	awijaya	5.3.3 Descriptive An	alysis of Participation Rate	es of the Pap Smear T	est
0	awijaya	Universitas Brawijaya	Universitas Brawijaya Ur		Universitas Brawijaya
repository.ub.ac.id	awijaya	Descriptive ana	alysis of the Pap smear partic	pation rate can be see	en as the itas Brawijava
<u> </u>	awijaya		Universitas Brawijaya Ur		Universitas Brawijaya
	awijaya	following table:	Universitas Brawijaya Ur		Universitas Brawijaya
		Universitas Brawijaya		niversitas Brawijaya	
	awijaya	Universitas Brawijava Table 5.	11 Participation Rates of th	e Pap smear Test	Universitas Brawijaya
	awijaya	Universitas Brawijaya		niversitas Brawijaya	Universitas Brawijaya
	awijaya	Participation Test	Frequency	Percentage	Universitas Brawijaya
	awijaya	, , ,	University	liversitas brawijaya	Universitas Brawijaya
	awijaya	Universitas Brawijaya	47	rsitas Brawijaya	Universitas Brawijaya
	awijaya	Univ Present Brawii	47	47%Brawijaya	Universitas Brawijaya
	awijaya	Universitas Brz	ANG DA	rawijaya	Universitas Brawijaya
	awijaya	Univ Absent	61 533 BR	53% liaya	Universitas Brawijaya
	awijaya	Universit		va	Universitas Brawijaya
	awijaya	UniveTotal	100	100%	Universitas Brawijaya
	awijaya	Univ			Universitas Brawijaya
	awijaya	Uni	SW KGD WY	Site Y	hiversitas Brawijaya
	awijaya	Uni		A A	niversitas Brawijaya
	awijaya	Uni			hiversitas Brawijaya
		Based on the a	bove table it is known that o	of the 100 female empl	ovees in
	awijaya	Based on the a	bove table, it is known that o	of the 100 female empl	oyees in niversitas Brawijaya
		Unit Based on the a	bove table, it is known that o a's medical faculty involved ir		oyees in hiversitas Brawijaya
	awijaya	Based on the a Uni Universitas Brawijaya Universitas Brawijaya	a's medical faculty involved in	n this study as many as	oyees in s 47% of itas Brawijaya Jniversitas Brawijaya
	awijaya awijaya	Based on the a Uni Universitas Brawijaya Universitas Brawijaya		n this study as many as	oyees in s 47% of itas Brawijaya Jniversitas Brawijaya
	awijaya awijaya awijaya	Based on the a Uni Universitas Brawijaya Universitas told the	a's medical faculty involved ir y had never taken Pap smea	n this study as many as r test, and 53% of resp	oyees in s 47% of itas Brawijaya oniversitas Brawijaya oondents
	awijaya awijaya awijaya awijaya	Based on the a Uni Universitas Brawijaya Universitas told the	a's medical faculty involved in	n this study as many as r test, and 53% of resp	oyees in s 47% of itas Brawijaya oniversitas Brawijaya oondents
	awijaya awijaya awijaya awijaya awijaya	Based on the a Uni Universitas Brawijaya Universitas brawijaya Universitas brawijaya Universitas brawijaya	a's medical faculty involved ir y had never taken Pap smea	n this study as many as r test, and 53% of resp shows that most of the	oyees in \$ 47% of it as Brawijaya \$ 47% of it as Brawijaya bondents tas Brawijaya \$ female Universitas Brawijaya
	awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	a's medical faculty involved ir y had never taken Pap smea taken Pap smear test. This	n this study as many as r test, and 53% of resp shows that most of the	oyees in \$ 47% of it as Brawijaya \$ 47% of it as Brawijaya bondents tas Brawijaya \$ female Universitas Brawijaya
	awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in Univers	a's medical faculty involved ir y had never taken Pap smea taken Pap smear test. This	n this study as many as r test, and 53% of resp shows that most of the	oyees in s 47% of itas Brawijaya oondents e female dy neversitas Brawijaya
	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	a's medical faculty involved ir y had never taken Pap smea taken Pap smear test. This	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this stu-	oyees in 47% of itas Brawijaya ondents e female Universitas Brawijaya dy neversitas Brawijaya Universitas Brawijaya
	awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in Univers had Pap smear test.	a's medical faculty involved ir y had never taken Pap smea taken Pap smear test. This	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this stu- ya	oyees in 47% of itas Brawijaya 47% of itas Brawijaya oondents itas Brawijaya e female Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya
	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in University had Pap smear test.	a's medical faculty involved ir y had never taken Pap smea taken Pap smear test. This	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this stu- ya jaya	oyees in 47% of itas Brawijaya ondents tas Brawijaya ondents tas Brawijaya e female Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya
	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in Universitas had Pap smear test.	a's medical faculty involved ir y had never taken Pap smea taken Pap smear test. This	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this stu- uaya awijaya awijaya	oyees in 47% of itas Brawijaya 47% of itas Brawijaya oondents itas Brawijaya e female Universitas Brawijaya dy neversitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya
	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in University had Pap smear test.	a's medical faculty involved in y had never taken Pap smea taken Pap smear test. This sitas Brawijaya's medical fac	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this study ulty available tities with Pap Sme	oyees in 47% of itas Brawijaya 47% of itas Brawijaya oondents itas Brawijaya e female Universitas Brawijaya dy neversitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya
	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in Universitas had Pap smear test.	a's medical faculty involved in y had never taken Pap smea taken Pap smear test. This sitas Brawijaya's medical fac	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this stu- ulty involved in this stu- ulty involved in this stu- ulty involved in this stu- involved in	oyees in 47% ofsitas Brawijaya ondents sitas Brawijaya ondents sitas Brawijaya female female universitas Brawijaya dy neversitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya
	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in University had Pap smear test. 5.4 Cross Tabulati Participation Rates	a's medical faculty involved in y had never taken Pap smea taken Pap smear test. This sitas Brawijaya's medical fac	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this study daya daya tities with Pap Sme hiversitas Brawijaya	oyees in ATM of Sitas Brawijaya ATM of Sitas Brawijaya Jiniversitas Brawijaya oondents Sitas Brawijaya Universitas Brawijaya
	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in University had Pap smear test. 5.4 Cross Tabulati Participation Rates	a's medical faculty involved in y had never taken Pap smea taken Pap smear test. This sitas Brawijaya's medical fac	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this study daya daya tities with Pap Sme hiversitas Brawijaya	oyees in ATM of Sitas Brawijaya ATM of Sitas Brawijaya Jiniversitas Brawijaya oondents Sitas Brawijaya Universitas Brawijaya
A	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in Univers had Pap smear test. 5.4 Cross Tabulati Participation Rates 5.4.1 Cross Tabulat	a's medical faculty involved in y had never taken Pap smea taken Pap smear test. This sitas Brawijaya's medical fac	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this stu- ulty involved in this stu- day tities with Pap Sme hiversitas Brawijaya Participation Rates of	oyees in 47% ofsitas Brawijaya 47% ofsitas Brawijaya oondents sitas Brawijaya oondents sitas Brawijaya e female female universitas Brawijaya dy neversitas Brawijaya Universitas Brawijaya
IXA	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in Univers had Pap smear test. 5.4 Cross Tabulati Participation Rates 5.4.1 Cross Tabulat	a's medical faculty involved in y had never taken Pap smea taken Pap smear test. This sitas Brawijaya's medical fac	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this stu- ulty involved in this stu- ulty involved in this stu- ulty involved in this stu- participation Rates of	ovees in A7% of sitas Brawijaya ondents itas Brawijaya ondents itas Brawijaya ondents itas Brawijaya ondents itas Brawijaya universitas Brawijaya
ĴĂYA	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in Univers had Pap smear test. 5.4 Cross Tabulati Participation Rates 5.4.1 Cross Tabulat Smear Test	a's medical faculty involved in y had never taken Pap smea taken Pap smear test. This sitas Brawijaya's medical fac on of Respondents' Iden Universitas Brawijaya U ion of Age Variables with F	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this study ulty involved in this study daya daya daya daya daya daya daya d	oyees in A7% ofsitas Brawijaya ondentsitas Brawijaya ondentsitas Brawijaya ondentsitas Brawijaya ondentsitas Brawijaya universitas Brawijaya
VIJAYA	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in Univers had Pap smear test. 5.4 Cross Tabulati Participation Rates 5.4.1 Cross Tabulat Smear Test	a's medical faculty involved in y had never taken Pap smea taken Pap smear test. This sitas Brawijaya's medical fac on of Respondents' Iden Universitas Brawijaya U ion of Age Variables with F	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this study ulty involved in this study daya daya daya daya daya daya daya d	oyees in A7% ofsitas Brawijaya ondentsitas Brawijaya ondentsitas Brawijaya ondentsitas Brawijaya ondentsitas Brawijaya universitas Brawijaya
WIJAYA WIJAYA	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in Univers had Pap smear test. 5.4 Cross Tabulati Participation Rates 5.4.1 Cross Tabulat Smear Test Cross tabulat	a's medical faculty involved in y had never taken Pap smea taken Pap smear test. This sitas Brawijaya's medical fac on of Respondents' Iden ion of Age Variables with Fa ion of age variables with Pa	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this stu- tities with Pap Sme Participation Rates of p smear test participation	oyees in A7% of sitas Brawijaya ondents itas Brawijaya ondents itas Brawijaya ondents itas Brawijaya ondents itas Brawijaya ondents itas Brawijaya universitas Brawijaya
V E R S I 1	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in Univers had Pap smear test. 5.4 Cross Tabulati Participation Rates 5.4.1 Cross Tabulat Smear Test Cross tabulat can be identified a	a's medical faculty involved in y had never taken Pap smea taken Pap smear test. This sitas Brawijaya's medical fac ion of Respondents' Iden ion of Age Variables with Fa ion of age variables with Pa	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this stu- tities with Pap Sme Participation Rates of p smear test participation	ovees in iversitas Brawijaya 47% ofsitas Brawijaya ondentsitas Brawijaya ondentsitas Brawijaya ondentsitas Brawijaya universitas Brawijaya
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V E R S I 1	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in Univers had Pap smear test. 5.4 Cross Tabulati Participation Rates 5.4.1 Cross Tabulat Smear Test Cross tabulat can be identified a	a's medical faculty involved in y had never taken Pap smea taken Pap smear test. This sitas Brawijaya's medical fac on of Respondents' Iden ion of Age Variables with Fa ion of age variables with Pa is the following table:	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this study tities with Pap Sme versitas Brawijaya p smear test participation p smear test participation iversitas Brawijaya	oyees in A7% of sitas Brawijaya ondents itas Brawijaya ondents itas Brawijaya ondents itas Brawijaya ondents itas Brawijaya universitas Brawijaya
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RAW	awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya	Based on the a Universitas Brawijaya respondents told they told they had never employees in Univers had Pap smear test. 5.4 Cross Tabulati Participation Rates 5.4.1 Cross Tabulat Smear Test Cross tabulat can be identified a	a's medical faculty involved in y had never taken Pap smea taken Pap smear test. This sitas Brawijaya's medical fac on of Respondents' Iden ion of Age Variables with Fa ion of age variables with Pa is the following table:	n this study as many as r test, and 53% of resp shows that most of the ulty involved in this study uity involved in this study inversitas Brawijaya participation Rates of niversitas Brawijaya p smear test participation niversitas Brawijaya niversitas Brawijaya niversitas Brawijaya	oyees in A7% of sitas Brawijaya ondents itas Brawijaya ondents itas Brawijaya ondents itas Brawijaya ondents itas Brawijaya universitas Brawijaya

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awijaya	Universitas Brawija	aya Unive	ersitas Bra	awijaya	Universitas	Brawijay	a Universitas E
awijaya	Universitas Brawija	aya Unive	ersitas Bra	awijaya	Universitas	Brawijay	a Universitas E
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awijaya	Universitas Brawija	aya Unive	ersitas Bra	awijaya	Universitas	Brawijay	a Universitas E
awijaya	UniverTable 5.12 Ag	ge Variable	es with Pa	rticipatio	on Rates of th	ne Pap sm	ear Test rsitas E
awijaya	Universitas Brawija	aya Unive	ersitas P	wijaya	Universitas	Brawijay	a Universitas E
awijaya	Universitas Brawija	Level of	Participati	ion test	Universitas	Brawijay	a Universitas E
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awijaya	Universitas Brz					rawijay	a Universitas E
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awijaya	Universit	23	70	N	70		a Universitas e
awijaya	Univer	0	0.000/	0	0.000/	_	Universitas E
awijaya	Univ 21 - 25 Years	3	3.00%	2	2.00%	5	5.00%versitas E
awijaya	Uni			S - S		7,	hiversitas E
awijaya	Uni 26 - 30 Years	17	17.00%	4	4.00%	21	21.00%ersitas E
awijaya	Uni					T	hiversitas E
awijaya	Unit 31 - 35 Years	20	20.00%	17	17.00%	37	37.00%ersitas E
awijaya	Univ	1		KR P	17		niversitas E
awijaya	Univ 36 - 40 Years	10 🚺	10.00%	13	13.00%	23	23.00% ersitas E
awijaya	Unive						Universitas E
awijaya	41 – 45 Years	3	3.00%	6	6.00%	9	9.00% versitas E
awijaya	Universit			1			Universitas E
awijaya	46 - 50 Years	0	0.00%	3	3.00%	3	3.00%
awijaya	Universita	-				Ду	a Universitas E
awijaya	Universitas	0	0.00%	2	2.00%		a Universitas E
awijaya	51 - 55 Years	U	0.00 /0	2	2.00 /0	2 vilav	a ^{2.00%} versitas E
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niversitas Brawijaya

The calculation results show that out of 100 female employees in Universitas Brawijaya's medical faculties participated in this study, at most 17%

of respondents who were in the age interval between 31-35 years said that they had taken the Pap smear test, then the second most was 13% respondents who

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awijaya smear test, the third most at 6% of respondents who were at an age interval between 41 - 45 years said they had taken a Pap smear test. While at most 20% of respondents who were at the age interval between awijaya Universitas Brawijaya Universitas Brawijaya Unive 31-35 years said they had never taken Pap smear test because the reasons it as Brawijava awijaya awijaya included there were no chance, fear of the Pap smear, and not married. Then awijaya awijaya the second most amounting to 17% of respondents who were at the age interval it as Brawlaya awijaya between 26-30 years said they had never taken Pap smear test with the reasons awijaya awijaya of which were not married and there is no time. Next is the third highest of 10% awijaya awijaya Univer of respondents who were in the age interval between 36-40 years said they had it as Brawijaya awijaya never taken Pap smear test with the reasons for which there was no time and tas Brawijaya awijaya awijaya no chance. awijaya awijaya awijaya awijaya 5.4.2 Cross Tabulation of Educational Variables with Participation Rates of awijaya

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Cross tabulation of educational variables with Pap smear test participation

Universates can be identified as the following table:

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vijaya	Universitas Brawijaya	Univer	rsitas	Brawijaya	Universitas	Braw	ijaya	Universitas	Brawi	aya
vijaya	Universitas Brawijaya	Unive	rsitas I	Brawijaya	Universitas	Braw	ijaya	Universitas	Brawij	aya
vijaya	Universitas Brawijaya	Unive	rsitas	Brawijaya	Universitas	Braw	ijaya	Universitas	Brawij	aya
vijaya	Universitas Brawijaya	Unive	rsitas I	Brawijaya	Universitas	Braw	ijaya	Universitas	Brawij	aya
vijaya	Universitas Brawijaya	Unive	rsitas I	Brawijaya	Universitas	Braw	ijaya	Universitas	Brawij	aya
vijaya	Universitas Brawijaya	Unive	rsitas I	Brawijaya	Universitas	Braw	ijaya	Universitas	Brawij	aya
vijaya	Universitas Brawijaya	Unive	rsitas I	Brawijaya	Universitas	Braw	ijaya	Universitas	Brawij	aya
vijaya	Universitas Brawijaya	Unive	rsitas	Brawijaya	Universitas	Braw	ijaya	Universitas	Brawij	aya
vijaya	Table 5.13 Ed	ucationa	al varia	ables with H	articipation	Rates	s of the	Papersitas	Brawij	aya
vijaya	Universitas Brawijaya	Unive	rsitas I	smear Tes	Universitas	Braw	ijaya	Universitas	Brawij	aya
vijaya	Universitas Brawijaya				Universitas			Universitas	Brawij	aya
vijaya	Uni versitas Brawijaya		Dartic	ipation test	Universitas	Braw	ijaya	Universitas	Brawij	aya
vijaya	Universitas Brawijaya	Unive	rsitas	Brawijaya	Universitas	Tota	ijaya	Universitas	Brawij	aya
vijaya	Universitas Brawijaya	Unive	rsitas	Brawijaya	Universitas	-Braw	ijaya	Universitas	Brawij	aya
vijaya	Education Universitas Brawijaya	Do not h	ave Sitas I	Have Brawijaya	Universitas	Braw	ijava	Universitas	Brawij	ava
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vijaya	Universitas Brawijaya		%	N	Universitas	Baw	%va	Universitas		
vijaya	Universitas Brawijava							Universitas		
vijaya	Univ High school wii	4	4.00%	2	2.00%	6 av		Universitas		
vijaya	Universitas Br							Universitas		
vijaya	Univ Diploma	7	7.00%	5 43 4	4.00%	11		Universitas		
vijaya	Universit	5					va	Universitas		
vijaya	Univ Bachelor degree	27	27.009	% 31	31.00%	58	58 00%	Universitas	Brawij	aya
vijaya	Univ		21.00		31.0070	00	50.007	Universitas	Brawij	aya
vijaya	Uni		14.000		0.000/	22	22.000	hiversitas	Brawij	aya
vijaya	Master's degree	14	14.009	% 8	8.00%	22	22.00%	o niversitas	Brawij	aya
vijaya	Uni			3 MAN				hiversitas		
vijaya	Uni Doctoral degree	1	1.00%	2	2.00%	3	3.00%	hiversitas	Brawij	aya
vijaya	Univ		WU	MAD			- 1	niversitas	Brawij	ava
vijaya	Univ			51.5				Iniversitas	Brawii	ava
/ijaya	Unive							Universitas		
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vijaya	Universitas Braw	10 m	11	1 10 11=						
vijaya	Universitas Braw	/ijaya's r	nedical	taculties p	participated i	n this	study,	2% of Universitas	Brawii	ava
/ijaya	Univerrespondents who	had high	school	/vocationa	education to	ld that	they ha			
/ijaya	Universitas		50100	, recationa			iava	Universitas		
/ijaya	Pap smear test, t	hen 4%	of resp	ondents wh	o had Diplom	na edu	cation	told that	Brawij	

they had taken Pap smears test, 31% of respondents who had Bachelor degree

Univereducation told that they had taken a Pap smear test, the next was 8% of itas Brawijaya respondents who had Master's degree education told that they had taken Pap smear test, while 2% of respondents who had Doctoral degree education told Univerthey had taken Pap smear test. Brawijaya Universitas Brawijaya

While 4% of respondents who had high school / vocational education stated that they had never taken Pap smear test on the grounds that they were not

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Universitas Brawijaya married and do not need to have Pap smear test. Then by 7% of respondents who had Diploma education told that they had never taken Pap smear test with the Brawlaya Unive reasons that includes fear, no chance, and trauma with negative stories. As tas Brawijava awijaya many as 27% of respondents who had an Bachelor degree education told they awijaya awijaya had never taken Pap smear test because they had no time, had no chance, the Brawlaya awijaya were not married, and were afraid. Next, 14% of respondents who had Master's awijaya awijaya degree stated that they had never taken Pap smear test because they had no awijaya Unive time, had no chance, were not married, and were afraid. Whereas 1% of itas Brawijava awijaya awijaya respondents who had Doctoral degree stated that they had never taken Pap awijaya awijaya smear test because they had not had time to do the Pap smear test. awijaya awijaya awijaya awijaya sitas Brawijaya 5.4.3 Cross Tabulation of Occupational Variables with Participation Rates of awijaya ersitas Brawijava awijaya Uni the Pap Smear Test awijaya awijaya

The cross tabulation of work variables with the Pap smear test participation sites Brawijaya

Universate can be identified as the following table: awijaya

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awijaya		Universitas						
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awijaya	Universitas Brawijaya	Universitas	s Brawijay	a Uni	versitas l	Brawijaya		
awijaya		Universitas						
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awijaya	Universitas Brawijaya	Universitas national Va	Brawijay	a Univ	versitas l	Brawijaya Patos of t	Universitas	Brawijaya
awijaya	Table 5.14 Occu	pational va	nables wit		cipation	Rales of I	Universitas	Brawijaya
awijaya	Universitas Brawijaya	Universitas	smear T	est ^{Univ}	versitas l	Brawijaya		
awijaya	Universitas Brawijaya	Universitas	s Brawijay	a Uni	versitas l	Brawijaya		
awijaya	Uni versitas Brawijaya	Universites Level	of particip	ation t	versitas l est	Brawijaya	Universitas	
awijaya		Universitas	s Brawijay	a Uni	versitas i	I Atal		Brawijaya
awijaya	Universitas Brawijaya Occupational Universitas Brawijaya	Univ ersitas	Brawijay	Have	versitas l	Brawijaya	Universitas	Brawijaya
awijaya	Universitas Brawijaya	Universitas		a Uni	versitas i		Universitas	
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awijaya	Universitas Brawijaya	Univ N	%	Nuni	versitas l	Brawijaya	%Universitas	Brawijaya
awijaya	Universitas Brawijaya				rsitas l	Brawijaya	<u>Universitas</u>	Brawijaya
awijaya	Univ Private employees	21	21.00%	23	23.00%	Br 44 /ijaya	44.00% rsitas	Brawijaya
awijaya	Universitas Brz		C D			rawijaya	Universitas	Brawijaya
awijaya	Univ Lecturer	12	12.00%	6	6.00%	18 ilaya	18.00% sitas	Brawijaya
awijaya	Universit	3			4	Va	Universitas	
awijaya	Universit	7	7.00%	6	6.00%	13	13.00% sitas	Brawijaya
awijaya	Univ	1.101					Universitas	Brawijaya
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awijaya	Univ Analyst	2	2.00%	0	0.00%	2	2.00% ersitas	Brawijaya
awijaya	Unive		4.000/	5	0.000/	. /	Universitas	Brawijaya
awijaya	Univ Lab staff	1	1.00%	0	0.00%	1	1.00%ersitas	
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awijaya	Universit The calculation	results she	owed that	out o	f 100 fer	male emp	•	
awijaya	Universitas E	a madiaal fa		inotod	in this stu	wijaya		
awijaya 	Universitas Brawijaya	s medical la	iculty partic	ipaleu	in this su	uuy, at mo		
awijaya	respondents who had	private em	oloyee jobs				ap smear	
awijaya	Universitas Brawijaya	Universites	- Drawijay Drawijay			Brawijaya		Brawijaya
awijaya	test, then the second		-			-		
awijaya	Universitas Brawijaya teacher, staff, admin,	Universitas	ment emp	ovees	told they	had taker	Universitas	Drawijaya
awijaya		Universitas						
awijaya	smear lest.							
awijaya awijaya		Universitas						
awijaya awijaya	While at most 21	% of respor	idents who	had jo	b as priva [.]	te employe	es stated	Brawijaya
awijaya awijaya	Universitas Drawijaya	Universitas	blawijay	a uni	versitas	Diawijaya	Universitas	Diawijaya
awijaya awijaya	Uni that they had never t Universitas Brawijaya	aken Pap s Universitas			-			
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Universitas Brawijaya	Universitas Braw	ijaya Universitas	Brawijaya	Universitas I	
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	d to take Pap smea				
were afraid. Then the	e second most amour	nting to 12% of respo	ondents who	had jobs ^{sitas}	Brawijaya
Universitas Brawijaya Uni as lecturers / instruct				Universitas I reasonstitas I	
that includes fear, no	o chance, no time, ar	nd not married. Nex	t, 7% of resp	ondents,	Brawijaya
each of whom had jo		5.5	5.5		
Universitas Brawijaya	Universitas Por	iiaya Universitas	Brawijaya	Universitas I	Brawijaya
taken Pap smear te	est on the grounds t	nat there was no f	time, no cha	nce, not	Brawijaya
married, and afraid.	and trauma with nega	ative stories. sitas	Brawijaya	Universitas I	
Jniversitas Brawii		C C	Brawijaya	Universitas I	
Universitas Brz	S A C	Dr	rawijaya	Universitas I	
Jniversitas	GIAO	DRA	iiaya	Universitas I	0 0
5.4.4 Cross Tabulat	tion of Marriage Sta	tus Variables with	Participatio	Universitas I on Rates	Brawijaya
haiv		JE I			
of the Pap smear T	est (United)			Universitas I hiversitas I	
		1772	Z		
Cross tabulation	on of marital status va	ariables with Pap sn	near test par	ticipation	Brawijaya
ini rates can be found a				hiversitas l	5 5
Univ				niversitas l	
		13/ 17			1 I I I I I I I I I I I I I I I I I I I
Table5.15 Marria	ge Status Variables	with Participation	Rates of th	e Papersitas I	Brawijaya
		with Participation	Rates of th	e Papersitas I Universitas I	
Jnive	ge Status Variables smea		Rates of th		Brawijaya
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Unive Univers Universi Universita Universita Universitas B Universitas B	smean Level of participat	Test ion test	Total ya Jaya wijaya N ^{awijaya}	Universitas I Universitas I Universitas I Universitas I Universitas I Universitas I Universitas I	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
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Unive Univers Universi Universita Universita Universitas B Universitas Bra Universitas Bra Universitas Brawy Universitas Brawy Universitas Brawy	Smean Level of participat Do not have N %	Test ion test Have N %	Total Aya Jaya wijaya N ^{awijaya} Brawijaya Brawijaya	Universitas I Universitas I Universitas I Universitas I Universitas I Universitas I Universitas I Universitas I Universitas I Universitas I	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
Unive Univers Universitä Universitä Universitä Universitäs Brau Universitäs Brau Universitäs Brau Universitäs Brau Universitäs Braujaya	Smear Level of participat Do not have N % 40	Test ion test Have N % 45 45.00%	Total Aya Jaya wijaya N ^{awijaya} Brawijaya Brawijaya 85 Brawijaya	Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
Univer Univers Universit Universit Universita Universitas B Universitas Bray Universitas Bray Universitas Bray Married Universitas Bray Universitas Bray Universitas Bray	Smear Level of participat Do not have N 40 40 40	Test ion test Have N % 45 45.00%	Total ya jaya wijaya N ^{wijaya} Brawijaya Brawijaya Brawijaya Brawijaya	Universitas I Universitas I	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
Univer Universi Universi Universitä Universitä Universitäs Bra Universitäs Bra Universitäs Brawijaya Universitäs Brawijaya Universitäs Brawijaya Universitäs Brawijaya	Level of participat Do not have N 40 40 40.00% 13	Test ion test Have 45 45 45 12 12.00%	Total Jya Jaya wijaya Nawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya	Universitas I Universitas I	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
Univer Univers Universit Universit Universita Universitas B Universitas Bra Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Level of participat Do not have N 40 40 40 13 13.00%	Test ion test Have N % 45 45.00% 12 12.00%	Total ya Jaya wijaya Wijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya	Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
Univer Univers Universit Universit Universita Universitas Bravijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	Level of participat Do not have N 40 <	Test ion test Have 45 45.00% 12 12.00%	Total Jya Jaya Jaya Wijaya Nawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya	Universitas I Universitas I	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
Univer Univers Universit Universit Universita Universitas Universi	Level of participat Do not have N 40 <	Test ion test Have N % 45 45.00% 12 12.00%	Total ya Jaya wijaya wijaya Mawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya	Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
Univer Universi Universi Universita Universita Universita Universitas Universitas Universitas Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya	N % 40 40.00% 13 13.00% Universitian Brain Inversitian Brain Inversitian Brain	Test ion test Have N % 45 45.00% 12 12.00% 12 12.00% iava Universitas it of 100 female emp	Total ya Jaya Mijaya Navijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya	Universitas I Universitas I	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
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Universita Universita Universita Universita Universita Universitas Universitas Universitas Universitas Married Married Married Married Universitas Brawijaya's medica	N % 40 40.00% 13 13.00% urresults How that out urresults Show that out urresults Show that out	Test ion test Have N % 45 45.00% 12 12.00% 12 12.00% 1344 Universitas 1454 Universitas	Total N N 85 Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Doyees in Un	Universitas I Universitas I	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
Univer Universi Universi Universi Universitat Universitat Universitat Universitat Universitat Universitat Universitat Brawijaya Universitat Brawijaya Universitat Brawijaya Universitat Brawijaya Universitat Brawijaya Universitat Brawijaya	N % 40 40.00% 13 13.00% University show that out I faculties participation	Test ion test Have N % 45 45.00% 12 12.00% 12 12.00% tof 100 female emp ated in this study	Total ya Jaya Mijaya N Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Doyees in Un Brawijaya Shawijaya Brawijaya Brawijaya	Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas Universitas	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
Universi Universi Universi Universita Universita Universitas Unive	N % 40 40.00% 13 13.00% Universitian Brain n results show that out 1 faculties participat	Test ion test Have N % 45 45.00% 12 12.00% 12 12.00% ated in this study	Total Java N Navijava 85 Brawijava Brawijava Brawijava Brawijava Doyees in Un Brawijava Doyees in Un Brawijava Shawijava Brawijava Brawijava Brawijava	Universitas I Universitas I	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
Universi Universi Universi Universita Universita Universitas Unive	Level of participat Do not have N % 40 40.00% 13 13.00% Universitas Bray n results show that ou I faculties participat Universitas Bray Universitas Bray	Test ion test Have N % 45 45.00% 12 12.00% 12 12.00% 134 Universitas 145 tof 100 female emp ated in this study 145 Universitas 145 Universitas 145 Universitas 145 Universitas 145 Universitas	Total ya jaya wijaya N Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Doyees in Un Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya	Universitas I Universitas I	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya
Universita Universita Universita Universita Universita Universitas	Level of participat Do not have N % 40 40.00% 13 13.00% Universitas Bray n results show that ou I faculties participat Universitas Bray Universitas Bray	Test ion test Have N % 45 45.00% 12 12.00% 12 12.00% tof 100 female emp ated in this study	Total ya jaya wijaya N Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Doyees in Un Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya	Universitas I Universitas I	Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya Brawijaya

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respondents told that they had taken the Pap smear test, then 12% of single respondents said they had ever taken Pap smear test. While 40% of respondents who were married stated that they had never taken Pap smear test on the grounds it as Brawijava that there were no time, no chance, and fear for the Pap smear test. Then 13% of awijaya awijaya awijaya Unisingle respondents stated that they had never taken Pap smear test because they it as Brawijaya awijaya were not married. awijaya awijaya awijaya awijaya Un 5.5 Relationship Analysis of Knowledge Levels of Early Detection of Cervical itas Brawijava awijaya awijaya **Cancer with Participation Rate of Pap smear Test** awijaya awijaya The value of P-Value which is below 0.05 is considered significant whereas if the Brawlaya awijaya awijaya the value of P-Value above 0.05 is considered as insignificant. The relationship of awijaya awijaya Un the level of knowledge about early detection of cervical cancer with the level of itas Brawijaya awijaya participation in Pap smear tests can be known as the following table: awijaya awijaya Table 5.16 Knowledge Levels of Early Detection of Cervical Cancer with awijaya awijaya Participation Rate of Pap smear Test awijaya versitas Brawijaya awijava Level of participation test awijaya Total P-Value awijaya Level Of Knowledge Do not have Have awijaya awijaya awijaya awijaya awijaya Low (0-16) 0 0.00% 0 0.00% 0 0.00% Universitas Brawijaya Universitas Brawijaya 0.707 versitas Brawijaya awijaya 20 20.00% 16 16.00% 36 36.00% Moderate (17-32) 33 High (33-46) 33.00% 31 31.00% 64.00% 64 Universitas Brawijaya Universitas Universitas Brawijaya

The calculation results showed that out of 100 female employees in Universitas Brawijaya's medical faculties participated in this study, as many as the Brawijaya 20% of respondents who had sufficient level of knowledge about early detection of sitas Brawijava awijaya cervical cancer told they had never taken Pap smear test, while 16% of awijaya awijaya respondents who had sufficient level of knowledge about early detection of cervical as Brawlaya awijaya cancer states that taken Pap smear test. Then as many as 33% of respondents awijaya awijaya who had high level of knowledge about early detection of cervical cancer told they awijaya Uni had never taken Pap smear test, while as many as 31% of respondents who had it as Brawijava awijaya awiiava high level of knowledge about early detection of cervical cancer told they had taken awijaya awijaya Pap smear test. awijaya awijaya Testing the relationship between the level of knowledge about early detection awijaya Uni of cervical cancer with the level of participation in Pap smear tests performed using it as Brawijaya awijaya awijaya Chi Square. Based on the table note that the probability value of 0.7016. These awijaya awijaya Universults indicate the probability> level of significance (alpha (α = 5%)). Thus it can^{sitas} Brawijaya awijaya be stated that there is no significant relationship between the level of knowledge tas Brawlava awijaya awijaya about early detection of cervical cancer with the level of participation in Pap smear awijaya awijaya tests. awijaya awijaya awijaya awijaya 5.6 Analysis of the Relationship of Attitudes Toward Early Detection of awijaya awijaya Cervical Cancer with the Participation Rate of the Pap smear Test awijaya awijaya Universitive of P-Value which is below 0.05 is considered significant whereas if it as Brawijaya the value of P-Value above 0.05 is considered as insignificant. The relationship of Brawlava attitude towards early detection of cervical cancer with the level of participation in Pap smear tests can be known as the following table: Stas Brawlaya

BRAWIJAYA

awijaya	Universitas Brawijaya	Uni	versitas	Brawij	aya univ	/ersita	s Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Uni	versitas	Brawij	aya Univ	/ersita	s Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Uni	versitas	Brawij	aya Univ	/ersita	s Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Uni	versitas	Brawij	aya Univ	/ersita	s Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Uni	versitas	Brawij	aya Univ	/ersita	s Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Uni	versitas	Brawij	aya Univ	/ersita	s Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya			<i>2</i>	<i></i>		s Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Uni	versitas	Brawij	aya Univ	/ersita	s Brawijaya	Universitas Brawijaya th the Universitas Brawijaya
awijaya	Universitas Brawijaya	les t	oward Ea	rly Det	ection of	Cervic	al Cancer wi	^{tn} the Universitas Brawijaya
awijaya	Universitas Brawijaya	artic	ipation Ra	ate of t	he Pap s	mear T	e Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya						s Brawijaya	Universitas Brawijaya
awijaya	Uni versitas Brawijaya	-Uni	el of part	ticipati	ava Univ	/ersita	s Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Uni	versitas	Brawij	aya Univ	/ersita	s Brawijaya	P-Value
awijaya	Universitas Brawijaya Attitudes	Uni	versitas	Brawij	<u>ava uni</u>	/ei 'sita	s Brawijaya	Universitas Brawijaya
awijaya	Attitudes Universitas Brawijaya	Do	not have	Brawi	<i>l</i> e aya Univ	/ersita	s Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya						s Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Nnj	%	N	% Univ	/ers h ta	s [%] rawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya					rsita	s Brawijaya	Universitas Brawijaya
awijaya	Univ Low (0-5) awji	0	0.00%	1	1.00%	1	1.00% jaya	Universitas Brawijaya
awijaya	Universitas Br						awijaya	Universitas Brawijaya
awijaya	Univ Moderate (6-10)	5	5.00%	211	11.00%	16	16.00%aya).131versitas Brawijaya
awijaya	Universit	5				1	Va	Universitas Brawijaya
awijaya	Univ Good (11-15)	46	46.00%	32	32.00%	78	78.00%	Universitas Brawijaya
awijaya	Uniy	1	10.0070		02.0070	10	10.0070	Universitas Brawijaya
awijaya	Uni Vory good (16.20)	2	2.009/		3.00%	SU E	5 009/	niversitas Brawijaya
awijaya	Very good (16-20)	420	2.00%	3	3.00%	5	5.00%	niversitas Brawijaya
awijaya	Uni	-		En.	1. 1.4	_		hiversitas Brawijaya
awijaya	Uni			FL				hiversitas Brawijaya
awijaya	Univ		A PARKET	11/1				niversitas Brawijaya
		- 1				100		

The calculation results showed that out of 100 female employees in awijaya Universitas Brawijaya's medical faculties participated in this study, none of the awijaya awijaya Universion dents had low attitude towards early detection of cervical cancer, claimed tas Brawiava awijaya awijaya they had never taken Pap smear test, while as many as 1% of respondents who awijaya awijaya had lack of attitude towards early detection of cervical cancer stated they had taken it as Brawlaya awijaya Pap smear test. Then as many as 5% of respondents who had an adequate attitude it as Brawijava awijaya awijaya towards early detection of cervical cancer told they had never taken Pap smear awijaya awijaya test, while as many as 11% of respondents who had sufficient attitude towards tas Brawlaya awijaya early detection of cervical cancer told they had taken Pap smear test. Next as many tas Brawijaya awijaya as 46% of respondents who had good attitude towards early detection of cervical Universitas Brawijaya cancer told they had never taken Pap smear test, while as many as 32% of Universitas Brawijaya respondents who had good attitude towards early detection of cervical cancer told

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awijaya they had taken Pap smear test. Whereas 2% of respondents who had very good attitude towards early detection of cervical cancer told they had never taken Papsitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya In smear test, while as many as 3% of respondents who had very good attitude tas Brawijava awijaya towards early detection of cervical cancer told they had taken Pap smear test. awijaya awijaya Testing the relationship between attitudes toward early detection of cervical awijaya awijaya cancer with the level of participation in Pap smear tests performed using Chi Las Brawliava awijaya Square. Based on the table note that the probability value of 0.131. These results awijaya awijaya indicate the probability> level of significance (alpha ($\alpha = 5\%$)). Thus it can be stated awijaya awijaya Unithat there is no significant relationship between attitudes toward early detection of itas Brawlaya awijaya cervical cancer with the level of participation in Pap smear tests. awijaya awijaya awijaya awijaya awijaya 5.7 Descriptive Analysis of Action Variables awijaya awijaya 5.7.1 Descriptive Analysis of the Place of Pap smear Tests awijaya Descriptive analysis of where to conduct the Pap smear test is informed it as Brawijaya awijaya awijaya through the following table and explanation: awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya

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Universitas Brawijaya	Universitas Brawijaya Universitas Brawijaya	5
Universitas Brawijaya	Universitas Brawijaya Universitas Brawijaya	E
Universitas Brawijaya	Universitas Brawijaya Universitas Brawijaya	E
Universitas Brawijaya	Universitas Brawijaya Universitas Brawijaya	a
Universitas Brawijaya	Universitas Brawijaya Universitas Brawijaya	E
Universitas Brawijaya	Universitas Brawijaya Universitas Brawijaya	E
Universitas Brawijaya	Universitas Brawijaya Universitas Brawijaya	E
Universitas Brawijaya	Universitas Brawijaya Universitas Brawijaya	E
Universitas Brawijaya	Table 5.18 Place of Pap smear Tests	a
Universitas Brawijaya	Universitas Brawijaya Universitas Brawijaya	E
Place test taken	Universitas BrawFrequencyersitas Percentag	je
Universitas Brawijaya	Universitas Brawijaya Universitas Brawijaya	F
Universitas Brawijaya Univ HospitaBrawijaya	Universitas Brawijaya Universitas Brawijaya Universitas Braw28 ya Universitas 60%wijaya	
		а
UnivHospitaBrawijaya	Universitas Braw28 ya Universitas 60% wijaya	a a
UnivHospitaBrawijaya Universitas Brawijaya	Universitas Braw28 ya Universitas 60%wijaya Universitas Brawijaya Universitas Brawijaya	a a a
Universitas Brawijaya Universitas Brawijaya Univ Primary healthcare	Universitas Braw28 ya Universitas 60%wijaya Universitas Brawijaya Universitas Brawijaya Universitas Braw7jaya Universitas 15%wijaya	a a a
Univ HospitalBrawijaya Universitas Brawijaya Univ Primary healthcare Universitas Brawijaya	Universitas Braw28 ya Universitas 60%wijaya Universitas Brawijaya Universitas Brawijaya Universitas Braw7jaya Universitas 15%wijaya Universitas Pravijaya Universitas Brawijaya	a a a a
Univ Hospital Brawijaya Universitas Brawijaya Univ Primary healthcare Universitas Brawijaya Univ Clinic S Brawijaya	Universitas Braw28 ya Universitas 60%wijaya Universitas Brawijaya Universitas Brawijaya Universitas Braw7jaya Universitas 15%wijaya Universitas Brawijaya Universitas 26%wijaya 12 Universitas Brawijaya	a a a a a
Univ Hospital Brawijaya Universitas Brawijaya Univ Primary healthcare Universitas Brawijaya Univ Clinic s Brawijaya Universitas Brawijaya	Universitas Braw28 ya Universitas 60%wijaya Universitas Brawijaya Universitas Brawijaya Universitas Braw7jaya Universitas 15%wijaya Universitas Ponvijaya Universitas Brawijaya Universitas Brawijaya Sitas Brawijaya	a a a a a
Univ Hospital Brawijaya Universitas Brawijaya Univ Primary healthcare Universitas Brawijaya Univ Clinic S Brawijaya Universitas Brawijaya Universitas Brawijaya	Universitas Braw28 ya Universitas 60%wijaya Universitas Brawijaya Universitas Brawijaya Universitas Braw7jaya Universitas 15%wijaya Universitas Brawijaya Universitas 26%wijaya 12 Universitas Brawijaya	a a a a a

awijaya Based on the above table, it is known that of the 47 female employees in awijaya Universitas Brawijaya's medical faculty who have had Pap smears, 60% of awijaya awijaya Un respondents have had Pap smears in hospitals, then 15% of respondents have tas Brawijava awijaya awijaya Pap smear tests at the primary healthcare, while as many as 26 % of respondents awijaya awijaya Un had Pap smear test at the doctor's clinic. This shows that most of the female it as Brawliava awijaya employees in Universitas Brawijaya's medical faculty who have done Pap smear as Brawijaya awijaya awijaya tests, do the tests at the hospital. awijaya

awijaya awijaya

awijaya 5.7.2 Descriptive Analysis of people whom accompany respondent for Pap Brawijaya awijaya awijaya smear Tests awijaya Descriptive analysis of friends to do a Pap smear test informed through the awijaya awijaya Unifollowing tables and explanations: Brawijaya Universitas Brawijaya awijaya

ersitas Brawijaya

ersitas Brawijava

awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya		Universitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya ests ohiversitas Brawijaya
awijaya	Universitable 5.19 Peop	e wnom accompany res	pondent for Pap smear I	ests Universitas Brawijaya
awijaya	Uni <u>versitas Brawijaya</u>		Universitas Brawijaya	Universitas Brawijaya
awijaya	Place test taken	Universitas BrawFilequ	uencyersitas Percentage	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Univ Husband rawijaya	Universitas Braw13ya	Universitas 28% vijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	UniveMother Brawijaya	Universitas Brawgaya	Universitas 4% awijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya	Universitas Porvijaya	Universitas Brawijaya	Universitas Brawijaya
awijaya	Univerriend Brawijaya	University 32	Universitas 68% vijaya	Universitas Brawijaya
awijaya	Universitas Brawijaya		rsitas Brawijaya	Universitas Brawijaya
awijaya	Universitas Brawii	47	100% jaya	Universitas Brawijaya
awijaya	Universitas Brz		rawijaya	Universitas Brawijaya
awijaya	Universitas	TAJ BA	ijaya	Universitas Brawijaya
awijaya	Universit	5	va	Universitas Brawijaya

awijaya Based on the table above, it is known that of 47 female employees in awijaya awijaya 28% of Brawijaya Universitas Brawijaya's medical faculties who had Pap smears, awijaya Un respondents took Pap smears accompanied by their husbands, then 4% of the Brawlava awijaya awijaya respondents took Pap smears accompanied by mothers (biological / in-laws), while awijaya awijaya Unitas many as 68% of respondents took Pap smear test accompanied by a friend. It as Brawijaya awijaya This shows that most of the female employees in Universitas Brawijaya's medical awijaya awijaya faculty who have done Pap smear tests, they did the tests accompanied by friends. awijaya

awijaya awijaya

awijaya 5.7.3 Descriptive Analysis of the Previous Time for Conducting the Paparas Brawijaya awijaya awijaya smear Test awijaya awijaya Descriptive analysis of the last time conducting a Pap smear test was awijaya awijaya Uninformed through the following table and explanation: Isitas Brawijaya awijaya

Universitas Brawijaya iversitas Brawijaya

5.20 Previous Time for Conducting the Pap smear Test Previous Time For Last Time Test taken Frequency E Percentage Versitas Brawijaya Univer MonthBrawijaya awijaya Universitas Brawijaya3 Universitas Br6%ijaya awijaya Univ 6 Months rawijaya Universitas Brawijaya8 Universitas Br17% aya awijaya awijaya awijaya Univeryear Brawijaya 36 niversitas Er77% aya awijaya Universitas Braw awijaya 100% 47 awijaya awijaya

awijaya awijaya

Based on the above table, it is known that of the 47 female employees in awijaya awijaya Universitas Brawijaya's medical faculty who have taken Pap smears, as many as awijaya Un 6% of respondents stated that the last time they did Pap smear test was one monthal tas Brawijaya awijaya awijaya ago, then 17% of respondents told that the last time they did Pap smear test six awijaya awijaya Unimonths ago, while 77% of respondents stated that the last time they did Pap smear it as Brawlava awijaya test was one year ago. This shows that most of the female employees in the shows and the second seco awijaya Universitas Brawijaya's medical faculty who had done Pap smears, stated that the awijaya awijaya In last time they did Pap smears was one year ago.

awijaya awijaya awijaya awijaya

5.7.4 Descriptive Analysis of the Reasons for Doing a Pap smear Test awijaya awijaya Descriptive analysis of the reasons for conducting a Pap smear test is awijaya awijaya awijaya informed through the following table and explanation: Islas Brawlaya

sitas Brawijava

Table 5.21 Reasons for Doing a Pap smear Test Frequency Bra Percentage versitas Brawijaya Reasons for Doing the Test as Brawijava Univ Husband support a awijaya Universitas Brawijaya U4 iversitas Bra9%aya awijaya Universitas Brawijaya U3 iversitas Bra6%aya awijaya Univ Have symptoms a awijaya awijaya 40versitas Bra85%va Cervical cancer prevention action awijaya awijaya Universitas Brav B 100% 47 awijaya awiiava awijaya awijaya Based on the above table, it is known that of the 47 female employees in awijaya awijaya Universitas Brawijaya's medical faculties who have taken Pap smear test, 9% of awijaya Un respondents stated that the reason they had Pap smear test was due to their tas Brawijava awijaya awijaya husband's encouragement, then 6% of respondents stated that the reason they did awijaya awijaya UniPap smear test is due to a perceived complaint, while as many as 85% of itas Brawijaya

respondents stated that the reason they did Pap smear test was as a preventative tas Brawijaya measure for cervical cancer. This shows that most of the female employees in Uni Universitas Brawijaya's medical faculty who had done Pap smear tests, stated that it as Brawijaya

awijaya the reason they did Pap smear tests was as a preventative measure for cervical awijaya awijaya cancer.

awijaya awijaya awijaya awijaya 5.7.5 Descriptive Analysis of Transportation to Pap smear Test Location awijaya Descriptive analysis of transportation to Pap smear test location is informed transportation and the paper of the second through the following table and explanation: Universitas Brawijaya

awijaya

Universitas Brawijaya

sitas Brawiiava

awijaya

awijaya awijaya

awijaya awijaya awijaya awijaya

awijaya awijaya

awijaya

awijaya

awijaya awijaya

awijaya awijaya

awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas	Brawijaya	universitas
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas	Brawijaya	Universitas
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas	Brawijaya	Universitas
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas	Brawijaya	Universitas
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas	Brawijaya	Universitas
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas	Brawijaya	Universitas
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas	Brawijaya	Universitas
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas	Brawijaya	Universitas
awijaya	Universitas Brawijaya	22 Transportation to Pap	smear Test	Location	Universitas
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas	Brawijaya	Universitas
awijaya	Univ Transportation to I	Pap smear test Location	Frequency	BraPercent	ageiversitas
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas	Brawijaya	Universitas
awijaya	Univ Motor vehicle jaya	Universitas Brawijaya	U42versitas	Bra89%ya	Universitas
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas	Brawijaya	Universitas
awijaya	Univ Public Vehicle aya	Universitas Brawijaya	U 4niversitas	Bra9%aya	Universitas
awijaya	Universitas Brawijaya	Universitas Porvijaya	Universitas	Brawijaya	Universitas
awijaya	Univ Walking Brawijaya	Unive	Universitas	Bra <mark>2%</mark> aya	Universitas
awijaya	Universitas Brawijaya		rsitas	Brawijaya	Universitas
awijaya	Universitas Brawii		47	Bra100%	Universitas
awijaya	Universitas Br			awijaya	Universitas
awijaya	Uni versitaș	TAJ BA		ijaya	Universitas
awijaya	Universit	5	YL.	va	Universitas
awijaya	Univer		差		Universitas
awijaya	Univ Based on the a	above table, it is known th	hat of the 47	temale empl	oyees in sitas
awijaya	Uni Universitas Brawijav	a's medical faculty who h	ad done Pan	smear test	89% of
awijaya	Uni		aa aono i ap		iversitas

Un respondents used motorized vehicles to reach the location of health services to do it as Brawijaya Pap smear test, then 9% of respondents used public transportation to reach health

Universide location to do Pap smear test, while as many as 2% of respondents walked tas Brawlava to reach health service location to do Pap smear test. This shows that most of the Brawing a female employees in Universitas Brawijaya's medical faculties who have done Pap Universitas Brawijaya

Unismear tests stated that they used motorized vehicles to reach the health services tas Brawijaya

location to do Pap smear tests.

awijaya awijaya

awijaya awijaya Uni 5.7.6 Descriptive Analysis Carrying Out Continuous Pap smear Tests Universitas Brawijaya awijaya awijaya awijaya Universit Descriptive analysis conducts continuous Pap smear test checks through the itas Brawijaya

Universitas Brawijaya Universitas Brawijaya awijaya

awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawi
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawi
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawi
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawi
awijaya	Universitas Brawlaya	s carrying out continue	bus Pap sinear rests	Universitas Brawi
awijaya	Universitas Brawijaya			Universitas Brawi
awijaya	Continuous Test Me	thodersitas Brawfrequ	encyersitas Percentage	Universitas Brawi
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawi
awijaya	Univerestas Brawijaya	Universitas Braw31ya	Universitas 31%vijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawi
awijaya	UniveNoitas Brawijaya	Universitas Braw69ya	Universitas 69%vijaya	Universitas Brawij
awijaya	Universitas Brawijaya		Universitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Univ 100	Universitas 100%ijaya	Universitas Brawij
awijaya	Universitas Brawijaya		rsitas Brawijaya	Universitas Brawi j
awijaya	Universitas Brawii		Brawijaya	Universitas Brawij
awijaya	Universitas Brz	ZAG D.	yawijaya	Universitas Brawij
awijaya	Universitas Based on the ta	ble above it is known th	at of the 100 female empl	Universitas Brawi
awijaya				
awijaya	Universitas Brawijaya	's medical faculties pa	rticipated in this study,	31% of Itas Brawi
awijaya	Univ University respondents stated that	at they would carry out ar	ovamination using the Br	Iniversitas Brawij
awijaya				
awijaya	test method continuou	sly, then 69% of respond	ents told that they would r	ot check
awijaya awijaya				
awijaya	Uni with the Pap smear tes	a method on an ongoing i	basis. This showed that me	niversitas Brawi
awijaya	female employees in l	Jniversitas Brawijaya's m	nedical faculties participate	ed in this
awijaya	Thebus	Steller		Universitas Brawi
awijaya	University stated that they	would not carry out conti	nuous Pap smear tests.	Universitas Brawij
awijaya	Univers			Universitas Brawij
awijaya	Universi			Universitas Brawi
awijaya			a ava	
awijaya	5.7.7 Descriptive Ana	lysis of Husband's Sup	port for Conducting a Pa	ap smear
awijaya	Univ rest tas B	1988 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 -	wijaya	Universitas Brawi
awijaya	Universitas Bra		awijaya	Universitas Brawi
awijaya	Universit Descriptive ana	veic of the huchand's a	upport for the Pap amor	Universitas Brawi
awijaya	Universitas Brawijaya		-oniversitas Brawijaya	Universitas Brawij
awijaya	Univinformed through the f	ollowing table and explar	ationersitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawij
awijaya			Universitas Brawijaya	Universitas Brawij
awijaya			Universitas Brawijaya	Universitas Brawij
awijaya			Universitas Brawijaya	Universitas Brawij
awijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawijaya	Universitas Brawij

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awijaya Universite Table 5.24 Husband's Support for Conducting a Pap smear Test inversities Brawijaya Univ Husband support Universitas BrawFrequencyersitas Percentage awijaya awijaya Univerestas Brawijaya Universitas Braw67ya Universitas 78%vijaya awijaya awijaya awijaya Univenoitas Brawijaya niversitas _{22%}wijaya 19 awijaya Universitas Braw awijaya 100% Jaya 86 awijaya awijaya niversitas Brawiiava awijaya

awijaya Based on the above table, it is known that from 86 female employees in awijaya awijaya Universitas Brawijaya's medical faculty who were already married, as many as awijaya In 78% of respondents stated that they got their husband's support to do Pap smears tas Brawijava awijaya awijaya test, then as many as 22% of respondents told that they did not get their husband's awijaya awijaya Unisupport to do Pap smear test. This shows that most of the female employees insitas Brawijaya awijaya Universitas Brawijaya's medical faculty who were already married, stated that they has Brawijaya awijaya awijaya got the support of their husbands to do Pap smear test. awijaya

awijaya awijaya

awijaya 5.7.8 Descriptive Analysis Informing Others about the Pap smear Test inversitas Brawijaya awijaya awijaya Universit Descriptive analysis informs others about the Pap smear test informed itas Brawijaya awijaya awijaya through the following tables and explanations: awijaya awijaya awijaya

awijaya awijaya awijaya awijaya Early Detection awijaya awijaya Universitas Brawijava awijaya awijaya Unive Vgitas Brawi awijaya awijaya Unive Total awiiava awijaya awijaya Univ awijaya

Universities Br Table5.25 Informing Others about the Pap smear Test Univ Sharing Information About Cervical Cancerversitas Brawijava Percentage Frequency 67 67% 33 Brawi33% 100 100% Universitas Brawijava

Universitas Brawijaya

Universitas Brawijaya

Based on the above table, it is known that of the 100 female employees in awijaya awijaya Universitas Brawijaya's medical faculty participated in this study, as many as 67% tas Brawijaya awijaya awijaya of respondents stated that they would share information about the Pap smear test awijaya awijaya Unitias an early detection of uterine cancer to friends, relatives, or others, then 33% of itas Brawijaya awijaya respondents stated that they would not share information about the Pap smear test awijaya awijaya as an early detection of uterine cancer to friends, relatives, or others. This shows awijaya awijaya Un that most female employees in Universitas Brawijaya's medical faculties tas Brawijaya awijaya participating in this study stated that they would share information about the Pap awijaya smear test as an early detection of uterine cancer to friends, relatives, or others. awijaya awijaya awijaya awijaya awijaya awijaya awijaya

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Universitas Brawijaya Universitas Brawijaya CHAPTER 6 Universita DISCUSSION Universitas Brawijava awijaya awijaya Universita This study aims to determine the relationship of the level of knowledge and it as Brawijava awijaya awijaya attitudes towards early detection of cervical cancer with the level of Pap smear test awijaya awijaya participation in female employees of the Faculty of Medicine in Universitas awijaya Brawijaya with respondents of 100 employees. awijaya awiiava awijaya The most common cancers in the community include cervical cancersitas Brawijaya awijaya Human papillomavirus (HPV) infection is a major factor in cervical cancer. This is awijaya awijaya the third most common malignancy in women worldwide, and still stands as the awijaya Unileading cause of cancer-related deaths in women in developing countries. awijaya awijaya awijaya awijaya awijaya 6.1 Identity of Respondents awijaya From this research, it is shown that the majority of female employees in Sitas Brawijaya awijaya awijaya Universitas Brawijaya's medical faculty the highest level of education was Bachelor it as Brawijaya awijava awijaya degree. Most respondents were married. In general women before age 32 were awijaya awijaya considered most fertile as after age 32 women's fertility starts to decrease and awijaya Uni when they reach age 37 the fertility declines more significantly, finally when women it as Brawijava awijaya awijaya reached the age 37 the fertility is dramatically fall. In research conducted the awijaya awijaya Universion of the second secon level decreases by age (Hum 2010), rawijaya Universitas Brawijaya

awijaya awijaya awijaya

awijaya

6.2 Knowledge level results and early detection and participation of Pap smear tests wijaya 6.2.1 Knowledge on Pap smear screening awijaya awijaya Majority of the respondents knew and had heard about Pap smear test. As awijaya awijaya much as 64% of the respondents got high level of knowledge score, even though the Brawlaya awijaya they were high in knowledge about Pap smear, some of them still have limited awijaya awijaya knowledge on the procedures regarding the test. Based on the research which awijaya Uni conducted by (Oon 2011) stated that many respondents have high knowledge and it as Brawijava awiiava awijaya the knowledge about Pap smear was adequate in of the respondents awijaya awijaya (Thippeveeranna, 2013). awijaya

6.2.2 Attitude towards Pap smear screening

awijaya Regardless of their groups, respondents often did not feel the necessity to awijaya awijaya do the Pap smear test due to absence in symptoms. The respondents also that Brawijaya awijaya Unimentioned that they would conduct the Pap smear test if they had reproductive tas Brawijava awijaya awijava problems. For the groups that never once done the Pap smear test, they mentioned awijaya awijaya Un that do not want to do the Pap smear test due to embarrassment and fear of the itas Brawijaya awijaya test procedure. Most of the female employees in Universitas Brawijaya's medical tas Brawijaya awijaya awijaya faculty involved in this study have a good attitude towards early detection of awijaya awijaya cervical cancer. Based on the research conducted by (Oon 2011) stated that many awijaya respondents does not feel the necessity to do Pap smear test due to absent in symptoms. From the literature (Thippeveeranna, 2013) inadequate attitude, when Universitas Brawijaya Universitas Brawijaya the woman presented reasons for the examination other than the prevention of the Brawlava Cervical Cancer.

Universitas Brawijaya Universitas Brawijaya 6.2.3 Participation of Pap smear test Universit Most of the female employees who were in the Universitas Brawijaya's tras Brawijaya medical faculty involved in this study had never had Pap smear test. There were awijaya Universitas Brawijaya In also those who perceived themselves as being healthy and therefore did not need it as Brawijava awijaya Pap smear at this moment. Based on the research conducted by (Oon, 2011) awijaya awijaya awijaya stated that many respondents did not take Pap smear test. Beliefs about Pap tas Brawlaya awijaya smears appear to be related to actual participation in cancer screening (Esquer tas Brawlava awijaya awijaya 2003). Many believed that Pap smear is performed only on women who are WIJA, awijaya awijaya symptomatic (Wong lw 2009). awijaya awijaya awijaya awijaya 6.2.4 Place test conducted awijaya awijaya Majority of the respondents conducted the Pap smear test at the nearest awijaya awijaya Un hospital around them. This made them easier to have regular check-up and also it as Brawijaya awijaya easy access to healthcare service. awijaya awijaya awijaya awijaya awijaya Uni 6.2.5 Accompany awijaya awijaya Universit As much as 68% of the respondents choose their friends to accompany them it as Brawijaya awijaya Un to take the Pap smear test as they were more comfortable around their friends tas Brawijaya awijaya awijaya compared to other people which were close to them. awijaya niversitas Brawijaya awijaya

6.2.6 The previous time test taken and continuity taking the test. Based on the data collected, majority respondents took 1 year before from Brawlava the time the data is being collected. Most of the respondents mentioned that lack awijaya In of time was one of the barriers to women's access to Pap smear screening tas Brawiava awijaya awijaya services. Various situations were associated with the lack of time such as being awijaya awijaya busy with their tasks either as housewives and working women as well as long tas Brawlaya awijaya there was also a long waiting time especially at government's clinics. Majority of the Brawlava awijaya awijaya the respondent did not continue taking the Pap smear test frequently. awiiava MIL awijaya awijaya awijaya 6.2.7 Support awijaya awijaya Generally there was very little involvement of family members for cervical tas Brawijava awijaya awijaya cancer screening but there was also some support from the respondent's husband awijaya awijaya Unito do the test. There was lack of family and spousal support for women who wanted it as Brawlaya awijaya to do Pap smears. Some respondents never discussed Pap smear with their as Brawijaya awijaya awijaya respective spouses and vice versa. But they felt that if they were to discuss with awijaya Uni their spouses, they would definitely gain their support. As a step of prevention of itas Brawijava awijaya awijaya cervical cancer, majority acted on their own to take care of their health. awijaya awijaya awijaya awijaya Un 6.2.8 Accessibility awijaya awijaya awijaya Universit Majority of the respondents noted that they brought their own vehicle to the itas Brawijaya location where they conducted the test and accessibility was never a problem for the Brawijaya Pap smear test.

6.2.9 Information spreading Respondents stated that they would share information about the Pap smear test as an early detection of cervical cancer to friends, relatives, or others when awijaya Unithey are spending time around them, rawijaya Universitas Brawijaya awijaya awijaya awijaya awijaya 6.2.10 Relationship between attitudes toward early detection of cervical tas Brawijaya awijaya awijaya cancer with the level of participation in Pap smear tests awijaya awiiava awijaya Universit Testing the relationship between attitudes toward early detection of cervical itas Brawlaya awijaya cancer with the level of participation in Pap smear tests performed using Chi awijaya Square. Based on the table note that the probability value of 0.131, the value of Pawijaya awijaya UniValue which is below 0.05 is considered significant whereas if the value of P-Value it as Brawi awijaya awijaya above 0.05 is considered as insignificant. These results indicate the probability> awijaya awijaya Unilevel of significance (alpha (α = 5%)). Thus it can be stated that there is not as Brawlaya awijaya significant relationship between attitudes toward early detection of cervical cancer awijaya awijaya with the level of participation in Pap smear tests. The limited knowledge and awijaya Uninonchalant attitude as well as ignorance about cervical cancers and Pap smearing Brawi awijava awijaya screening are the two most significant factors affecting women from being awijaya awijaya screened. Among other reasons for low participation in Pap smear test included awijaya Uni women not perceiving themselves as being susceptible to cervical cancer because it as Brawing awijaya awijaya they had no symptoms of illness and this is further strengthened because of awijaya inadequate information and knowledge about the importance of Pap smear tas Brawijaya screening. Regarding women's attitude towards Pap smear screening, embarrassment and fear are seen to be as a main barrier to undergo Pap smear test. Fear can be associated with many elements such as fear of pain, fear of

getting negative results, procedure. The concept of embarrassment can be associated with strong cultural factors since majority of women mentioned being it as Brawijaya Universitas Brawijaya Universitas Brawijaya Universitas Brawijaya Uni shy if they have to expose their private parts and Pap smear test is a very intimate it as Brawijava awijaya procedure. Furthermore, there was also gender issue involved in that they would awijaya awijaya be further embarrassed if the Pap smears were performed by male doctors. Instas Brawlaya awijaya conclusion, the low uptake of Pap smear screening is associated with various awijaya awijaya factors some of which were noted in previous studies (Oon, 2011) Although awijaya Uni knowledge of Pap smear as a screening procedure for cervical cancer is high, it as Brawijaya awijaya AN, JA awijaya practice is still low (Thippeveeranna, 2013). awijaya awijaya awijaya awijaya 6.3 Research Limitations awijaya awijaya awijaya One of the limitations faced in this study is the different views of eachillas Brawijaya awijaya respondent on the questions in the questionnaire and the explanations that had awijaya awijaya been given. Where it can lead to interpretation in answering awijaya un questionnaires so as to produce different conclusions in the process of analysis tas Brawijava awijaya awijaya and discussion of this study. awijaya awijaya awijaya awijaya awijaya awijaya awijaya awijaya

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awijaya

awijaya awijaya Universitas Chapter 7 awijaya CONCLUSIONS AND SUGGESTION Brawijaya awijaya awijaya Uni 7.1 Conclusion ava awijaya awijaya awijaya Based on the results and discussion, it can be concluded that: awijaya awijaya awijaya Universit. The respondents have high level of knowledge of respondents and a good it as Brawijaya awijaya Universita attitude towards early detection of cervical cancer. awijaya awijaya awijaya 2. Majority of the respondents had never participated for a Pap smear test. ersitas Brawijava awijaya 3. There is no significant relationship was found between the level of itas Brawijaya awijaya awijaya knowledge and attitudes toward early detection of cervical cancer and the tas Brawijava awijaya awijaya level of participation in Pap smear tests. awijaya awijaya awijaya awijaya 7.2 Suggestion awijaya awijaya Based on the results and discussion, suggestions can be taken that: awijaya awijaya Univers1. Need to educate about cervical cancer in the community with more. Universitas Brawijaya awijaya awijaya awijaya University. Need more attention to personal health. awijaya awijaya awijaya awijaya awijaya awijaya

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ep	awijaya	Universita Indonesia, page 1-6 rsitas Brawijaya Universitas Brawijaya Universitas	
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	awijaya	M. E. Fernández-Esquer, P. Espinoza, A. G. Ramirez, A. L. McAlister, 2003, Versitas	
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	awijaya	Mayo clinic staff, 23 rd August 2017, Diagnosis, Cervical Cancer, accessed 8 th	Brawijaya
	awijaya	Universita December 18 9PM, <u>https://www.mayoclinic.org/diseases-</u> wijaya Universitas	
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	awijaya	https://online.epocrates.com/diseases/25924/Cervical-cancer/Etiology	Brawijaya
	awijaya	Ramondetta D.L., 2013, Cervical Cancer Overview, National Cervical Cancer	
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	awijaya	Universita online.org/hpvcervical-cancer/cervical-cancer-overview/	Brawijaya
	awijaya	Universitas Repeated Pap smear screeping among Mexican-American women	Brawijaya
	awijaya	Repeated Pap smear screening among Mexican-American women,	
	awijaya	Universita Health Education Research, Vol.18, Issue 4, Pages 477–487. ya Universitas	
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	awijaya	Universita women-children Iniversitas Brawijaya Universitas Brawijaya Universitas	
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