

## INTISARI

**Latar Belakang:** Riwayat keluarga kanker payudara meningkatkan risiko terjadinya kanker payudara. Perilaku Periksa Payudara Sendiri (SADARI) sebagai metode deteksi dini kanker payudara di Yogyakarta masih rendah (17,71%). Komponen kepercayaan kesehatan mempengaruhi perilaku SADARI.

**Tujuan penelitian:** Untuk mengetahui hubungan kepercayaan kesehatan dengan perilaku SADARI pada wanita dengan riwayat keluarga kanker payudara.

**Metode:** Penelitian merupakan cross sectional survei yang dilakukan pada 100 wanita yang memiliki riwayat kanker keluarga kanker payudara, sudah menstruasi, berdomisili di Sleman dan Kota Yogyakarta dipilih menggunakan convenience sampling. Instrumen yang digunakan Champion's Health Belief Model Scale versi Bahasa Indonesia. Analisa data menggunakan uji Spearman Rank.

**Hasil:** Sebanyak 79% responden sudah melakukan SADARI, namun 62% responden tidak rutin melakukan SADARI. Domain kepercayaan kesehatan yang signifikan berhubungan dengan perilaku SADARI adalah persepsi kerentanan ( $p = 0,039$ ,  $r = 0,177$ ), persepsi manfaat ( $p = 0,000$ ,  $r = 0,465$ ), persepsi hambatan ( $p = 0,000$ ,  $r = -0,609$ ), efikasi diri ( $p = 0,000$ ,  $r = 0,593$ ), sedangkan persepsi keparahan ( $p = 0,151$ ,  $r = -0,104$ ) dan isyarat bertindak ( $p = 0,208$ ,  $r = 0,082$ ) tidak memiliki hubungan dengan perilaku SADARI.

**Kesimpulan:** Mayoritas responden tidak rutin melakukan SADARI. Semakin tinggi persepsi kerentanan, persepsi manfaat, persepsi efikasi diri semakin baik perilaku SADARI, sebaliknya semakin rendah persepsi hambatan semakin baik perilaku SADARI. Sedangkan persepsi keparahan dan isyarat bertindak tidak memiliki hubungan dengan perilaku SADARI.

**Kata Kunci :** Kanker Payudara, Kepercayaan Kesehatan, SADARI, riwayat keluarga

<sup>1</sup> Mahasiswa Program Studi S1 Ilmu Keperawatan Fakultas Kedokteran, Kesehatan Masyarakat, dan Keperawatan UGM

<sup>2</sup>Departemen Keperawatan Medikal Bedah, Fakultas Kedokteran, Kesehatan Masyarakat, dan Keperawatan UGM

## ABSTRACT

**Background:** Family history of breast cancer increases the risk of breast cancer. Practice of breast self examination (BSE) as an early detection method of breast cancer in Yogyakarta is still low (17.71%). Domain of health belief affects the BSE practice.

**Research Objectives:** To determine the relationship of health belief and breast self examination practice in women with family history of breast cancer

**Method:** A cross sectional study was conducted in 100 women who have family history of breast cancer, already menstruating, domiciled in Sleman and Yogyakarta City selected using convenience sampling. The instruments used was Champion's Health Belief Model Scale in Bahasa Indonesia version. Spearman Rank test was used to analyze data.

**Result:** The 79% of respondents had performed BSE, but 62% did not routinely doing BSE. The domain of health belief including perceived susceptibility ( $P = 0.039$ ,  $r = 0.177$ ), the perceived benefits ( $P = 0.000$ ,  $r = 0.465$ ), perceived barriers ( $p = 0.000$ ,  $r = -0.609$ ), and self-efficacy ( $P = 0.000$ ,  $r = 0.593$ ) significantly associated with BSE practice. While the domain of health belief including perceived severity ( $p = 0.151$ ,  $r = -0.104$ ) and cues to action ( $P = 0.208$ ,  $r = 0.082$ ) were not associated with BSE practice.

**Conclusion:** The majority of respondents did not do BSE routinely. The higher the perceived susceptibility, perceived benefits, and self-efficacy will increase BSE practice, otherwise the lower perceived barriers will increase BSE practice. While perceived severity and cues to action have no connection with the BSE practice.

**Keywords:** Breast Cancer, Health belief, Breast Self Examination.

<sup>1</sup>Undergraduate Nursing Student, Faculty of Medicine, Public Health and Nursing, Universitas Gadjah Mada

<sup>2</sup>Departemen of Medical Surgical Nursing, Faculty of Medicine, Public Health and Nursing, Universitas Gadjah Mada