

INTISARI

LATAR BELAKANG: Kanker payudara merupakan kanker yang paling sering diderita oleh wanita di dunia. SADARI (Periksa Payudara Sendiri) adalah salah satu metode deteksi dini kanker payudara. Angka deteksi dini kanker payudara di Kabupaten Sleman masih tergolong rendah. Deteksi dini dapat dilakukan sejak remaja. Pengetahuan remaja mengenai kanker payudara pada remaja masih tergolong rendah. *Health belief model* dapat digunakan untuk melihat ada tidaknya motivasi untuk melakukan deteksi dini. *Health belief model* dapat dipengaruhi oleh berbagai faktor yang dapat dimodifikasi salah satunya ialah pengetahuan.

Tujuan Penelitian: Mengetahui hubungan antara pengetahuan kanker payudara dengan *health belief* pada remaja wanita di Kabupaten Sleman.

Metode: Desain penelitian ini ialah kuantitatif dengan rancangan studi *cross-sectional*. Pengambilan sampel menggunakan Teknik *Stratified Random Sampling* dan Teknik *Simple Random Sampling*. Instrumen penelitian ini adalah Instrumen Pengetahuan Kanker Payudara dan *Indonesian version of Champion's Health Belief Model Scale* (CHBMS-I). Penelitian ini dilakukan di 4 SMA negeri dan 3 SMA swasta di Kabupaten Sleman, dengan jumlah responden sebanyak 394 wanita. Data dianalisis menggunakan Uji *Spearman Rank*.

Hasil: Remaja wanita di Kabupaten Sleman mayoritas memiliki pengetahuan tanda gejala kanker payudara dalam kategori tinggi (56%) dan pengetahuan faktor risiko kanker payudara dalam kategori tinggi (58,9%). Hasil uji hubungan menunjukkan bahwa terdapat hubungan antara pengetahuan tanda gejala kanker payudara dengan masing-masing domain *health belief* (kepercayaan kesehatan) adalah persepsi kerentanan ($r:0,132$; $p\text{-value}: 0,009$) dan persepsi manfaat ($r:0,137$; $p\text{-value}: 0,006$). Terdapat hubungan antara pengetahuan faktor risiko kanker payudara dengan masing-masing domain *health belief* sebagai berikut yaitu persepsi kerentanan ($r: 0,098$; $p\text{-value}: 0,052$), persepsi manfaat ($r:0,100$; $p\text{-value}: 0,048$), stimulus/isyarat bertindak ($r: 0,131$; $p\text{-value}: 0,009$), dan kesiapan/efikasi diri ($r:0,177$; $p\text{-value}: 0,000$). Namun pengetahuan tanda gejala kanker payudara tidak memiliki hubungan dengan domain-domain *health belief* berikut persepsi keparahan ($r:0,046$; $p\text{-value}: 0,367$), persepsi hambatan ($r:-0,038$; $p\text{-value}: 0,454$), stimulus/isyarat bertindak ($r:0,091$; $p\text{-value}: 0,070$), dan kesiapan/efikasi diri ($r:0,094$; $p\text{-value}: 0,062$). Pengetahuan faktor risiko kanker payudara tidak memiliki hubungan dengan domain-domain *health belief* berikut persepsi keparahan ($r:-0,001$; $p\text{-value}: 0,992$) dan persepsi hambatan ($r:-0,074$; $p\text{-value}: 0,141$).

Kesimpulan: Semakin tinggi pengetahuan tanda gejala kanker payudara semakin tinggi pula persepsi kerentanan dan persepsi manfaat. Semakin tinggi pengetahuan faktor risiko kanker payudara maka semakin tinggi pula persepsi kerentanan, persepsi manfaat, stimulus/isyarat untuk bertindak, dan kesiapan/efikasi diri.

Kata Kunci: Kanker Payudara, SADARI (Periksa Payudara Sendiri), Pengetahuan, *Health Belief Model*

ABSTRACT

BACKGROUND: Breast Cancer is the common cancer among woman globally. BSE (Breast Self Examination) one of the best tool for the prevention and diagnosis of breast cancer. The number of women who have early detection of breast cancer in Sleman Regency was low. BSE recommended for women since adolescent. Knowledge level of breast cancer amongst female adolescents is poor. Health belief model (HBM) can predict the motivation of person taking recommended preventive health action. There are several factors that can affect HBM.

AIM: To know the correlation between knowledge of breast cancer with health belief in female adolescents in Sleman Regency.

METHOD: This study was a quantitative research with cross-sectional design. Sample was taken by Simple Random Sampling followed by Stratified Random Sampling. Data were collected using Knowledge of Breast Cancer Questioner and Indonesian version of Champion's Health Belief Model Scale (CHBMS-I). This study was conducted among 394 female students in 4 public senior high school and 3 private high school. Data analysis was used coefficient correlation Spearman Rank.

RESULTS: The findings of this study indicated that female adolescent in Sleman Regency mostly had the highest score (56%) in knowledge about sign and symptom of breast cancer and also had a high score (58,9%) in knowledge about risk factors of breast cancer. This study showed that knowledge about sign and symptom of breast cancer has correlations with perceived susceptibility ($r:0,132$; $p\text{-value}: 0,009$) dan perceived benefit ($r:0,137$; $p\text{-value}: 0,006$). Knowledge has correlations with perceived susceptibility ($r: 0,098$; $p\text{-value}: 0,052$), perceived benefit ($r:0,100$; $p\text{-value}: 0,048$), cues to action ($r: 0,131$; $p\text{-value}: 0,009$), and self-efficacy ($r:0,177$; $p\text{-value}: 0,000$). Beside that knowledge about sign and symptom of breast cancer has no correlation with perceived severity ($r:0,046$; $p\text{-value}: 0,367$), perceived barriers ($r:-0,038$; $p\text{-value}: 0,454$), cues to action ($r:0,091$; $p\text{-value}: 0,070$), and self-efficacy ($r:0,094$; $p\text{-value}: 0,062$). Knowledge about risk factors of breast cancer has no correlation with perceived severity ($r:-0,001$; $p\text{-value}: 0,992$), perceived severity ($r:-0,074$; $p\text{-value}: 0,141$)

CONCLUSIONS: The high knowledge about sign and symptom of breast cancer can be followed by high perceived susceptibility and perceived benefit. The high knowledge about risk factors of breast cancer can be followed by high perceived susceptibility, perceived benefit, cues to action, and self-efficacy.

Key word: Breast Cancer, BSE (Breast Self Examination), Knowledge, Health Belief Model