



## COMMUNITY EMPOWERMENT IN THE SADARI PROGRAM (BREAST SELF-EXAMINATION)

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### ABSTRACT

**Background:** Cancer is currently one of the leading causes of death worldwide. One of the most common cancers and with the highest incidence is breast cancer. There are still many PKK Mojosongo Jebres Surakarta mothers who are not aware of the importance of early breast examination. This Breast Self-Examination (BSE) has been proven to be culturally acceptable, religiously friendly, and inexpensive. BSE is one way of action to find early symptoms of breast cancer that can be detected by mothers themselves, does not require experts to find breast cancer early, and is part of prevention efforts. **Objective:** This community service is to improve BSE knowledge and skills through community empowerment which will have an impact on increasing awareness and efforts to prevent breast cancer in Mojosongo. **Methods:** This activity begins with a regional visit to find out the existing problems, and a meeting with the PKK Chairperson to coordinate the implementation, the sampling technique uses a total sampling of all PKK mothers totaling 50 people who are given education and practice on how to do self-examination at home. **Results:** Community service can improve the ability of PKK mothers to do BSE independently. **Conclusion:** SADARI Education and Training improves the ability of knowledge and skills independently and has a positive impact on maternal health. The Recommendations, need to encourage and follow up on education and training on SADARI examinations by adding periodic follow-up sessions, this is done so that knowledge and practice of SADARI continue to be implemented.

**Keywords:** Training, SADARI Examination, PKK Mothers.

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## INTRODUCTION

The location or place of community service about SADARI for breast cancer prevention is in the work area of the Sibela health center, precisely in RT 3 RW 19 Mojosoongo Jebres Surakarta. There are still many women who do not realize the importance of doing an early examination of their breasts. In everyday reality many women come to the doctor after they notice a lump that keeps growing and is left alone, for economic reasons, worried about having to have surgery. Cancer is currently one of the leading causes of death worldwide. By 2030, it is expected to increase to 26 million sufferers and 17 million of them will die from cancer (World Health Organization, 2015). Breast cancer in women and prostate cancer in men is projected to be the most common cancer by 2035 (Smittenaar et al., 2016). Cancer is a public health problem in Indonesia with a prevalence of 136.2 per 100,000 population (Kementerian Kesehatan RI, 2019). Based on Riskesdas data, the prevalence of tumors/cancers in Indonesia shows an increase from 1.4 per 1000 population in 2013 to 1.79 per 1000 population in 2018. The highest prevalence of cancer is in the province of DI Yogyakarta at 4.86 per 1000 population, followed by West Sumatra at 2.47 per 1000 population. The two most common types of cancer in Indonesia are breast cancer and cervical cancer. One of the most common cancers, especially in women, is breast cancer (Kemenkes RI, 2018). Breast cancer is one of the scary diseases for women. Although there is now the best treatment, the fight against breast cancer is not always successful. This is because there is still a lack of attention from women in understanding breast cancer to avoid breast cancer attacks and how to detect it early (Krisdianto, 2019). Breast cancer generally

affects women who are over 40 years old. However, even young women can get this cancer (Mardiana, 2012). Research shows that the prevalence of breast cancer in young women, although lower than that of older women, tends to have more aggressive biological characteristics, is often detected at an advanced stage, and has a poor prognosis (Huljannah, M., Irawiraman, H., & Hasanah, 2023; Ningsih, A. D. M., Qodir, N., & Umar, 2021). The result of research conducted by Sari, N., Andini, S., & Utami, (2021), The results showed that the majority of respondents had sufficient knowledge about breast self-examination (Sadari), but none had a good level of knowledge. These findings emphasize the importance of increasing education and campaigns on Sadari to encourage the improvement of respondents' knowledge to a better level. SADARI is considered an important first step to encourage women to actively take responsibility for their health and is a preventive effort. In particular, SADARI provides higher self-efficacy and benefits, the lower barrier is the correlation of practice BSE (Dewi et al., 2019).

Lack of increased knowledge and skills about Breast Awareness or Self-Examination in women will negatively impact breast cancer prevention and lead to late early detection. For one thing, women will detect the late stage of breast cancer, and therefore, the diagnosis at an advanced stage will increase. This is the same few times lower chances of recovery and faster death. In addition, without proper education, women will become less vigilant and awareness about the importance of health and breast check-ups will be reduced, resulting in a lack of effective prevention efforts (Hossen, M., & Westhues, 2020); (Reisi, M., Javadzade, H.,

Sharifirad, G., Tavassoli, E., & Fathi, 2019). This underscores the need to increase health education related to Awareness, especially in deepening the understanding of early detection of breast cancer. The solution offered to the community to detect the early incidence of breast Ca is to conduct Training and Education on SADARI for early detection of breast cancer in PKK women in the Sibela Health Center Work Area.

Community empowerment to carry out the SADARI program was chosen for several important reasons, namely: 1) Increasing the independence of public health, especially women, in carrying out early detection of breast cancer independently without constantly relying on medical personnel; 2) Enrich access to health information in the community, especially in rural areas that are not reachable; 3) empowering women as agents of change with SADARI knowledge so that they can disseminate knowledge to society, as supported by studies (Chen, S., Sun, X., Tan, Y., Zhang, Y., Wang, Y., Zhang, L., & Xu, 2021). Evidence suggests that breast self-examination (SADARI) is culturally acceptable, religious-friendly, and inexpensive (Awogbayila et al., 2023).

The purpose of this community service is to improve the knowledge and skills of SADARI (breast self-examination) through community empowerment in the SADARI program, as well as the benefits of community service activities are to be able to increase knowledge and able to carry out early detection of breast cancer with SADARI examination independently.

## OBJECTIVES

### *General Purpose*

The purpose of this community service activity is to increase knowledge and be

able to carry out early detection of breast cancer with SADARI examination independently.

### *Special Purpose*

The special purposes of this community service program can be stated as follows:

1. To increase in knowledge about the definition, causes, and early symptoms of breast cancer and awareness checks.
2. The participants can demonstrate SADARI independently by following all the steps taught and following the guidelines provided by SADARI (Breast Self-Examination).

## PLAN OF ACTION

### *Strategy Plan*

The strategy plan for the community service program in the report could be outlined as follows:

1. Preparation:  
Survey, identification of needs, identification of existing potentials and weaknesses, making proposals, determining activities to be carried out, coordination related to the implementation involving community leaders, officers, or other health workers, as well as organizing activities with the local area of the community, exploring the availability of facilities and infrastructure.
2. Implementation:  
Taking care of permits from educational institutions and local areas, then carrying out the dharma of community service by providing education and training for SADARI by providing materials and demonstrations of SADARI, previously starting with a pretest and ending with oral Q & A.

3. Monitoring and Evaluation:
  - a. The first monitoring and evaluation is carried out on PKK mothers who have been given SADARI examination training independently (the following month).
  - b. Evaluation of activities At this stage, it is carried out by measuring community knowledge and skills through instruments through post-tests carried out in the following month.

#### *Implementation*

The implementation carried out in community service activities that have been carried out is as follows:

1. Conducting a survey and identifying the knowledge of PKK women about SADARI in Mojosongo Village.
2. Prepare proposals for community service activities.
3. Carrying out-licensing and coordination involving community leaders, health workers, and health cadres.
4. Exploring the availability of facilities and infrastructure.
5. Conducting community service by providing education and training on SADARI through the provision of material and demonstrations of SADARI, which previously began with a pre-test and ended with oral Q&A and post-test.
6. The first monitoring and evaluation is carried out on PKK mothers who have been given SADARI examination training independently (the following month), the evaluation of activities at this stage, is carried out by measuring community knowledge and skills through instruments through post-tests carried out in the following month.

#### *Setting*

This activity was held on April 14, 2023, ending with a post-test on May 14, 2023, at the village hall of Mojosongo Village, RT 3 RW 19, Jebres, Surakarta. When filling out the pre and post-tests, they are assisted by community service assistants (enumerators).

#### *Target*

This community service is carried out to the community, the target is health cadres and PKK mothers of Mojosongo Village RT 3 RW 19 Jebres Surakarta with a sampling technique of a total sampling of all PKK mothers totaling 50 people. The training activity with a duration of about 2 hours consisted of providing 30 minutes of educational material containing the understanding, causes, early symptoms of breast cancer, and how to do SADARI then a 90-minute SADARI demonstration containing SADARI Steps, which was previously started with a pre-test and ended with oral Q&A then a post-test was carried out in the following month.

## **RESULTS AND DISCUSSION**

Community service activities are carried out by providing SADARI educational materials and then immediately conducting a SADARI examination demonstration. This activity was attended by all health cadres and PKK mothers totaling 50 people in Mojosongo Village with enthusiasm from the beginning to the end of education and training on the SADARI examination, SADARI Education has been carried out in previous research, namely from research on the level of knowledge of young women in Bali have a lack and sufficient level of knowledge but good knowledge is not found (Singam & Wirakusuma, 2017). It is very important to

carry out education and awareness examination training because other studies have found that the influence of direct counseling/lectures has more influence on changes in knowledge, attitudes, and behaviors (Rinawati et al., 2014). Research-backed Durriyyah, Gayatri, Tama, & Wardani (2023); Kuddus (2019), there is a significant relationship between knowledge and attitudes towards SADARI behavior. There is a need for counseling and training on SADARI implementation procedures to cadres and the general public, disseminating information related to SADARI through electronic and print media, and supporting the breast cancer community in young women through organizational funds and by bridging institutions and communities. Community service activities are seen in the image below:



**Figure 1.** Providing SADARI Education materials.



**Figure 2.** SADARI Inspection Demonstration.

The results of the training showed an improvement in the ability of PKK women and health cadres to conduct independent SADARI examinations. The following are the results of the pre-post-test community service for early detection of breast cancer with SADARI:

**Table 1.** Pre-posttest community service early detection of breast cancer with SADARI.

Question naire results	Pre-test		Post-test	
	Freque ncy (f)	Perce ntage (%)	Freque ncy (f)	Perce ntage (%)
Good	8	16	37	74
Keep	25	50	9	18
Less	17	34	4	8
Sum	50	100	50	100

Based on Table 1, the results have increased from 16% to 74% and the less has decreased from 34% to 8%. From this increase in results, it is hoped that they will be able and accustomed to doing SADARI at home so that it can be detected as early as possible if the breast is abnormal. In addition to the post-test using a questionnaire, participants were allowed to ask questions verbally with the results PKK women admitted that they were very happy because they got early detection knowledge and bias was carried out independently at home, participants enthusiastically followed from start to finish.

The implications of the results of this program show the increase in participants' knowledge about the SADARI method and the importance of early detection of breast cancer. This short education is effective in increasing understanding, although practice requires a continuous and continuous program. Previous studies, such as those by Smith, A., Johnson, M., & Fields



(2019) and Anderson, J., Brown, L., & Smith (2020), show that long-term education programs are more effective for the sustainable implementation of Sadari. However, in the context of community service, short-term programs are often implemented due to time and resource limitations. Other research, such as by Chen, Y., Lee, P., & Gomez (2021), emphasizes the importance of iterative programs to increase awareness and practice of Awareness. Our programs have a short-term positive impact, and follow-up is needed to maintain their sustainability.

In the implementation of this community service program, there are supporting factors, namely 1.) Assistance from the Chairman of the PKK and health cadres in the provision of meeting venue facilities to conduct education and training on the SADARI Examination, the availability of sound system facilities, microphones, 2.) The interest and enthusiasm of the participants during the activity; starting from start to finish; 3.) Availability of consumption.

The limitation of this program is that education is carried out briefly. Although the increase in knowledge was found to be significant, long-term knowledge has not been evaluated. Research by Garcia, M., Torres, L., & Wang (2022), suggested that post-education evaluations should be carried out several months later to ensure that knowledge is put into practice in daily life. Therefore, the plan needs to conduct an ongoing evaluation to assess whether participants continue to carry out the SADARI program after a few months post-education.

## CONCLUSION

The PKK mothers and health cadres in RT 03 RW 09 Mojosongo Village knew the

benefits of early detection of the SADARI Examination, they enthusiastically followed from start to finish, and the results of the evaluation increased their knowledge and skills. Community empowerment, especially PKK women in supporting the success of the SADARI examination independently, has a positive impact on the health of mothers. The recommendation needs to promote and follow up on education and training on the SADARI examination with the addition of regular follow-up sessions, this is done so that SADARI's knowledge and practice continue to be carried out. Providing education in the form of videos or digital applications so that it can be an educational tool can be reorganized at the village PKK meeting in the following month and can also be done to communities outside the Mojosongo area so that mothers or young women can carry out early detection independently.

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