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THE IMPACT OF FOCUS GROUP DISCUSSION (FGD) AND VIDEO ON WOMEN ADULT KNOWLEDGE, ATTITUDES, AND PRACTICES (KAP) OF IVA EXAMINATION

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A B S T R A C T

Introduction: The most common types of cancer among women adults are cervical cancer that can be prevented by doing IVA practice. One of the factors contributing to the low practice of women performing early detection through IVA is lack of knowledge. Action should be made to improve information through health promotion using various learning education combinations with technology and conventional methods with Focus Group Discussion (FGD) and creative videos. **Objective:** To explore the impact of innovative health education on women's adult knowledge, attitudes, and practice of IVA test examinations. **Method:** This research uses a quantitative quasi-experimental with a group pre-test and post-test design and divided into two intervention groups. Convenience sampling method was approached during two months of data collection from August-September 2023. A structured instrument was used to measure knowledge, attitudes, and practice (KAP). **Result:** The pre-test showed average knowledge value before the intervention was 1.95 and attitude was 0.45 and after the intervention, it was 9.80 and attitude 0.95, respectively. The statistical result showed a significant difference with a value of 0.000 (<0.05). The practice of IVA test before was 5% and after the intervention was 90%. The FGD and video educational methods influence knowledge, attitudes, and practice of IVA tests. **Conclusion:** The FGD and video educational methods influence knowledge, attitudes, and practice of IVA tests. There is a need to develop other educational methods combination between FGD and video to increase IVA test information therefore it will influence women adult interest in carrying out IVA tests as an effort to detect cervical cancer early.

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1. INTRODUCTION

The total of women with cervical cancer worldwide is an estimated 604,000 new cases in 2020. Of the estimated 342,000 deaths due to cervical cancer in 2020, around 90% of them occurred in low and middle income countries (Pratiwi, D. I., Kusumastuti, I., & Munawaroh, M. 2023). Women living with HIV are six times more likely to develop cervical cancer compared to women without HIV, and it is estimated that 5% of all cases of cervical cancer are caused by HIV (Stelzle et al., 2021).

The high death rate from cervical cancer worldwide can be reduced with effective interventions at different stages of life. The high incidence and death rates in cancer cases are influenced by several factors include age, parity, education, use of hormonal birth control, smoking, hygiene, physical activity, place of residence, and hereditary history. Most of these factors are risk factors that can be modified, so that prevention efforts can be carried out (Setianingsih, E., Astuti, Y., & Aisyaroh, N. (2022).

The IVA test is one of the examination methods used to detect the presence of cancer cells early, very easily and practically, and the results can be seen immediately. The cervical cancer detection program through Visual Inspection with Acetic Acid (IVA) has been implemented in all community health centers in Indonesia since 2010 and targets 10% of adult women each year (Benita, I. S., Mardiah, S. S., & Nurvita, N. (2020). However, action should be made to increase awareness since the low IVA test practice.

The IVA achievement in Indonesia was only 16.3% and can caused by poor knowledge, lack of support from husbands and lack of role of health workers (Wantini, N. A., & Indrayani, N. 2019). There is a relationship between social support from health workers and awareness of women of childbearing age in early detection of cervical cancer using the IVA method (Wigati, A., Nisak, A. Z., & Astuti, D. (2023).

Health education is effective in increasing women's behavior in carrying out VIA examinations. With conventional approach and technology will significant to improve knowledge, attitude and practice in several articles. The low interest of adult women in carrying out IVA tests requires education that can increase interest so that they have behavior in conducting IVA tests (Silalahi, V., Lismidiati, W., Hakimi, M., Keperawatan, B. I., Kedokteran, F., Obstetri, B., & Kedokteran, F. (2018).

Knowledge about the IVA method as an early detection of cervical cancer is important so that someone has the will and awareness to carry out an IVA test. Women's low knowledge about VIA examinations results in them not knowing about the benefits of early detection of cervical cancer, this has an impact on the low level of decision making to undergo VIA examinations. This lack of knowledge can be carried out in promotional efforts with educational methods that suit needs, so that the goals of health education can be achieved. From the description above, researchers want to explore the impact of innovative health education on women adult KAP of IVA examination.

2. METHODS

Research Design

The study is a prospective research using aquasi-experimental approach with one group pre-test and post-test design.

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Population and Sample

Convenience sampling was applied in this study. This study was conducted in one of the community health centers in Indonesia during in December 2023. The population in the study was women of childbearing age. A total of 40 respondents agreed to participate in this study.

Instruments

This research used instruments developed by Rosyda, R. (2018) with a total of 24 knowledge IVA questions and 9 attitude questions. The Guttman scale applied with a 1 or 0 score was given. Based on previous research Cronbach α for knowledge was 0.73 and attitude was 0.78 indicating the good reliability

Research Procedure

A total of 40 respondents were divided into two groups and intervention was delivered among thosegroups either FGD or videos in once a week for two week. Respondents randomly assigned in FGD (5-10 people) or video group intervention. The intervention of FGD deliver for 30-60 minutes and video for 15 minutes. Both groups were treated the same, namely given a pre-test and post-test intervention to measure knowledge and attitudes, while for practice observations were carried out according to the IVA test schedule. Informed consent was given to each respondent to complete.

Data Analysis

The normality test is carried out using the Kolomogrov-Smirnov test and the results indicatea normality value ≤ 2, so it can be concluded that the data used is data with anormal distribution, therefore data was analyzed using a parametric test.

Ethical Clearance

This research gained ethical permission from the Ethic Committee- University of Muhammadiyah Jakarta Number 1574/F.9-UMJ/XI/2023 at November 9th, 2023 and concluded that no human right violation or harms to respondents should be take into consideration from this study.

3. RESULT

Table 1. Demographic Characteristics Respondents (n=40)

Variables	FGD n (%)	Video n (%)
Early Age	3 (15)	1 (50)
Late Age	17 (85)	19 (95)
Low Education	16 (80)	20 (100)
High Education	4 (20)	0
Work	3 (15)	3 (15)
Unemployment	17 (85)	17 (85)
Muslim	20 (100)	18 (90)
Another religion	0	2 (10)

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Based on table 1, it is known that the majority of research subjects' age characteristics were in late adulthood (85%) for the FGD group and video group (95%), the characteristics of the education level of the majority were low in the FGD group (80%) and video group. (100%), the job characteristics of the majority are not working in the FGD group (85%) and the video group (85%).

Table 2. The Total of KAP Among Respondents

Variables		FGD		Video	
		Pre (%)	Post (%)	Pre (%)	Post (%)
Knowledge	Good	10	80	5	40
	Moderate	75	20	30	35
	Poor	15	0	65	25
Attitude	Good	45	90	35	85
	Poor	55	10	65	15
Practice	Yes	5	90	5	85
	No	95	10	95	15

Based on table 2, the majority of knowledge characteristics before the intervention were in the moderate category for the FGD group (75%) and in the poor category for the video group (65%), the majority of attitude characteristics before the intervention were poor for the FGD group (55%). %) and video group (65%), and the characteristics of the practice before intervention, 5% did and 95% did not carry out an IVA test, either FGD or video.

Table 3. The Knowledge and Attitude Pre and Post Intervention after FGD

Variables		%	Mean	*p-value*
Knowledge Pre	Good	5	1.40	0.00*
	Moderate	30		
	Poor	65		
Knowledge Post	Good	40	8.85	
	Moderate	35		
Attitude Pre	Good	35	0.35	0.00*
	Poor	65		
Attitude Post	Good	75	0.75	
	Poor	15		

Table 4. The Knowledge and Attitude Pre and Post after Video Intervention

Variables		%	Mean	*p-value*
Knowledge Pre	Good	10	1.95	0.00*
	Moderate	75		
	Poor	15		
Knowledge Post	Good	80	9.80	
	Moderate	20		
Attitude Pre	Good	10	0.45	0.00*
	Poor	90		
Attitude Post	Good	90	0.90	
	Poor	10		

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Table 5. Practice of IVA among FGD and Video

Practice		FGD n(%)	Video n(%)	*p-value*
Pre	Yes	1 (5)	1 (5)	1.00
	No	19 (95)	19 (95)	
Post	Yes	18 (90)	17 (85)	1.00
	No	2 (10)	3 (15)	

Table 6. The Effect of FGD toward KAP

Source	Measurement	Mean	Sig	Partial Eta Square
Knowledge- Practice of IVA test	Pre - Post 1	8.30	0.00	0.95
	Pre - Post 2	8.90	0.00	0.98
	Pre - Post 3	9.80	0.00	0.99
Attitude- Practice of IVA test	Pre - Post 1	8.20	0.00	0.96
	Pre - Post 2	8.55	0.00	0.97
	Pre - Post 3	8.80	0.00	0.96
Practice- Examination of IVA test	Pre - Post 1	1.00	0.00	1.00
	Pre - Post 2	1.00	0.00	1.00
	Pre - Post 3	1.90	0.00	0.98

Table 7. The Effect of Video toward KAP

Source	Measurement	Mean	Sig	Partial Eta Square
Knowledge- Practice of IVA test	Pre - Post 1	7.85	0.00	0.92
	Pre - Post 2	8.50	0.00	0.96
	Pre - Post 3	8.85	0.00	0.99
Attitude- Practice of IVA test	Pre - Post 1	8.20	0.00	0.98
	Pre - Post 2	8.45	0.00	0.98
	Pre - Post 3	8.55	0.00	0.98
Practice- Examination of IVA test	Pre - Post 1	1.00	0.00	1.00
	Pre - Post 2	1.00	0.00	1.00
	Pre - Post 3	1.85	0.00	0.96

From table 3,4,5 there was a change from moderate knowledge to good and statistically significant ($p< 0.005$) and also in attitude and practice In Table 6 & 7 from Multivariate analysis in this study used General Linear Model Repeated Measure (GLM-RM) it is known that the effectiveness of the FGD and video group measurements for knowledge, attitudes and practices regarding the IVA test showed that the Partial Eta Square value increased from the first week to the third week so it can be concluded that the FGD method is more effective in increasing knowledge, attitudes and practices regarding the IVA test.

4. DISCUSSION

Demographic Characteristics

In this study, the majority age characteristic was women in adulthood phase. The results of this study are in line with research by Riawati (2019) which stated that there is a significant relationship between age and early detection of cervical cancer using the IVA method. Women in late adulthood gained understanding and experience of a healthy lifestyle therefore it will be easier to accept the information provided and it will be appropriate to take action to behave.

The educational methods, both FGD and video, in this research are appropriate methods for increasing knowledge, attitudes and practice of IVA tests in the group of women of childbearing age . In this study, the educational characteristic of the majority is low education which can influence in making an inappropriate decision

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to do IVA test. In this study, the majority of respondents unemployee, so it would be easier to carry out interventions once a week according to service facilities. Family income and the availability of time enable women to visit health services for cancer detection enable women.Wwomen with higher incomes tend to engage in better health behaviors. In this research, it can be seen that there has been an increase in knowledge, attitudes and practice of IVA testing in the group of women to find out earlier the occurrence of cervical cancer.

Difference Intervention FGD and Videos

Increased knowledge also occurred in the FGD and video groups where education was provided with the same frequency, namely once a week. Subjects' knowledge and attitudes increased significantly after the intervention in both the FGD and video groups. In this study, knowledge and attitudes also showed a positive correlation. This finding is in line with the findings that show colleagues who confirmed that the higher an individual's level of knowledge, the individual tends to show better attitudes (Kietpeerakool, C., Phianmongkhol, Y., Jitvatcharanun, K., Siriratwatakul, U., & Srisomboon, J. 2009).

As explained above, in this study it was found that there was a significant influence between the FGD educational method and the video method on knowledge, attitudes and practices regarding the IVA test before and after the educational intervention. One important factor that can determine the level of health literacy is the level of education. Individuals with higher levels of education demonstrate higher health literacy (Van Der Heide, I., Wang, J., Droomers, M., Spreeuwenberg, P., Rademakers, J., & Uiters, E. (2013).

Video with audio-visual learning media enable women to acquire knowledge, skills or attitudes that are used to help achieve learning goals (Hayati, N., & Harianto, F. (2017) This research show that the conditions that can enable students to acquire knowledge, skills, or attitudes that are used to help achieve learning goals (Sinaga, S. P, 2020).

The intervention in this study used FGD or video educational methods. This FGD method is an effort to use group interaction to produce data and participants are active so they have the opportunity to discuss their opinions and share experiences with other participants (Evaharnilawati, E., Fetriyah, U. H., & Asmadiannor, A., 2023). This theory is consistent with the success of health education being influenced by several factors, one of which is communication methods in health education. Brochures and videos were used as media in this research. This means that respondents remember 60% of the information provided. Before and after measurement, the average knowledge increased significantly. This is because respondents received the intervention again and were able to remember and assimilate the information. (Falakh, I., Ningrum, W. A., Muthoharoh, A., & Permadi, Y. W., 2021).

The FGD method is more effective in increasing knowledge and attitudes related to reproductive health compared to the lecture method. (Maya, S., et.al., 2023). In this research, the application of education using FGD will be easier to understand, because this method is followed by 5-10 people so it will be easier to receive information. This FGD method begins by exploring the participants' knowledge and continues to share correct perceptions about cervical cancer and the importance of the IVA .

Attitudes with increased knowledge using the FGD method in research have a significant effect on decision making to carry out an IVA test, FGD is more effective than video because with the FGD method the instructor directly interacts with the target group so that he will get accurate information and will provide the right solution in taking action These findings are in line with previous research (Nugrahini, E. Y., & Maharrani, T. 2019). Hhealth education using lecture and FGD methods was able to increase knowledge of women of childbearing age about family planning, but for changing attitudes, the FGD method was more effective. (Adifta, M. B., 2016).

The right educational method surely will enhance person's knowledge and attitudes will increase and will provide a reaction to make the right decision. FGD is an educational method by digging up information and providing suggestions and sharing with a smaller number of members. This is the right method for the target group of adults because adulthood is an age where it is easy to receive information. Meanwhile, video is an educational method that uses audio-visuals and is appropriate for all target groups.

5. CONCLUSION

It is hoped that people who have received information about the IVA test through this research can contribute to conveying appropriate information about the importance of early detection of cervical cancer through the IVA test and can play an active role in providing motivation to women who have not yet had the IVA test. Researchers hope

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that this research will become a reference in carrying out similar research and that other educational methods can be carried out to increase knowledge and attitudes to influence groups of women of childbearing age to carry out early detection of cervical cancer through the IVA test.

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