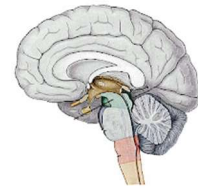


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Empowering Gen Z : Assessing Adolescent Knowledge Of Breast Self-Examination (BSE) Through Bloom's Taxonomy In Support Of SDG'S

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ABSTRACT

The Sustainable Development Goals in the third target aim to ensure healthy lives and promote prosperity for all people at all ages by 2030 (WHO, 2016). Within this target there are efforts to reduce the incidence of death due to non-communicable diseases, including breast cancer. The incidence of breast cancer increases with age. However, young age is also not a guarantee of being safe from breast cancer. Adolescents, as the largest age group in Indonesia's population structure, can be the focus of attention and a point of intervention for human resource development, especially for the prevention of cancer. Early detection through BSE is carried out from adolescence with increased awareness and is believed to reduce the number of deaths due to breast cancer (Pulungan, 2022). This study aims to determine the knowledge and behavior of young women in carrying out early detection of breast cancer by self-examination of the breast (BSE). The population in this study were 30 female students and the variables measured were the knowledge and behavior. The results were that 56.7% of respondents had sufficient knowledge about BSE Examinations and 66.7% of respondents' behavior regarding BSE Examinations was in the Sufficient category. The conclusion was that there was a significant increase in respondents' BSE skills after receiving education using video media and teaching aids. By providing counseling and direct breast self-examination to respondents, it is hoped that respondents can increase their knowledge and skills in practicing BSE actions in daily life.

INTRODUCTION

Breast cancer, also called *ca mammae*, is uncontrolled growth of breast cells due to abnormal changes in genes that play a role in cell division. 2 Breast cancer is still a problem today because it is the type of cancer with the highest incidence rate in Indonesia. The incidence of breast cancer increases with increasing age. However, young age is also not a guarantee of safety from breast cancer (KPKN, 2015).

The Sustainable Development Goals (SDGs) in the third target aim to ensure healthy lives and promote prosperity for all people at all ages by 2030 (WHO, 2016). Within this target there are efforts to reduce the incidence of death due to non-communicable diseases, including breast cancer. Therefore, a healthy paradigm that prioritizes promotive and preventive concepts in health services is a priority SDGs target in Indonesia.

The promotive and preventive concept implemented by the government in cases of non-communicable diseases, especially breast cancer, is to carry out early detection of breast cancer through Breast Self-Examination (BSE). We can prevent cancer and if it is caught early there is a possibility of getting better treatment. Therefore, to increase awareness in recognizing the symptoms and risks of breast

cancer, appropriate prevention and early detection can be carried out through Breast Self-Examination (BSE) (Ministry of Health of the Republic of Indonesia, 2019).

BSE is an examination carried out by women to look for lumps or other abnormalities in the breasts in an upright position facing the mirror and lying down, observing and touching the breasts systematically. It is very important to recommend BSE to the public because almost 86% of breast lumps are discovered by sufferers themselves (Ministry of Health of the Republic of Indonesia, 2019).

Early detection is a very important first step to find out early the presence of tumors or lumps in the breast so that it can reduce the death rate due to cancer. The advantage of early detection is to increase the chances of life expectancy in women with breast cancer. Apart from that, BSE is the easiest, fastest, cheapest and simplest method that can detect breast cancer early (Sakti, 2023).

The incidence of breast cancer increases with age. However, young age is also not a guarantee of being safe from breast cancer. Adolescents, as the largest age group in Indonesia's population structure, can be the focus of attention and a point of intervention for human resource development, especially for the prevention of cancer. Early detection through BSE is carried out from adolescence with increased awareness and is believed to reduce the number of deaths due to breast cancer (Pulungan, 2022).

In line with research by Riski (2022) which stated that there was a significant difference between the average scores before and after being given health education about breast cancer. So it can be concluded that there was a significant increase in respondents' BSE skills after receiving peer education using video media and teaching aids. The influence of peer education on adolescent girls' BSE practice skills. Peer adolescent educators are considered to have more influence on BSE abilities than teachers. Active learning methods provided by adolescent peer educators can improve adolescents' BSE abilities (Riski, 2022).

Breast examination itself is an effort to detect breast cancer early. Prevention to detect whether there is breast cancer or not is better than treating it when breast cancer is at an advanced stage and becomes more difficult to handle. BSE is the second preventive method used for early detection of breast cancer besides mammography and clinical examination. BSE is a breast cancer detection method proposed by the American Cancer Society (ACS) and is recommended to be done alone when you reach the age of 20, and does not require any costs (Setyawan, 2019).

METHODS

This research design uses a descriptive method, which is a research method used to describe phenomena (including health) that occur in a certain population. Researchers examined the description of adolescent girls' behavior regarding breast self-examination.

The population in this study were all female students who were active in universities in the Blimbing District, Malang City. The number of samples that would be used as respondents in this study was 30 respondents. The sampling technique is purposive sampling where the sample is taken with certain considerations.

The variables measured in this research are respondent competencies including knowledge, attitudes and skills. The knowledge measured is knowledge about definitions, signs and symptoms, prevention methods, early detection by breast self-examination (BSE). The behavior measured is the respondent's attitude in carrying out early detection to prevent breast cancer. The skills measured are the respondent's

skills in carrying out early detection through breast self-examination (BSE). Measuring tools using questionnaires, observation sheets and BSE checklists.

RESULTS AND DISCUSSION

Based on the research that has been carried out, the general data results obtained for respondents based on age are described with the following characteristics:

Table 1 Frequency distribution of characteristics by age

Age	Frequency	Percentage (%)
Age 21 - 23 th	18	60,0%
Age >=24 th	12	40,0%
Total	30	100,0%

Based on table 1 above, it can be seen that most of the 18 female respondents (60%) at STIKes Kendedes Malang were aged 21 - 23 years.

Table 2 Frequency Distribution Based on Knowledge

Knowledge	Frequency	Percentage (%)
Good	8	26,7%
Enough	17	56,7%
Not enough	5	16,7%
Total	30	100,0%

Based on table 2 above in this study, it can be seen that the majority of 17 (56.7%) female adolescent respondents at STIKes Kendedes Malang had sufficient knowledge about breast self-examination (BSE).

Table 3 Frequency Distribution Based on Behavior

Behavior	Frequency	Percentage (%)
Good	6	20,0%
Enough	20	66,7%
Not enough	4	13,3%
Total	30	100,0%

Based on table 3 above, it can be seen that the majority, namely 20 people (66.7%) of female adolescent respondents at STIKes Kendedes Malang, have behavior in the sufficient category regarding breast self-examination (BSE).

Knowledge is the result of knowing and this occurs after a person has sensed a particular object, without knowledge a person has no basis for making decisions and determining actions regarding the problems faced (Notoatmodjo, 2012). Knowledge is also the result of information from someone to other people who do not know and become knowledgeable to shape the behavior of a person or group, for example through health education. The peer group method has higher effectiveness than other methods in health promotion. Peer groups are also useful for various experiences, mutual support, building awareness and new ideas. According to research by Imron (2012), teenagers are happier, more comfortable and open discussing problems related to their reproductive health with their peers. Peers tend to have more influence than family on teenagers' knowledge and actions. Thus, the correct information about early detection of

breast cancer through BSE comes from teenagers, is transferred or campaigned by teenagers and for teenagers.

A person's level of knowledge is greatly influenced by internal and external factors. According to Notoatmodjo (2010) in his book entitled *Health Promotion*, he said that education is very closely related to knowledge, where it is hoped that someone with higher education will have broader knowledge, but it needs to be emphasized that someone with low education does not mean absolutely low knowledge. Increased knowledge is not absolutely obtained in formal education but can also be obtained in non-formal education. Internal factors that can influence a person's knowledge include age, education and length of work.

Most of the research respondents' knowledge was sufficient regarding breast self-examination (BSE). This can be caused by several factors, including environmental factors, information factors received by young women in getting information about BSE from the internet, magazines, brochures. Respondents as students were considered very appropriate and very easy to find and obtain the information needed to support knowledge, including knowledge about BSE.

This proves that knowledge is the result that occurs after someone observes a certain object/stimulus. It is stated that knowledge is the result of "knowing" and this occurs after people sense a particular object. Sensing of objects occurs through the five human senses, namely sight, hearing, smell, taste and touch. The time from sensing to producing knowledge is greatly influenced by the intensity of perceptual attention to the object. Most human knowledge is obtained through the eyes and ears (Notoatmodjo, 2013).

Most of the female adolescent respondents had the behavior of carrying out breast self-examination in the sufficient category. This means that the behavior of young women who support giving a positive response to early detection through breast self-examination. The material used can respond to an object, concept or situation in a supportive manner that can reduce cases of breast cancer. Good knowledge will influence behavior with an attitude towards carrying out breast self-examination (BSE). This is in accordance with research conducted by Purba (2020).

Behavior can be interpreted as a process of changing previous behavioral actions to new behavior. This process requires a relatively long time. This behavior is influenced by knowledge and attitudes. Before someone adopts a behavior (new behavior) a person must know what the meaning, purpose and benefits are for themselves. Behavioral changes that are based on knowledge and awareness will last longer than behavioral changes that are not based on knowledge and awareness. Meanwhile, attitude is a syndrome or collection of symptoms in response to a stimulus or object so that attitude becomes behavior or action, (Sakti et al., 2023).

Several factors influence an individual's attitude, firstly personal experience. Experiences followed by emotional feelings will more easily shape an individual's attitude. Second, the influence of people closest to you who are considered to have an important influence tends to create attitudes in the same direction in order to avoid conflict. Third, mass media influences individual attitudes in responding to an object. Individuals who are often exposed to negative content will tend to do negative things, whereas individuals who often access positive things will have a positive attitude. Fourth, educational institutions and religious institutions are institutions that are expected to be able to direct a person's attitude in a positive direction. Fifth, emotional factors determine someone's behavior as a form of frustration or as a form of defense against the ego (Azwar, 2013).

Based on research conducted by T. M. Sari (2013) in Karanganyar, it is stated that there is a significant relationship between attitudes and behavior for early detection of breast cancer in women. And

Rinawati Eka (2017) stated that there was an influence of providing information on changes in knowledge and attitudes towards BSE behavior. The attitude of young women about breast cancer and BSE is poor because young women say that breast cancer is nothing to be afraid of and BSE cannot prevent breast cancer (Y. P. Sari, Lubis, & Syahrial, 2014).

The women's attitude supports breast cancer prevention after receiving health information, the women's attitude changes to a supportive attitude and is willing to take action to prevent breast cancer with BSE. The information received influences and/or invites individuals, groups or communities to implement healthy behavior. (Notoatmodjo, 2018). By providing counseling and direct breast self-examination (BSE) to respondents, it is hoped that respondents can increase their knowledge and skills in practicing BSE in everyday life and can teach other friends.

CONCLUSIONS AND RECOMMENDATIONS

Based on the research, it can be concluded that there was a significant increase in respondents' BSE skills after receiving education using video media and teaching aids. By providing counseling and direct breast self-examination (BSE) to respondents, it is hoped that respondents can increase their knowledge and skills in practicing BSE in everyday life and can teach other friends.

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