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Health Promotion Management in the Context of Breast Cancer Prevention Using the SADARI and CERDIK Methods at Al Ihsan Regional General Hospital, West Java Province

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Abstract

This study aims to determine the systematics of Health Promotion Management in Hospitals on the effectiveness of the performance of Hospital Health Promotion Services. By conducting studies, planning, implementation and evaluation as well as monitoring to measure the success of PKRS activities in accordance with the rules of the Regulation of the Minister of Health of the Republic of Indonesia Number 44 of 2018 concerning the Implementation of Hospital Health Promotion (PKRS). The research method used is Qualitative Descriptive with the data collection used is making questionnaires, and observations because they have close relevance to the problem. The results after collecting 20 respondents using the Pre Test revealed that the average score was 5.6 out of 100, which can be concluded that the knowledge of the hospital community is still minimal about the awareness of maintaining health with the Cerdik method and early examination of SADARI. After counseling and counseling activities with the same 20 respondents, it was seen that the increase in the number of community knowledge with an average score of 8.7 out of 100 was seen. The findings of this study show that the hospital health promotion management system has an impact on the effectiveness of educational services at Al Ihsan Hospital, West Java Province.

Keywords: *Management, health promotion, PKRS management*

1. Introduction

Al Ihsan Regional General Hospital is one of the Type-B Regional General Hospitals located on Jl. Ki Astramanggala – Baleendah Bandung Regency. Al Ihsan Hospital was established on December 28, 1998, initially this hospital was a private hospital called RSI Al Ihsan. Then based on a meeting between the management of Al Ihsan Hospital and the Regional Assistant (Asda) of West Java Province Midwives Administration, it was decided that the management of the hospital would be transferred to the West Java Provincial Government (1).

Based on the Regulation of the Minister of Health of the Republic of Indonesia Number 44 of 2018 concerning the Implementation of Hospital Health Promotion, it is considered that to ensure the fulfillment of everyone's right to obtain information and education about health, especially in hospitals, as well as to ensure the implementation of health services in hospitals in an optimal, effective, efficient, integrated and sustainable manner (2).

Considering the Regulation of the Minister of Health No. 74 of 2015 concerning Efforts to Improve Health and Prevent Diseases (State Gazette of the Republic of Indonesia No. 1755 of 2015); Stipulating the Regulation of the Minister of Health on the Implementation of Hospital Health Promotion to carry out health promotion oriented to patients, patients' families, hospital human resources, hospital visitors, and the community around the hospital in order to prioritize security and safety with the principle of coordination, integrative through inter-professional and interprofessional

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cooperation to improve the competence of PKRS personnel, as well as carry out technical guidance on Health Promotion at sources in community in the context of sustainable health promotion (3).

Based on the results of the assessment of health needs for hospital visitors and the community around the hospital environment by taking data from the top 5 diseases of Al Ihsan Hospital, including; (a) CAD with 17,208 visitors, (b) Pulmonary Tuberculosis with 13,837 visitors, (c) Lumbal Radiculopaty with 12,436 visitors, (d) CA Mamae with 9,637 visitors, (e) Congestive Heart Failure with 7,743 visitors (4).

The prevalence of non-communicable diseases in Indonesia is increasing, including cancer. Based on the above data, CA Mamae is located in the 4th position of the top 5 diseases at Al Ihsan Hospital. CA Mamae or Breast Cancer is a disease in which abnormal breast cells grow out of control and form tumors. Breast cancer is the highest cause of cancer death in women in Indonesia (5). This is because breast cancer patients go to health services when breast cancer is advanced. The prevalence of non-communicable diseases in Indonesia is increasing, including cancer. Based on the above data, CA Mamae is located in the 4th position of the top 5 diseases at Al Ihsan Hospital. CA Mamae or Breast Cancer is a disease in which abnormal breast cells grow out of control and form tumors. Breast cancer is the highest cause of cancer death in women in Indonesia. This is because breast cancer patients go to health services when breast cancer is advanced (6).

According to Globocan (2020) data, the number of breast cancer cases reached 68,858 or 16.6% of the total 396,914 cancer cases in Indonesia. Meanwhile, according to WHO, it is estimated to reach 20 million cases with 9.7 million deaths based on a survey in 115 countries in 2024. Based on the results of observations and secondary data obtained from the medical record installation about the top 10 diseases in the inpatient and outpatient of Al Ihsan Hospital, it can be identified that CA Mamae or Breast Cancer has 9,637 visitors (7).

In the context of reviewing, planning, implementing health promotion and also monitoring and evaluating breast cancer, PKRS has an important role in developing behavioral change communication strategies in increasing awareness, willingness and ability in breast cancer prevention efforts (8).

2. Methods

The research methodology used explains the approach used, the data used, the data collection and data analysis process, as well as the location and time of the research (9). The author uses a descriptive approach with a qualitative approach for the study at the Al Ihsan Regional General Hospital, West Java Province (10). This study uses secondary data. The data collection techniques used in this study are interviews, questionnaires (Pre Tets and Post Test), monitoring and evaluation. In the study at the Al Ihsan Regional General Hospital, West Java Province, there were 20 respondents, namely hospital visitors and patients. This research was carried out during field work practice from April 22, 2024 to June 11, 2024 from 07.30 to 16.00 WIB following the working hours of Al Ihsan Regional General Hospital, West Java Province (11).

3. Result and Discussion

Based on the results of the assessment of breast cancer cases that are increasing due to ignorance and indifference of patients and hospital visitors to early detection of SADARI and CERDIK behavior, Pre Tets has been carried out which shows that the average value of patient and hospital visitor knowledge is 56 out of 100 (12). The PKRS installation plans health promotion to cut down the ignorance and indifference of the community and hospital visitors with the aim of counseling (13). The first step taken is to determine the objectives of the material to be delivered based on the behavior of hospital visitors, after that determine the media that will be carried out to help deliver information and education, then determine the evaluation plan which includes the time and theme of the implementation of the evaluation, and finally determine the implementation schedule, implementation time, person in charge of implementation and the costs needed (14).

Health promotion was carried out on June 11, 2024 as determined at the time of planning, this counseling activity was carried out in the midwifery room of Al Ihsan Hospital, 20 respondents were gathered who after conducting counseling continued with monitoring activities (15). The author and the PKRS installation conducted interviews with hospital visitors who attended and conducted counseling so that the discussion was conveyed optimally and hospital visitors understood what was conveyed (16).

In order for this monitoring activity to run optimally and continuously, the PKRS installation also conducts regular meeting activities (monthly, quarterly, semi-monthly, and yearly) to discuss the implementation of PKRS (17).

After this monitoring activity was carried out, the author and the PKRS installation conducted intervention measurements to calculate the success rate of PKRS activities using the N-gain method. By calculating the difference between the Pre test and Post test scores to find out whether the use or application of a certain method can be said to be effective or not (18).

Table 1. The following are the categories of interpretation of N-gain effectiveness

Percentage	Interpretation
> 0.7	Effective
< 0.7	Less Effective
< 0.3	Ineffective

The following are the results of the Pre Test and Post Test interventions of 10 out of 20 respondents using the N-gain method in measuring the effectiveness of Extension activities:

Table 2. N Gain Score based on Pre Test and Post Test

NO.	Name	Score		N Gain
		Pre test	Post Test	
1.	Tini	50	80	0.6
2.	Kiranti	50	80	0.6
3.	Yanti	70	90	0.666667
4.	Nanin Aisyah	60	100	1
5.	Kokom Komilah	70	100	1
6.	Sari	90	100	1
7.	Eda Wini Kaka	40	70	0.5
8.	Nita Febiyanti	50	80	0.6
9.	Siti Ropiah	30	80	0.714286
10.	Nurmala	50	90	0.8
	Average Score	**56**	**87**	**0.748095**

Based on the results of measuring the effectiveness of an extension activity, the average score of the Pre test and Post test using the N-gain method is 0.748095 which has been attached to table if there is a value above 0.7 included in the effective category.

Conclusion

The internship activities carried out by the author in coordination with the PKRS installation of Al Ihsan Hospital, the author was able to plan and be involved in the implementation of PKRS activities in the context of breast cancer prevention with smart behavior and early detection of SADARI (19). And the author is also involved in monitoring and evaluation intervention activities of community knowledge in the form of Pre Test and Post Test which after calculating the counseling activities carried out by the author and the PKRS installation are included in the effective category with a calculation

using the N-gain method which shows a result of 0.748095 which has been attached in the interpretation category table that values above 0.7 are included in the Effective category (20).

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