

REASONS WHY MARRIED WOMEN DO NOT PAP SMEAR: A STUDY OF FEMALE TEACHERS AT STATE JUNIOR HIGH SCHOOL 20, NORTH PONTIANAK, WEST KALIMANTAN

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Abstract

Background: *Pap smear is an early detection of cervical cancer caused by the HPV virus with more accuracy. The cause of the high incidence of cervical cancer is due to the level of awareness of women who do not want to do a Pap smear.*

Objective: *To understand the various factors that influence the decision of married women who do not Pap smear at SMPN 20 Pontianak Utara, West Kalimantan.*

Method: *This study is qualitative with a case study approach. This method was chosen to focus attention on a case intensively and in detail, namely 5 informants who are married but do not do a Pap smear.*

Results: *Some of the reasons why married women never do a Pap smear are trauma from their past, fear of the examination, feeling healthy and not feeling the need to do the examination, not being familiar with the examination process, fear and shame, no support or invitation from the environment to do the examination, expensive costs, feeling ashamed and afraid especially if the examiner is a male doctor, lack of knowledge about the Pap smear procedure, not knowing the examination process, location, and costs required.*

Conclusion: *Pap smear examination for married women is a must for personal health. Pap Smear examination requires support from close relatives, the daily residential environment and workplace, especially among married women.*

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1. Introduction

Approximately 99.7% of oncogenic Human papillomavirus or HPV causes cervical cancer or cervical cancer. Cervical cancer is an urgent health problem for women around the world (Kurniasih et al., 2023). Even WHO (World Health Organization) data notes that every eleven minutes one world resident dies from cervical cancer in developing countries. Meanwhile, in Indonesia, according to a summary of the Indonesian Pathology Center, of the 10 most common types of cancer in Indonesia, cervical cancer is the highest. This fact proves that women are the group most at risk of cancer compared to men (Rasima, 2016).

If we look at the general view, namely The International for Research on Cancer (IARC) estimates that there will be 408,661 new cases of cervical cancer and 242,988 deaths in Indonesia in 2022. Reflecting on this, IARC sees that in 2050 there will be a 77% increase in cervical cancer in Indonesia. Even the WHO Southeast Asia Region stated that Indonesia is ranked third highest in the Asian region for incidence rate or number of new cases. Through this event, the Ministry of Health Dr. Sandra said that WHO formed a global strategy for the elimination of cervical cancer, which seeks to reduce or eliminate cancer by 2030. Therefore, in 2023 Indonesia has prepared a National Action Plan (RAN) for the elimination of cervical cancer. One of the pillars of the RAN is screening. This activity has been carried out since 2023. That is why one of the screening efforts is trying to find out the reasons why married women do not do Pap Smears (RI, 2024).

If we look at various literature and facts in society, it turns out that the high incidence of cervical cancer is due to the level of awareness of women who do not want to do Pap smear examinations. The prevalence of cervical cancer when viewed in general in West Kalimantan according to data from the West Kalimantan Provincial Health Office shows the fact that Pontianak City has the highest number of cases of cancer in women compared to other cities and districts. This consists of 134 cases in Pontianak (West Kalimantan Provincial Health Office, 2017).

The results of Damilia and Oktavia's (2015) research stated that the low level of cervical cancer screening (Pap Smear) was caused by limited access to screening and treatment. Many Indonesian women still lack information and services for cervical cancer due to low economic levels and women's low level of knowledge about early detection through the Pap smear or IVA method.

The results of Ramadini's research (2018) stated that the high incidence of cervical cancer is caused by many factors, namely the lack of awareness of women to carry out early detection of cervical cancer, not maintaining personal hygiene, and sufferers only find out about the disease after entering an advanced stage of cervical cancer. Even the results of research from Novita Nining Anggraini (2016) said the same thing that there are few early indications caused by cervical cancer, so women do not realize that they have cervical cancer; so that treatment is often too late and causes many deaths in women.

After observing, analyzing, and seeing the general situation in society, this situation certainly requires a solution from the institution or health sector. It is very important to know the reasons why married women do not do Pap Smear examinations.

Why they do not want to do the Pap Smear examination is certainly due to several obstacles as stated above. As health workers, knowing the reasons why married women do not do Pap Smear examinations is a problem that must be overcome. Their openness, awareness, and knowledge about cervical cancer must be continuous education. This is the main focus for raising this research. The situation is actually simple, but it will help health workers to be more aware of the community's situation related to awareness of the importance of Pap Smear examinations.

Therefore, this study was conducted at SMPN 20 Pontianak Utara, West Kalimantan. The number of female teachers at this school is 21 people. Of these 21 people, 19 are married and 2 others are not married. Therefore, this study aims to understand the various factors that influence the decisions of married women who do not undergo Pap smear

examinations at SMPN 20 Pontianak Utara, West Kalimantan.

2. Methods

This research is qualitative research with a case study approach. This method was chosen because it limits the approach by formulating attention to a case intensively and in detail, namely 5 (five) informants who are married but did not make Pap smears. The reasons for choosing these five informants are: (1) they are married; (2) they did not do Pap smears; (3) they work as teachers who are known to have open minds and better knowledge; (4) they have provided answers that can be studied and scientifically accounted for based on the questions asked. The reason the researcher used a qualitative method was to explore the condition or state of a natural object (Susilo, 2015). One of the basic things is that the researcher is a key instrument. Therefore, the qualitative approach used was a narrative analysis of the informants' answers. Narrative analysis itself aims to interpret and understand narratives qualitatively by exploring the deeper meaning, structure and subjective experiences of mothers who are married but did not have Pap smears (Asfar, 2019). The researcher's reason for selecting this case was to determine and understand the reasons why married clients do not undergo Pap smears. The data collection technique used was triangulation (or a combination). Furthermore, the data analysis was inductive. Deductive analysis itself is grounded theory, a methodology used by researchers to inductively develop theories from data. According to Payne (2010) in Karuntu et al. (2022), inductive grounded theory seeks to explore unknown research areas where no theory exists to explain the situation, compare or challenge existing theories, understand participants' understanding, perceptions, and experiences, and develop a new theory. This is relevant to the situation in Pontianak City, where the public is still unfamiliar with Pap smears and therefore reluctant to undergo them.

3. Research Results

3.1. Definition of Pap Smear

Pap smear is a cytology examination to detect cervical cancer early, even to detect pre-cancer stage. In addition, Pap Smear can also detect infection in the birth canal (Irianto Koes, 2015). This is intended for women who are married and have had sexual intercourse, at least Pap Smear examination is done once a year.

According to Emillia, in (Azmi, 2017) Papanikolaou test or Pap smear is a gynecological screening method first performed by Georgis Papanikolaou to find premalignant processes or pre-malignancy and malignancy or malignancy in the outer cervix, and infections in the endometrium of the cervix. Regular screening can prevent most cases of cervix in the early stages.

According to Wijaya, in (Azmi, 2017) Pap smear is a method for examining cervical fluid cells using a microscope to detect cervical cancer, which is done easily, quickly, painlessly, and with accurate results. Based on the various definitions above, it can be understood that Pap smear is an early detection examination for cervical cancer caused by the HPV virus with more accuracy.

3.2. Purpose of Pap Smear

According to Irianto Koes (2015), there are two main objectives in Pap Smear examination, namely:

- a) To diagnose malignancy. This is the most important role of cytology.
- b) If there is malignancy, then if possible determine the type of malignant tumor, although this is a secondary objective. However, this greatly helps clinicians to determine therapy or tumor localization.
- c) To determine hormonal status.
- d) To find the cause of inflammation or infection.
- e) To evaluate the results of radiation therapy by determining the degree of radiation

(Radiation Response).

- f) Determine the time of ovulation.
- g) Determine the time of pregnancy.
- h) Determine the possibility of miscarriage (abortion).
- i) Mass screening.

3.3. Cytology Sampling Techniques

According to Aditya Reza (2024), there are two types of sampling used in Pap Smear, namely collection of exfoliative cells and collection of cells removed by rubbing or abrasion techniques.

a) Exfoliative Cytology

Exfoliative cytology is based on the shedding of cells from the lining of organs into the body cavity, where they can be removed in a non-abrasive manner. Shedding of cells is a constant phenomenon of the renewal of the epithelial lining of organs. What cannot be determined from this sample is the age of these cells. For example, vaginal smear preparations are made from cells removed from the posterior fornix from several sources, including: squamous epithelium lining the vagina and vaginal portio of the cervix, epithelial lining of the endocervical canal and others such as the endometrium, tubes, peritoneum, and sometimes from distant sites. These cells accumulate in the mucous membranes and secretions of the uterus or vagina. It should also be noted that vaginal smears sometimes contain leukocytes and macrophages that accumulate in response to the inflammatory process and various microorganisms such as bacteria, fungi, and viruses and parasites that do not live in the lower genital tract.

b) Abrasive Cytology

In the late 1940s–1950s, several new methods of safe smear cytology were developed. Ayre introduced the cervical scraping, or spatula, in 1974. Ayre stated that the sample was directly obtained from cells derived from the squamous epithelium of the uterine cervix and the lining of the endocervical canal

3.4. Women who are recommended to have a Pap Smear

According to Sukaca in (Azmi, 2017), women who are recommended to have a Pap smear are:

- a. Young age, married or unmarried but high sexual activity.
- b. Changing sexual partners.
- c. Aged over 35 years.
- d. As often as possible, have a check-up if the Pap smear results are abnormal.
- e. Using birth control pills.

3.5. General Information Informant

This research was conducted in one of the schools in North Pontianak, West Kalimantan. Geographically, SMP Negeri 20 Pontianak Utara is located in Jl. Khatulistiwa No. 150, Siantan Hilir Village, North Pontianak District, Pontianak City, West Kalimantan Province.

Based on data from the Ministry of Education and Culture, the number of teachers at SMP Negeri 20 Pontianak Utara is 29 people consisting of 10 males and 19 females. This research is intended only for female teachers.

3.6. Research Result

After describing the background of this research, the theories that have confirmed the research and the research methods used, here are the research results obtained. The results of this study will be described based on the results of interviews and documentation.

The discussion in this section is obtained through the results of data collection

through recording techniques on informants needed in this research and discussion, will describe the results of interviews in June 2024 regarding the reasons why married women do not do Pap Smears conducted at SMP Negeri 20 Pontianak Utara.

This study uses a qualitative approach with a descriptive method, interviews conducted by the Researcher in stages over a period of June 25 to June 27, 2024. The interview structure designed by the Researcher is not a standard guideline, so it will allow some questions given to respondents to flow along with the respondent's story.

The following is a description of the results of the interview and research documentation in the field:

- a) Have you ever heard of the term Pap Smear?
- b) Have you ever had a Pap Smear?
- c) What is the reason for not having a Pap Smear?

These three questions were asked by the Researcher (R) and answered by the Informants (I) who numbered five respondents as follows:

Informant 1 (I1):

(R) Have you ever heard of the term Pap Smear?

(I1) *Yes.*

(R) Have you ever had a Pap Smear?

(I1) *Never.*

(R) What is the reason you didn't do a Pap Smear?

(I1) *I was traumatized in the operating room. Because I had surgery before, so every time I went into the hospital and went into the operating room I was afraid. That's why I didn't dare to have a Pap Smear.*

Informant 2 (I2):

(R) Have you ever heard of the term Pap Smear?

(I2) *Yes. I have heard of it.*

(R) Have you ever had a Pap Smear?

(I2) *Never.*

(R) What is the reason you did not have a Pap Smear?

(I2) *I feel healthy. So I don't need that kind of examination. I feel that there is no problem with my physical condition.*

Informant 3 (I3):

(R) Have you ever heard of the term Pap Smear?

(I3) *Yes.*

(R) Have you ever had a Pap Smear?

(I3) *Not yet.*

(R) What is the reason you haven't had a Pap Smear?

(I3) *First, maybe it's not well known to me. Second, maybe the process. For me the process is embarrassing, because there might be changes in the genitals that will get bigger. Third, because no one supports and invites me to have a Pap Smear examination. Even though it's important, if no one supports me, I don't dare to have it checked.*

Informant 4 (I4):

(R) Have you ever heard of the term Pap Smear?

(I4) *Yes.*

(R) Have you ever had a Pap Smear?

(I4) *Never.*

(R) What is the reason you did not have a Pap Smear?

(I4) *First, the cost of a Pap Smear examination is expensive. Second, I am embarrassed if*

the doctor who examines me is a man. I am embarrassed to have my genitals seen by a male doctor.

Informant 5 (I5):

(R) Have you ever heard of the term Pap Smear?

(I5) *Yes. But I don't know specifically how a Pap Smear is done.*

(R) Have you ever had a Pap Smear?

(I5) *No.*

(R) What is the reason you didn't do a Pap Smear?

(I5) *I don't want to have a Pap Smear because I'm embarrassed and afraid of the process. So even though it's important, I don't dare to have it done because I'm embarrassed and afraid.*

Table 1. Summary of Interview Results

Informant	Knowledge about Pap Smears	Reasons for Not Having a Pap Smear
1	Awareness	Trauma (fear) of going into the operating room.
2	Awareness	Feeling physically healthy, so there's no need for a Pap Smear.
3	Awareness	1. Lack of understanding; 2. The Pap Smear process is embarrassing, especially if there are indications of changes in the genitals after the Pap Smear; 3. No one supports or encourages you to have a Pap Smear, so you don't dare (are afraid) even though it's important.
4	Awareness	1. The cost of a Pap Smear is expensive; 2. It would be embarrassing if examined by a male doctor.
5	Awareness, but not in depth	Embarrassment and fear of the process.

Source: Interview June 2024.

The interview results and the summary in the table show that all informants know about Pap Smear, but informant 5 added that they know but not in depth. However, there are variations in the reasons why they do not dare to do Pap Smear. The data above shows that the main reason for not doing Pap Smear is shame. This can be seen in the answers of informants 3, 4 and 5. Next, the second reason is trauma or fear, which can be seen in the answers of informants 1, 3 and 5. The third reason is the lack of support and invitation from a husband or family, which can be seen in the answer to informant 3. The fourth reason is the expensive cost of the Pap Smear examination as answered by informant 4. The fifth reason is a lack of understanding of Pap Smear as indicated by informant 3. While the fifth reason is that they feel physically healthy, so they do not need to do Pap Smear as indicated by informant 2.

4. Discussion

Based on what was conveyed by the informants, these five informants had never had a Pap Smear examination with the reasons for these five informants not having a Pap Smear, namely because of trauma from their past, fear of the examination, feeling healthy and not feeling the need to have an examination, being unfamiliar with the examination process, feeling afraid and ashamed, no support or invitation from the environment to have an

examination, expensive costs, feeling ashamed and afraid especially if the doctor examining is male, lack of knowledge about the Pap Smear procedure, not knowing the examination process, location, and costs required.

According to Irianto Koes (2015), Pap Smear is a cytology examination to detect cervical cancer early, and can even detect pre-cancer stages. In addition, Pap Smear can also detect infections in the birth canal. This is intended for women who are married and have had sexual intercourse, at least a Pap smear examination is carried out once a year.

The benefits or advantages obtained from this examination are that this examination is simple, not tiring, and does not hurt the patient or sufferer, the results are known quickly so that it can be used for mass examinations.

Previous research conducted by Ramadini (2018) illustrates that many married women do not do Pap Smear. The results of the study showed that most of the 40 informants had never done early detection; with 40 informants as many as 88.9%. The results of this study illustrate that the community is still very less aware of the importance of Pap Smear examinations. This study only sought to find out how many people did not do Pap Smear, but did not find out their reasons in more depth. So finding out that many did not do Pap Smear, but did not try to approach and hear the reasons why they did not do Pap Smear. Finally, the study only came to the final conclusion, namely the number of people who did not do Pap Smear examinations.

In 2023, Indonesia has prepared a National Action Plan (NAP) to eliminate cervical cancer. One of the pillars of the RAN is screening. This activity has been carried out since 2023. This research is also an effort to realize the RAN which is at least implemented in Pontianak City, especially at SMP Negeri 20 Pontianak Utara.

According to Mansyarif and Far (2023) in a journal entitled Identification of Factors of Fertile Age Couples Not Doing Pap Smears in the Rambiha Sangkula Work Area, provides some descriptions of women who do not do Pap Smears. They interviewed 15 women of childbearing age, it was found that they had never done a Pap Smear. But they know that Pap Smear examination is very important for married women. This is due to the lack of motivation and encouragement from the family, the lack of information obtained by the family; because it has become a habit that fertile women trust their families more, either because of a habit or the absence of a habitus about this.

The five informants also said in the interview process that some of them were not supported by their surroundings such as family, so they did not dare to do a Pap Smear examination. Through this study, it can be said that both fertile and non-fertile, most women do not want to do a Pap Smear. as stated by Wulandari et al. (2022) in their journal about the reluctance of women of childbearing age (WUS) to do a Pap smear: in a review of the Health Belief Model theory, it was revealed that 73% of women of childbearing age showed reluctant behavior to do a Pap Smear.

The reluctance is not based on the perception of vulnerability, perception of severity, perception of benefits, and triggers to act. But it is based on the perception of barriers in terms of costs, as well as self-confidence to act, in the form of fear, shame, and distrust of health workers.

Therefore, from the comparison or with theories about Pap Smear or with previous studies in general, it has the same conclusion, namely personal fear, lack of confidence, distrust of health workers, motivation from people closest to them or the surrounding environment, high shame, and awareness of the importance of health for their lives.

The research conducted on five informants, the difference is not only how many did not do Pap Smear, but more focused on hearing the basic reasons they did not want to do Pap Smear. In other words, it is not just the number of people who did not do Pap Smear, but the basic reasons they said. This reason is what ultimately decided they did not do Pap Smear.

This is why personal preparation is important before doing a Pap Smear examination. This preparation is not only medical, but also personal to each patient. It takes an attitude that builds trust in married women to do Pap Smear examinations.

In theory, this is not mentioned at all. In fact, what happens in society is their attitude of being reluctant to take themselves to do a Pap Smear examination. Although the Pap Smear examination process has been explained in detail, with adequate completeness of theory, but a personal approach is not done, the community will be reluctant to do a Pap Smear examination.

Referring to the Health Belief Model (HBM) theory, the reasons for not having a Pap smear are understandable. The HBM itself serves as a tool for assessing a person's behavior, specifically to understand why individuals choose to perform or avoid behaviors that support their health (Bakhtiar, 2024). The HBM itself identifies four (4) human health behaviors.

First, the perception of susceptibility and severity of not having a Pap smear. Based on this argument, the reason married people don't have a Pap smear is understandable because they feel they are still healthy and well, thus considering the Pap smear a less important health examination. Although they understand that a Pap smear is mandatory for married people, as long as there is no significant threat, they will not have it.

Second, the perceived benefits of a Pap smear. Based on this argument, the reason for not having a Pap smear may be because married people have not received direct testimony about having a Pap smear from those close to them. This is crucial because, despite public education and campaigns from health officials urging the importance of Pap smears, their beliefs will be low if no one close to them or family members perform them.

Third, perceived barriers to Pap smears. Based on this argument, interviews revealed numerous barriers. These barriers range from shame, fear, and trauma, to lack of support and financial constraints, all significant obstacles. It can be said that they remain focused on these barriers without confronting and overcoming them. Unless they address these barriers and try to do them themselves, they will not directly understand the benefits of Pap smears.

Fourth, cues to action for Pap smears. Based on this argument, health officials campaigning for the importance of Pap smears must work harder and find relevant ways to encourage married couples to undergo Pap smears. In essence, a person who receives accurate information and assesses conditions and situations that threaten their health will develop behaviors that lead to prevention and treatment (Laili and Tanoto, 2021). Healthy behavior is shaped by a person's desire to avoid disease. In other words, if married people truly understand the importance of Pap smears, they will likely perform them.

However, it cannot be denied that perceptions of health issues, including the importance of Pap smears, are also influenced by demographic and psychological factors, such as age, gender, socioeconomic status, and education, all contributing to a person's understanding of the situation and circumstances. We believe this is the responsibility of those in authority.

5. Conclusion

Pap smear is an early detection examination of cervical cancer caused by the HPV virus. Facts in society confirm that the high incidence of cervical cancer is due to the level of awareness of women who do not want to do Pap smear examinations. Pap smear examinations for married women are a must for personal health. Pap smear examinations require support from close relatives, the daily living environment and the workplace, especially among married women.

Referring to the interview results conducted in this study, it is clear that to raise awareness about Pap smears, regular education by health workers is necessary for the public, especially married women. Activities such as seminars and demonstrations of how

Pap smears are performed are even needed. This is crucial to address the shame, fear, and trauma felt by married women who are reluctant to undergo Pap smears.

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