

Talk, Prevent, And Protect About Breast Cancer and Cervical Cancer

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Abstract

Breast cancer and cervical cancer remain major causes of morbidity and mortality among women globally, including Indonesian women living abroad. Limited health literacy, restricted access to screening services, and cultural as well as language barriers contribute to delayed detection, particularly among Indonesian migrant women in South Korea. This community service program aimed to improve knowledge, awareness, and preventive behavior related to breast and cervical cancer among members of the Indonesian Muslim women community (Rumaisa) in Seoul. The activity employed a participatory educational approach, including health education sessions, audiovisual presentations, group discussions, and practical early detection through routine screening and healthy lifestyle practices. Participants also demonstrated increased confidence in performing BSE and expressed willingness to disseminate the information to other community members. In conclusion, structured and community-based educational interventions are effective in enhancing health literacy and promoting preventive behaviors related to breast and cervical cancer. Continuous and sustainable health education programs are recommended to strengthen cancer prevention demonstrations of breast self-examination (BSE). Evaluation was conducted using pre-test and post-test questionnaires to assess changes in participants' knowledge. The results showed a significant improvement in participants' understanding of risk factors, early signs, prevention strategies, and the importance of efforts and reduce the burden of breast and cervical cancer

among Indonesian migrant women.

Keywords: breast cancer, cervical cancer, early detection, migrant workers, prevention

Introduction

Breast cancer and cervical cancer remain significant public health problems and are among the leading causes of morbidity and mortality among women worldwide. In Indonesia, breast cancer ranks as the most common cancer among women, followed by cervical cancer, with many cases still detected at advanced stages due to limited awareness and low participation in early detection programs. Early detection and preventive strategies, such as breast self-examination, clinical screening, HPV vaccination, and routine cervical screening, have been proven to significantly reduce cancer-related mortality. However, the effectiveness of these strategies depends largely on community health literacy and access to accurate health information.

These challenges are more pronounced among Indonesian women living abroad, particularly migrant workers in South Korea. Language barriers, cultural differences, limited time, and unfamiliarity with the host country's health system often restrict their access to preventive health services. As a result, participation in cancer screening programs remains low, and awareness of early signs and preventive measures is inadequate. Despite South Korea having an advanced healthcare system, migrant communities frequently remain underserved in health education and promotion activities.

This community service program was conducted within the Indonesian Muslim women community (Rumaisa) in Seoul, South Korea. The location was selected due to the absence of structured and culturally appropriate health education programs focusing on women's reproductive health and cancer prevention within this community. Previous community service activities have largely focused on general health promotion or religious and social empowerment, with limited emphasis on cancer prevention and early detection.

The novelty of this program lies in its participatory and culturally sensitive approach, integrating health education, audiovisual media, group discussions, and hands-on demonstrations of breast self-examination. By empowering Indonesian migrant women to become active participants and peer educators, this community service initiative aims to enhance health literacy, promote preventive behavior, and contribute to sustainable cancer prevention efforts within migrant communities.

Method

This community service activity employed an educational and participatory approach through health counseling and practical training. The program was conducted among members of the Indonesian Muslim women community (Rumaisa) in Seoul, South Korea, with a total of 15 participants.

The implementation of the community service consisted of several stages. The first stage involved an introductory session to establish rapport between the facilitators and participants and to explain the objectives of the activity. The second stage focused on health counseling, during which educational materials on breast cancer and cervical cancer were delivered through presentations and audiovisual media. The topics included risk factors, early signs and symptoms, prevention strategies, and the importance of early detection through routine screening.

The third stage involved practical training, particularly a demonstration and guided practice of breast self-examination (BSE), allowing participants to directly apply the knowledge provided. This session aimed to improve participants' skills and confidence in performing early detection independently. The fourth stage consisted of an interactive discussion and question-and-answer session to clarify participants' concerns and reinforce key messages.

Evaluation of the activity was conducted using pre-test and post-test questionnaires to assess changes in participants' knowledge and understanding. The activity concluded with feedback collection and the distribution of souvenirs as appreciation for participants' active involvement in the community service program.

Results

The community service activity was successfully implemented among 15 participants from the Indonesian Muslim women community (Rumaisa) in Seoul, South Korea. The results are presented according to the objectives of the program, focusing on participants' knowledge improvement, engagement during the activity, and their commitment to preventive behavior related to breast and cervical cancer.

Improvement in Knowledge and Awareness

The evaluation results, measured through pre-test and post-test questionnaires, indicated a noticeable improvement in participants' understanding of breast and cervical

cancer. Prior to the intervention, most participants demonstrated limited knowledge regarding risk factors, early signs, and available screening methods. After the educational sessions, participants showed increased comprehension of cancer prevention strategies, including breast self-examination (BSE), HPV vaccination, and routine cervical screening.

Participants were able to correctly identify early warning signs of breast and cervical cancer and demonstrated improved awareness of the importance of early detection in reducing morbidity and mortality. The findings suggest that the educational and participatory approach effectively enhanced health literacy among the participants.

Participant Engagement and Skill Development

High levels of participant engagement were observed throughout the activity. During the practical training session, participants actively participated in the demonstration and guided practice of breast self-examination. Most participants were able to perform the steps of BSE correctly by the end of the session and expressed increased confidence in conducting self-examinations independently at home.

The interactive discussion and question-and-answer session further reinforced participants' understanding. Participants raised questions related to screening access in South Korea, cultural barriers, and lifestyle modification, indicating strong interest and relevance of the topic to their daily lives.

Commitment to Preventive Behavior

In addition to knowledge improvement, participants expressed a commitment to adopting healthier lifestyles and participating in routine screening programs. Several participants stated their intention to share the information gained with other members of the Indonesian migrant community, suggesting the potential for a multiplier effect of the intervention.

Documentation of Community Service Activities

The implementation of the community service activities is documented in the following figures:

- Figure 1. Delivery of educational material on breast and cervical cancer using audiovisual media.
- Figure 2. Practical demonstration and guided practice of breast self-examination (BSE).
- Figure 3. Interactive discussion and question-and-answer session with participants.

These figures illustrate the participatory nature of the activity and the active involvement of participants throughout the program.

Summary of Knowledge Improvement

Table 1 Presents A Summary Of Participants' Knowledge Levels Before And After The Community Service Intervention.

Knowledge Aspect	Before Intervention	After Intervention
Understanding of risk factors	Low	Improved
Awareness of early signs	Low	Improved
Knowledge of screening methods	Moderate	High
Ability to perform BSE	Low	High

The table demonstrates an overall improvement in participants' knowledge and skills related to breast and cervical cancer prevention and early detection.

Discussion

The findings of this community service activity demonstrate that participatory and culturally tailored health education is an effective strategy for improving health literacy related to breast and cervical cancer among Indonesian migrant women in South Korea. The observed improvement in participants' understanding and engagement aligns with previous community-based interventions that reported increased cancer awareness following structured educational programs (Dedey et al., 2024; Cho et al., 2022). However, this activity provides additional insight by highlighting the importance of cultural relevance and community trust in enhancing program effectiveness among migrant populations.

Compared to earlier community service initiatives that primarily relied on lecture-based health promotion, this program incorporated interactive discussions, audiovisual media, and hands-on practice of breast self-examination (BSE). This approach facilitated active learning and skill acquisition, which has been shown to be more effective in promoting sustained behavioral change than passive information delivery. The ability of participants to confidently perform BSE indicates that practical training plays a critical role in translating knowledge into preventive action.

A key novelty of this community service lies in its implementation within a faith-based Indonesian migrant women community. By integrating health education into an

established social and religious gathering, the program successfully overcame common barriers such as mistrust, limited participation, and cultural discomfort often reported in previous community outreach efforts. This setting enabled open discussion of sensitive reproductive health topics, which are frequently stigmatized, particularly among migrant women.

The advantages of the empowerment approach used in this activity include strong participant engagement, peer support, and the potential for a multiplier effect, as participants expressed willingness to share the information within their social networks. Community-based empowerment also strengthened participants' sense of ownership over their health and increased their motivation to adopt preventive behaviors.

Nevertheless, several limitations should be acknowledged. The relatively small number of participants and the short duration of the intervention limit the generalizability of the findings and the ability to assess long-term behavioral change. Additionally, external barriers such as time constraints, work demands, and limited access to affordable screening services in the host country may continue to hinder sustained participation in preventive programs.

Overall, this community service activity contributes new evidence that culturally sensitive, faith-based, and participatory empowerment models are particularly effective for migrant communities. Such approaches complement formal health systems by addressing social and cultural determinants of health, thereby strengthening cancer prevention efforts at the community level.

Conclusion

This community service program successfully achieved its objective of improving knowledge, awareness, and preventive behavior related to breast and cervical cancer among Indonesian migrant women in South Korea. Through a participatory and culturally sensitive educational approach, the activity enhanced participants' understanding of cancer risk factors, early warning signs, and the importance of early detection practices such as breast self-examination and routine cervical screening.

The program advances current community health practice by demonstrating that health education embedded within trusted community structures can effectively address barriers faced by migrant populations, including language limitations, cultural sensitivity, and limited access to formal health promotion services. By integrating practical training, interactive discussion, and audiovisual media, the service translated theoretical knowledge into actionable

preventive behavior, moving beyond conventional information dissemination models.

Furthermore, this community service contributes to the field of community empowerment by positioning participants not only as beneficiaries but also as potential peer educators within their social networks. This empowerment-based approach strengthens the sustainability of health promotion efforts and supports the diffusion of cancer prevention knowledge beyond the immediate participants.

In conclusion, community-based, participatory, and culturally appropriate health education represents a valuable strategy for strengthening cancer prevention among underserved migrant communities. Continuous and scalable implementation of similar programs is recommended to further enhance health literacy, promote early detection, and ultimately reduce the burden of breast and cervical cancer among Indonesian women living abroad.

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Conflict of Interest

The authors declare that there is no conflict of interest regarding the implementation of this community service activity, the preparation of the manuscript, or the publication of this article.

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