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THE INFLUENCE OF HEALTH SERVICES ON HUSBAND'S ABILITY TO MOTIVATE WOMEN OF CHILDBEARING AGE IN VISUAL INSPECTION OF ACETID ACID IN SURABAYA

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Abstract

Introduction: WUS's willingness to carry out early detection of cervical cancer is still very minimal for various reasons and is considered normal, this is not accompanied by the husband's ability to motivate to detect cervical cancer as the person closest to WUS. The aim of this research is to determine the effect of health facilities on husband's ability to motivate women of childbearing age in visual inspection of acetic acid in Surabaya. **Methods:** Analytical observational research design with a cross sectional design approach. The research was conducted in Surabaya for eight weeks from November to December 2022. The sample size was 186 respondents with a sampling technique using multistage random sampling. The research instrument is a questionnaire. Analyzed data were using SEM-PLS. **Results:** Testing the effect of health services on husbands' abilities produced a statistical T value of 3.374 with a p-value of 0.001. The test results show that the statistical T value is > 1.96 and the p-value is < 0.05. This means that there is a significant influence between health services and the husband's abilities. The resulting coefficient value is 0.249, which means that the better the health service, the more likely it is to increase the husband's abilities.**Conclusion:** Good health services can improve a husband's abilities. It is hoped that access and health workers can increase so that the motivation of women childbearing age to carry out visual inspection of acetid acid in Surabaya also increases.

Keywords: Husband's Ability, Health Services, Visual Inspection of Acetid Acid, Women of Childbearing Age.

INTRODUCTION

Cervical cancer is the fourth most common cancer in women of childbearing age and its incidence tends to increase. The high mortality rate from cervical cancer globally can be reduced through a comprehensive approach that includes prevention, early diagnosis, effective screening and treatment programs (WHO, 2018). The Indonesian government has implemented an early detection program for cervical cancer using the Acetic Acid Visual Inspection (IVA) method, which is a form of secondary prevention with the aim of reducing the incidence and prevalence of cervical cancer. This program has often been socialized directly to women of childbearing age (WUS) or through the role of health cadres, but there are still many who have not undergone early detection of cervical cancer

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(Mulyati et al., 2015), so its coverage is still far from the target that has been set. (Dinas Kesehatan Provinsi Jawa Timur., 2020).

Cervical cancer is estimated to have 570,000 new cases in 2018 and represents 6.6% of all cancers in women (WHO, 2018). The incidence of cancer in Indonesia (136.2/100,000 population) is 8th in Southeast Asia, while in Asia it is 23rd. The incidence of new cases of cervical cancer according to GLOBOCAN data, 2018 for women in Indonesia is around 32,469 cases with a death rate of 18,279 cases. . This incidence tends to increase with 36,633 new cases (9.2%) with a death rate of 21,003 cases (9%) (Globocan, 2020). The IVA inspection target in the 2015-2019 Ministry of Health Strategic Plan is expected to reach 50% by 2019, but this target has still not been met. Nationally, as many as 4,370,483 WUS or 12.2% (of 1, 170, 0,353 WUS) of women aged 30 – 50 years have undergone cervical cancer detection using the IVA method. The results of this examination found 84,185 IVA positive, 5,015 suspected uterine cancer (Kementerian Kesehatan RI tahun 2020, 2020).

In East Java, WUS who carried out VIA examinations were 270,809 women (4.3%) with positive VIA results of 3,341 women (1.2%) (Dinas Kesehatan Provinsi Jawa Timur., 2020). Meanwhile in the city of Surabaya, the coverage of early detection of cervical cancer through IVA was 24,345 people (5.1%) with positive IVA results of 325 people (1.33%) (Surabaya, 2020). According to a preliminary study at several Community Health Centers in Surabaya, an average of 5% of WUS visited the Community Health Center and the majority were due to illness, not to detect cervical cancer.

Globally there were 14 million new cases of cancer and 8 million cancer-related deaths in 2012 (Denny & Prendiville, 2015). The results of this study showed that 62% of women in Sub-Saharan Africa diagnosed with cervical cancer died and more than 86% of cases of incidence and death due to cervical cancer occurred in countries with low resources where the initiation and/or maintenance of cervical cancer screening programs was unsuccessful, the health system was weak. , lack of access to pathology services, lack of financial and human resources. In other research (Babatunde et al., 2017), predicts that barriers for women to participate in early detection of cervical cancer include: lack of awareness, suboptimal confidence, fear of being diagnosed with cervical cancer, lack of knowledge, stomach ache after the examination and feeling uncomfortable during the test. Apart from that, several factors that can motivate screening are recommendations from doctors, friends and motivation from husbands and this is a big factor. Most of the negative support from husbands will reduce the WUS' motivation to carry out Visual Inspection of Acetic Acid (IVA) detection, including the husband's minimal perception and knowledge which can prevent WUS from doing so (Sahr & Kusumaningrum, 2018).

Husbands often ignore WUS’s health. Husbands often feel that WUS is safe as long as there are no complaints. For example, WUS reproductive health problems such as the risk of cervical cancer. This could be due to the husband's lack of knowledge, perceptions about the severity, benefits, and vulnerability of WUS to disease are still limited. So it is necessary to improve health services to increase the husband's ability to motivate WUS

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to carry out early detection examinations for cervical cancer using the acetate visual inspection (IVA) method.

MATERIALS AND METHODS

This research uses a descriptive analysis method using a cross sectional design. The population in this study were all husbands in Surabaya who had women of childbearing age (WUS) aged 30-50 years. The sampling technique in this research used multistage random sampling. The variables in this research are the independent variable (health services) and the dependent variable (husband's ability to motivate WUS to participate in the Acetic Acid Visual In The instrument in this research was to use a questionnaire. The questionnaire sheets that have been collected are then processed and analyzed using SEM-PLS.

This research was carried out after obtaining a research permit from Airlangga University, a research permit from BAKESBANGPOL Surabaya City, a research permit from the Surabaya City Health Service, a health center permit and a certificate of ethical suitability from Airlangga University.spection (IVA) examination).

RESULTS

This research was conducted from November to December 2022 and obtained 186 respondents. The results of the questionnaire from this research are obtained in the table below:

Table 1: Demographic Data

Data	Details	Frequency	Percentage
Age	20-29 years old	1	0,54
	30-39 years old	56	30,1
	40-49 years old	84	45,2
	> 50 years old	45	24,2
Education	SD	45	24,2
	SMP	63	33,9
	SMA	69	37,1
	PT	9	4,84
Work	Self-employee	21	11,3
	Private-employee	42	22,6
	Labor	123	66,1
Income	One million	21	11,3
	Two millions	39	21
	Three millions	60	32,3
	Four millions	33	17,7
	Five millions	21	11,3
	Six millions	9	4,84
	Ten millions	3	1,61

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Table 2 : Specific Data

Data	Details	Frequency	Percentage
Access	Less	42	22,6
	Adequate	42	22,6
	Good	102	54,8
Workers	Less	21	11,3
	Adequate	60	32,3
	Good	105	56,5
Perceived health	Less	6	3,2
	Adequate	123	66,1
	Good	57	30,6
Personal growth	Less	0	0,0
	Adequate	162	87,1
	Good	24	12,9
Existensial well being	Less	69	37,1
	Adequate	79	42,5
	Good	38	20,4

Table 3 : Influence between variables

Data	Coefficient	T Statistics	*p value*
The influence of health services on husband's abilities	0,249	3,374	0,001

DISCUSSION

Testing the effect of health services on husbands' abilities produced a statistical T value of 3.374 with a p-value of 0.001. The test results show that the T statistic value is > 1.96 and the p-value is < 0.05. This means that there is a significant influence between health services and the husband's abilities. The resulting coefficient value is positive, namely 0.249. Thus, it can be interpreted that the better the health service, the more likely it is to increase the husband's abilities.

Health facility factors such as access and health workers can determine a husband's ability to provide motivation to WUS. With this, the indicators of health facility factors are optimal, proven by good access and health workers.

According to Permenkes (2015) Adequate health facilities have a big influence because by providing affordable health facilities, whether services at clinics, hospitals or health centers, adequate financing can increase the husband's ability to carry out maximum motivation for WUS. Apart from that, health workers also involve families in appreciating the act of providing motivation for WUS. Then in the form of support or support from health workers, such as easy access to contact and always paying attention to husbands and WUS as individual and social creatures, families and communities.

Health facilities can determine the husband's ability to provide motivation to WUS with adequate health insurance so that it can reduce costs for less fortunate families, in addition to the support from health workers who always provide education or health

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education and clear information during treatment to the husband to help can increase motivation for WUS (Novitarum et al., 2022).

The husband's ability to provide motivation to WUS can be caused by the health facilities they obtain, because health facilities that are easily accessible and complete can provide various things that the husband needs to understand his role.

A husband's ability to motivate his wife's desire for early detection of cervical cancer can be in the form of support. Support is behavior that provides strength that can regulate the achievement of a goal. Husband's support is closely related to the form of attention and can determine the improvement in the health status of WUS.

This is not in line with research conducted by Wakhidah, et al (2017) in Damayanti & Permatasari (2021) which states that there is no influence between husband's support on WUS behavior in carrying out early cancer detection. This proves that husband's support does not always provide positive opportunities for wives to carry out early cancer detection. This incident can be influenced by various factors. One of them is the motivation of WUS itself. No matter how much support is provided by the husband, if WUS do not have awareness, will and motivation then the results will still be negative.

Sondang & Hadi (2019) revealed that the husband's ability influences the motivation of WUS in carrying out early detection of cervical cancer. This can happen because WUS consider their husbands and family as the closest people who make WUS feel safe, comfortable and loved so that WUS can behave as expected, namely by carrying out early detection of cervical cancer. Apart from that, husbands who have the ability to motivate WUS must be equipped with high knowledge regarding cervical cancer so that husbands have sufficient information and can confidently advise their wives to carry out early detection of cervical cancer as a form of disease prevention.

CONCLUSION

In this study, it was found that the influence of health services on husband's abilities was achieved by the participation of women of childbearing age (WUS) in carrying out Visual Inspection of Acetic Acid (IVA) examinations in Surabaya.

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