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Perception Analysis Of Women Of Reliable Age In The Utilization Of Acetic Acid Visual Inspection In The Province Of Southeast Sulawesi

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ABSTRACT

Cervical cancer is an important health problem for women all over the world. Currently, the coverage of early detection of cervical cancer in Indonesia through IVA examinations is still very low, which is around 5%. Based on the results of a preliminary study, it was found that only 40% of women knew about cervical cancer in the Kombikuno Health Center Work Area in 2020. This study aims to determine the analysis of perceptions of female prostitutes in the use of IVA examinations at the Kombikuno Community Health Center. This study used a cross sectional research design. The number of samples in this study were 100 respondents. The data analysis used is by using the Chi square test. There is a significant relationship between knowledge, information sources and family support with the perception of female prostitutes in the use of IVA examinations at the Kombikuno Public Health Center, Muna Barat Regency, Southeast Sulawesi Province with the results of Value (0.000), (0.000) and (0.008). There is no significant relationship between the affordability of the distance and the perception of WUS in the IVA examination with Value (0.132). There is a significant relationship between knowledge, information sources and family support and perceptions of female prostitutes in the use of IVA examinations Suggestion: It is hoped that it can increase provision for cadres about early detection of cervical cancer, and involve health cadres to conduct counseling about cervical cancer in villages.

Keywords: Perception; IVA examination; WUS

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INTRODUCTION

Cervical cancer is an important health problem for women worldwide. Cervical cancer is cervical cancer caused by the Human Papilloma Virus (HPV). According to the World Health Organization (WHO) in 2018, cervical cancer ranked fourth after breast, colon and liver cancer with a prevalence of 168,411 (51.4%).[1]

In Indonesia, more than 70% of cases in hospitals are in an advanced stage. According to the Basic Health Research (Riskesdas) in 2018, the prevalence of tumors/cancer in Indonesia showed an increase from 1.4 per 1000 population in 2013 to 1.79 per 1000 population in 2018 (Riskesdas, 2018). Cervical cancer cases were found in Southeast Sulawesi as many as 1025 cases. Data obtained from the Muna Barat Hospital, Southeast Sulawesi, there was an increase in the incidence of cervical cancer from 2018 to 2019, which found 103 cases in 2018 and 161 cases of cervical cancer in 2019.[2]

According to WHO, the high mortality rate and incidence of cervical cancer is caused by delays in treatment. Women who suffer from cervical cancer tend to come to the hospital after the condition is in an advanced stage and causes delays in treatment. This happens because of the delay in early detection of cervical cancer and the lack of public knowledge about the dangers of cervical cancer. The incidence of cervical cancer can actually be suppressed by carrying out primary prevention efforts such as increasing or intensifying outreach activities to the community to carry out a healthy lifestyle, avoiding risk factors for cancer, immunizing with the HPV vaccine and followed by early detection of cervical cancer.[3]

Currently, the scope of screening for early detection of cervical cancer in Indonesia through VIA examination is still very low, which is around 5%, even though the coverage of "screening" which is effective in reducing morbidity and mortality due to cervical cancer is 85%. The ideal number of screening implementations is 80% of the female population in one area. When compared with the total population of Indonesia, which is 250 million people, the figure of 5% is a small number. Whereas the number of women who are at risk of cervical cancer in Indonesia based on population is quite large.[4]

From the results of a preliminary study that the researchers conducted on 10 women in the working area of the Kombikuno Muna Barat Health Center, it was found that 6 women said they knew about cervical cancer and only 2 of them knew about the IVA examination but did not do it because they were afraid of the examination, while the other 4 women did not. know about cervical cancer and IVA examination. 4 women who did the IVA test found that the woman did the IVA test not from self-awareness. Nearly 90% of the women in the preliminary study had health insurance. It was found that 6 women in the Kombikuno Community Health Center had cervical cancer.[1]

Based on the data and problems described above, the researcher is interested in conducting research on the analysis of perceptions of women of childbearing age in the use of acetic acid visual inspection at Kombikuno Health Center, West Muna Regency, Southeast Sulawesi Province.

METHOD

This type of research is a quantitative research, with an analytical survey. This study used a cross sectional approach. The population in this study were all women of childbearing age (WUS) in the working area of the Kombikuno Health Center in January-June as many as 1,177 people. The sample in this study were all women living in the working area of the Kombikuno Public Health Center who met the inclusion criteria. the sample in this study amounted to 100 respondents

The sampling technique in this study is Simple Random Sampling, which is a sampling technique from population members that is carried out randomly without regard to the existing strata in the population. The working area of Kombikuno Health Center has 5 villages, namely Latawe Village with 338 WUS, Tangkumaho Village with 211 WUS, Kombikuno 282 WUS, Umba Village 211 WUS and Lahaji Village with 135 WUS. Each of them will take 20 respondents in each village by drawing a random draw.

To get the desired information, the researcher used a questionnaire as a data collection instrument that was developed based on the literature, namely knowledge, sources of information, family/husband support and distance affordability with the perception of WUS in the use of the VIA examination.

Univariate analysis is to describe the characteristics of the data and each variable studied and presented analytically by using the frequency distribution table and the percentage of each group. Analysis of the data used with the chi-square test with the help of computer software. Chi-square test for non-parametric ordinal scale data with nominal and sample more than 30.

RESULTS AND DISCUSSION

Knowledge	WUS Perception in Utilization of IVA Examination				Amount		P	OR
	Positive		Negative					
	N	%	n	%	N	%		
Well	26	83.9	5	16.1	31	100	0.000	13.684
Not enough	19	27.5	50	72.5	69	100		
Resources								
Once	25	83.3	5	16.7	30	100	0.000	12,500
Never	20	28.6	50	71.4	70	100		
Family support								
Support	19	65.5	10	34.5	29	100	0.008	3,288
Does not support	26	36.6	45	63.4	71	100		
Distance Affordability								
Close	12	60.0	8	40.0	20	100	0.132	2,136
Far	33	41.3	47	58.8	80	100		
Amount	45	45.0	55	55.0	100	100		

Relationship between Knowledge and Perception of WUS in the Utilization of IVA Examination

Based on the bivariate analysis, the results of 69 WUS with poor knowledge were mostly WUS, namely 50 people (72.5%) had a negative perception in the use of the VIA examination. Of the 31 WUS with good knowledge, most of the WUS, namely 26 people (83.9%) had a positive perception in the use of the VIA examination.

The results of the relationship analysis show that the p value is 0.000 or is less than the specified significant value, which is 0.05. This can be interpreted that there is a significant relationship between knowledge and perceptions of WUS in the use of Acetic Acid Visual Inspection (IVA) at Kombikuno Health Center, West Muna Regency, Southeast Sulawesi Province. From the results of the analysis, the value of OR = 13,684 means that WUS who have less knowledge have 13.684 times the opportunity to have a negative perception in utilizing the VIA examination.

Knowledge that has been documented or stored in a tangible form, can be in the form of a person's health behavior. The behavior change model is also influenced by the role of individual differences in behavior and the stages of decision making and decision taking sometimes not always in accordance with logic and rational thinking.[5]

Perception is the process of receiving stimuli through the five senses which is preceded by attention so that individuals are able to know, interpret and live what they believe. There are several factors that influence the perception of WUS in conducting VIA examinations including knowledge factors, age factors, employment factors, education factors, socio-economic factors and belief factors.[6]

Everyone's perception differs even though they have the same object, most of which can be seen from the education of respondents with high school education. A person's intellectual ability can be obtained from education, the higher a person's education level, the higher the knowledge, the easier it is to receive information and capture the information needed. Knowledge can be obtained by someone in any way, namely through the five senses such as sight, hearing, smell, taste and touch.[7]

The use of the VIA examination is still experiencing obstacles such as the reluctance of women to be examined because of shame, doubts about the importance of the examination, lack of knowledge and fear of feeling sick during the examination. The low knowledge of women about cervical cancer makes women less willing to do early detection, this is because WUS is still unfamiliar with cervical cancer. Lack of public knowledge, especially women, about cervical cancer and reluctance to carry out early detection, causes most patients to come to health facilities in a condition that is already severe and difficult to cure.[8]

There is a significant relationship between knowledge and perception in conducting the IVA test. As an effort for women of childbearing age in early detection of cervical cancer[9]

The same study also agrees that there is a significant relationship between knowledge about early detection of cervical cancer and early detection behavior of cervical cancer in couples of childbearing age in the Mandala Health Center Work Area, Medan Tembung District, Medan City.[6]

Azizah argues that the better the knowledge about cervical cancer, the better the participation of women in cervical cancer early detection programs. With better knowledge about cervical cancer and its problems, women can understand the dangers of cervical cancer and the importance of early detection of cervical cancer for their health so that they are willing to actively participate in cervical cancer early detection programs.[10]

In contrast to the results of research by Ayuni that knowledge about cervical cancer is generally low, especially for behavior seeking health care and cervical cancer treatment. Among women who have heard of cervical cancer, 49% do not know the cause. While 74% can identify at least one risk factor for cervical cancer. Only 33% of women were able to properly manage when women should seek care and 33% identified at least one treatment option for cervical cancer.[11]

The researcher's assumption is that there is a relationship between knowledge and perceptions of WUS in the use of the IVA examination because the respondent's knowledge influences the conduct of the VIA examination. In addition, the knowledge possessed by the respondents is one of the influencing factors in conducting the VIA examination. Moreover, the IVA examination is free of charge by the Puskesmas. In addition, the low level of knowledge of WUS in the Kombikuno Health Center area regarding VIA examinations is mostly due to lack of information. This is due to the lack of promotion and outreach to the public by health workers.

The Relationship of Information Sources with WUS Perceptions in the Utilization of IVA Examination

Based on the table of 70 WUS who never received information in the last 6 months, the majority of WUS, namely 50 people (71.4%) had a negative perception of the use of the IVA examination. Of the 30 WUS who had received information, most of the WUS, namely 25 people (83.3%) had a positive perception of the use of the VIA examination.

The results of the relationship analysis show that the p value is 0.000 or is less than the specified significant value, which is 0.05. This can be interpreted that there is a significant relationship between the source of information and the perception of WUS in the utilization of Acetic Acid Visual Inspection (IVA) at Kombikuno Health Center, West Muna Regency, Southeast Sulawesi Province. From the results of the analysis, the value of OR = 12,500 means that WUS who have never received information have 12,500 times the opportunity to have a negative perception in utilizing the VIA examination.

Knowledge can be obtained from experience that comes from various sources of information so that it can form a belief for someone. One of the factors that affect a person's knowledge is information or counseling from competent people such as midwives, cadres and other health workers.[12]

Individual exposure to health information will encourage health behavior. Even though cervical cancer is now called the first female killer cancer in Indonesia, in fact there are still many women who do not know about cervical cancer. Women must know what and how cervical cancer actually is, that way women can take precautions when they are not infected or know how to properly handle if they are

infected by the virus that causes cervical cancer. In this case, it means that many women do not get information about cervical cancer.[13]

There is a significant relationship between the source of information and the perception of women of childbearing age in cervical cancer examination with the IVA method in the work area of Bangetayu Health Center Semarang City.[5] According to Miftahurrahmi's research (2019), there is a significant relationship between sources of WUS information on perceptions of VIA examinations in the work area of the Puskesmas. Information access affects mothers in cervical cancer examinations with VIA.[14]

According to the researcher's assumption, there is a relationship between sources of information and perceptions of WUS in the use of VIA examinations because information exposure is the more dominant factor associated with WUS behavior in conducting VIA examinations, where most of the information is obtained from health workers. In addition, the delivery of good information between health workers and the community itself will contribute positively to the behavior of early detection of cervical cancer.

Information can be conveyed through counseling using film media, leaflets considering that this method is more effective in increasing one's knowledge and non-formal counseling such as during social gathering, yasinan, etc. so that it can reach people who have never or rarely visited the puskesmas.

Relationship between Family Support and WUS Perception in the Utilization of IVA Examination

Of the 71 WUS with unsupportive families, most of the WUS, namely 45 (63.4%) had a negative perception of the use of the IVA examination. Of the 29 WUS with families who support the majority of WUS, 19 people (65.5%) have a positive perception in the use of the VIA examination.

The results of the relationship analysis show that the p value is 0.008 or is less than the specified significant value of 0.05. This can be interpreted that there is a significant relationship between family support and the perception of WUS in the use of Acetic Acid Visual Inspection (IVA) at Kombikuno Health Center, West Muna Regency, Southeast Sulawesi Province. From the results of the analysis, the value of OR = 3.288 means that WUS with unsupportive families have 3,288 times the chance to have a negative perception in utilizing the VIA examination.

Husband's support is one form of motivation to carry out the VIA examination given by the husband. The role of the family as a small group consisting of individuals who have a relationship with each other, interdependence is a social environment in which the family effectively provides a feeling of security, economically the family functions to provide adequate economic resources to support the care process, socially families foster self-confidence, provide feedback, help solve problems, so it appears that the role of the family is very important for every aspect of health care.[15]

One of the husband's roles in the IVA examination is to provide information about the place and time of the VIA examination, so that WUS knows where and when to carry out the examination. Then husbands also need to guide and support WUS to carry out examinations to prevent cervical cancer.

Furthermore, husbands can provide facilities for WUS to carry out VIA examinations, so WUS can focus more on VIA examinations.[16]

Respondents who get support from a good family will be more likely to carry out an IVA examination. This is due to the strong influence of the closest person or husband will tend to make respondents more motivated to improve their health levels. In addition, the husband's role as a decision maker will greatly affect the behavior of the WUS in conducting the VIA examination. Meanwhile, respondents who received unfavorable support from their families were less likely to carry out an IVA examination.[17]

According to Putra (2019), stating that there is a significant relationship between family support and the participation of women of childbearing age in conducting an IVA examination in Kenjeran Village, Surabaya in 2019.[7]

According to Putu, the husband is the closest person to the mother in interacting and in making decisions. Women who get good social support (support from their partner, family, friends, or community leaders) tend to do early detection of cervical cancer.[18]

According to the researcher's assumption, in this study, husband/family support is still not supportive in the perception that WUS can take advantage of the VIA examination for early detection of cervical cancer, because some husbands of WUS themselves do not have enough information and knowledge to participate in cervical cancer screening using the IVA method. This is evidenced from the respondents' answers that 71% of WUS did not get information and encouragement from their husbands to carry out IVA.

The husband's lack of information and knowledge is caused by the lack of participation of health workers in providing health education, one of which is through counseling. This can be proven through an interview with one of the MCH officers at the Kombikuno Health Center who specifically handles VIA examinations, explaining that the puskesmas officers have never provided health education to the husbands/families of WUS. The target in conveying information regarding early detection of cervical cancer in addition to married WUS, should also be conveyed to husbands or families so that they both know and support each other with this early cervical cancer screening.

The Relationship between Distance Affordability and WUS Perception in the Utilization of IVA Examination

80 WUS with long distances to health facilities, most of WUS, namely 47 people (58.8%) have a negative perception of the use of the IVA examination. Of the 20 WUS with close distance, most of the WUS, namely 12 people (60.0%) had a positive perception in the use of the VIA examination.

The results of the relationship analysis show that the p value is 0.132 or is more than the specified significant value, which is 0.05. This can be interpreted that there is no significant relationship between distance affordability and the perception of WUS in the utilization of Acetic Acid Visual

Inspection (IVA) examination at Kombikuno Health Center, West Muna Regency, Southeast Sulawesi Province.

Distance is the place where the community is from the puskesmas as measured by the time indicator. The working area of the puskesmas can be sub-district, the population density factor, area area, geographical conditions and other infrastructure conditions are taken into consideration in determining the working area of the puskesmas. The affordability of the distance to reach the place of service, really supports someone to take action. According to Lawrence Green's theory that distance and availability of transportation as enabling factors for a motivation to be implemented. Ease of access and utilization of health services is related to several determining factors, one of which is the distance from residence to health care facilities.[19]

According to Yuliwati, there is no significant relationship between affordability and early detection of cervical cancer using the IVA method. Although the distance from residence to the location of the examination is relatively close, the costs incurred for transportation are an obstacle in achieving it, the location of the IVA examination. The distance from the house to the place of examination that is far away can also increase the costs that must be incurred by a woman in conducting a cervical cancer screening program. The high costs that must be incurred will automatically be a woman's consideration in conducting an IVA examination.[20]

According to the researcher's assumption, West Muna Regency is a coastal area, so access to the Kombikuno Health Center or other health facilities takes more than 15 minutes by means of transportation that are difficult to obtain. So that many respondents do not get information about early detection of cervical cancer and do not take advantage of the IVA examination at the Kombikuno Health Center or other health facilities.

There are some respondents who live far from the Kombikuno Health Center or more than 3 km, still carry out an IVA examination at the Kombikuno Health Center. WUS, which is close to the Puskesmas, 80% of respondents do not take advantage of the IVA examination. So it is expected for health workers to provide information about the importance of early detection of cervical cancer and approach cadres and religious leaders to provide support for WUS while conducting VIA examinations.

CONCLUSION

There is a significant relationship between knowledge, sources of information and family support with the perception of women of childbearing age in the utilization of Acetic Acid Visual Inspection at Kombikuno Health Center, West Muna Regency, Southeast Sulawesi Province.

There is no significant relationship between affordability of distance and the perception of women of childbearing age in the use of the Visual Inspection of Acetic Acid (IVA) at Kombikuno Health Center, West Muna Regency, Southeast Sulawesi Province.

SUGGESTION

1. WUS still have less knowledge, so WUS is expected to be more active in visiting health services to get information or communicate actively with cadres because cadres are an extension of information from Puskesmas officers.
2. Increasing socialization to the public that the IVA examination for BPJS health participants is free, and doing more social service activities by holding free IVA examinations for all people in the working area of the Kombikuno Health Center.

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