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## The Role of Task Force SUP IVA on IVA Examination Behavior

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### ABSTRACT

**Background** : The total number of women aged 30-50 years in Temanggung Regency who underwent IVA (Visual Acetic Acid Inspection) examination for early diagnosis of cervical cancer was reported to be 2,127, which accounts for 1.1% of the total population of 114,035 women in that age group. The proportion of WUS who conduct VIA examinations is still well below the established aim of 10% (Dinkes Temanggung, 2022). This study seeks to ascertain the impact of the SUP IVA (Husband cares about IVA examination) Task Force on the conduct of IVA examinations in Women of Childbearing Age (WUS).

**Methods** : This type of research uses quasi-experiments with postest only with control group design. The population in this study was all men who had wives aged 30-50 years in Coyo, Dayohan, and Jekaton Hamlets of Wonosari Village who had not done IVA examination totaling 197 people. With the slovin formula, a sample of 130 respondents was obtained, namely 65 respondents became the intervention group and 65 respondents became the control group. The sampling technique uses purposive sampling. The statistical test of this study used the Chi Square test.

**Result** : The group that received counseling from the SUP IVA Task Force, as many as 11 people (16.9%) carried out IVA examinations. The group that received counseling for female IVA cadres, as many as 6 people (9.2%) carried out IVA examinations. Chi Square's statistical test shows that the role of the SUP IVA Task Force does not have a significant effect on IVA inspection behavior in WUS (*p value* = 0,298). **Conclusion**: There is no influence on the role of Task Force SUP IVA on IVA examination behavior. Provide

input to health workers to involve the role of the husband in the behavior of IVA examination in WUS.

Keywords : Task Force on the role of husbands, cadres, WUS, IVA

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Background. Cancer is one of the health problems whose incidence tends to increase in the community, both in the world and in Indonesia (Ministry of Health, 2015a). Types of cancer in Indonesia that require public health efforts or interventions through national prevention programs are breast cancer and cervical cancer (Ministry of Health, 2015b). One of the measures for early detection of cervical cancer is with IVA. However, awareness of IVA examination is still low. This can be due to a lack of motivation or support for women of childbearing age and access to information obtained (Sholikah, 2023).

According to data (Indonesia Health Profile in 2021), cervical cancer ranks second after breast cancer, with 36,633 cases (17.2%) of the total number of cancer patients in Indonesia. This number has a high mortality rate of 21,003 deaths (19.1%) of all deaths due to cancer. Based on data (Central Java Health Office in 2021), the number of cervical cancer patients increased by 57.9% from the previous year, reaching 2,444 cases.

Based on the health profile of Temanggung Regency in 2022, the number of women aged 30-50 years in Temanggung Regency who underwent IVA (Visual Acetic Acid Inspection) examination for early diagnosis of cervical cancer was reported to be 2,127 people or 1.1% of the total population of 114,035 women at that age. Group. The proportion of WUS conducting IVA examinations is still far below the target set at 10% (Dinkes Temanggung, 2022).

The 2022 Puskesmas Bulu Performance Assessment Report shows that out of 7,171 women aged 30-50 years, only 109 people (1.52%) underwent IVA tests, far from the target of 10%. Meanwhile, in Wonosari village, only 2 people carried out IVA examinations during the January-December 2022 period (Puskesmas Bulu, 2022).

Low early detection is one of the causes of the high incidence of cervical cancer. Timely identification is the most effective measure to prevent delays in cervical cancer treatment. Various methods are used for early identification of cervical cancer, including the use of IVA examination or also called visual inspection of acetic acid. IVA test is a macroscopic examination of the entire cervix using undiluted acetic acid/vinegar, without the help of an enlargement device (Santosa, 2020). Because it is simple and affordable. this examination has been included as a program in the Decree of the Minister of Health of the Republic of Indonesia No. 796/MENKES/SK/VII/2010 which provides technical guidelines for cervical and breast disease control. (Ministry of Health, 2017).

The lack of motivation of women of childbearing age (WUS) for IVA examination is one of the factors causing the low IVA examination. The role of the husband as a motivator is a form of encouragement or support that the husband gives to his wife to do an action (Maryani, 2023). External sources of support and motivation are provided by Task Force SUP IVA, which carries out the function of husband support. A husband's support becomes a moral and material encouragement and inspiration for his wife (Mardjan, 2016). The purpose of the IVA Task Force Cares for Husbands of Women of Childbearing Age (WUS) is to be actively involved in efforts to prevent and treat cervical cancer. The goal is to ensure that couples are willing to undergo IVA (Visual Acetic Inspection) examination Acid (Dartiwen, 2022). Husband's participation can be done by participating in health education which is carried out with the concept of peer group. Peer group education aims to improve one's knowledge and skills to prevent various problems (Indah, 2022).

Cadres are carefully selected and appointed community members to improve health conditions and raise public awareness of the importance of maintaining health through collaborative involvement in many community initiatives, including posyandu programs. (Isnawati, 2019). The emergence of cadres who are empowered by the community can be caused by various motivational factors aimed at improving family and community health. These cadres have the capacity to identify health needs and barriers, understand the resources available in the community, and collaborate effectively with community leaders, government officials, and health workers to encourage independent community involvement in health services (Rasyid, 2021).

Puskesmas Bulu seeks to provide information on Early Detection of Cervical Cancer through IVA Examination targeting only married women. However, the results have not shown any improvement in compliance with the VIA examination. The findinas of a preliminary investigation conducted by researchers through interviews with 10 husbands whose wives were aged between 30 and 50 years in Coyo, Dukuh, and Jekaton Hamlets, Wonosari Village, Bulu District in March 2023, revealed that the ten couples (100%) had never undergone an IVA examination before. The husbands cited three main reasons: first, 10 people (100%) had never been told about IVA screenings; second, 10 husbands were embarrassed to seek information about IVA from midwives and health cadres in the village; and third, the ten husbands (100%) stated that they preferred to obtain information from male cadres rather than female cadres.

The results of the analysis (Widayanti et al., 2017), showed that there was no biavriat significant relationship between the level of husband support and the behavior of undergoing IVA examination (p = 0.719). Meanwhile, the results of the study (Cendraiswati, 2021), showed a significant relationship (p = 0.001, sig < 0.05) between the level of husband support and the behavior of women of childbearing age in early detection of cervical cancer. A contingency coefficient value of 0.342 indicates a moderate relationship.

Based on the description provided, researchers wanted to know the impact of Task Force SUP IVA on IVA Examination Behavior at WUS.

**Methods.** This study uses a quasiexperimental research design, which is an experiment that includes treatment, impact assessment, and experimental units, to determine the impact of the therapy (Henny Syapitri et al, 2021). This study used Only With Control Group Design. Both experimental groups in this design received the same treatment and neither group underwent pre-test prior to the study. Measurements are carried out post-treatment.

This study focuses on the role of Task Force SUP IVA as an independent variable. The dependent variable in this study was the behavior of the WUS IVA examination. The study population consisted of 197 married men, aged 30-50 years, domiciled in Coyo, Dayohan, and Jekaton Hamlets of Wonosari Village. These people have not undergone IVA examination. A sample size of 130 respondents was obtained based on calculations using the formula of Isaac and Michael. Purposive Sampling approach is used for the sampling process.

The research was conducted in Coyo, Dayohan, and Jekaton Villages, Wonosari Villages, Puskesmas Bulu area in December 2023. The instruments of this research are leaflets on IVA examination, IVA examination register book.

Analisa univariate pada penelitian ini menggunakan frekuensi dan persentase. The bivariate analysis conducted in this study involved comparing two separate groups using the Chi Square test. Interpretation of the results shows p value = 0.298 > 0.05. This shows that there is no significant difference in IVA examination behavior between the group that received counseling from the SUP IVA Task Force and the group that received counseling from female IVA cadres.

#### **Result and Discussion.**

#### IVA Examination Behavior in Groups Receiving Counseling from Task Force SUP IVA

Table 1. Data on the Frequency Distribution of IVAExamination Behavior in the GroupReceiving Counseling from the SUP IVATask Force

No	IVA Examination	F	(%)	
1	Did not do	54	83,1	
2	Do	11	16,9	
	Total	65	100,0	

Based on table 4.1 shows that of women of childbearing age (WUS) who received counseling from the SUP IVA Task Force, as many as 11 respondents (16.9%) underwent IVA examination. Based on the results of the study, it can be concluded that the awareness to do the IVA test is still low.

Lack of motivation among women of childbearing age (WUS) to undergo IVA tests is one of the causes of the low frequency of IVA examinations. The husband's duties as a motivator include providing encouragement or support to the wife to inspire her to take action. This assistance can be provided by enabling the couple to meet their requirements while Individual undergoing an Voluntary Arrangement (IVA) assessment (Maryani, 2023). The lack of WUS knowledge about early detection of cervical cancer is caused by the low involvement of mothers in seeking information on the topic. Access to information facilitates the achievement of changes in health behavior, especially the application of early detection of cervical cancer through IVA examination. In addition, certain women who undergo cervical cancer screening may also experience feelinas of embarrassment (Sholikah, 2023).

External sources of support and motivation are provided by Task Force SUP IVA, which plays a role in providing assistance. The support of a husband provides encouragement and incentives both morally and materially for his wife (Mardjan, 2016). The purpose of the IVA Caring for Husbands of Women of Childbearing Age (WUS) is to play an active role in efforts to prevent and control cervical cancer. The aim is to encourage wives to be willing to undergo IVA (Visual Acetic Acid Examination) examination (Dartiwen, 2022). Husbands can participate by conducting health education activities carried out through a peer group framework. Peer group education seeks to improve individual knowledge and abilities to reduce various problems (Indah, 2022). The SUP IVA Task Force consisting of WUS husbands aged 30-50 years who are targeted by IVA is expected to have a greater capacity in motivating and facilitating the improvement of the husband's role so as to encourage WUS to undergo IVA examination.

As in the study (Cendraiswati, 2021), the findings of this study show a significant relationship between the level of support provided by husbands and the behavior of women of childbearing age in early detection of cervical cancer. The analysis showed a p-value of 0.001 (sig < 0.05) and a contingency coefficient value of 0.342 (in the range of 0.26-

0.50), indicating a moderate degree of relationship.

# IVA Examination Behavior in Groups with Counseling for Women IVA Cadres

Table 2. Frequency Distribution of IVA Examination						
	Behavior	in	the	Group	Receiving	
Counseling for Female IVA Cadres						
No	IVA Exam	inati	on	F	(%)	

NO	IVA Examination	F	(%)
1	Did not do 59 90		90,8
2	Do	6	9,2
	Total	65	100,0

Based on table 4.2, it shows that Women of Childbearing Age (WUS) in the group who received counseling for female IVA cadres as many as 6 respondents (9.2%) carried out IVA examination. Based on the results of the study, it can be concluded that the number of women who carry out IVA examinations with the assistance of female IVA cadres is still low.

The role of a cadre, as defined by (Isnawati, 2019), is that cadres have the power to overcome all health problems faced by the community. Public health cadres work within the health system and not in isolation, thus fulfilling their duties as active participants. This research aims to increase knowledge about WUS, thus encouraging the application of the VIA test.

Research (Nuraini et al., 2023) states that awareness of IVA examinations cannot be separated from the role of cadres. The level of knowledge and communication in providing information about cervical Ca and IVA examination affects women's awareness to do IVA examinations.

### Differences in IVA Examination Behavior in Groups Receiving Counseling from the SUP IVA Task Force and Groups Receiving Counseling for Women IVA Cadres

Table 3. Differences in IVA Examination Behavior in					
Groups Receiving Counseling from the SUP					
IVA Task Force and Groups Receiving					
Counseling for Women IVA Cadres					

	IV	IVA Examination						
Mentoring Group		Tidak Periksa Periksa		riksa	Total		p value	
	f	%	f	%	f	%	-	
SUP IVA								
Task Force	54	47,8	11	64,7	65	50	0,298	
Women's IVA Cadre	59	52,2	6	35,3	65	50	,	
Sum	113	86,9	17	13,1	130	100	-	

The data analysis test using the Chi Square Test obtained a p value of 0.298 (p > 0.05) which showed that there was no statistically significant difference in IVA examination behavior between the group who received counseling from the SUP IVA Task Force and the group who received counseling. from female IVA cadres.

However, based on descriptive analysis, it is known that the maternal cadre counseling group and not IVA is more than IVA, which is 52.2% compared to 35.3%. Meanwhile, in the counseling group in the SUP IVA and IVA Task Force, there were more than those without IVA, namely 64.7% compared to 47.8%. Thus, there is a tendency for IVA examination behavior to be carried out in groups that receive counseling by the SUP IVA Task Force rather than groups that receive counseling for female IVA cadres.

Based on the researcher's assumptions in this study, factors that affect women's low awareness to do IVA examinations include lack of support from husbands, low levels of knowledge and women's fear or anxiety about IVA examinations.

Research (Purnamasari, 2023) states that there is a relationship of husband support to the wife's behavior in the IVA examination which is shown by a p value = 0.010 < 0.05. Research (Dewi et al., 2019) stated that there was a relationship between the knowledge of women of childbearing age about cervical cancer and participation in the visual inspection examination of acetic acid which was shown with a p value = 0.028 < 0.05. Research (Isnaini et al., 2020) stated that there was a relationship between the level of anxiety about cervical cancer and the participation of women of childbearing age (WUS) in conducting visual inspections of acetic acid (IVA) in the Sibela Health Center Working Area, which was shown by a p value = 0.000 < 0.05.

The research findings showed that there was no statistically significant disparity in IVA examination behavior between the group that received counseling from the SUP IVA Task Force and the group that received counseling from female IVA cadres. However, there is a tendency for IVA assessment to be carried out in cohorts that receive guidance from the SUP IVA Task Force, compared to cohorts that receive guidance from female IVA cadres. The lack of motivation of women of childbearing age (WUS) to undergo IVA tests is one of the causes of the low frequency of these

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examinations. The absence of spousal support is an external factor that initiates the lack of IVA examination behavior in women undergoing uterine sonography. The husband's job as a motivator is to provide encouragement and support to his wife in order to inspire her to take action. This assistance can be provided by giving the ability to the wife to meet her needs during the IVA assessment (Maryani, 2023). The lack of WUS knowledge regarding early detection of cervical cancer is caused by the limited involvement of mothers in seeking information on this topic. Access to knowledge facilitates the implementation of early diagnosis of cervical cancer through IVA examination. thus encouraging changes in health behavior. In addition, certain women who undergo cervical cancer screening may experience fear and embarrassment (Sholikah, 2023). The aim of the study was to provide health workers with valuable insights into how couples can play a more active role in encouraging WUS to take VUS tests. To increase the involvement of husbands, it is necessary to increase the enthusiasm and support of husbands so as to encourage wives to conduct IVA assessments.

**Conclusion and Suggestions.** The group that received counseling from the SUP IVA Task Force, as many as 11 people (16.9%) carried out IVA examinations. The group that received counseling for female IVA cadres, as many as 6 people (9.2%) carried out IVA examinations. There was no difference in IVA examination behavior in the group that received counseling from the SUP IVA Task Force with the group that received counseling for female IVA cadres (p value = 0.298)

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