Analysis of Knowledge and Attitudes of Pregnant Women Towards Motivation to do the PMTCT VCT Test in the District Bojonegoro

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ABSTRACT

Transmission of human immunodeficiency virus (HIV) from mother to baby is now increasing with the increase in women infected with HIV. This study aims to analyze the knowledge and attitudes of pregnant women towards motivation to conduct PMTCT VCT test in Bojonegoro Regency. This research was carried out in five puskesmas in Bojonegoro, namely Ngambon, Sugihwaras, Kesongo, Malo and Kepohbaru Puskesmas. The study design was cross sectional study. The sampling technique used porportional sampling and a sample of 110 respondents, where data collection was carried out using a questionnaire. Statistical tests used logistic regression tests at the significance level of p <0.05 and a 95% Confidence Interval (IK). The results showed that nearly half of the respondents 47.3% had good knowledge about HIV / AIDS and the PMTCT VCT test tended to have strong motivation at 62%. Statistically variable knowledge and attitudes of pregnant women have a significant relationship when a logistic regression analysis was performed with sig values. 0,000 which means the value is < 0.05. So that the knowledge and attitudes of pregnant women about HIV / AIDS, HIV VCT and PMTCT are considered influential on motivation to carry out VCT PMTCT tests.

Keywords: Pregnant women, motivation, VCT, PMTCT

INTRODUCTION

Data from the East Java Health Office in September 2015 recorded that around 30,526 pregnant women who checked their pregnancies at the health service were 170 pregnant women detected as HIV positive. Meanwhile, in 2016 as many as 920 pregnant women who did the PMTCT test detected 70 HIV positive babies and 20 of them died. Based on data from the Bojonegoro Health Office until December 2018, there were 1026 HIV cases in Bojonegoro Regency with a cumulative number of cases dying with HIV as many as 224 people. HIV cases among pregnant women in Bojonegoro district have also increased. The number of pregnant women with HIV positive in 2018 was 9 pregnant women and until September 2019 there were 17 new HIV positive pregnant women detected. Low maternal knowledge, stigma, and discrimination about HIV and AIDS are the biggest
problems in Indonesia in efforts to reduce the prevalence of pregnant women with HIV. Negative stigma does not only arise from the general public, but also from health workers.

Although HIV / AIDS has entered Indonesia since 1987, most people still do not know about the causes and modes of transmission of HIV / AIDS. For some people, touching or sharing eating utensils or towels, for example, is considered to be able to transmit HIV / AIDS. This is due to the low level of public knowledge about HIV / AIDS.

MATERIALS AND METHODS
In this study, the authors used an observational research design with a cross sectional approach in which data between the independent and dependent variables would be collected at the same time. The population in this study were all pregnant women who carried out ANC K1 examinations at Ngambon, Sugihwaras, Kesongo, Malo and Kepohbaru public health centers in Bojonegoro Regency with a total of 152 using a proportional sampling technique and obtained a sample of 110 pregnant women. The instrument used in this study was a questionnaire. The statistical test used in this study is the logistic regression test. This research has passed the ethical approval with number: 1765/KEPK/II/2020.

RESULTS

1. Characteristics of respondents

Table 1. Frequency Distribution of Respondent Characteristics

| Respondent Characteristics | n   | %    |
|----------------------------|-----|------|
| Age                        |     |      |
| < 20                       | 8   | 7,3  |
| 20-30 years                | 80  | 72,7 |
| >30 years                  | 22  | 20   |
| Education                  |     |      |
| Junior High School         | 17  | 15,5 |
| High School                | 58  | 52,7 |
| Bachelor                   | 35  | 31,7 |
| Job                        |     |      |
| PNS/TNI/POLRI              | 3   | 2,7  |
| Entrepreneur               | 31  | 28,2 |
| Private                    | 34  | 30,9 |
| Housewife                  | 42  | 38,2 |
| Information                |     |      |
| Mass media                 | 4   | 3,6  |
| TV / Radio / Internet      | 14  | 12,7 |
| Health workers             | 30  | 27,3 |
| Community / Environment    | 62  | 56,4 |
| Pregnancy history          |     |      |
| Primipara                  | 62  | 56,4 |
| Multipara                  | 48  | 43,6 |

2. Characteristics of Respondents Based on Knowledge, Attitudes, and Motivation of Pregnant Women

Table 2. Frequency Distribution of Respondent Characteristics

| Respondent Characteristics | n   | %    |
|----------------------------|-----|------|
| Knowledge                  |     |      |
| Good                       | 52  | 47,3 |
| Enough                     | 31  | 28,2 |
| Less                       | 27  | 24,5 |
| Attitudes                  |     |      |
| Positive                   | 59  | 53,6 |
### Analisis Bivariat

1. **Results of Cross Tabulation of Knowledge of Pregnant Women with Motivation**

Table 3. Cross Tabulation of Knowledge Variables on Motivation of respondents

| Knowledge of Pregnant Women | Motivation Pregnant Women |   |   |   |   |
|-----------------------------|---------------------------|---|---|---|---|
|                            | Weak | Strong | Total |   |   |
| Less                        | 19 n | 8  n | 27  n | 17,3% | 7,3% | 24,5% |
| Enough                      | 14 n | 17  n | 31  n | 12,7% | 15,5% | 28,2% |
| Good                        | 15 n | 37  n | 52  n | 13,6% | 33,6% | 47,3% |
| Total                       | 48 n | 62  n | 110 n | 43,6% | 56,4% | 100  |

The table shows that of the 62 respondents who had strong motivation to do the VCT PMTCT, there were 37 respondents (33.6%) who had good knowledge.

2. **Results of Cross Tabulation of Motivational Attitudes of Pregnant Women**

Table 4. Cross Tabulation of Attitude Variables towards Motivation of respondents

| Attitudes of Pregnant Women | Motivation Pregnant Women |   |   |   |   |
|-----------------------------|---------------------------|---|---|---|---|
|                            | Weak | Strong | Total |   |   |
| Negative                   | 34 n | 17  n | 51  n | 30,9% | 15,5% | 46,4% |
| Positive                   | 14 n | 45  n | 59  n | 12,7% | 40,9% | 53,6% |
| Total                      | 48 n | 62  n | 110 n | 43,6% | 56,4% | 100  |

The table shows that of the 62 respondents who had strong motivation to do the VCT PMTCT test, there were 45 respondents (40.9%) who had positive attitudes.

### Analisis Multivariat

1. **Multivariate Test of Knowledge Variables and Attitudes Toward Motivation to Conduct VCT PMTCT Test.**

Table 5. Multivariate Test of Knowledge Variables and Attitudes Toward Motivation to Conduct VCT PMTCT Test.

|                     | B    | S.E. | OR   | df  | Sig. | Exp(B) |
|---------------------|------|------|------|-----|------|--------|
| Step 1<sup>a</sup>  |      |      |      |     |      |        |
| Knowledge           | 0,553| 0,165| 11,218| 1   | .001 | 1,739  |
| Attitudes           | 0,123| 0,041| 8,916| 1   | .000 | 1,131  |
| Constant            | 8,175| 2,070| 15,602| 1   | .000 | .000   |

a. Variable(s) entered on step 1: Knowledge, Attitudes.

Based on the results of the multivariate test output from the variables of knowledge and attitudes towards motivation above, it can be concluded that:

1. Knowledge variable (X1) has a sig value 0.001 < 0.05, which means that there is an influence on the motivation of pregnant women to do the VCT PMTCT (Y).
2. Attitude variable (X2) has a sig value 0.003 < 0.05, which means that there is an influence on the motivation of pregnant women to do the VCT PMTCT (Y).
DISCUSSION

A. Knowledge Analysis of Pregnant Women on Motivation to perform VCT PMTCT test

Based on table 4.6 Frequency Characteristics of Respondents Based on the knowledge of respondents at Puskesmas Ngambon, Sugihwaras, Kesongo, Malo and Kepohbaru, Bojonegoro Regency in January 2020, the results obtained from 110 respondents, there were 52 respondents (47.3%) who had good knowledge of the PMTCT VCT test, 31 respondents (28.2%) had sufficient knowledge and a small proportion had less knowledge, namely 27 respondents (24.5%). Whereas in table 4.8 the motivation of pregnant women to do the VCT PMTCT test shows that 62 respondents (56.4%) had strong motivation and 48 respondents (43.6%) had weak motivation.

These results indicate that if the level of knowledge is getting better about HIV / AIDS or the VCT PMTCT test, it will increase the possibility of the mother to take the VCT PMTCT test when checking her pregnancy, so that if there are pregnant women who have the same characteristics and background, then mothers with knowledge higher level of motivation will have a stronger level of motivation to do the VCT PMTCT test (Pratitis & Pongsibidang, 2013).

The results of a similar study were carried out by Karimah (2017) who examined “The Relationship between Knowledge of Pregnant Women about PMTCT and VCT Examination at Prambanan Health Center” in the working area of Puskesmas Prambanan. From the results of this study, it can be seen from the 68 respondents who were studied that the highest percentage was at the level of knowledge of pregnant women about PMTCT, namely in the good category, namely 30 respondents (42.7%).

Another research that is in line with this research is Desy Octavia’s (2018) research which examines "The Relationship between Knowledge and Attitudes of Pregnant Women about Prevention of Mother-to-Child HIV Transmission (PPIA) with the use of HIV testing at Paya Lombang Puskesmas Serdang Begadai Regency" which states that most Pregnant women have good knowledge about prevention of mother-to-child HIV transmission (PMTCT) (58.1%) compared to pregnant women who have poor knowledge (41.9%). From the cross tabulation results in table 4.12, it is found that respondents with the latest tertiary education are 33 respondents (30%) who have good knowledge about VCT PMTCT compared to respondents who have high school final education, namely 19 respondents (17.3%).

According to Notoamodjo (2010), education has a function to provide or improve community or individual skills regarding the aspects concerned, so that a developing society is achieved. So the level of someone's knowledge of an object is largely determined by the level of education. In general, the higher a person's education, the easier it is to receive information.

According to research Kusumo (2016), states that pregnant women who have good knowledge about their pregnancy will have a high awareness of caring for their pregnancy. One of the efforts made is to schedule pregnancy checks, the benefits of antenatal care, pregnancy danger signs, high risk of pregnancy and places to check for pregnancy as well as regular visits for examinations.

B. Analysis of Attitudes of Pregnant Women on Motivation to perform VCT PMTCT test

From the tabulation results in table 4.7, the attitudes of pregnant women towards the VCT PMTCT test can be seen that out of 110 respondents, 59 respondents (53.6%) were in the positive category doing the VCT PMTCT test and 51 respondents (46.4%) had negative attitudes towards the VCT test. PMTCT.

The results of a similar research conducted by Rahmadina (2019) on “The attitude of pregnant women to prevent mother-to-child transmission of HIV / AIDS (PMTCT) at Balowerti Health Center, Kediri City” shows that most respondents have a positive attitude and will carry out PMTCT. as many as 37 people (38.5%). Conversely, as many as 20 people (20.8%) respondents with negative attitudes to do PMTCT examination.

The results above are also in line with the research results of Pipit Maria et. al (2017) “The Relationship between Knowledge of Pregnant Women and Attitudes of HIV / AIDS Screening at Puskesmas Lubuk Baja, Batam City”. From the results of the study, there were 53 respondents, it was
found that 19 (35.8%) respondents with the attitude of not agreeing to do the screening and respondents with the attitude of agreeing to screen for HIV / AIDS were 34 (64.2%) respondents.

The attitude of pregnant women towards motivation to do VCT PMTCT test is an internal factor which determines the behavior of health service utilization. The attitude in this study is the response of pregnant women regarding the acceptance of the mother of the benefits obtained from PMTCT VCT services and is one of the factors that influence the use of PMTCT VCT. The existence of a positive attitude about VCT PMTCT reflects the concern of pregnant women for the health of themselves and the fetus.

C. The Influence of Knowledge and Attitudes of Pregnant Women on Motivation

Motivation can be influenced by many factors, including education level and knowledge, age, employment status, parity, husband's support, and so on.

In simple terms, motivation is defined as anything that encourages someone to do something. The emergence of the urge to do an action is generally influenced by the knowledge and belief in the action to be performed.

A pregnant woman who has good knowledge about HIV / AIDS testing in pregnant women will have an awareness and willingness to participate in the VCT PMTCT test. The knowledge that they have about HIV / AIDS has led to awareness and correct thinking about the VCT PMTCT test and ultimately a willingness to participate in the PMTCT VCT test.

Based on the results of the multivariate test of the variable knowledge and attitudes of pregnant women towards the motivation to do the VCT PMTCT test in table 4.28, the sig value is obtained. from the knowledge of pregnant women is 0.001 and the sig value. from the attitude of pregnant women is 0.000 which means <0.05 so that there is a relationship between the knowledge and attitudes of pregnant women with the motivation to do the VCT PMTCT test.

Based on the sig value. From the knowledge and attitudes of pregnant women it can be seen that the sig. the attitude of pregnant women is smaller than the sig value. knowledge of pregnant women so that the attitudes of pregnant women have a greater influence on the motivation of pregnant women to do the VCT PMTCT.

From the value of Exp B1 in table 4.28, the result is 1.739, which means that if there is an increase in the knowledge of pregnant women by 1, there will be a change of 1.739 pregnant women's motivation to do the VCT PMTCT test. Thus, if there is an increase in the knowledge of pregnant women from less knowledge to good knowledge, it will increase the motivation of pregnant women to do the VCT PMTCT test by 1,739 times. Likewise, table Exp B2 shows that pregnant women who have a positive attitude have 1,131 times more motivation to do the VCT PMTCT test compared to pregnant women who have a negative attitude.

CONCLUSION

Based on the results of data analysis and discussion with reference to the formulation of the problem and research hypothesis, a conclusion can be drawn as follows:

1. There is an influence between the knowledge of pregnant women about HIV / AIDS, the VCT PMTCT test on the motivation of pregnant women to do the VCT PMTCT test. Pregnant women who have good and sufficient knowledge are more likely to take advantage of VCT PMTCT services than pregnant women who have less knowledge.

2. There is an influence between the attitudes of pregnant women on the motivation of pregnant women to do the VCT PMTCT, where pregnant women who have a positive attitude are more likely to benefit from PMTCT VCT services than pregnant women who have negative attitudes.

3. The logistic regression test results show that the variables of knowledge and attitudes of pregnant women have an effect on the motivation to perform VCT PMTCT tests on pregnant women participating in ANC at several health centers in Bojonegoro Regency.
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CONFLICT OF INTEREST
The author declares that no conflict of interest in this research.

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