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PREDISPOSING FACTOR OF THE WILLINGNESS OF HOUSEWIVES TO TAKE HIV/AIDS TEST IN THE COASTAL AREAS OF JEMBER REGENCY

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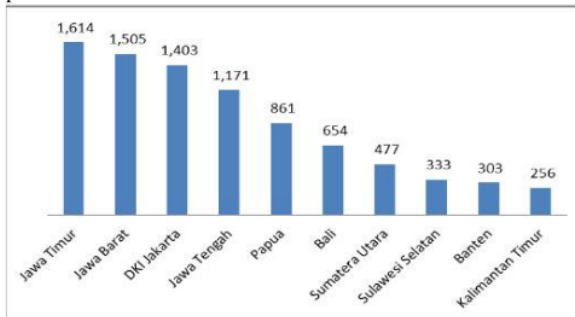
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ABSTRACT. Almost all countries in the world experience an increasing case number of HIV/AIDS from year to year. In East Java, Jember Regency is one of the areas that have the highest case number of HIV where the main infection source to the housewives is from their husbands. The aim of this research is to find out the relation of Predisposing Factor, which is a knowledge and behavior of housewives in doing HIV test. The research methodology used is analytic survey with cross sectional time approach with the samples of as much as 96 respondents of housewives in the coastal areas of Jember. The research result shows that there is a relation between the knowledge and the behavior of housewives to the willingness of taking the HIV test. The importance of increasing knowledge and behavior of housewives about HIV can increase the willingness of taking HIV test.

1. Introduction

AIDS (Acquired Immuno Deficiency Syndrome) issue is increasing until it becomes a global pandemic all over the world. Almost all countries in the world experience an increasing case of HIV/AIDS from year to year. Based on the result of Development Report Result of HIV/AIDS and Sexually Transmitted Disease on the first quarter of 2017, it is stated that East Java province is included in the province that has the highest case number of HIV/AIDS (1). It can be observed from picture 1.



Source : Health Ministry Republic of Indonesia, 2017

Picture 1. The ten provinces reporting the highest case number during January – March 2017

In East Java, Jember is one of the areas that has the highest case number of HIV/AIDS. Based on the data of health department of Jember Regency, it states that there are 4206 people suffering HIV/AIDS in 2018. Based on the data reported by KPA of East Java, there are 1.286 cases happens among housewives. It is even more than the case in WPS which is as much as 568 cases (6,8%). Nationally,

HIV/AIDS cases also happen mostly among housewives as much as 14.721 housewives. The main infection source of HIV/AIDS among housewives comes from their husband themselves. Heterosexual is the main source of HIV/AIDS spreading.

Public Relation of Health Department of Jember Regency states the most HIV/AIDS case number is in the "Gold Triangle" sub district, which are Puger, Kencong, and Gumukmas which are located in the coastal areas of Jember Regency (2). Based on the data of Kencong Public Health Service, it is known that during September 2017 the number of housewives visiting VCT and taking HIV test voluntarily is only one person, while the health workers has initiated the HIV test to the 93 housewives. It shows the lack of VCT clinic utilization in Kencong Public Health Service. Voluntary Counseling and Testing (VCT) or in Bahasa it is called Konseling dan Tes Sukarela (KTS) is one of the strategies of public health which is effective to conduct prevention and also become the entrance to get a case management service and also treatment, support, and medication for people suffering HIV/AIDS at once. This VCT is important because: First, it conducts prevention of HIV infection from someone suffering HIV positive to others with HIV negative or with unclear status, from a HIV positive mother to her children, and also doing counseling or voluntarily test. Second, VCT clinic is an entrance to all HIV/AIDS services which are medical service, Keluarga Berencana (KB), psychosocial service, counseling about healthy behavior, mentally and emotionally support, and also law support and future planning. Third, decreasing stigma in society and supporting Human Right. HIV/AIDS diagnostic has many implications either physically, psychologically, socially, or spiritually. HIV/AIDS can threat life and it needs a whole life medication that it raises stigma in the society (3).

One of the service types in VCT service is PMTCT (Prevention of Mother to Child Transmission). This program is specially made for women, especially housewives. Before the HIV/AIDS is conducted, patient will be given some information about HIV/AIDS in order to develop the patient's knowledge. Based on the background, I am as the researcher interested to hold a research about Predisposition factor including knowledge and willingness behavior of housewives to take HIV/AIDS test in the coastal areas of Jember Regency.

2. Methods

The type of this research is analytical survey with cross sectional time approach. Based on the counting of the sample largeness, the number of samples in this research is determined as much as 96 housewives in Kencong sub district. The data collection is conducted by giving questionnaires to the housewives as the respondents who come to the Kencong Public Health Service. Before filling the questionnaires, the respondents are asked to sign informed consents as a willingness statement of participating in this research. Sampling technique in this research uses quota sampling, which means that sampling can be conducted everywhere by giving questionnaires to the housewives coming to the Kencong Public Health Service until it reaches 96 housewives. Data analyses used is bivariat descriptive analysis which is conducted by using cross tabulation between independent variable and dependent variable. Bivariat analytic is used to find out the relation between both variables; independent variable and dependent variable using Chi-Square test with Yates correction approach. if the test result of chi-square is $p < 0,05$, it means that there is a relation between independent variable and dependent variable.

3. Result and Discussion

Characteristic of Housewives in the coastal areas of Jember Regency

Information about respondent's characteristic includes age and education level background, occupation, and the condition of areas. From the 96 respondents of data collected, the respondent distribution like in table 1 according to the respondent's characteristic states that there are more respondents who has healthy reproduction age, as much as 50 (52,8%) where most of the respondent education level background is further education (Senior High School and University).

Table 1. Characteristic of Housewives in the coastal areas of Jember Regency

Number	Respondent's Characteristic	Frequency	Percentage (%)
1	Age		
	Healthy Reproduction (20-35 years old)	50	52.1
	Reproduction at Risk (< 20 and >35 years old)	46	47.9
2	Respondent Education Level Background		
	Further Education (Senior High School & University)	55	57.3
	Basic Education (Elementary School & Junior High School)	41	42.7

According to Winengan, 2007 in Rahaman, P, 2012. The coastal areas society that is identically as fisherman is a part of the marginalized society that still keep on struggling in every life problem, either they are economic, social, education, health, or culture. Their life is always in a concerned condition; especially in economic because of the income that is depend on the nature condition (4). According to Angraini, 2000 in Rahaman, P, 2012. Generally, the fishermen's household doesn't have a careful planning about their children education. Education for them is not a priority. It can be said that the need of education among of them is still relatively low (4). Based on the research result above, even though the frequency of housewives in the coastal areas of Jember Regency that has further education is as much as 57,3%, there are still many of them who has basic/low education as much as 42,7%.

The Level of Housewives Knowledge about HIV/AIDS in the Coastal Areas of Jember Regency

Based on the research conducted to 96 respondents living in the coastal Areas of Jember Regency, it results the data of frequency distribution of HIV/AIDS knowledge owned by respondents which can be seen on table 2.

Table 2. Distributon of Housewife Knowledge of HIV/AIDS in the Coastal Areas of Jember Regency

Housewife Knowledge of HIV/AIDS	Frequency	Percentage (%)
Good	55	57.3
Poor	41	42.7
Total	96	100.0

Based on the frequency distribution of HIV/AIDS knowledge of Housewives in the Coastal Areas of Jember Regency, it can be divided into two categories; good knowledge and poor knowledge. Table 1 shows that from the 96 respondents living in the Coastal Areas of Jember Regency, 55 respondents (57,3%) has good education and 41 respondents (42,7%) has poor education. the level of knowledge of respondents is rated based on the 31 questions about knowledge. From the questions, many respondents have wrong answers of the question about: The different of HIV and AIDS HIV and also the knowledge about HIV test result.

Based on the Decision of Ministry of Coordinating for People's Welfare of Republic of Indonesia Number 9 Year of 1994, it states about one of the target of information communication and education (ICE) of HIV/AIDS preventing and how to deliver ICE to the highly risk group. Information about HIV/AIDS through the communication media can increase the knowledge of housewives which has high risk to suffer HIV/AIDS and the learned knowledge is expected to be able to change their sex attitude and behavior to prevent HIV/AIDS (5).

Responses of the housewives to the HIV/AIDS test in the Coastal Areas of Jember Regency

Based on the data of frequency distribution about Responses of the housewives to the HIV/AIDS test in the Coastal Areas of Jember Regency, it can be described as follows:

Table 3. Distribution of Responses of the housewives to the HIV/AIDS test in the Coastal Areas of Jember Regency

Responses of the housewives to the HIV/AIDS test	Frequency	Percentage (%)
Good Responses	57	59.4
Poor Responses	39	40.6
Total	96	100.0

Frequency distribution of Responses of the housewives about HIV/AIDS test is divided into two categories which are Good responses and Poor responses. Table 3 shows that from 96 respondents living in the coastal areas of Jember regency, 57 respondents (59,4%) have good responses and 39 respondents (4,7%) have poor responses. Based on the theory of Reasoned-Action (FisbeinAjzen), response of someone will influence in the behavior through a result of profit and loss consideration of the behavior (6).

Relation between Variables

Relation between the Knowledge Level of Housewives about HIV and the Willingness to take HIV test in the Coastal Areas of Jember Regency

The following is a test for the relation between two variables which are about the Knowledge level of housewives about HIV and the Willingness to take HIV test in the Coastal Areas in Jember Regency.

Table 4. Relation between the Knowledge Level of Housewives about HIV and the Willingness to take HIV test in the Coastal Areas of Jember Regency

Knowledge Level of Housewives about HIV	Willingness to take HIV test		Total		p- Value
	Willing (%)	Unwilling (%)	n	%	
Good	50 90,9	5 9,1	55	100	0,042
Poor	30 73,2	11 26,8	41	100	
Total	80	16	96		

From the research result above, there is a meaningful relation between the housewives knowledge of HIV/AIDS and the Willingness to do HIV/AIDS test in the Coastal Areas of Jember Regency. It can be seen from the p value which is $0,042 < 0,05$. This research is in line with the research held by Octaviani, L 2015. it is known that there is a meaningful relation between the general knowledge about HIV/AIDS to the housewives who have husbands working as intercity car driver and the effort of preventing HIV/AIDS in Tanah Bumbu Regency (5). According to Ajik S, Sarwanto, 1999 in Oktarina 2009, knowledge is a predisposing factor the happening of behavior changing. Based on the adaptation theory, if the level of knowledge is increasing at least it can push them to have a good attitude and behavior too (7). This research result is in line with the theory. However, on the other hand, with the knowledge that is misleading about something because of the inappropriate, incomplete, or too exaggerated in delivering the information, or the existence of misleading believe in the group of society which influences especially to the HIV/AIDS information will raise and develop myths. The myths referred here are the society perception and believe which are actually misleading. In case HIV/AIDS, the myths are the misleading perception about HIV/AIDS. Because of the raise and the development of the myths to HIV/AIDS, it will create discrimination behavior and stigmatization in society to the people suffering HIV/AIDS and their family (7).

The Relation between the Response of the Housewives and the Willingness to take HIV/AIDS Test in the Coastal Areas of Jember Regency

Table 5. The Relation between the Response of the Housewives and the Willingness to take HIV/AIDS Test in the Coastal Areas of Jember Regency

Knowledge Level of Housewives about HIV	Willingness to take HIV/AIDS test		Total		p- Value
	Willing (%)	Unwilling (%)	n	%	
Good Response	52 91,2	5 8,8	57	100	0,026
Poor Response	28 71,8	11 28,2	39	100	
Total	80	16	96		

From the research above, there is a meaningful relation between the response of the housewives about HIV/AIDS and the willingness to take the HIV/AIDS test in the coastal areas in Jember Regency. It can be seen from the p value which is $0,026 < 0,05$. It is in line with the research held by Setiyawati (2014) which states that even though the informants haven't known about HIV/AIDS test and HIV/AIDS procedure, they think that HIV/AIDS test can give them benefit. By taking HIV/AIDS test, they can add knowledge about HIV/AIDS and HIV/AIDS test and find out their HIV/AIDS status so that they can do preventive actions especially for pregnant women so that their conceived babies can be helped soon. While the losses of taking HIV/AIDS are the feeling of fear and shame, cost, and time spent (6). Based on the Cognitive Social Theory, stating response is influenced by environmental factor either the physical or social environment (Bandura, 1962). Physical environment according to the opinion of the informants among of them are the service given, the location of service that is reachable, and cost. Social environment that influences the response of the housewives is the support from husband, friends, cadres, public figures, and the existed HIV/AIDS stigma (6).

4. Conclusion and Suggestion

From this research result, it can be concluded that there is a meaningful relation between the knowledge and the response of the housewives about HIV/AIDS and the willingness of taking HIV/AIDS test in the coastal areas of Jember Regency. the increase of knowledge to the housewives is highly advised more over by giving counseling before taking HIV/AIDS test in order to increase the scope of HIV/AIDS test and the housewives can maintain the good behavior in order to prevent HIV/AIDS transmission.

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