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## The Relationship of Husbands, Friends and Health Workers Support on The Implementation of Voluntary, Counseling and Testing (VCT) on Housewives

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### ABSTRACT

*Kencong Sub-district is one of the sub-districts with the highest HIV / AIDS cases in Jember Regency with total 150 cases in 2017-2019. HIV / AIDS cases are most common in residents who work as housewives. This study aims to determine the support of husbands, friends and health workers to the housewives in conducting early detection of HIV/AIDS through the Voluntary, Counseling and Testing (VCT) program. This research type is quantitative research with cross sectional approach. Data was collected through questionnaire. The sample used was 96 housewives. The results of the study using the chi square statistical test showed that there was a significant relationship between husband support (OR = 5.257; 95% CI = 1.377-20.064; p = 0.009), peer support (OR = 4.846; 95% CI = 1.809-12.982; p = 0.001), and health workers support (OR = 5,788; 95% CI = 2,067-16,209; p = 0,000) towards the implementation of Voluntary, Counseling and Testing (VCT). Conclusion: It requires comprehensive support between husband, friends and health workers to conduct VCT in order to prevent HIV/AIDS in Housewives. Suggestion: HIV/AIDS care forum needs to be established in collaboration with the government, health workers, health cadres, and families in preventing HIV/AIDS.)*

**Keywords:** Support of Husbands, Friends, Health Workers, Housewives, VCT

### I. INTRODUCTION

Acquired Immune Deficiency Syndrome (AIDS) is a group of symptoms or disease caused by the declining immunity in the human body due to the infection of HIV which can be transmitted through people [1]. HIV/AIDS can be transmitted through sexual contact such as sperm, vaginal secretions, blood, and breast-milk [2]. HIV/AIDS disease is the world's number four killer. More than 150 countries in the world have reported the case of Human Immunodeficiency Virus / Acquired Immuno Deficiency Syndrome (HIV/AIDS) [3].

The latest number of HIV infection based on the key population group in Indonesia at 2016 was 90.915. On January until March 2017, the latest HIV infection reported in Indonesia was 10.376 people, while there were 673 people with AIDS. The highest HIV case was at the age range of 25 - 49 years old with 69,6%, while the highest AIDS case was in the age range of 30-39 years old with 38,6%. Based on the profession, the number of AIDS sufferer on housewives is 12,3% [4]. The great number of sufferers on housewives is assumed as the husband with HIV transmitted the wife through sexual intercourse without using condoms [5].



The HIV/AIDS cases in Jember increased significantly from 2014 until 2015 by 720 cases. The number is the fifth highest in East Java Province [6]. Based on the profession, housewives (IRT) is in the highest position with 491 case findings in Jember Regency. One of sub-districts with highest HIV/AIDS case number is Kencong Sub-district. The number of HIV sufferers in Puskesmas Kencong in 2017-2019 was 150 cases [7].

An effort taken by the government to decrease the case of HIV/AIDS is through Voluntary, Counseling, and Testing (VCT) program. This is in line with the article made by Rachmawati et.al (2019) which states that preventive and promotive efforts in preventing HIV/AIDS in housewives is by conducting Voluntary, Counseling, and Testing (VCT) and condom use [8]. VCT program is the initial step in preventing, taking care, supporting and treating the HIV/AIDS sufferer. Through VCT program, someone can get early detection on his/her HIV status. This will give an opportunity to the people with HIV/AIDS (ODHA) to reach the medication comprehensively to decrease the HIV/AIDS case, decline the fatality rate, and prevent the sexual transmittance between a couple. The effective medication will be able to decrease 96% of the HIV/AIDS sufferer to transmit the virus to their sexual partner. If the VCT result shows HIV negative then they may maintain to stay negative through several preventive efforts such as safe sexual behavior, the use of condoms, circumcision, and safe injection behavior [9].

VCT visit to housewives is relatively low, this is due to the stigma on the HIV/AIDS disease, being afraid of the result of HIV/AIDS test, being afraid of excommunication, and never feel committing a risky behavior [10]. The fear of and stigma on HIV/AIDS is caused by the lack of information and support given to the housewives. Continuous support from the closest people like husband will give a great

impact on someone's decision to take the HIV test. It is in line with the study of Yulianti (2013) stated that a wife will only obey her husband that she cannot decide individually concerning anything related to the medical service access including the counseling service [11].

So does support from friends has a big role according to the study of Pichon et al (2015) in the USA stated that friend's support had an impact on those having risk of infected by HIV [12]. According to Wahyunita (2014), health workers have an influence for the society in utilizing the medical service. The influence can be in the form of support given by the health workers as the driving factor in utilizing the VCT clinic. The health workers support can be particularly in the form of information support either the information concerning HIV transmission and its prevention, as well as giving motivation to the society to take voluntary HIV examination [13].

The result of preliminary study conducted by interviewing the head of Puskesmas Kencong, Jember Regency showed that most of the society took VCT due to the health workers support factor, while the VCT taken voluntarily is still relatively low. Based on the problems background, the writer conduct a study entitled "The Relationship of Husband, Friend, and Health Worker Support with the VCT Implementation on Housewives"

## II. METHODS

$$q = 1 - p$$

$$d = \text{desired absolute precision } (0,1)$$

It is known that the number of population (N) was

18.578 then the amount of sample in this study was:

$$n = \frac{18578 \cdot 1,96^2 \cdot 0,5 \cdot (1 - 0,5)}{0,1^2(18578 - 1) + 1,96^2 \cdot 0,5 \cdot (1 - 0,5)}$$

$$n = \frac{17.842,3}{186,73}$$

$$n = 95,5 = 96$$



Based on the sample size calculation above, then the number of sample in this study was 96 housewives.

Sampling technique used in this study was quota sampling which was conducted by giving questionnaire to the housewives who came to Puskesmas Kencong until fulfilling the 96 numbers of samples.

### C. Analysis

The bivariate analysis in this study involved nominal measurement scale on the dependent and independent variables. Chi square was used as the statistical test. Statistics meaning or significance was seen from the result of p value (<0.05) and the  $\chi^2$  value which was calculated using chi square test formula as follows:

$$\chi^2 = \sum \frac{(O - E)^2}{E}$$

According to Murti (2013), the relationship strength among variables was showed by the Odds Ratio (OR) and Confidence Interval of 95%. Here is the interpretation of the Odds Ratio (OR) value [16]:

#### A. Study Design

The study type is analytical study with cross sectional approach. This study aims to determine the relationship of husband, friend, and health workers support with the Voluntary, Counseling, and Testing (VCT) implementation on housewives in Puskesmas Kencong. Study data collection on the study object is conducted once.

#### B. Study subjects

The study was conducted on August until October 2019. The population was 18.578 [14]. The amount of sample in this study was calculated by using the sample size formula for cross sectional study as follows [15]:

$$n = \frac{N \cdot Z^2 \cdot 1 - \frac{\alpha}{2} \cdot p \cdot q}{d^2 (N - 1) + Z^2 \cdot 1 - \frac{\alpha}{2} \cdot p \cdot q}$$

Description:

n = Sampel size

N = Number of population

$Z^{2 \cdot 1 - \alpha/2}$  = Z value for the trustworthiness degree of 95% (1,96)

p = proportion estimation for the willingness in taking HIV test

Tabel 3.1 Odds Ratio (OR) Interpretation

Source: Murti (2015)

## III. RESULTS AND DISCUSSION

### A. Results

TABLE I. FREQUENCY DISTRIBUTION

Variable	Taking VCT				Total	
	Yes		No		n	%
	n	%	N	%		
<b>Husband Support</b>						
Yes	46	56,8	35	43,2	81	100
No	3	20	12	80	15	100
<b>Friend Support</b>						
Yes	42	61,8	26	38,2	68	100
No	7	25	21	75	28	100
<b>Health Worker Support</b>						
Yes	43	62,3	26	37,7	69	100
No	6	22,2	21	77,8	27	100

Source: Primary Data (2019)

Based on table 1, it showed that most of the housewives who took VCT gained supports from husbands (56,8%), friends (61,8%), and health workers (62,3%). While other housewives who did not conduct VCT visit, most of them did not get supports from husbands (80%), friends (75%), and health workers (77,8%).



**TABLE II.** CHI SQUARE STATISTICAL TEST RESULTS

Variable	OR	95% CI	$\chi^2$	<i>p</i> value
Husband's Support	5,257	1,377-20,064	6,855	0,009
Friend's Support	4,846	1,809-12,982	10,728	0,001
Health Worker's Support	5,788	2,067-16,209	12,485	0,000

Source: Primary Data (2019)

The result of Chi Square test on table II showed that there was a significant relationship between husband's support ( $p=0,009$ ), friend's support ( $p=0,001$ ), and health workers ( $p=0,000$ ) with the VCT implementation on housewives in Puskesmas Kencong.

The result also explained that the study subject who gained supports from husband had 5,3 times bigger opportunity to conduct VCT visit compared to those who did not get husband's support (OR= 5,257; 95% CI= 1,377- 20,064). So did the study subject who gained friend's support had 4,8 times bigger opportunity to conduct VCT visit compared to those who did not get friend's support (OR= 4,846; 95% CI= 1,809-12,982). While the study subject who gained supports from health workers had 5,8 times bigger opportunity to conduct VCT visit compared to those who did not get health worker's support (OR= 5,788; 95% CI= 2,067-16,209).

#### B. Discussion

In this study, husband's support correlated to the VCT implementation on housewives ( $p=0,009$ ). The Odd Ratio (OR) value also showed a positive result, where housewives who gained husband's support had 5,3 times bigger chance to conduct VCT visit compared to those who did not get husband's support (OR= 5,257;

95% CI= 1,377-20,064). Husband's support given is usually in the form of information and taking the patient to the HIV test center.

This is in line with the result of Maskuniawan and Azinar (2018) which mentioned that the support gained by respondents from their family can be in the form of suggesting and persuading the respondent to take the HIV test, providing information concerning HIV test, showing their care by taking the respondent to the HIV test center, and reminding them the significance of taking HIV test. Such kind of support can influence the respondent to take the HIV test [17]

This is in line with the study result in Semarang in 2012 where there was a relationship between husband's support and the pregnant woman behavior to take the HIV test [18]. Besides, there was a study by Asmaruddin (2015) stated that there was a significant difference between husband's support and friend's support on the HIV test implementation on **housewives** [19].

Bukit and Simanjuntak (2015) stated that men had a big role in controlling the household condition, either in terms of finance, decision making, and job. The patriarchy culture developed in Indonesia explained that husband is a head of family and decision maker in his family including giving permission to his wife to take the HIV test [20]. It is in line with the study of Yulianti (2013) which showed that women cannot reject the sexual intercourse with their husband and ask them to use condoms during the intercourse which will increase the risk of being infected by HIV/AIDS when the husband has been infected earlier. The taboo of discussing sex, reproduction health, and any information concerning sexuality made women reluctant to discuss sexual problems with their husband. Wives only obey the husband's wish that they



cannot decide by themselves anything related to the health service including the counseling [11].

Friedman (2010) mentioned that family has several functions such as affective function, socialization function, reproduction function, economic function, and medical treatment function. Preventing HIV/AIDS transmission is one of efforts to achieve the medical treatment function. The HIV/AIDS transmission preventive effort should be conducted through increasing the role of husband and wife to apply self-protection from the HIV/AIDS infection [21].

In this study, friend's support is also related to the VCT implementation on housewives ( $p=0,001$ ). The Odd Ratio (OR) value also showed positive result, where the housewives who gained supports from friends has 4,8 times bigger chance to conduct VCT visit compared to those who did not get any friend's support (OR= 4,846; 95% CI= 1,809- 12,982).

This is in line with the statement of Gunung et al (2018) that friend's support also affects someone's decision to take the HIV test. Someone may decide not to take the HIV test because she did not get any supports from her partner, friends, or family members after someone told about HIV testing [22]. Maskuniawan and Azinar (2018) stated that continuous support from closest people such as friends and society will create a significant impact on someone's decision to take an HIV test [17].

This is similar to the research of Widiyanto et al (2009) stated that the support from relations will give a significant effect to the VCT re-practice on WPS in Sunan Kuning Red District of Semarang City [23]. This study result is suitable to the research of Pichon et al (2015) in the USA which stated that friend's support will be meaningful for

those having risk of infected by HIV [12]. The important role of peers can be used as the basis of housewives empowerment as the health cadre to disseminate information or knowledge concerning HIV/AIDS and HIV test.

This study also showed the significant relationship between health worker support and VCT implementation on housewives ( $p= 0,000$ ). The Odd Ratio (OR) value also showed positive result, where the housewives who gained medical worker's support has 5,8 times bigger chance to conduct a VCT visit compared to those who did not get any supports from the medical workers (OR= 5,788; 95% CI= 2,067-16,209).

Health worker is an important component which can influence the society to utilize a certain medical service. The influence can be in the form of support which can be the driving factor in utilizing the VCT clinic [13]. The **health worker support** especially in the form of information support either in the form of information concerning the transmission, symptoms, and preventive effort on HIV/AIDS, as well as giving motivation to the society to take a voluntary HIV/AIDS examination can increase the knowledge of housewives about HIV / AIDS. This is in line with research conducted by Hikmah et.al (2019) that 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  $0,042 < 0,05$  [24].

This result is suitable to the study of Arianty (2018) which stated that there is a relationship between health worker's support and the pregnant woman behavior in taking the HIV test [25]. The same study result was obtained by Maskuniawan and



Azinar (2018) which showed that in the respondent group with little health worker support had 5,29 times bigger chance not to take HIV test than those supported with the health workers. The study showed that the health worker support variable is the risk factor of the HIV test practice and statistically had a significant relationship [17].

#### IV. CONCLUSION

The conclusion in this study is that it requires a comprehensive support from husband, friends, and health workers to take VCT to prevent HIV/AIDS infection on housewives (IRT).

Suggestion: an HIV/AIDS care forum shall be established which involves the cooperation of government, health worker, health cadres, and family in preventing HIV/AIDS. Health workers shall actively participate in conducting mobile VCT and providing information concerning HIV/AIDS to the health cadres and society. The health cadres formation shall include housewives who actively participate as peers that will ease the socialization among housewives in their surrounding environment.

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