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Provider Initiated Testing and Counselling (PITC) based on The Theory of Planned Behavior (TPB) for HIV Prevention

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ABSTRACT

Increased prevalence of HIV in pregnant women is worrying and a health threat. Health Ministry data 21,103 pregnant women undergoing HIV testing, 534 (2.5%) positive HIV infection. The purpose of knowing the effect of Provider Initiated Testing And Counseling with the Theory of Planned Behavior Approach to HIV Prevention. Pre-experimental research method with quantitative approach, One-Shot Case Study research design. The population and sample were 105 midwives in 10 health centers in Surabaya analyzing the data using the Coefficiens test, significance (P <0.05). The results of the study were significant effects of PITC on the TPB approach to HIV prevention. PITC with the TPB approach can prevent HIV.

Keywords: HIV, Provider Initiated Testing and Counselling, The Theory of Planned Behavior

INTRODUCTION

The Ministry of Health has completed drafting the Guidelines for Implementing Integrated HIV Tests and Counseling at Health Facilities / PITC, which provides guidance for health workers in initiating HIV testing and counseling for patients who come to get health services for their complaints. The problem of HIV / AIDS in Indonesia are one of the national health problems that requires comprehensive joint management. Since the last 10 years, the number of AIDS cases in Indonesia has experienced a significant surge. This requires the attention of all parties, especially health workers who provide health services for patients with HIV / AIDS. One form of service is HIV counseling and testing which aims not only to make a diagnosis but also provide counseling to get therapy and deal with various problems faced by patients.

Ministry of Health data shows that of 21,103 pregnant women undergoing HIV testing, 534 (2.5%) were HIV positive. The Ministry of Health's HIV Epidemic Mathematical Modeling Results in 2012 show HIV prevalence in populations aged 15-49 years and HIV prevalence in pregnant women in Indonesia is expected to increase. The number of HIV-AIDS cases is estimated to increase from 591,823 (2012) to 785,821 (2016), with the number of new HIV infections increasing from 71,879 (2012) to 90,915 (2016). Meanwhile, the number of AIDS-related deaths in the population of 15-49 years will almost double in 2016 (1). Data from the United Nations of AIDS (UNAIDS) in 2012 showed that in Indonesia there was an increase in the number of new HIV infections by more than 25% in the period 2001 to 2011. The cumulative number of AIDS cases in Indonesia since April 1, 1987 to June 2013 was 108,600 HIV cases and 43,667 AIDS cases, with cases of AIDS deaths totaling 8,340 cases. Currently HIV / AIDS cases have spread in 341 of 497 districts / cities in all provinces in Indonesia.

In Antenatal Care examinations for pregnant women who first come for a pregnancy check up at the puskesmas, an integrated ANC examination will be conducted. In this case the midwife carries out an integrated ANC examination, among others, the implementation of PITC to recruit pregnant and non-reactive pregnant women. Activities carried out in PITC as a way to detect HIV transmission in pregnant women and their fetuses. The implementation of PITC carried out by midwives seems to be a little pushy because it must be carried out on advice and advice or orders from the midwife so that not all pregnant women will be willing to carry out HIV testing. This event is most likely due to the presence of stigma and discrimination by the community on the incidence of HIV / AIDS in someone. Increased Trends of HIV Infection in Women and Children therefore various efforts are needed to prevent HIV infection in women, as well as prevent HIV transmission from pregnant women to babies, namely PMTCT (Prevention of Mother to Child HIV Transmission). The adverse effects of HIV transmission from mother to baby can be prevented if: (1) Early detection, (2) Controlled (Mothers do healthy living behavior, Mothers get prophylactic ARV regularly, Mothers do ANC regularly, Based on this, research is conducted for knowing the implementation of the PITC by midwives with the TPB approach to HIV prevention for pregnant women

METHODS

Researchers used quantitative research that is research that emphasizes testing theories through measuring research variables with numbers and analyzing data with statistical procedures (Sugiyono, 2008). This study aims to look at the

implementation of PITC by midwives with the TPB approach to HIV prevention in pregnant women and to see the intention of mothers to carry out PITC examinations after getting an explanation of PITC. The implementation of PITC by midwives was carried out in 10 health centers by providing treatment namely by giving quisioners and carrying out observations on the implementation of PITC conducted by midwives with the TPB approach. The research population is the entire research object or object under study (Arikunto, 2010). The population in this study was 105 midwives in 10 health centers in Surabaya who were prone to HIV transmission and pregnant women who came first to have their pregnancies checked and those who checked but did not implement PITC. Bivariate analysis was carried out on two variables to determine the relationship or correlation, differences. The test used in this study the t-test test carried out were: Independent Sample T Test, Descriptive Statistics, Normality Test, Mann-Whitney Test.

RESULTS

Table 1. Path Analysis Test Results

Independent Variable	Dependent Variable	Estimate	S.E.	C.R.	P	Information
PITC	Attitude	1.290	0.338	3.812	0.000*	Significant
	Intention	1.322	0.471	2.803	0.005*	Significant
	Behavior	0.666	0.207	3.219	0.001*	Significant
Intention	Attitude	0.513	0.128	4.012	0.000*	Significant
	Behavior	0.140	0.040	3.540	0.000*	Significant

Based on table 1, the path analysis test shows that, there is a significant influence between PITC and the sig attitude. 0,000 or (P <0.05). There is a significant influence between PITC and sig's intention. 0.005 or (P <0.05). There is a significant influence between PITC and sig behavior. 0.001 or (P <0.05).

Table 2. Effect of Intention and Attitude

Descriptive	Influence	Estimate	S.E.	C.R.	P	Information
Attitude	Intention	0.513	0.128	4.012	0.000*	Significant
Niat	Behavior	0.140	0.040	3.540	0.000*	Significant

There is a significant influence between intention and sig attitude. 0.000 or (P <0.05), and there is a significant influence between intention and sig behavior. 0.000 or (P <0.05).

Table 3. Test Ranks or Ranking Tests

Group	n	Mean Rank	Sum of Ranks	Mann-Whitney U Test	Asymp. Sig. (2-tailed)	Information
Before PITC	105	53.00	5565.00	0.000	0.000	Sign
After PITC	105	158.00	16590.00			
Total	210					

Based on table 3 statistical tests show that there are significant differences between groups before and after PITC sig. 0.000 or (P <0.05).

Table 4. Model Summary

Model	R	R Square	Adjusted R Square	Standart. Error of the Estimate
1	0.284	0.081	0.072	1.06874

Based on table 4 shows that multiple correlation coefficients obtained the value R = 0.284 means that the relationship level of the PITC method with the TPB approach to prevention of HIV behavior including strong categories with R Square (R2) was obtained at 0.284 or 28.4% prevention of HIV behavior influenced by PITC with the TPB approach with the standard deviation estimate is 1.069. Whereas to test the research hypothesis with the formulation of the problem, ANOVA different tests were conducted, the results of the ANOVA different test can be seen in table 5.

Tabel 5. ANOVA Tests

	Model	Sum of Squares	df	Mean Square	F	Sig.	Information
1	Regression	10.314	1	10.314	9.030	0.003	Significant
	Residual	117.648	103	1.142			
	Total	127.962	104				

Based on table 5 shows that there is a significant influence between the PITC method and the TPB approach to prevention of HIV behavior in sig. 0.003 or ($P < 0.05$). As for knowing multiple linear regression equations and testing hypotheses with t statistics for independent variables, a coefficients test is performed, the results of the coefficients test can be seen in the following table.

Table 6 Coefficiens Test Results

Variabel Dependent	Variabel Independent	t	Sig.	Information
PITC with an approach TPB	Behavior Prevention HIV	3.005	0.003	Sign

Based on table 6 shows that there is a significant influence between the PITC method and the TPB approach to prevention of HIV behavior in sig. 0.003 or ($p < 0.05$).

DISCUSSION

The Effect of PITC on the Attitudes of Pregnant Women

The value of the influence of PITC on the attitude of pregnant women means that the implementation of PITC that has been carried out and given by midwives either by coercion or voluntarily can affect the attitude of pregnant women in participating and implementing PITC. The implementation of PITC carried out by force can cause the attitude of pregnant women to be forced to implement PITC, but it is hoped that in implementing PITC the TPB approach can change or make the attitude of pregnant women willing to implement PITC without coercion or volunteerism.

The attitude of pregnant women towards the implementation of PITC can affect the implementation of PITC so that attitudes are part of the behavior in which someone who has an attitude towards something can influence one's intention to carry out an action as expected. Where this attitude is expected to conduct an examination by creating a positive attitude where if the negative results of pregnant women are known to be relieved and not worried about the health of the fetus, whereas if the results are positive pregnant women are not angry but feel the need to treat the disease so that the mother and fetus can be safe and healthy the treatment will run smoothly because the pregnant mother is cooperative.

Effect of PITC on Intention of Pregnant Women

The value of the influence of PITC on the intention of pregnant women is 0,000 < 0.005 , which means that the implementation of PITC that has been carried out and given by midwives either by coercion or voluntarily can affect the intention of pregnant women to participate in and implement PITC. The implementation of PITC carried out by force can cause the intention of pregnant women to be forced to implement PITC, but it is hoped that in implementing the PITC the TPB approach can change or make pregnant women have the intention to implement PITC without coercion or voluntary activities even though they have not conducted PITC activities or examinations.

A person's intention in carrying out an action is influenced by several things, among others, the information obtained through training can make a person to implement PITC better than those who have never carried out training. In this case PITC influences attitudes and attitudes affecting the intention of pregnant women in implementing PITC.

Effect of PITC on the behavior of pregnant women

The implementation of PITC activities can not only affect the attitudes and intentions of pregnant women in conducting PITC but also on a person's behavior to carry out these activities. PITC can affect a person's behavior based on the attitudes and intentions of pregnant women in implementing PITC. The value of the influence of PITC on the behavior of pregnant women is 0.001, which means that the implementation of PITC that has been carried out and given by midwives either by coercion or voluntarily can affect the behavior of pregnant women in participating and implementing PITC. It would be better if the implementation of PITC was carried out without coercion.

The Effect of PITC by TPB Approach on HIV Prevention in Pregnant Women

The implementation of the PITC activities using the TPB approach was carried out in 10 health centers in Surabaya which were the sites of research to find out the benefits of HIV prevention were greater or the same as the implementation of PITC as usual. PITC can influence one's attitudes, intentions and behavior based on this, so the implementation of PITC is carried out with the TPB approach which is expected to get better results compared to the implementation of PITC in general.

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CONCLUSION

Based on the research on the Effect of Provider Initiated Testing and Counseling (PITC) with The Theory of Planned Behavior (TPB) Approach to HIV Prevention can be concluded as follows: There is an influence of PITC (Provider Initiated Testing And Counseling) on the attitude of pregnant women. There is the influence of PITC (Provider Initiated Testing And Counseling) on the intention of pregnant women. There is the influence of PITC (Provider Initiated Testing And Counseling) on the behavior of pregnant women. There is the influence of PITC (Provider Initiated Testing And Counseling) with the Theory of Planned Behavior (TPB) approach to HIV prevention in pregnant women.

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