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Development of Social Capital Based on Health Promotion Model to Improve Behavior for Taking VIA Test

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ABSTRACT

VIA Test is an alternative screening examination of pap smears because it is usually inexpensive, practical, very easy to carry out and simple equipment and can be done by health professionals other than gynecology doctors. The purpose of this study was to prove the development of social capital-based health promotion to improve maternal behavior in following VIA Test to detect early cervical ces. This type of research was quasy experiment research with non equivalent pre test post test control group design, to analyze the influence of social capital-based health promotion to improve the behavior of mothers of fertile age couples in taking the VIA Test. The sampling technique was multistage random sampling with a sample size of 160. The independent variable of the research was a social capital-based health promotion module. The dependent variables were cognitive, perception, commitment and behavior for taking VIA Test. Data analysis were carried out by t-test and multiple linear regression test. Showed significant differences between pre test and post test on social capital, perception, commitment and behavior of mothers in taking the VIA test. There were a significant difference between intervention group 1 and control and intervention group 2 with control on cognitive, perception, commitment and behavior of mothers in taking VIA test. From the results of multiple linear regression analysis, it was found that the effect of social capital-based health promotion on maternal behavior in taking VIA Test was significant (p-value = 0.021). The influence of perception and commitment on maternal behavior in taking VIA Test was significant (p-value = 0.000).

Keywords: social capital; perception; commitment; behavior

INTRODUCTION

Background

VIA test (Visual Inspection with Acetic Acid) is a cervical examination by looking directly at the cervix after applying the cervix with acetic acid solution 3-5%. If after the appearance of acetic acid 3-5% there is a change in color, which looks white patches, then there is a possibility of pre-cancerous stage abnormalities. Women who are recommended for VIA Test are aged 30-50 years. The VIA method is designed for people who are far from health facilities⁽¹⁾. The requirements for taking part in the VIA Test include: being married, not having menstruation / menstruation, not being pregnant, and not having sexual intercourse 24 hours before. VIA (visual inspection with acetic acid) is a simple way to detect cervical cancer as early as possible ⁽²⁾. VIA Test is an examination of the cervix (cervix) by looking directly (with the naked eye) of the cervix after applying the cervix with 3-5% acetic acid solution ⁽³⁾. The Health Promotion Model notes that everyone has unique personal characteristics and experiences that influence subsequent actions. Collection of variables for knowledge and specific behavioral influences have important motivational significance. This variable can be modified through nursing actions. Health promoting behavior must result in improved health, improved functional abilities and a better quality of life at all stages of development. The latter demand for behavior is also influenced by direct competing demands and preferences, which can thwart desired health promotion actions ⁽⁴⁾.

Purpose

The purpose of this study was to analyze the development of health promotion based on social capital to improve the behavior of mothers of fertile age couples in taking the VIA Test.

METHODS

This type of research was quasy experimental with the design of non-equivalent pretest-posttest control group design, to determine the effect of health promotion based on social capital on the cognitive, commitment and behavior of mothers of fertile age couples in following the VIA Test⁽⁵⁾.

| | Pre Test | Intervention | Post Test |
|----------------------|----------|--------------|-----------|
| Intervention group1 | 01 | X1(a) | 02 |
| Intervention group 2 | 01 | X1(b) | 02 |
| Control group | 01 | | 02 |

Figure 1. The research design

The independent variable of the research was the health promotion module based on social capital, VIA Test and Ca Cerviks. The dependent variable of the research was cognitive, perception, commitment and behavior of mothers of fertile age couples in taking VIA Test⁽⁶⁾.

The location of the study was the Panekan Public Health Center in Magetan Regency. The time of the research began from the preparation of proposals, reviewing data, the middle seminar, the final and the preparation of research reports, namely April 2018 to October 2018.

The study population was mothers of fertile age couples in three villages namely Milangasri, Ngiliran and Bedagung in the work area of Panekan Health Center in Magetan District in 2018 as many as 6,500 people. The inclusion criteria were: 1) mother of childbearing age couple, 2) cooperative, 3) willing to be a research respondent ⁽⁷⁾. The sampling technique in this study was Multistage random sampling, which is sampling which is carried out based on the regional level in stages ⁽²⁰⁾. So the sample size taken in the study was 160 mothers of fertile age couples who were divided into 3 groups, each group was 60 people, namely 2 treatment groups and 1 control group (16).

Data analysis was done by: descriptive analysis using frequency ⁽²¹⁾, presented in the form of tables, graphs and images. Perform normality and homogeneity tests on demographic characteristics. The hypothesis testing used t-test and multiple linear regression⁽¹⁷⁾.

RESULTS

Distribution of Age, Education and Work of Respondents

From Table 1, obtained the distribution of the age of research respondents, mostly aged 31-35 years as much as 3.56% and a small percentage of 16-20 years old as much as 2.8%. From the education frequency distribution, the majority of respondents in the study were 58.3% of the secondary education and 6.7% of the majority of tertiary education. From the frequency distribution of work, the majority of respondents worked as 56.1% of entrepreneurs / entrepreneurs / farmers and a small percentage worked as civil servants / military as much as 3.9%.

| Age (year) | Frequency | Percentage | Mean | SD | Kolmorgorov- Smirnov |
|--------------------|-----------|------------|------|-------|-------------------------|
| 16-20 | 5 | 2.8 | | | |
| 21-25 | 39 | 21.7 | | | |
| 26-30 | 53 | 29.4 | 3.29 | 1.012 | 2.928 |
| 31-35 | 64 | 35.6 | | | |
| 36-40 | 19 | 10.6 | | | |
| Education | | | | | |
| Basic | 63 | 35 | | | |
| Second | 105 | 58.3 | 1.72 | 0.582 | 4.520 |
| Hight | 12 | 6.7 | | | |
| Employment | | | | | |
| Housewife | 72 | 40 | | | |
| Entreprenuer | 101 | 56.1 | 1.64 | 0.557 | 4.583 |
| Goverment employee | 7 | 3.9 | | | |

Table 1. Distribution of age, education and work of respondents at Panekan Public Health Center, Magetan Regency in 2018

Description of Variables

Contraction of

| | Cognitive Pretest | Cognitive Postest | Perception Pretest | Perception Postest | Commitment Pretest | Commitment Postest | Behavior Pretest | Behavior Postest |
|--------|----------------------|----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---------------------|---------------------|
| Mean | 9.27 | 13.26 | 7.51 | 11.51 | 1.89 | 3.96 | 5.04 | 7.27 |
| Median | 9.00 | 13.00 | 8.00 | 12.00 | 2.00 | 4.00 | 5.00 | 8.00 |
| Mode | 9 | 13 | 8 | 12 | 2 | 4 | 5 | 8 |
| SD | 1.394 | 1.716 | 0.829 | 2.097 | 0.483 | 0.861 | 0.982 | 1.369 |
| Min | 7 | 10 | 5 | 4 | 1 | 2 | 3 | 4 |
| Max | 13 | 17 | 9 | 15 | 3 | 5 | 7 | 9 |
| n | 180 | 180 | 180 | 180 | 180 | 180 | 180 | 180 |

Table 2. Description of variables

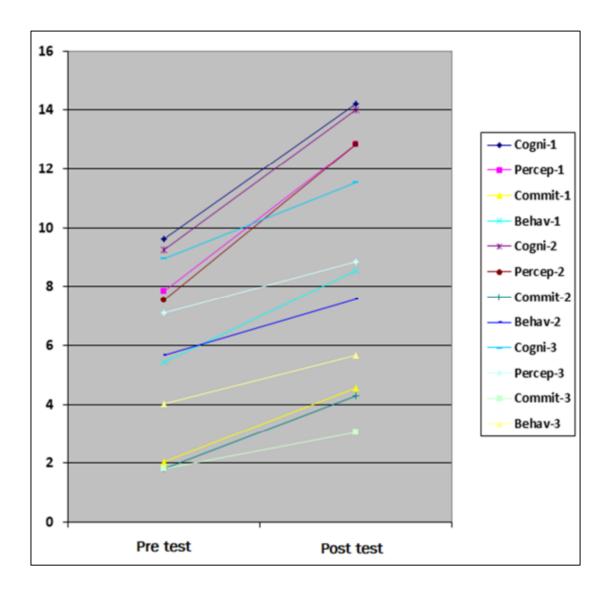


Figure 2. Description of variables

Statistical analysis results

Table 3. The results of paired sample t-test

| No | Variable relation | Т | df | Sig. (2-tailed) | Information |
|----|---------------------|---------|-----|-----------------|-------------|
| 1. | Cognitive Pre-Post | -27.123 | 179 | 0.000 | Significant |
| 2. | Perception Pre-Post | -27.534 | 179 | 0.000 | Significant |
| 3. | Commitment Pre-Post | -30.569 | 179 | 0.000 | Significant |
| 4. | Behavior Pre-Post | -27.139 | 179 | 0.000 | Significant |

From table 3, there was a significant difference between pre test and post test on social capital, perception, commitment and behavior of mothers in taking VIA test.

| Variable | Variable group | F | Т | df | Sig | Information |
|------------|---------------------------|-------|--------|-----|-------|-------------|
| Cognitive | Intervention-1 Control | 8.868 | 12.481 | 118 | 0.000 | Significant |
| Perception | Intervention-1 Control | 2.668 | 23.242 | 118 | 0.000 | Significant |
| Commitment | Intervention-1 Control | 6.498 | 15.374 | 118 | 0.000 | Significant |
| Behavior | Intervention-1 Control | 2.141 | 22.826 | 118 | 0.000 | Significant |
| Cognitive | Intervention-2 Control | 1.239 | 12.276 | 118 | 0.000 | Significant |
| Perception | Intervention-2 Control | 2.686 | 23.442 | 118 | 0.000 | Significant |
| Commitment | Intervention-2 Control | 6.471 | 11.456 | 118 | 0.000 | Significant |
| Behavior | Intervention-2 Control | 0.280 | 14.179 | 118 | 0.000 | Significant |

From table 4 there was a significant difference between intervention group 1 and control and intervention group 2 with control on cognitive, perceptions, commitments and behavior of mothers in following VIA test.

| No | Influence between variables | t | Sig. (2-tailed) | Information |
|----|-----------------------------|-------|-----------------|-------------|
| 1. | Cognitive-Behavior | 2.336 | 0,021 | Significant |
| 2. | Perception-Behavior | 6.610 | 0.000 | Significant |
| 3. | Commitment-Behavior | 4.438 | 0.000 | Significant |

From the results of multiple linear regression analysis obtained the p-value of influence of social capitalbased health promotion on the behavior in taking VIA Test was 0.021 (<0.05); the p-value of influence of cognitive, perception and commitment on the behavior in taking VIA Test was 0.000 (<0.05).

DISCUSSION

Description of Variables

This study discusses the participation of VIA tests based on age, education and work. This discussion is presented based on the results of the study. Based on the result, the distribution of respondents based on age shows the majority of 31-35 years old is 35.6%. At this age, age is susceptible to cervical cancer, so it is necessary to check to prevent cervical cancer, one of which is VIA test. This is supported by the theory that cervical cancer is a malignant tumor that grows on the cervix which is the entrance to the uterus which is located between the uterus and burrow intercourse that is common in women aged 30-50 years^(6,7). This age is also an age that is mature enough to obtain information either through mass media or experience. With increasing age, there will be changes in the physical and psycholigic aspects ⁽⁸⁾.

Based on the work shows the majority of respondents based on mother's work are entrepreneur / farmer as much as 56.1%. The work environment can make a person gain experience and knowledge both directly and indirectly ⁽⁹⁾. The majority of maternal work and data that VIA test participation turned out to be many did not follow so it can be assumed that the mother's experience and knowledge was less developed because it only relates to people around the house so that many did not participate in the VIA test.

Statistical Analysis Results

From the Paired T Test analysis, there were significant differences between pre test and post test on cognitive, perceptions, commitment and behavior of mothers in following the VIA test. This research is in line with the research conducted by on the influence of community leaders in promoting HIV risk to adolescents with the results that community leaders play an important role in the perception and behavior of adolescents in an environment about the risk of HIV⁽¹⁰⁾. Maternal behavior regarding early detection of cervical cancer through VIA test before and after being given health promotion and motivation by community leaders mostly have behaviors in not in the category of early detection of cervical cancer with VIA test and after health promotion and commitment by community leaders mostly have behavior in the category yes in the early detection of cervical cancer with VIA test⁽¹¹⁾.

Based on the results of statistical tests it was found that there were behavioral differences in mothers before and after being given health promotion using modules (0,000 <0,05). This is due to the provision of health information with a module on early detection of cervical cancer so as to increase the perception and commitment of respondents about cervical cancer and form a positive attitude. In the end the respondents who were given a health promotion with the module can do what is recommended in the health promotion. Positive perception causes women to behave according to positive perceptions, causing women to behave according to their knowledge, in this case women's participation in early cervical cancer detection programs⁽¹⁸⁾.

Based on the results of statistical tests found that there are differences in behavior for mothers before and after being given a health promotion with community commitment (0,000 < 0.05). Community commitment or people who have a strong influence in the community are very helpful in delivering information to the community so that it is easily accepted by the community, so that approaches to community leaders are needed in various scientific fields so that people can receive it well. The additional commitment by community leaders makes respondents more enthusiastic to participate in health promotion activities from the beginning to the end, so that the information delivered can be received completely so that knowledge and behavior will be better⁽¹³⁾.

The results of multiple linear regression analysis showed the effect of social capital-based health promotion on maternal behavior in following VIA Test with significance = 0.021 (<0.05). The influence of perception and commitment to behavior in following VIA Test with significance p = 0.000 (<0.05). This behavior change proves that health promotion is one of the efforts to prevent a disease in a group of healthy people, with the aim that they can improve their health⁽²²⁾. Coupled with the encouragement from community leaders so that respondents are more confident and willingThe influence of perception and commitment to behavior in following VIA Test with significance p = 0.000 (<0.05). This behavior change proves that health promotion is one of the efforts to prevent a disease in a group of healthy promotion is one of the efforts to prevent a disease in a group of healthy promotion is one of the efforts to prevent a disease in a group of healthy people, with the aim that they can improve their health. Coupled with the encouragement of community leaders so that respondents are more confident and sease in a group of healthy people, with the aim that they can improve their health. Coupled with the encouragement of community leaders so that respondents are more confident and enthusiastic to make behavior changes as has been done by their leaders, namely early detection of cervical cancer with VIA test. Another study by Delgado-gallego & Vázquez which states that there are institutional and leadership influences on changes in passive attitudes and behavior towards health services in the Colombian region⁽²²⁾.

CONCLUSION

Social capital-based health promotion has an effect on the behavior of mothers of fertile age couples in following the VIA Test. This is indicated by the results of data analysis, the mean value of social capital-based health promotion intervention groups is higher than the control group. Providing information through health promotion will affect the cognitive, perceptions and commitment of the mother and eventually will behave healthily by early detection of cervical cancer using the VIA test.

This change in behavior proves that health promotion is one of the efforts to prevent an illness in individuals, groups of healthy people, and the community with the aim that they can improve their health. Positive perceptions and community commitment will make mothers more confident and eager to change behavior, namely early detection of cervical cancer with VIA test.

It is expected that the community will participate actively in detecting the early occurrence of cervical cancer through VIA Test quickly and correct response supported by a healthy lifestyle.

REFERENCES

- 1. Francois P. Social Capital and Economic Development. London: Routledge; 2003.
- Frick JE, Eriksson LT, Hallen L. Effects of Social Capital on Processesin A Regional Strategic Network. Industrial Marketing Management. 2012:41.
- 3. Glanz FM, Rimer BK, Viswanath K. Health Behavior and Health Education: Theory, Research and Practice. 4th edition. San Francisco: Jossey-Bass; 2017.
- 4. Glanz K, Rimer BK, Lewis FM. Health Behavior and Health Education: Theory, Research and Practice. San Fransisco: Wiley & Sons; 2002.
- Glanz K, Rimer B. Theory at a Glance: A Guide for Health Promotion Practice. 2nd Edition. Publication Number: T052. NIH Number: 05-3896. U.S. Department of Health and Human Services. National Institutes of Health. Bethesda: National Cancer Institute. Accessed on June 26, 2011
- 6. Green LW. Toward cost-benefit evaluations of health education: someconcepts, methods, and examples. Health Education Monographs. 1974;2(Suppl.2);201.
- 7. Green L, Kreuter M. Health program planning: An educational and ecological approach. 4th edition. New York: McGraw-Hill; 2005.
- Green LW, Kreuter MW, Deeds SG, Partridge KB. Health Education Planning: A Diagnostic Approach. Mountain View, California: Mayfield; 1980.
- 9. Green L, Kreuter M. Health promotion planning: An educational and environmental approach. 2nd edition. Mountain View, CA: Mayfield Publishing Company; 1991.
- Green LW, Ottoson JM. Public health education and health promotion. In Novick LF, Morrow CB, Mays GP. (eds.). Public Health Administration: Principles for Population-Based Management. Boston: Jones & Bartlett Publishers; 2008.
- 11. Hung Tsai. Integrating Social Capital Theory, Social Cognitive Theory, and the Technology Acceptance Model to Explore a Behavioral Model of Telehealth SystemsInt. J. Environ. Res. Public Health. 2014;11.
- 12. Jones S. Community-Based Ecotourism the significance of Sosial Capital. Annals of Tourism Research. 2005;32(2).
- 13. Jones N. Enviromental activation of citizen in the context of policy agenda formation and the influence of sosial capital. The Sosial Capital Journal. 2010;47:121-136.
- 14. Kassa A. Effects of different dimension of social capital on innovative activity: Evidance from Europe at Regional Level. Technovation2009;29:218-233.
- 15. Kuntoro. Statistical Method (Metode Statistika). Surabaya: Pustaka Melati; 2011.
- 16. Kuntoro. Sampling Method and Determination of Sample Size (Metode Sampling dan Penentuan Besar Sampel). Surabaya: Pustaka Melati. 2010.
- 17. Lukatela A. The Importance of Trust-Building in Transition: A Look at Sosial Capital and Democratic Action in Eastern Europe. Canadian Slanovic paper. 2007.
- Lyon F. Trust, Network and Norms: The Creation of Sosial Capital in Agricultural economies in Ghana.World Development. 2000;28(4).
- 19. Martin G, David AS, Benno T. The Role of Social Capital in Reducing Negative Health Outcomes among Police Officers. International Journal of Social Inquiry. 2010;3(1):141-161.
- 20. Nursalam. Concepts and Application of Nursing Research Methodologies: Guidelines for Undergraduate Thesis, Graduate Thesis and Research Instruments in Nursing (Konsep dan Penerapan Metodologi Penelitian Ilmu Keperawatan: Pedoman Skripsi, Tesis dan Instrumen Penelitian Keperawatan). Jakarta: Salemba Medika; 2012.

- 21. Suharto A, Soedirham O, Dyson. The Influence of Factors in Social Capital on the Behavior of Mothers to Visiting "Posyandu" Park. DIJR. 2016.
 22. Yamaguchi A. Impact of Social Capital on the Psychological Well-Being of Adolescents International
- Journal of Psychological Studies. 2013;5(2):2013.