



JNK

JURNAL NERS DAN KEBIDANAN
(JOURNAL OF NERS AND MIDWIFERY)

<http://jnk.phb.ac.id/index.php/jnk>



Knowledge of Sexually Transmitted Infections (STI's) and HIV/AIDS among Health Cadres of 'Aisyiyah



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Article Information

Abstract

History Article:

Received, 25/08/2020

Accepted, 26/10/2020

Published, 15/12/2020

Keywords:

Knowledge of STIs and HIV / AIDS, 'Aisyiyah Health Cadres, Health Education

HIV / AIDS education needs to be done to active reproductive women such as housewives who are vulnerable populations. This research aimed to analyze differences in knowledge related to STIs and HIV / AIDS among Aisyiyah health cadres in North Banguntapan, Bantul Regency. This research is a pre-experimental research design method. The design of this research was one group pretest-posttest. The research sample was selected purposively as many as 31 respondents. This research produced information that there was a mean difference between prior and after knowledge about health education about STDs and HIV / AIDS with a significance value of 0.001 (p-value <0.05) and 95% CI of 0.466 - 1.728. Based on the results of the research it could be concluded that there was an increase of knowledge about STI and HIV / AIDS in Aisyiyah health cadres after getting health education.

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DOI: 10.26699/jnk.v7i3.ART.p421-425

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P-ISSN : 2355-052X

E-ISSN : 2548-3811

INTRODUCTION

HIV (Human Immunodeficiency Virus) and AIDS (Acquired Immune Deficiency Syndrome) have become global problems. Worldwide, there are 37.9 million people living with HIV / AIDS, 1.7 million of whom are children, 20% of whom do not know they have the virus (UNAIDS, 2019). HIV / AIDS in Indonesia is an epidemic, this threat can be seen from the increase in cases, especially in high-risk groups in several places in Indonesia. In 2018 in Indonesia there were 640,000 people living with HIV. Projections of HIV and AIDS in Indonesia based on sex for HIV cases are 38% women and 62% men, AIDS 36% women and 64% men. By age 0.8% of the 15-49 year old group worldwide are living with HIV (Ditjen PP & PL, 2014; Kementerian Kesehatan RI, 2018). The data from health office of Yogyakarta mentioned that the number of HIV/AIDS cases among women in 2015 there were 108 cases (classified by VCT testing result)(I.H. Lende, Nugroho, & Wantini, 2019). Based on data from the Bantul Health Office in 2013, there were 28 HIV sufferers, 22 of them were childbearing age women and of the 15 AIDS sufferers 12 were women of childbearing age (Bantul, 2013).

The increasing number of HIV / AIDS cases in Indonesia is influenced by risk factors which can accelerate the spread of HIV / AIDS such as injection drug use, reluctance of male sex customers to use condoms, high sexually transmitted diseases for street children, and migration and population movement accompanied by a lack of knowledge and prevention information of HIV / AIDS (Kementerian Kesehatan RI, 2018; Were, Were, Wamai, Hogan, & Galarraga, 2020). Traditionally, Indonesian women have been heavily influenced by social and religious values. Islam is the religion of the majority of the population in Indonesia, so the influence of Islamic teachings greatly affects the attitudes and behavior of Indonesian women. These social and religious values ultimately form a label for women that they must uphold ethics and politeness towards their partners, put a high level of trust in their partners so that this greatly affects taboo behavior in using condoms in their sexual life (Agnes Yeni, Songwathana, & Perngmark, 2020; Handayani, Ratnasari, Husna, Marni, & Susanto, 2019; I.H. Lende et al., 2019; Mahamboro et al., 2020; Rahmalia, Pohan, Wisaksana, & Laga, 2020; Yuliati, Chaerowati, & Rochim, 2020). This is an obstacle

for Muslim women to protect themselves and their husbands from HIV / AIDS transmission (A. Ernawati, Nursalam, & Vranada, 2020; Handayani et al., 2019).

The impact of HIV infection on mothers includes: social stigma, discrimination, maternal morbidity and mortality. Woman in childbearing age is an active reproductive age; this allows transmission to children during pregnancy or breastfeeding if a mother does not know the prevention of transmission to the child or infant. The existence of stigma in people living with HIV and AIDS (PLWHA) which is associated with deviant behavior in the community is one of the causes of HIV and AIDS transmission (Yohana Dian Natalia, Nining Tunggal Sri Sunarti, 2014) and women potentially face many obstacles and harassment when they transmitted by HIV/AIDS(Yuliati et al., 2020).

Low level of knowledge on prevention and attitudes among housewives towards HIV/AIDS which resulted increasing number of HIV / AIDS cases among housewives (Muflihah, Lestari, Margaiana, & Atmarina, 2016). Prevention is a priority in the response to HIV / AIDS, this prevention needs to be done through communication, information and education efforts adapted to local culture and religion. Paradigm and stigma in society can be changed through the most basic preventive efforts by providing education about HIV and AIDS (Enda MOra Dalimunthe, 2016). Previous studies mentioned that level of knowledge among women can increase the capability of bargaining power to use condom as the HIV/AIDS prevention activity(Mahamboro et al., 2020; Sistiarani, 2019).

One of the steps in educating the community is through counseling. Health education is a health education activity carried out by spreading messages, instilling confidence, so that people are not only aware, know and understand, but also want and can carry out a recommendation that is related to health (Fitriani, 2011; Rahmalia et al., 2020). HIV / AIDS education needs to be done for women who are actively reproducing, such as housewives, who are a vulnerable population. HIV / AIDS education can reduce the number of stigma and discrimination against people living with HIV / AIDS(Najmah, 2019).

A research explains that pregnant women who receive education regarding the prevention and transmission of HIV / AIDS are proven to increase

their knowledge regarding the prevention of mother-to-child transmission of HIV / AIDS (Aprilia Nurtika Sari, 2017; Khadijah & Palifiana, 2019; Muflihah et al., 2016; Sormin & Puri, 2019). Based on this information, this research was conducted to analyze the differences in knowledge of health cadres of 'Aisyiyah regarding the prevention of STI and HIV / AIDS transmission so that they can be used as initiation materials to promote HIV / AIDS prevention through strengthening the role of health cadres and religious leaders.

METHODS

This research was a pre-experimental design research method. This research design used one group pretest-posttest. The sample of this research was 31 health cadres Aisyiyah in Banguntapan Utara, Bantul Regency. The instrument used in this research was the 2017 IDHS questionnaire about the knowledge of HIV/AIDS. The selection of the research sample was based on the purposive sampling method. The research sample was determined based on the inclusion criteria, namely: (1). Aisyiyah's health cadre in North Banguntapan, (2). they become a health cadre for at least 1 year, (3). willing to be research respondents.

Tabel 2 Paired T-Test Analysis

		Paired differences					df	Sig (2-tiled)	t
		Mean	SD	95% CI					
				Lower	Upper				
Pair 1	Pre-Post	1,098	1,720	0,466	1,728	3,551	31	0,001	

education of 80.65% and the least respondents were respondents with a master degree program level of education as many as 3.23%. The most respondents were respondents who worked as teachers at 90.32% and the least respondents were respondents who worked as private parties at 3.23%.

Based on Table 2, a significance value of 0.001 (p-value <0.05) and a 95% CI of 0.466 - 1.728 (not past 0) was obtained, it was concluded that there was a mean difference between knowledge before and after being given health education about STI's and HIV/AIDS and statistically significant.

RESULT

The research results are displayed in the following Table:

Table 1 Characteristics of Respondents

Characteristic of the Respondents	Freq	Percentage
Age		
Childbearing (15-49 tahun)	18	58,06
Non Childbearing (50-65 tahun)	13	41,94
Education		
Senior High School	2	6,45
Diploma	3	9,68
Undergraduate	25	80,65
Master Degree	1	3,23
Job		
Teacher	28	90,32
Family Planning Cadre	2	6,45
Private Sector	1	3,23

Based on Table 1, it can be seen that the most respondents are in the category of age 15 - 49 years (women in fertile age) 58.06%. The most respondents were respondents with an undergraduate

DISCUSSION

Based on the results of the research, it was found that the majority of respondents (58.06%) were women of childbearing age. A person's age correlates with the experience of seeking information on an issue. Experience looking for a lot of information will strengthen an individual to understand a problem or topic (Enda MOra Dalimunthe, 2016). Apart from age, there are several factors related to a person's level of knowledge, namely education and employment (Ima Syamrotul Muflihah, Endang Lestari, Wulan Margiana, 2016;

Sormin & Puri, 2019). The age of the respondent who is still sexually productive is closely related to the risk of HIV / AIDS transmission, so it is important to know its progress. It is important for women to understand the development of HIV / AIDS information to increase their bargaining power with their partners (Khadijah & Palifiana, 2019).

The education level is a formal research carried out with the aim of obtaining information and intellectual maturity in solving a problem (E. Ernawati, Rahayu, & Kurniawan, 2019; Rodiyah Soekardi, 2018). The results of this research explain that the majority of respondents have completed the undergraduate level as many as 80.65%. A high level of education opens up opportunities for individuals to get more information and intellectual experience than education at a lower level (Hasanah, 2015). The results of this research also indicate that the majority of respondents work as teachers or educators (90.32%). The teacher is a source of conveying information, so it is expected that more knowledge is possessed than students. Work is also linear with individual experiences to interact with the environment so that knowledge will increase (Hasanah, 2015; Khadijah & Palifiana, 2019; Rodiyah Soekardi, 2018).

Based on the results of the pre and post tests that had been carried out, it was found that there was a mean difference between knowledge before and after being given health education about STIs and HIV/AIDS and it was statistically significant by (p -value < 0.05) and 95% CI of 0.466 - 1.728 . The results of this research was linear with the results of research conducted on a group of housewives in Yogyakarta which explained that there were differences in HIV/AIDS knowledge among housewives after being given health education interventions using the lecture method (Rodiyah Soekardi, 2018) (Ima Syamrotul Muflihah, Endang Lestari, Wulan Margiana, 2016).

The success of educational activities is strongly influenced by several things including interest, curiosity about something, and the content of the material to be delivered. Discussing the topic of HIV / AIDS is interesting because this disease is a multi-dimensional disease that is not only related to health but also social, cultural, and religious matters so that it increases the curiosity of students to keep looking for new information related to HIV / AIDS (E. Ernawati et al., 2019; Rahmalia et al., 2020; Yuliati et al., 2020). 'Aisyiyah as the Islamic organization

really needs to promote HIV / AIDS prevention education to cadres, for example the use of condoms. A research explains that there are several factors that have the potential in negotiating condom use which are still considered taboo among couples, including education, length of marriage, economic independence, social and religious values (A. Ernawati et al., 2020; E. Ernawati et al., 2019).

CONCLUSION

Based on the results of the analysis, it could be concluded that there were differences of knowledge of STIs and HIV/AIDS in the group of health cadres in North Banguntapan, Bantul Regency.

SUGGESTION

It should be important if conduct education seminar on reproductive health and HIV/AIDS regularly to the cadres.

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