FACTORS WHICH INFLUENCE EFFECTIVENESS PREVENTION TRANSMISSION HIV FROM MOTHER TO CHILD

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ABSTRACT

East Java has a high prevalence of HIV/AIDS, where there are 6957 women aged 15-49 years suffering from HIV/AIDS. This problem can cause transmission of HIV/AIDS to the baby even baby deaths due to HIV. This research aims to analyze the influencing factors sustainability program PPIA. Study use method qualitative with collectorlan data through interview deep. Study done in East Java, Service Health City East Java from January 2015 until June 2015. Population study is all power health in East Java city health service, and the sample was 12 people including the head of the UPT AIDS TB, head sexy P2PL, head community health center, head KIA, staff KIA And underwriter answer HIV Public health center. Sampling was purposive sampling and data was analyzed by triangulation. PPIA does not succeed Because low his K1 And Also K4, Where There is Public health center Which own K4 only 58%. At the Abepura hospital, 8 babies born with HIV were found, this was because the pregnant women were positive who do not take ARVs regularly until giving birth. The low K1 is also caused by several factors, namely pregnant women are more interested in going to medical practitioners, husbands who do not agree if wife his get test VCT, And low his awareness Mother pregnant will importance K1 until K4 And Also VCT. So Also with SIHA Which No walk with Good

KEYWORDS

HIV Prevention; Pregnant Mother; Infants

INTRODUCTION

East Java Province Health Profile show that in Province East Java There have been 17,639 cases of Human Immunodeficiency ciency Virus/ Acquired Immune deficiency Syndrome (HIV/AIDS), Where 6,579 person infected HIV and 11,060 people have been affected by AIDS. Then reproductive age Which infected (age 15 year Sam-pai 49 years) is 14,286 people. Specifically for women of reproductive age, there were 6,957 women of childbearing age who suffer from HIV/AIDS. Based on findings IBS, HIV/AIDS spread 2.4% po-population general And 3.4% is person original East Java.
Data Ministry Health Republic Indo-nnesia year 2013 show that number recentlyThe maternal mortality rate (MMR) in East Java Province is 573/100,000birth life And is BATTERY highest second in Indonesia. For the infant mortality rate in East Java Province, namely 155 per 1000 live births. A more serious problem is immunization coverage and coverage of the pregnant mother's first visit very low where immunization coverage is 55% and scope K1 Mother pregnant 40% And matter This No meme-nuhi standards service minimum (SPM) WhereK1 coverage for pregnant women must meet 80% accordinglySPM.

Impact HIV and AIDS against mothers and Babies are a cause of Pain and Deathin pregnant, maternity and postpartum women and new babies born. Then more than 90% of babies are infected with HIVinfected from Mother HIV positive. Transmission thecan occur during pregnancy, during childbirth and during breastfeeding. So without treatment appropriate and early, half of the children involved fection HIV will die before repeat yearesecond (Ministry of Health, 2014).

Give antiretrovirals (ARVs) to the mother positive pregnancy and giving birth undergoing a cesarean section is very effective in stopping the transmission of HIV from mother to child, so that KIA is expected to play an active role in this task increase positive awareness of pregnant women HIV to regularly take ARV drugs. In accordance with- bro exposure material in Prevention Seminar Penu-ban HIV from Mother to Child (PPIA) Service HealthEast Java Province, this prevention has been through studies and observations that prove both steps prevention This.

Diagnosis of HIV in babies born to mothers HIV positive is very important. There are some Instructions for diagnosing HIV in babies include: see symptom clinical And response immune to HIV, And detect There is his virus. Although detection ge-net clinical HIV on baby sometimes difficult, however will looks deficiency immune heavy And exists presenter kit of accompanying infections caused by microbes (Akib, 2004). The aim of this research is to know factors Which influence program PPIA

**MATERIALS AND METHODS**

This research was conducted using the method allitative and induction approaches. How to take data/information interview deep And Focus Group Discussion (FGD). Then after WM and FGD will carry out data analysis method Triangulation data qualitative. Study donein East Java City from January 2023 to with June 2023.

The research population is all employees East Java City Health Service Department of Health Health City East Java. The sample is 12people consisting of the Head of the Implementation Unit, in-where technique Taking Samples is PurposiveSampling.

**RESULTS**

From table 1 we can see that City East Java own population Mother pregnant Which more ban-yak compared with 6 regency other his.

From table 2 it can be concluded that only30% Mother pregnant positive Which referred And get-right treatment.

(1) Factor Internal
Based on the results of several interviews in-forman said that the low PPIA was cause by low his scope visit first (K1), and the low K1 is influenced by style life urban Which make para Mother pregnanmtmore interested in checking their pregnancy at practicing doctor. Most informants also say it that quality HR health For PPIA still requires study assignments to that level higher and the number of Voluntary Counselorling and Test (VCT) Still not enough. Service health

Table 1. Amount Mother Pregnant Which Get VCT in City East Java until with September 2023.

<table>
<thead>
<tr>
<th>Mother Pregnant</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Checked HIV</td>
<td>9252</td>
</tr>
<tr>
<td>Be positive and take the results Positive And referred to PPIA</td>
<td>295</td>
</tr>
<tr>
<td></td>
<td>99</td>
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</tbody>
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The city of East Java needs to increase the number of personnel VCT so Also with amount power counselor ka-because this can have an impact on compliance taking medication among pregnant women who are pregnant positive. This is supported by research by Karel (2008) who found that counseling can improve increase mother's knowledge about PPIA. Therefore It is necessary to recruit honorary staff and/or personnel contract as counselor ARVs.

**DISCUSSION (Times New Roman 11)**

Counseling and proactive activities from cadres Posyandu also plays an important role in improving success of program coverage. There must be more cadres often conduct outreach and education about danger HIV, benefit VCT, And benefit ARVs onpregnant mother. Based on research, it was found thatwa the active role of cadres and cadre counseling significant increase knowledge And attitude Motherpregnant, and also increases Ante Natal coverage Care (Sakinah And Fibriana, 2015).

Regen, medicines and medical devices for cope HIV/AIDS Already available And cu-kup, and if the reagent medicine is out of stock, you can ask Public health Office. It's different with the Cluster tool of Differentiation 4 (CD4) Which used in RS be-lum know availability his. Results This in line withresults study from Awatiful (2010), Which find-right that facility support for overcoming bro HIV/AIDS Still minimal.

Business Service Health Province Already mom-Here’s an example of an easy reagent for VCT obtained in every Public health center And House Sick pe-command, so Also with drug ARVs Which always at the regional general hospital. VCT Services in health centers And service ARVs in ru-mah Sick free, only constrained in supplyequipment such as CD4 tubes in hospitals sometimes requires maintenance costs.bear it answer program HIV/AIDS in House Sick must routine report condition tool tube CD4 inHouse Sick to service health.

The HIV/AIDS Information System (SIHA) is still many encounter obstacles such as untrained personnel still lacking because training funding is limited bags, also internet facilities at community health centers which do not adequate. Recording and reporting information system Ran HIV/AIDS programs that are online yet implemented with Good special his in City Jayapu-ra. This is because the SIHA program experienced several obstacles from a technical perspective. As for obstacle Which faced is not enough his employeeor trained health personnel and facilities internet for SIHA which is not yet equipped in all areas every health center and hospital. Matter this is supported by previous research which found thatwa Still Lots Public health center Which request first-materials
for recording and reporting, in- support with training and additional facilities (Spacewati et al. 2009).

Service health city East Java Also need improve facilities for implementing SIHA. For example, accessing the internet and carrying out training SIHA practice among officers and after implementation. There must be continued monitoring of implementation SIHA is where the employee’s performance has been trained must be assessed because the output of the system in- This formation is very necessary for the evaluation of pro- grams PPIA furthermore (Australia Aid (a), 2015).

Financing also plays a role in achieving PPIA specifically funds the provision of health equipment tan, provision of facilities for SIHA, and training health workers for VCT counselors and usersnaa SIHA (Australia Aid (b), 2015).

(2) Factor External

Then low his PPIA Also causedby not enough his education to woman age fertile And Mother pregnant about importance test VCT And pem-taking ARVs during pregnancy. Likewise the family of pregnant women who provide less support for do VCT. Then For Mother pregnant Which in- finding HIV positives is still problematic where they exist whose adherence to taking ARVs is still low. Un- knock giving ARVs Also Still experience constraint where there was a loss of follow-up in the fourth trimester or low pregnancy visits at age 7 until 9 month pregnancy.

Based on research from Sisyahid and In-Darjo (2017), found that the low level of God is taking ARVs because they are still low the public’s understanding of the benefits of ARVs. Same matter his with VCT Which low because the benefits of VCT that mothers do not yet fully understand pregnant.

On the other hand, pregnant women prefer going to the doctor’s office will prevent screening VCT from the government because the doctor’s practice Tech doesn't require VCT, even though we know that the implementation of PPIA is solely to break the chain of HIV transmission from pregnant women to her child so that the baby can be born with free from disease HIV.

Study conducted on working women sex found that female sex workers feel there is no risk of contracting HIV. So it can be saved concluded that women with a higher level of knowledge lower huan still think that they are There is no risk of contracting HIV/AIDS from partners bro they (Usnawati And Zainafree, 2013).

Based on study from Wulandari (2013), that there is a lack of socialization of the benefits of VCT through communication media such as radio. The government program is not very successful. Researcher- tian in the city of Samarinda found that the media radio very influential to enhancement public knowledge about the dangers of HIV And benefit VCT, Where media local works se-like communication mass. Media local Also works promote program countermeasures HIV Which done government local, change public stigma about HIV, and also the media radio can facilitate questions and answers for pro-implementers program for preventing HIV/AIDS with the community cat local.

Obstacle K4 Also happen Because. Lots his Mother pregnant Which originate from regency or per-plebeians returned to their villages so they No carry on check it out self Again, whereas If you are HIV positive, it is very necessary to take ARVs until the baby is born, as well as Bro, pregnant women who are positive for delivery must undergo undergo a section or cesarean section so that there is no transmission through rope navel, example his in Public health center coverage for Q4 was only 58.2% where the target pro- vincy is 80%.

Different with survey from Ministry Health of the Republic of Indonesia that many people have visited the Puskesmas but have not yet received VCT where K1 is already high but mother pregnant women who arrive do not receive VCT (To- ministerial Health R.I 2013).

There are also pregnant women who do not want to VCT because of their husband's...
prohibition. From interview with the head of KIA said that found in the field there was a husband who forbade his wife to do VCT and also get get pressure from your husband. This is in line with research from Legiati et al. (2012) who found- That's the factor that has the biggest influence on the behavior of pregnant women for VCT is du- husband's confinement because in the family the husband is decision maker. Weak support from husband influence no seriously Mother pregnantin obtain service test HIV/AIDS.

Likewise with research from Elisa et al. (2012) found that family support In particular, husbands are very decisive in their success. PPIA results in which HIV transmission can be prevented to the baby. Comparison between positive and positive pregnant women receive family support with pregnant women positive that does not get very much support different. where the mother gets support from the family and husband are more optimistic about the family himan baby his.

(3) Findings Case

In 857 visits by pregnant women in the region There are 4 mothers working at the Community Health Center mile who is HIV positive. Then based on data from the Abepura Regional General Hospital (RSUD), from January to August 2023 there were 8 birth baby Which positive HIV. Lots Which loss follow up at the fourth trimester visit (K4) for example in the Puskesmas work area where K4 coverage is only 58%. The low is K4 also influences the implementation of PPIA where mothers Pregnant women who are HIV positive will not be monitored for con- her ARV intake and also her delivery process were not You won't be able to see where the positive pregnant women are HIV is safer if you give birth by cesarean section. This will push risk transmission to baby meta-drain blood from the placenta and umbilical cord. The obstacle what often happens is that many pregnant women return to their village and chose to give birth in the district patent, and also many of them choose to doctor content.

An interview with one of the responsible for KIA who said the findings in field that between 857 visit Mother pregnant There were 4 mothers who were positive. Then from Of these four people, only 2 people obeyed K4. Which other loss follow up Because return to thurs-back them. Said by the person in charge KIA that 3 of these pregnant women are new under 25 year.

Based on data from HOSPITAL Abepura in period January until August 2015 there is 8 to-birth of an HIV positive baby. From this data we can know that there are still pregnant women who do not adhere to taking ARVs. Although It cannot be denied that pregnant women can also originate from outside region Work Service Health East Java City or comes from the district, however birth 8 baby positive is number Which Ting-gi. Research from Akib (2004) found that Prophylaxis can improve the situation positive baby and improve quality of life baby Which positive.

Cross-sector cooperation is needed in socialization sasi function PPIA, cooperation built with service education, namely counseling in high schools and campuses among fertile women, so does cooperation with the women's empowerment department, and figures religion (Australia Aid (a), 2015).

Low his scope K1 influence low scope PPIA, based on results wa-interviews found that the K1 results were still low in a few region Work Public health center in City Jayapu-ra. However, this is still a matter of debate because There are community health centers that already have K1 coverage tall one. It was discovered in the field that kun- The first stage of pregnancy (K1) is fulfilled targets in East Java City, especially work areas puskesmas, but in several puskesmas like Public health center Still low because- So people are more interested in coming to practice private. So Also with socialization about K1 still lacking even though the community gets more Yanan Which free when to Public health center especially Forantenatal care services, administration of Fe tablets, and special
his VCT.

Increasing K1 in community health centers that cover the pan is still low with an increase strategy socialization in public Where more embederstanding that PPIA's function is to provide establish the chain of transmission from mother to child, thenIn counseling it's not just mothers who are target but Also family And para husband so that to-This group is more supportive of the implementation of the test VCT For sustainability program PPIA.

CONCLUSIONS

Low PPIA coverage is caused by low bye scope K1 Where low his visit Mother pregnant caused by a number of factor that is MotherPregnant women are more attracted to practicing doctors and are lower awareness of pregnant women about the importance of K1 and pie K4 And Also VCT, they No realize bah-wa VCT can prevent HIV transmission to children baby they. From proof interview Also obtained that there are more obstacles from the husband for VCT among pregnant women, this is due to a lack of counseling among fathers about the importance PPIA, new socialization regarding mothers. Instructor- han need do cooperation with Unit Ker-ja Other Regional Apparatus (SKPD) such as departments women's education and empowerment. Eventhere is also a need to collaborate with religious leaders and the community. There are various approaches tan, counseling and educational approaches cross-sector aims to strengthen who meltal public special his para Mother For Ready get test VCT.

Constraint Also come from availability powerhere in the implementation of PPIA it is very necessary to Lab staff for VCT tests are also needed counselors to monitor pregnant women and lam consuming ARVs. Also the function of counselors is-to increase patient awareness and compliance For routine drink drug they. In implementing PPIA, it is very necessary support for infrastructure, especially in providing for example, increasing human resources number of trained VCT personnel as well as the number of con-Certified cells must be added. So that when the PPIA program officers were working can fill in for each other if someone is absent, tooThis additional power will reduce responsibility excessive responsibilities or excessive workload.

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Conflict of Interest

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