Analysis of Factors Affecting Pregnant Mothers in Performing VCT Examinations at the Arjasa Public Health Center, Sumenep Regency

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ABSTRACT

HIV/AIDS is a frightening phenomenon for the Indonesian people today, so that people with HIV/AIDS often get very bad stigma and discrimination. The purpose of this study was to analyze the effect of attitudes, family support and service quality on the implementation of VCT examinations for pregnant women at the Arjasa Public Health Center, Sumenep Regency. The design of this research is an observational quantitative study with a cross sectional approach with the focus of the research directed at analyzing the influence of attitudes, family support and service quality on the implementation of VCT examinations for pregnant women at the Arjasa Public Health Center, Sumenep Regency. The total population is 159 respondents and a sample of 108 respondents is taken by the Accidental Sampling technique. In the study it was found that almost half of the respondents have attitude enough category as many as 47 respondents (43.52%). Most respondents have adequate family support category as many as 49 respondents (45.37%). Most of the respondents have sufficient service quality category as many as 50 respondents (46.30%). Most of the respondents carried out the VCT test as many as 71 respondents (65.74%). Based on the results of the Logistics Regression analysis showed that the p-value <0.05 then H1 was accepted so it was concluded that there was an influence of attitude, family support and service quality on the implementation of VCT examinations for pregnant women at the Arjasa Health Center, Sumenep Regency. It is expected for pregnant women to routinely check the womb in order to maintain the health of the mother and fetus so that the baby is born healthy and the mother is safe.

Keywords: Family support, Service quality, Attitude & VCT

INTRODUCTION

HIV/AIDS is a frightening phenomenon for the Indonesian people today, so that people with HIV/AIDS often get very bad stigma and discrimination. The stigma that develops in today’s society regarding HIV/AIDS is a disease of punishment due to immoral behavior by the sufferer. Whereas stigmatization and discrimination will be the main barrier for the prevention and treatment of HIV/AIDS. Stigma can prevent someone from getting tested for HIV. This also causes sufferers to be...
reluctant to inform others about their illness and not to behave in a manner that aims to reduce the risk of HIV transmission (Stuart, 2011).

According to WHO (2018), the international HIV epidemic claimed fewer victims in 2018 than in any other year in the last two decades, and fewer new cases of HIV AIDS than in previous years. This year, people with HIV AIDS in the world reached 36.7 million sufferers. The program to develop the application of antiretroviral therapy (ART) has reduced the number of deaths from HIV AIDS to 1.1 million in 2018 (45% less than in 2008). Nevertheless, countries need to strive to fulfill commitments to end the AIDS epidemic which is a public health threat with a target time of 2030.

Statistical data on patients reported by the Directorate General of PP and PL until December 2018, the number of HIV-AIDS sufferers in Indonesia was 16,110 cases or there were an additional 4,969 new cases during 2008, with the number of deaths of 3,362 people (Depkes RI 2018). Until September 2009, the number of people living with HIV-AIDS in Indonesia reached 18,442 cases, with 3,708 deaths. In September 2018, the number of people living with HIV-AIDS in Indonesia increased again to 22,726 cases, with 4,249 deaths (Ministry of Health, 2018). The prevalence of HIV-AIDS cases in Indonesia is 9.85 per 100,000 population. Meanwhile, the cumulative number of HIV cases from January 2018 to December 2018 was 96,740 cases (Ministry of Health, 2018). In East Java itself,

The most appropriate strategy to prevent vertical transmission is to prohibit HIV-infected mothers from getting pregnant, and to terminate pregnancy for HIV-infected mothers. However, this is not possible because everyone wants offspring. Pregnancy and having children are the rights of every human being. People with HIV also have the same right to marry and continue their offspring. Therefore, so that babies are not infected with HIV, a prevention strategy is carried out, namely PMTCT (Damania, 2016). PMTCT is a program to prevent the transmission of HIV/AIDS from mother to baby. The basic concept is to reduce the Viral Load as low as possible. Minimize exposure of the fetus/infant to HIV positive body fluids. Then optimize the health of babies from HIV positive mothers.

Pregnant women are a group at risk of contracting HIV, and every year it always increases. This happens because of the increasing number of men who have unsafe sex, so that they will transmit HIV to their sexual partners and have an impact on the baby they are carrying. Transmission of HIV from mother to baby is the end of the chain of HIV transmission. Mother-to-child transmission of HIV reaches up to 90% of cases. Efforts to prevent mother-to-child transmission of HIV are carried out comprehensively and effectively in health care facilities with the Prevention of Mother-to-Child HIV Transmission (PPIA) program. PPIA services can be carried out in various health facilities (hospitals, health centers) with the proportion of services in accordance with the availability of facilities and personnel/staff who understand and are able to carry out this program.

So far, the implementation of the program to prevent HIV-AIDS transmission from mother to child (PPIA) or there are still many obstacles since it was announced by the government in 2004. Constraints experienced include inadequate health facilities, not all health facilities are able to provide PMTCT services. The coverage of K1 antenatal care is quite high, namely 92.7%, but the coverage of K4 antenatal care (quality) has only reached 61.4%, meaning that there are still many pregnant women who have not received quality services, which is to prevent and detect early problems/diseases that they suffer. pregnant women and their fetuses, including HIV in pregnant women. This makes another obstacle, namely the delay in knowing the HIV status of pregnant women which will have an impact on the behavior of the mother in preventing the transmission of HIV/AIDS to the baby.

VCT examination is one of the preventive efforts from the negative impacts that can occur in patients with HIV/AIDS cases. Preventive action is a form of gratitude for the creation of humans and the various blessings that have been given by God. The pleasure of health has been placed by Allah as the highest blessing after faith and Islam given to humans so that it needs to be maintained as well as possible. Allah also prefers strong believers, so paying attention and maintaining health is an effort that must always be made to stay strong and not weak (Kamaludiningrat et al, 2012)

Based on the above conditions, the authors are interested in researching the analysis of factors that influence pregnant women in carrying out VCT examinations at the Arjasa Health Center, Sumenep Regency.
METHODS

In this study, the researcher used an observational quantitative design with a cross sectional approach, which is a study to study the dynamics of the correlation between risk factors and effects, by approaching, observing or collecting data all at once (point time approach), that is, each subject The study was observed only once and measurements were made on the status of the character or variable of the subject at the time of examination. This does not mean that all research subjects are observed at the same time (Sockidjo, 2012). This research will analyze the influence of attitudes, family support and service quality on the implementation of VCT examinations for pregnant women at the Arjasa Public Health Center, Sumenep Regency. The total population is 159 respondents and a sample of 108 respondents is taken by the Accidental Sampling technique. Data analysis using Logistic Regression test. This research has gone through an ethical test with the number SK: 2314/KEPK/III/2021.

RESULTS

Table 1 Analysis Results logistic regression analysis of factors that influence pregnant women in conducting VCT examinations at the Arjasa Public Health Center, Sumenep Regency conducted by researchers on August 4-25, 2021 with a total of 108 respondents

<table>
<thead>
<tr>
<th>No</th>
<th>Variable</th>
<th>Sig</th>
<th>Constant</th>
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<td></td>
</tr>
<tr>
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<td></td>
</tr>
<tr>
<td>3</td>
<td>Service quality</td>
<td>0.005</td>
<td>0.012</td>
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</table>

1. Attitude towards VCT Implementation

   Based on the results of the Logistics Regression analysis shows that the p-value 0.000 <0.05 then H1 is accepted so it can be concluded that there is the influence of attitudes on the implementation of VCT examinations in pregnant women at the Arjasa Public Health Center, Sumenep Regency

2. Family Support for the Implementation of VCT

   Based on the results of the Logistics Regression analysis shows that the p-value is 0.003 <0.05 then H1 is accepted so it can be concluded that there is the effect of family support on the implementation of VCT examinations for pregnant women at the Arjasa Health Center, Sumenep Regency

3. Service Quality on the Implementation of VCT

   Based on the results of the Logistics Regression analysis shows that the p-value is 0.005 <0.05 then H1 is accepted so it can be concluded that there is The influence of service quality attitudes on the implementation of VCT examinations for pregnant women at the Arjasa Public Health Center, Sumenep Regency.

DISCUSSION

A. Attitude of Pregnant Women in Conducting VCT Examination at Arjasa Health Center, Sumenep Regency

   The results showed that almost half of the respondents had a moderate category attitude as many as 47 respondents (43.52%). In addition, a number of 36 respondents (33.33%) have an attitude of less category. Meanwhile, a number of 25 respondents (23.15%) had a good attitude category.

   Attitude is a reaction or response of someone who is still closed to a stimulus or object. The manifestation of that attitude cannot be directly seen, but can only be interpreted beforehand from closed behavior. According to Randi in Imam (2011), attitude is a general evaluation made by humans against themselves or others for reactions or responses to stimuli (objects) that cause feelings accompanied by actions that are in accordance with the object.

   According to Notoatmodjo (2010) that the level of knowledge is a domain for someone to take someone's actions to the level of understanding shown through interpreting the material correctly so that further application is real, which means that respondents are able to view HIV/AIDS correctly. Knowledge can influence a person's attitude to take an action, in this case the
attitude of pregnant women to HIV/AIDS. This is in accordance with the research of Oberhelman, et al. (2015) providing comprehensive and appropriate information also has an influence on knowledge which will ultimately affect attitudes.

This is supported by the research of Taha, et al (2016), which shows that knowledge is positively correlated with attitudes. This proves the importance of education to increase one's knowledge which will ultimately shape that person's attitude. And supported by research Yasemin, et al (2010) which explains that increasing one's knowledge can change one's attitude towards a problem and it is beneficial for the development of one's self-awareness.

According to the researcher, to be able to form the basis for attitude formation, personal experience must leave a strong impression. Therefore, attitudes will be more easily formed if the personal experience occurs in situations that involve emotional factors. In general, individuals tend to have an attitude that is conformist or in line with the attitude of people who are considered important. This tendency is motivated, among others, by the desire for affiliation and the desire to avoid conflict with the person who is considered important. Based on the results of the study, it was found that half of the respondents had a moderate category attitude where this was due to the respondents wanting to do the best for themselves and their families.

B. Support of Pregnant Families in Conducting VCT Examinations at Arjasa Health Center, Sumenep Regency

The results showed that most of the respondents had adequate family support as many as 49 respondents (45.37%). In addition, 38 respondents (35.19%) had family support in the category of less. Meanwhile, a number of 21 respondents (19.44%) had good family support.

According to Friedman (2014) family support is the attitude, action and acceptance of the family towards its members. Family members are seen as an inseparable part of the family environment. The family also functions as a support system for its members and family members view that people who are supportive are always ready to provide help with assistance if needed.

Kane in Friedman (2017) defines family support as a relationship process between the family and the social environment. According to Kuncoro (2017) family support is verbal and non-verbal communication, advice, real help or behavior provided by people who are familiar with the subject in their social environment or in the form of presence and things that can provide emotional benefits or influence on the behavior of the recipient, in this case the person who feels emotionally supported feels relieved because he is noticed, gets advice or a pleasant impression on him.

Family and community support have a big role in increasing compliance, namely by supervision and giving encouragement to someone. The advantage of family support is that they live in the same house or close to home with mothers and toddlers so that monitoring is more optimal and there is no direct need for transportation costs (Becher, 2014). Families are aware of the importance of obedience in carrying out an activity, especially regarding the visit of mothers and toddlers at the posyandu, it is very necessary to monitor the growth and development of toddlers to become healthy adults.

C. Quality of VCT Services for Pregnant Women at Arjasa Public Health Center, Sumenep Regency

The results showed that most of the respondents had sufficient service quality category as many as 50 respondents (46.30%). In addition, a number of 32 respondents (29.63%) have poor service quality category. While a number of 26 respondents (24.07%) have good service quality category.

Quality is something that is decided by the customer. Quality is based on the actual experience of the customer or consumer towards the product or service which is measured based on these requirements (Mongkaren, 2013). Service quality can be interpreted as an effort to fulfill consumer needs and desires as well as the accuracy of delivery in balancing consumer expectations (Amrizal, 2014).

Service quality (service quality) can be known by comparing the perceptions of consumers on the services they receive with the services they actually expect on the service attributes of a company. Service quality is perceived as good and satisfactory if the service received or perceived is as expected, if the service received exceeds consumer expectations, then the service quality is perceived as very good and of high quality. Service quality is perceived as bad if the service received is lower than expected (Amrizal, 2014). The quality of health services refers to the level
of perfection in the appearance of health services that can satisfy every user of health services in accordance with the level of satisfaction of the average population.

Service is an activity or a series of tools that are invisible (cannot be touched), which occur due to interactions between consumers and employees or other things provided by service providers that are intended to solve consumer problems (Gronroos, 2011 in Ratminto and Winarsih, 2015).

People as consumers certainly want quality services. Service quality is defined as the level of excellence expected and control over the level of excellence to meet customer desires (Tjiptono, 2008, in Dimas and Oktafani, 2014). Service quality can be interpreted as an effort to fulfill consumer needs and desires as well as the accuracy of delivery in balancing consumer expectations (Dimas and Oktafani, 2014).

One of the services that is widely used by the community is health services. According to Azwar (2014) the use of health services is the use of service facilities provided either in the form of outpatient care, inpatient care, home visits by health workers or other forms of activity from the use of these services based on the availability and continuity of services, public acceptance and fairness, easy to use, accessible to the public, affordable and of good quality.

D. Implementation of VCT Examination for Pregnant Women at Arjasa Health Center, Sumenep Regency

The results showed that most of the respondents carried out the VCT test as many as 71 respondents (65.74%). Meanwhile, 37 respondents (34.26%) did not carry out the VCT test.

The Ministry of Health has made efforts to prevent mother-to-child transmission of HIV/AIDS in accordance with WHO recommendations (2009) by issuing Guidelines for the Prevention of Mother-to-Child HIV Transmission in 2012. PPIA is one of the efforts to control HIV/AIDS and Sexually Transmitted Infections (STIs) in Indonesia. Indonesia and is part of the Maternal and Child Health (KIA) program.

Ariningtyas' research (2017) states that the implementation of PPIA in maternal and child health services can reduce maternal mortality with HIV. The Independent Practice Midwife Service is one of the maternal and child health service facilities in Indonesia.

The VCT examination program as a mother-to-child HIV prevention program is mostly carried out by midwives. Midwives can provide counseling and support to women who are not infected with HIV or who are already infected with HIV. Midwives know about HIV and AIDS socialization to pregnant women from the training and socialization they have attended. Midwives who have received PPIA training are required to socialize to midwives who have not had the opportunity for training, this is done so that all midwives gain knowledge and can disseminate HIV and AIDS as well to every pregnant woman who comes (Widiyasari et al., 2014).

The VCT screening program aims to control HIV/AIDS transmission, reduce HIV cases as low as possible, reduce stigma and discrimination, and reduce AIDS deaths (Getting to Zero). This program can be implemented in an integrated manner at every level of health care and can be implemented by public health center and their staff, hospitals, and independent practice midwives. In this case, midwives have a very important role, where midwives are at the forefront of maternal and child health services. The increasing transmission of HIV from mother to child causes the PPIA program to be implemented immediately.

According to the researcher, the VCT examination program must be implemented immediately in all health services so that HIV transmission from mother to child can be prevented from an early age. The VCT examination program is integrated into MCH services, so it is part of the midwife's duties in MCH services. One of the MCH service providers is the Independent Practice Midwife (BPM) but the VCT examination has not been carried out at the Independent Practicing Midwife because there is no standard procedure that regulates the implementation of VCT in the Independent Practice Midwife and it must be at the Public health center. Based on the results of the study, it was found that there were some respondents who were not willing to do the VCT test in the program to prevent mother-to-child transmission of HIV at the Arjasa Health Center, Sumenep Regency, which was due to the respondent's ignorance of this program so that respondents were still afraid.
E. The Influence of Attitudes on the Implementation of VCT Examination in Pregnant Women at the Arjasa Health Center, Sumenep Regency

Based on the results of the Logistics Regression analysis shows that the p-value 0.000 <0.05 then H1 is accepted so it can be concluded that there is the influence of attitudes on the implementation of VCT examination in pregnant women at the Arjasa Health Center, Sumenep Regency.

Various comprehensive efforts related to the prevention of transmission from mother to baby have been carried out by health facilities. However, not all health services in districts/cities can provide HIV/AIDS services, including PMTCT services. Most of the health services located in districts/cities that are unable to handle female HIV patients until major actions such as giving birth to HIV mothers are immediately referred to the nearest referral hospital. This is the reason why HIV women, especially those who are pregnant or have toddlers, are not optimal in accessing PMTCT services. Especially without the support of the closest people such as spouse or husband and family (Gangga, 2012).

The most appropriate strategy to prevent vertical transmission is to prohibit HIV-infected mothers from getting pregnant, and to terminate pregnancy for HIV-infected mothers. However, this is not possible because everyone wants offspring. Pregnancy and having children are the rights of every human being. People with HIV also have the same right to marry and continue their offspring. Therefore, so that babies are not infected with HIV, a prevention strategy is carried out, namely PMTCT (Damania, 2016). PMTCT is a program to prevent the transmission of HIV/AIDS from mother to baby. The basic concept is to reduce the Viral Load as low as possible. Minimize exposure of the fetus/infant to HIV positive body fluids. Then optimize the health of babies from HIV positive mothers.

Pregnant women are a group at risk of contracting HIV, and every year it always increases. This happens because of the increasing number of men who have unsafe sex, so that they will transmit HIV to their sexual partners and have an impact on the baby they are carrying. Transmission of HIV from mother to baby is the end of the chain of HIV transmission. Mother-to-child transmission of HIV reaches up to 90% of cases10. Efforts to prevent mother-to-child transmission of HIV are carried out comprehensively and effectively in health care facilities with the Prevention of Mother-to-Child HIV Transmission (PPIA) program. PPIA services can be carried out in various health facilities (hospitals, health centers) with the proportion of services in accordance with the availability of facilities and personnel/staff who understand and are able to carry out this program.

So far, the implementation of the program to prevent mother-to-child transmission of HIV/AIDS has faced many obstacles since it was announced by the government in 2004. Constraints experienced include inadequate health facilities, not all health facilities are able to provide PMTCT services. The coverage of K1 antenatal care is quite high, namely 92.7%, but the coverage of K4 antenatal care (quality) has only reached 61.4%, meaning that there are still many pregnant women who have not received quality services, which is to prevent and detect early problems/diseases that they suffer. pregnant women and their fetuses, including HIV in pregnant women. This makes another obstacle, namely the delay in knowing the HIV status of pregnant women which will have an impact on the behavior of the mother in preventing the transmission of HIV/AIDS to the baby. Wudineh (2016) stated that the prevention of HIV transmission from mother to child is a program that is increasingly becoming a concern along with the increasing incidence of HIV in mothers and children. With good intervention, the risk of HIV transmission from mother to baby by 25% to 45% can be reduced to less than 2%. Implementation of PPIA in maternal and child health services can reduce maternal mortality with HIV. The Independent Practice Midwife Service is one of the maternal and child health service facilities in Indonesia. The Independent Practice Midwife is a basic service center that is the first line of early detection of complications in pregnancy, including HIV.

According to researchers, midwives play a role in referring pregnant women to get integrated ANC at the public health center. Counseling and offering HIV testing to all pregnant women can reduce stigma and discrimination in society. The implementation of the PPIA examination as a mother-to-child HIV prevention program can mostly be done at the Public health center. A good attitude to pregnant women can encourage a person to be more open and willing to
accept the situation no matter what. So it can be concluded that there is an influence of attitude towards the implementation of VCT examination in pregnant women at the Arjasa Health Center, Sumenep Regency.

F. The Effect of Family Support on the Implementation of VCT Examinations for Pregnant Women at the Arjasa Health Center, Sumenep Regency

Based on the results of the Logistics Regression analysis shows that the p-value is 0.003 <0.05 then H1 is accepted so it can be concluded that there is the effect of family support on the implementation of VCT examinations for pregnant women at the Arjasa Public Health Center, Sumenep Regency.

Support is information from other people that someone is loved and cared for, has self-esteem and is valued and is part of a communication network and shared obligations, while what is meant by a husband is a form of interaction in which there is a relationship of mutual giving and receiving, individuals who are involved in the social system which in the end will be able to give love, attention and a sense of attachment to both social families and partners (Ingela, 2009).

Instrumental support or facilities are the highest form of support that mothers get because this form of support involves direct assistance, for example in the form of financial assistance or assistance in carrying out certain tasks (Sarafino, 2014).

HIV counseling and testing behavior for pregnant women in Indonesia is still considered low, pregnant women consider HIV taboo which is a lifelong disease and has a bad stigma, mothers have never carried out risky behaviors such as changing partners that can transmit HIV, and do not feel the symptoms of HIV so that HIV testing does not need to be carried out voluntarily, besides that pregnant women are also afraid of the results obtained because it can affect the psychology of the mother and the fetus they are carrying when the test results are positive. The impact that can be caused by the unwillingness of pregnant women to take an HIV test is that HIV-positive mothers are not detected and are at risk of giving birth to HIV-positive babies, thereby increasing the HIV prevalence rate (Depkes RI, 2013).

The results of this study are supported by Nurhayati's research on the factors related to the participation of pregnant women in voluntary HIV counseling and testing at the Bukittinggi City Health Center which shows that husband's support is one of the factors that significantly influences HIV counseling and testing voluntarily with a value significance of 0.016. (Nurhayati, 2016).

The results of this study are also supported by research by Tyan Ferdiana Hikmah in 2016 Factors that influence pregnant women to screen for HIV/AIDS through the PMTCT program in the work area of the Kretek Health Center Bantul Yogyakarta. The results showed that there was a significant relationship between husband's support and the behavior of pregnant women to screen HIV/AIDS with a significance value of p = 0.027.

G. The Effect of Service Quality on the Implementation of VCT Examinations for Pregnant Women at Arjasa Health Center, Sumenep Regency

Based on the results of the Logistics Regression analysis shows that the p-value is 0.005 <0.05 then H1 is accepted so it can be concluded that there is The influence of service quality attitudes on the implementation of VCT examinations for pregnant women at the Arjasa Public Health Center, Sumenep Regency.

Good services are health services that are available to the community (acceptable) and sustainable (sustainable). This means that all types of health services needed by the community are found and their presence in the community is available at any time of need. Health services must be reasonable (appropriate) and acceptable (acceptable) by the community. This means that the health service can overcome the health problems faced, does not conflict with customs, culture, beliefs and beliefs of the community, and is unnatural, is not a condition of good health services.

The location angle is easily accessible by the community, so the distribution of health facilities is very important. Coverage of auxiliary facilities to determine effective demand. If the facility is easily accessible by using the available means of transportation, this facility will be widely used. Past user levels and trends are the best indicators of short and long term changes in future demand.

The services provided are affordable (affordable) by the community, where the cost of these services is sought in accordance with the economic capacity of the community. Expensive health services may only be enjoyed by some people. And shows the level of perfection of the
health services provided (quality/quality) and shows the healing of the disease and the safety of actions that can satisfy the service users in accordance with the standards that have been set. Health workers in this case are midwives who have an influence on the community in utilizing a health service. This influence can be in the form of support from health workers which is a driving factor in the use of VCT clinics. This support is especially in the form of information support in the form of information about how to transmit HIV and its prevention, as well as providing motivation to the community to carry out HIV testing voluntarily (Syahrir, 2014).

CONCLUSION
1. Almost half of the respondents have a moderate category attitude as many as 47 respondents (43.52%).
2. Most respondents have adequate family support category as many as 49 respondents (45.37%).
3. Most of the respondents have sufficient service quality category as many as 50 respondents (46.30%).
4. Most of the respondents carried out the VCT test as many as 71 respondents (65.74%).
5. There is the influence of attitudes on the implementation of VCT examinations in pregnant women at the Arjasa Public Health Center, Sumenep Regency
6. Ada the effect of family support on the implementation of VCT examinations for pregnant women at the Arjasa Health Center, Sumenep Regency
7. Ada the effect of service quality on the implementation of VCT examinations for pregnant women at the Arjasa Health Center, Sumenep Regency.

SUGGESTION
1. For Respondents
   It is expected for pregnant women to routinely check the womb in order to maintain the health of the mother and fetus so that the baby is born healthy and the mother is safe.
2. For Other Researchers
   It is hoped that further research needs to be deepened and added more research on the effect of interest and need on the implementation of VCT examinations for pregnant women at the Arjasa Health Center, Sumenep Regency.
3. For Research Agencies
   It is hoped that research institutions can use the results of this study as input for structuring the influence of attitudes, family support and service quality on the implementation of VCT examinations for pregnant women at the Arjasa Health Center, Sumenep Regency and can be developed again for further research to be more useful for research sites.

ACKNOWLEDGMENT
I solemnly declare that to the best of my knowledge, in this thesis there is no scientific work that has been submitted by another person to obtain an academic degree at a university, and there is no work or opinion that has been written or ordered by anyone. others, except those quoted in this manuscript and mentioned in the citation sources and bibliography.

CONFLICT OF INTEREST
In this study, there is no interest whatsoever concerning myself or with other institutions other than the Indonesian Strada Institute of Health Sciences, Kediri City.

REFERENCES


