

Analysis of the Relationship between Attitudes and Family Support with the Implementation of IVA Test Examination among Women of Reproductive Age at Ciputat Health Center in 2024

Reni Nofita^a, Adelia Indah Permatasari^b, Happy Novriyanti purwadi^c, Fikri Effendi^d.

^{a,b} Prodi D3 Kebidanan, Sekolah Tinggi Ilmu Kesehatan Banten, BSD City-Tangerang Selatan, 15318

^c Prodi S1 Kesehatan Masyarakat, Sekolah Tinggi Ilmu Kesehatan Banten, BSD City – Tangerang Selatan, 15318

^d Fakultas Kedokteran, Universitas Indonesia, Depok – Jawa Barat

Corresponding author: Reni Nofita Phone

e-mail address: nofita.reni@gmail.com

ARTICLE INFO

Article history:

Received 21 November 2025

Accepted 12 December 2025

Keywords: Attitud, Family Support, Women of Reproductive Age, IVA test Examination

ABSTRACT

Cervical cancer is the second most common cancer in women, preventable through the IVA test, a cost-effective and sensitive screening method. This study examines the relationship between attitudes and family support on IVA test participation among 63 women at Ciputat Health Center using a cross-sectional design and Chi Square analysis. Results indicate 77.8% had supportive attitudes and 65.1% received family support. Significant relationships were found for attitudes ($P = 0.0007$) and family support ($P = 0.030$) with IVA test participation. Findings suggest that positive attitudes and family support are important factors promoting early cervical cancer detection through IVA test.

© 2025 Universitas Telogorejo Semarang, Central Java, Indonesia

INTRODUCTION

In 2020, the World Health Organization (WHO) recorded over 19.2 million cancer cases with approximately 10 million deaths, including 604,127 cases of cervical cancer, mostly occurring in the Asia region. In Indonesia, only 6.83% of women aged 30–50 years undergo IVA screening for early detection of cervical cancer. The province of Banten shows a rising trend in cancer cases and low coverage of early

detection using IVA, particularly in South Tangerang City. Data from Ciputat Health Center indicate a number of reproductive-age women who regularly undergo monthly IVA examinations, with several positive cases identified.

Reproductive health plays a vital role in maintaining reproductive organ function and preventing serious diseases such as cervical cancer, which is primarily caused by infection with human papillomavirus (HPV)

types 16 and 18. Major risk factors for cervical cancer include early sexual activity, multiple sexual partners, and low socioeconomic status. The IVA test is an effective method for the early detection of cervical abnormalities. Complications of cervical cancer may include abnormal bleeding, cancer spread to other organs (metastasis), anemia, and other health-related issues.

Management of cervical cancer focuses on early detection and timely treatment, such as cryotherapy for women with positive IVA results. Factors influencing participation in IVA screening include age, level of knowledge, attitude, access to healthcare services, and support from family and healthcare workers. Public awareness campaigns and community education are essential to enhance women's understanding of the importance of IVA screening. Previous studies have revealed a strong connection between knowledge, attitude, and screening behavior. Based on this, this study aims to investigate the relationship between attitude and family support on the participation of reproductive-age women in IVA testing.

METHODS

This study uses a quantitative cross-sectional design to identify the relationship between attitudes and family support on IVA screening participation among reproductive-aged women (WUS). A purposive sampling method was applied, selecting participants based on specific criteria relevant to the research objectives, as this non-probability sampling technique does not provide equal selection chances for all population members. The research was conducted at Ciputat Health Center, located at Jl. Ki Hajar Dewantara No. 7, Ciputat, South Tangerang City

Banten Province, chosen due to the researcher's affiliation and the novelty of the topic. The study spanned from November 2024 to February 2025, with data collection carried out in January 2025.

RESULT AND DISCUSSION

Result

Table 1.1

Distribution of Frequency Characteristics of Women of Fertile Age in the examination of Iva Test at Ciputat Health Center

Variabel	N	%
Age		
- < 35 Year	51	81
- ≥ 35 year	12	19
Education		
- Bachelor	31	49,2
- Elementary/Junior/Senior high school	32	50,8
Occupation		
- Worker	34	54
- Not Worker	29	46
Jumlah	63	100

This table shows that of the 63 Women of Fertile Age in the working area of Ciputat Health Center the majority are under 35 years old (81%), the level of education of Women of Fertile Age the majority in the level of elementary / junior high / high school (49.2%), for employment in Women of Fertile Age the majority is Working (PNS / Private Employees / Self-Employed) as much as 54%.

Table 1.2

Distribution of Attitude Frequency of Women of Fertile Age in the examination of Iva Test at Ciputat Health Center

Variable	N	%
Supportive attitude	49	77,8%
Unsupportive attitude	14	22,2%
Total	63	100%

Based on the table above, it can be seen that the number of respondek Attitude is supporting as many as 49 people or 77.8% while Not Supporting as many as 14 people or 22.2%.

Table 1.3

Distribution of Family Support Frequency of Women of Fertile Age in the examination of Iva Test at Ciputat Health Center

Variable	N	%
Family support		
Good	41	65,1%
Not Enough	22	34,9%
Total	63	100%

Based on the table above, eating can be seen that the number of respondents based on family support is good as many as 41 people or 65.1% while less as many as 22 people or 34.9%.

Table 1.4

Correlation of Attitude on WUS in the examination of IVA Test at Ciputat Health Center

Attitude	Implementation				Total		p-value
	Check		Not Check		N	%	
	N	%	N	%			
Support	10	20,4	39	79,6	49	77,8	0,007
Do not Support	8	57,1	6	42,9	14	22,2	
Total	18	28,6	45	71,4	63	100	

Based on the table above that the cross table that contains the relationship between Attitude and Examination Iva Test for example in the total column there are numbers 49 means there are 49 people whose attitudes in the category of support and in the total column there are numbers 14 means there are 14 people whose attitudes in the category of Not Supporting. In the table above pearson chi square seen the value of Assimp.Sig of $0.007 < 0.05$ it can be concluded to have a dignifikan relationship between

attitudes and Examination Iva Test.

Table 1.5

Correlation of Family Support on WUS in the examination of IVA Test at Ciputat Health Center

Family Support	Implementation				Total		p-value
	Check		Not Check		N	%	
	N	%	N	%			
Good	8	19,5	33	80,5	41	65,1	0,030
Not Enough	10	45,5	12	54,5	22	34,9	
Total	18	28,6	45	71,4	63	100	

Based on the table above that the cross table that contains the relationship between Family Support and Iva Test Examination for example in the total column there are numbers 41 means there are people who are Family Support in Good category and in the total column there are numbers 22 means there are 22 people who are Family Support in Less Category. In the table above through the Pearson Chi Square statistical test seen p-value of $0.030 < 0.05$ then it is concluded that it has a significant relationship between Family Support and Iva Test Examination.

Discussion

The research results indicate that 49% of respondents (77.8%) had a supportive attitude, while 14 respondents (22.2%) showed an unsupportive attitude. Attitude refers to a pattern of behavior for adapting to social situations, or simply put, it is a response to social stimuli that has been conditioned. The research findings confirm that there is a significant influence of attitude among women of reproductive age (WUS) on undergoing IVA testing.

Many women of reproductive age hold positive attitudes toward early detection prevention for cervical cancer; however, they do not always translate this awareness into actual action. It is important to

recognize that early detection of cervical cancer is essential, and women should be encouraged to overcome embarrassment when undergoing IVA testing. These findings align with a study conducted by (S. Handayani, 2018), which showed a significant influence of attitude on IVA testing behavior among WUS in Penyak Village, Bangka.

According to research results by (Nur Rachmi, 2021), many women of reproductive age have a supportive attitude toward early detection prevention of cervical cancer, but they fail to act on it. Although they recognize the importance of early detection, they still lack the confidence to undergo IVA testing at the primary healthcare center (Puskesmas). This suggests a gap between awareness and action.

According to the researcher's observations, women who have been married for over one year and perceive IVA testing as highly important for preventing cervical cancer tend to have stronger supportive attitudes. A positive attitude is also reflected in women feeling safe and comfortable during the IVA examination process. The majority of respondents were under the age of 35. These younger women are not considered high-risk for cervical cancer, and due to the lack of noticeable symptoms at this age, they often remain unaware of the urgency for screening, despite having supportive attitudes.

The study also found family support status: 41 individuals (65.1%) reported good family support, while 22 individuals (34.9%) reported weak support. In a study conducted by Rahmawati (2018) among women aged 25–55 in Yogyakarta, it was found that spousal or family support significantly influences women's willingness to undergo IVA testing.

Although women may have a good understanding of the disease, they rely heavily on their husbands' support—not only financial or material, but also

emotional, motivational, and practical assistance such as accompanying them or providing transportation for the check-up. Family support plays a vital role in the success of cervical cancer early detection programs. The stronger the support, the more women are willing to undergo regular IVA testing.

According to Ardyani (2020), family support can take several forms, including informational, emotional, appreciation (recognition), and instrumental support. A husband with a good understanding of healthy lifestyle behaviors can positively influence his wife. Emotional support helps women feel calm and motivated to take health action. Instrumental support includes financial assistance, help in arranging medical appointments, transporting the woman to health facilities, or accompanying her during medical visits.

According to the researcher's observations, women who have been married for more than one year and believe IVA testing is crucial for preventing cervical cancer tend to be more supportive. Feeling safe and comfortable during the examination process is a positive attitude that supports the testing experience. Similarly, strong family support—especially from a spouse or family members—can greatly increase the number of WUS undergoing IVA testing at healthcare facilities. The motivation and support provided by a husband or family are crucial in encouraging women to undergo screening. Having a family member accompany the woman during the IVA test enhances her confidence and sense of security, helping the process run smoothly and effectively.

CONCLUSION

1. Characteristics of Women of Fertile Age in this study found that most WUS under 35 years old is 51 people.
2. Characteristics of Women of Fertile Age in this study found that the most educated WUS last high

school number of 32 people.

3. Characteristics of Women of Fertile Age in this study found that most WUS working 34 people
4. Attitudes of women of childbearing age who support the examination of iva test as many as 49 people.
5. Women of Fertile Age who get good family support as many as 41 people.
6. Based on the results of the analysis test using Chi Square test produce p value < 0.05 is 0.007 on the attitude variable.
7. Based on the results of the analysis test using Chi Square test produce p value < 0.05 is 0.030 on the family support variable

ACKNOWLEDGEMENT

The authors would like to express their sincere gratitude to the Ciputat Health Center, South Tangerang City, for their permission and support in conducting this research. Deep appreciation is also extended to all participants—women of reproductive age—who took part in the study for their valuable time and cooperation. Special thanks are given to the Sekolah Tinggi Ilmu Kesehatan (STIKes) Banten for providing academic guidance, facilities, and encouragement throughout the research process. The authors also acknowledge the assistance of colleagues and field enumerators who contributed to data collection and analysis.

REFERENCES

1. Ferlay J, Colombet M, Soerjomataram I, Parkin DM, Piñeros M, Znaor A, et al. Cancer statistics for the year 2020: An overview. *Int J Cancer*. 2021;149(4):778–89.
2. Kementerian Kesehatan. Modul Pelatihan Deteksi Dini Kanker Leher Rahim dan Kanker Payudara di Fasilitas Kesehatan Tingkat Pertama (FKTP) [Internet]. Direktorat Pencegahan dan Pengendalian Penyakit Tidak Menular Kementerian Kesehatan. Jakarta: Direktorat Pencegahan dan Pengendalian Penyakit Tidak Menular Kementerian Kesehatan; 2021. p. 30–5. Available from: <https://peraboi.org/>
3. Atfa I, Dwi Fara Y, Tri Utami I. Faktor-Faktor Yang Mempengaruhi Pemeriksaan IVA. *J Matern Aisyah (JAMAN AISYAH)*. 2023;4(1):76–87.
4. Sagita YD, Rohmawati N. Faktor yang Mempengaruhi WUS dalam Pemeriksaan Deteksi Dini Kanker Serviks Metode IVA. *J Matern Aisyah*. 2020;1(1):9–14.
5. Bray F, Laversanne M, Sung H, Ferlay J, Siegel RL, Soerjomataram I, et al. Global cancer statistics 2022: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. *CA Cancer J Clin*. 2024;74(3):229–63.
6. Fauza M, Aprianti, Azrimaidalisa. Faktor yang Berhubungan dengan Deteksi Dini Kanker Serviks Metode IVA di Puskesmas Kota Padang. *J Promosi Kesehat Indones*. 2019;14(1):68–80.
7. Kementerian Kesehatan RI. Pedoman Nasional Pelayanan Kedokteran Tata Laksana kanker Serviks. Jakarta: Kemneterian Kesehatan Republik Indonesia; 2019.
8. Jamilah, Rahmayani D, Palimbo A. Faktor-faktor yang Mempengaruhi Kesiapan Wanita Usia Subur dalam Pemeriksaan IVA di UPT Puskesmas Pasar Sabtu. *Khatulistiwa Nurs J*. 2022;4(2):64–72.
9. Purwanti S, Handayani S, Kusumasari V. Hubungan Tingkat Pengetahuan Tentang IVA Dengan Perilaku Pemeriksaan IVA. *J Kesehat Poltekkes Kemenkes RI Palangkaraya*. 2020;8(1):63–72.
10. Notoatmodjo S. Promosi Kesehatan dan Ilmu Perilaku Kesehatan. Jakarta: Jakarta: Rineka Cipta; 2018.
11. Rizani A. Faktor-faktor yang Berhubungan dengan Pemeriksaan IVA (Inspeksi Visual Asam Asetat) pada PUS (Pasangan Usia Subur) di Wilayah Kerja Puskesmas Mataram Tahun 2020. *J Skala Kesehat*. 2020;12(2):115–25.
12. Dewi NR, Ayubbana S, Pakarti AT, Inayati A. Faktor yang Memengaruhi Perilaku Pemeriksaan IVA (Inspeksi Visual Asam Asetat) pada Wanita Usia Subur: Literature Review. *J Wacana Kesehat*. 2024;9(1):23.
13. Sammouri J, Venkatesan A, Klopp A, Lin L, Jhingran A, Joyner M, et al. Ten-year clinical outcomes of stage IVA cervical cancer by bladder involvement treated with definitive chemoradiation (1106). *Gynecol Oncol* [Internet]. 2023;176(2023):S81. Available from: <https://doi.org/10.1016/j.ygyno.2023.06.028>

14. Yang ST, Wang PH, Liu HH, Chang CW, Chang WH, Lee WL. Cervical cancer: Part II the landscape of treatment for persistent, recurrent and metastatic diseases (I). *Taiwan J Obstet Gynecol* [Internet]. 2024;63(5):637–50. Available from: <https://doi.org/10.1016/j.tjog.2024.08.001>
15. Mustari R, Elis A, Maryam A. Faktor-faktor yang Mempengaruhi Rendahnya Minat Wanita Usia Subur Melakukan Pemeriksaan IVA di Puskesmas batu Putih Kabupaten Kolaka Utara. *Saintekes* [Internet]. 2023;2(3):390–404. Available from: <https://ejournal.itka.ac.id/index.php/saintekes/article/view/126/136>
16. Indriyani S, Wahyono B. Penyedia Layanan terhadap Implementasi Program Inspeksi Visual dengan Asam Asetat. *Higeia (Journal Public Heal Res Dev)*. 2019;3(1):1–11.
17. Kelrey KnR, Batara AS, Burhanuddin N. Faktor yang Mempengaruhi Pemanfaatan Pemeriksaan IVA (Inspeksi Visual Asam) pada Peserta BPJS. *Wind Public Heal J*. 2021;01(06):651–60.
18. Rahmi L, Sinta L El. Faktor-faktor yang mempengaruhi pemeriksaan inspeksi visual asam asetat (IVA). *JIKJurnal ilmu Kesehat*. 2020;4(2):72–7.
19. Arikunto. *Prosedur Penelitian Suatu Pendekatan Praktik*. Jakarta: Rineka Cipta; 2016.
20. Notoatmodjo. *Metodologi Penelitian Kesehatan*. Edisi Revi. Jakarta: PT. Rineka Cipta; 2018.
21. Nursalam. *Metodologi Penelitian Ilmu Keperawatan Pendekatan Praktis*. Ed. 4. Jakarta: Salemba Medika; 2020.
22. Sugiyono. *Metode Penelitian Kuantitatif, Kualitatif, dan R & D*. Bandung: Alfabeta, CV; 2019.
23. Sugiyono S. *Metode Penelitian Kuantitatif*. Bandung: Alfabeta, CV; 2018.
24. Hastono SP, Sabri L. *Statistik Kesehatan*. Jakarta: PT. Raja Grafindo Persada; 2014.
25. Greaney A, Sheehy A, Heffernan C, Murphy J, Mhaolrúnaigh N, Heffernan E, et al. Research ethics application: a guide for the novice researcher. *Br J Nursing*. 2012;21(1):38–43.
26. Indikator Kinerja Puskesmas Ciputat 2024, "Deteksi Dini Kanker Rahim dan Payudara " Diakses pada tanggal 1 November 2024 dari https://docs.google.com/spreadsheets/d/1H8Ch-rAPfIH8r_OVgQYwCCz5Tys5ywugfEWhsmzLPBY/edit?gid=1299877445#gid=1299877445
1. 27. Kementerian Kesehatan Republik Indonesia. (2015). Peraturan Menteri Kesehatan Republik Indonesia Nomor [nomor peraturan] Tahun [tahun] tentang perubahan atas Peraturan Menteri Kesehatan Nomor 34 Tahun 2015 tentang penanggulangan kanker payudara dan kanker rahim. Jakarta: Kementerian Kesehatan Republik Indonesia.