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DOI: http://dx.doi.org/10.33846/ hn30602 http://heanoti.com/index.php/hn RESEARCH ARTICLE URL of this article: http://heanoti.com/index.php/hn/article/view/ hn30602 Development of Social Capital Based on Health Promotion Model to Improve Behavior for Taking VIA Test Tinuk Esti Handayani1, Agung Suharto2(CA), Teta Puji Rahayu3 1Departement Midwifery, Poltekkes Kemenkes Surabaya; tinukesti@gmail.com 2(CA)Departement Midwifery, Poltekkes Kemenkes Surabaya; agunqsuharto14@qmail.com (Corresponding Author) 3Departement Midwifery, Poltekkes Kemenkes Surabaya; tarzako@yahoo.co.id 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 <u>development of social capital-based health promotion to</u> 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 is the result of desired behavior and is the end point in the Health Promotion Model. 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 <u>actions</u> (4). Purpose <u>The purpose of this study was to analyze the</u> development <u>of</u> health promotion based <u>on</u> social capital to improve the behavior of mothers of fertile age couples in taking the VIA Test. METHODS This type of research was guasy 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). 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

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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%. Table 1. Distribution of age, education and work of
respondents at Panekan Public Health Center, Magetan Regency in 2018 Age (year) Frequency Percentage Mean SD
Kolmorgorov- Smirnov 16-20 5 21-25 39 26-30 53 31-35 64 36-40 19 2.8 21.7 29.4 3.29 1.012 2.928 35.6 10.6
Education Basic Second Hight 63 35 105 58.3 1.72 0.582 4.520 12 6.7 Employment Housewife Entreprenuer Government
employee 72 40 101 56.1 7 3.9 1.64 0.557 4.583 Description of Variables Table 2. Description of variables Cognitive
Cognitive Perception Perception Commitment Commitment Behavior Behavior Pretest Postest Pretest Pretes
Postest Pretest 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 Figure 2. Description of variables Statistical analysis results Table 3. The
results of paired sample t-test No Variable relation T df Sig. (2-tailed) Infor mation 1. Cognitive Pre-Post 2. Perception
Pre-Post 3. Commitment Pre-Post 4. Behavior Pre-Post -27.123 -27.534 -30.569 -27.139 179 0.000 179 0.000 179 0.000
179 0.000 Significant Significant 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. Table 3. The results
of independent sample t-test Variable Variable group F T 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 Behavi or 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 Behavi or
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. Table 5. The result of linear regression test No Influence between variables t
Sig. (2-tailed) Information 1. Cognitive-Behavior 2. Perception-Behavior 3. Commitment-Behavior 2.336 0,021 6.610
0.000 4.438 0.000 Significant Significant From the results of multiple linear regression analysis obtained the
p-valueof influence of social capital-based 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 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 & Vázguez
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
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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. 2. 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. 5. 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. 8. 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. 10. 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. Environmental 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. 18. 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. Health Notions, Volume 3 Number 6 (June 2019) ISSN 2580-4936 Health Notions, Volume 3 Number 6 Number 8 Nu 2580-4936 Health Notions, Volume 3 Number 6 (June 2019) ISSN 2580-4936 Health Notions, Volume 3 Number 6 (June 2019) ISSN 2580-4936 251 | Publisher: Humanistic Network for Science and Technology 252 | Publisher: Humanistic Network for Science and Technology, 253 | Publisher: Humanistic Network for Science and Technology, 254 | Publisher: Humanistic Network for Science and Technology 255 | Publisher: Humanistic Network for Science and Technology 256 | Publisher: Humanistic Network for Science and Technology 257 | Publisher: Humanistic Network for Science and Technology 258 | Publisher: Humanistic Network for Science and Technology