



## Factors Influencing Low Interest of Fertile Women in Undergoing IVA Tests at Butong Community Health Center

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**Abstract,** A condition of physical and mental well-being devoid of all illnesses pertaining to the reproductive system, reproductive function, and reproductive processes is known as reproductive health. Women's reproductive health is therefore crucial. Cervical cancer brought on by an infection with the Human Papillomavirus (HPV) is one illness that can compromise the health of reproductive organs. 95% of occurrences of cervical cancer are linked to HPV, which is spread through sexual activity. Cervical cancer is presently the second most common cause of death for women's reproductive health, after breast cancer. After cardiovascular illness, cancer is the second most common cause mortality. There are number of ways to prevent cervical cancer, including IVA (Visual Inspection with Acetic Acid), a test that uses 3-5% acetic acid in a speculum and is visible with the unaided eye. However, many women still refuse to undergo the IVA test. In order to promote early detection behavior, husbands' knowledge, attitudes, and support are crucial. Counseling is one way to raise public awareness and interest. The purpose of this study is to identify the variables that affect fertile women's lack of interest in having IVA exams. The chi-square test version 25.0 was employed in the analysis. According to the test findings, there is a correlation between husband's support ( $p$ -value = 0.010), attitudes ( $p$ -value = 0.010), and knowledge ( $p$ -value = 0.006). The study concludes that women of reproductive age's lack of interest in undergoing IVA tests at the Butong Health Center is influenced by knowledge, attitudes, and husband support.

**Keywords:** Attitude, Husband's Support, IVA Examination, Knowledge, US Interest.

### 1. INTRODUCTION

According to Prawirohardjo (2018), reproductive health is a condition of whole physical, mental, and social well-being in all areas pertaining to the reproductive system and its activities and processes, not only the absence of illness or disability. Cervical cancer, the most frequent malignancy in women globally, is one condition that can interfere with the health of women's reproductive organs.(Fatmawati and Dewi, 2023).

The cervix, or mouth of the uterus, is the lowest portion of the uterus that extends into the vagina. Cervical cancer is a cancer or tumor that develops there. Over a million women globally are thought to have cervical cancer, and between three and seven million have high-grade precancerous lesions or high-grade dysplasia.(Fatmawati and Dewi, 2023).

Cervical cancer, which targets the cervix, is the leading cause of death for women in underdeveloped nations and the second leading cause of mortality for women worldwide, behind breast cancer.(2019, Fauza).

Cervical cancer accounts for around 6.5% of all cancer cases in women globally, making it the fourth most prevalent kind, according to Globocan (IARC) 2020 estimates. Approximately 342,000 women globally lose their lives to cervical cancer, while an estimated 604,000 women receive a diagnosis. The majority of incidences of cervical cancer are seen in underdeveloped nations. With an estimated 36,633 (6.1%) instances of cervical cancer, Indonesia, a developing nation, is third in the globe, after China (109,741 (18.2%) and India (123,907 (20.5%). With 36,366 cases (9.2%) and 21,003 deaths (9%), cervical cancer is the second most common malignancy in Indonesia after breast cancer.(Indriana Risma, 2023)

The 2021 Indonesian Health Profile states that 2,827,177 women in Indonesia between the ages of 30 and 50, or 6.83% of the target, had undergone early detection of cervical cancer and breast cancer using the IVA (Visual Inspection with Acetic Acid) and SADANIS methods in 2019–2021. This proportion still falls very short of the 80% goal.

In both industrialized and developing nations, including Indonesia, cervical cancer is still a major worldwide health concern for women. Cervical cancer is the most common cause of cancer-related fatalities in underdeveloped nations, yet it ranks tenth among all cancers in affluent nations.(Fatmawati and Dewi, 2023).

Visual Inspection with Acetic Acid (VIA) is an examination technique that involves using a wotten stick dipped in 3–5% acetic acid/vinegar to massage the cervix or neck of the uterus with the unaided eye. The objective is to identify dysplasia-affected cells as a means of early cervical cancer identification. In order to lower the frequency and death rate, early diagnosis of precancerous cervical lesions is increasingly important, and the easy VIA examination is anticipated to have a broader scope of inspection. While women 20 years of age and older who have engaged in sexual activity are the goal of the VIA screening, Indonesia's early detection program prioritizes women between the ages of 30 and 50.Masruroh (2018).

Since most instances are only discovered at an advanced stage, the rising number of new cases of cervical cancer in Indonesia each year presents a serious danger to world health. If women of reproductive age have sufficient information and awareness of early detection, cervical cancer can be avoided and discovered early.(Sirait and Sulistiowati, 2014).

A Pap smear is a microscopic analysis of cervix cells. It can identify alterations in cervical cells brought on by certain viral infections, including the human papillomavirus (HPV), which is known to cause cervical cancer. Early detection and treatment of precancerous alterations can prevent cervical cancer from fully developing. Many women die without realizing they have cervical cancer, as it often presents with no symptoms in the early stages. The illness is already serious and hard to cure once symptoms appear. Because Pap test findings

allow for prompt monitoring and intervention when abnormalities are found, it is believed that the Pap smear would dramatically reduce the incidence of cervical cancer and deaths from it.(2018, Indri Ramadini).

At just around 5% of married women of reproductive age, Pap smear screening for early cervical cancer detection is still extremely low in Indonesia, far from reaching effective early detection coverage. Effective early detection coverage in reducing morbidity and mortality from cervical cancer is 85% of the target number of married women of childbearing age, even though more than 3,700 community health centers in Indonesia have been trained to provide early detection services for cervical cancer.(Latifah, Nurachmah, and Hiryadi 2020).

Eighty percent of the local female population should be screened, according to Samadi in Riksani (2016). According to Lawrence Green's (1980) theory as presented in Anbumani et al. (2016), behavioral factors are determined or formed by predisposing factors, which manifest in knowledge, attitudes, beliefs, convictions, values, and so forth; supporting factors, which manifest in the physical environment, the availability or unavailability of health facilities or infrastructure, such as Community Health Centers, medicines, sterile equipment, and so forth; and driving factors, which manifest in the attitudes and actions of health workers or other officers, who serve as the benchmark for community behavior (Marni Siregar, Hetty WA Panggabean 2021).

Health education, an endeavor to enhance community knowledge, attitudes, and behavior, is one way to foster health-promoting communal behavior. Additionally, the low incidence of cervical cancer is influenced by economic condition. The distribution of various health issues according to economic position is often impacted by variations in lifestyle and behavior as well as disparities in the financial capacity to avoid illness. A variety of variables, such as predisposing factors (knowledge, attitudes, etc.), enabling factors, and reinforcing factors, might lead to participation in the VIA assessment.(Elis, Maryam, and Mustari 2023).

The author is interested in investigating the reasons for the low interest of women of reproductive age in having IVA exams at the Butong Community Health Center, as explained above

This study's question is whether women of reproductive age's lack of interest in having an IVA assessment at Butong Health Center is influenced by their level of knowledge. Does the poor interest of women of reproductive age in having an IVA assessment at Butong Health Center have anything to do with motivation? Does Butong Health Center's poor interest in IVA examinations among women of reproductive age stem from their attitudes? Does the low

interest of women of reproductive age in having an IVA examination at Butong Health Center stem from their husbands' support?

The goal of this study is to identify the variables that affect women of reproductive age's lack of interest in having an IVA assessment at Butong Community Health Center. The particular goals are to ascertain how knowledge affects women of reproductive age's lack of interest in having an IVA assessment at Butong Community Health Center. Additionally, to ascertain how attitudes affect women of reproductive age's lack of interest in undergoing IVA testing at Butong Community Health Center.

## **2. RESEARCH METHOD**

This study's methodology is an analytical survey. cross-sectional. Each respondent is only seen once in cross-sectional research, and the researcher measures the respondent's variables at the time of the examination without conducting any follow-up. In 2025, this study was carried out at the Butong Community Health Center.

A population is a category for generalization that includes items or persons with certain attributes chosen by the researcher to be examined and conclusions made.

There were one hundred women of childbearing age (WUS) in the Butong Community Health Center Working Area who made up the study's population. Purposive sampling was the method employed in this study, which involves choosing samples from the population based on the researcher's preferences (the study's goals and issues) in order for the sample to accurately reflect the community's known characteristics.

Sugiyono (2017) defines a sample as a subset of all the attributes that make up a population. There were sixty responders in the study's sample.

According to Sugiyono (2017), primary data comes directly from respondents or data sources to researchers. The women of reproductive age who participated in the research as responders provided the primary data. Respondent interviews were used to collect this data. The study's goals and purpose were explained to subjects who fit the requirements. Subsequently, the interviewees consented to participate in the survey and expressed a willingness to finish it.

sources or respondents who give data to data collectors (researchers) in an indirect manner (Sugiyono, 2017). Secondary data is information gleaned from Butong Community Health Center documentation or medical records.

Data collection was carried out by collecting WUS who met the inclusion criteria and were in the Butong Health Center Working Area by collecting questionnaire data.

### 3. RESULTS AND DISCUSSION

#### Research Results

In order to verify the presence of a link between several variables, this study employs a cross-sectional approach in an analytical survey research methodology. All of the study's participants were women of childbearing age (WUS) who worked at the Ribang Health Center in the Muara Uya District of Tabalong Regency. There were sixty responders in the research sample. Purposive sampling was used to choose this study method. A questionnaire served as the study's tool. The methods of data processing included editing, coding, processing, and tabulating. The Chi Square Test using SPSS was the statistical test employed in this investigation.

#### Respondent Characteristics

**Table 1** Frequency Distribution Based on Age, Occupation, Education, Knowledge, Attitude, and Husband's Support.

<b>Characteristics</b>	<b>Frequency</b>	<b>%</b>
<b>Respondent Age</b>		
20-35 years	27	45%
>35 years	33	55%
<b>Work</b>		
Work	35	58.3%
Doesn't work	25	41.7%
<b>Total</b>	<b>60</b>	<b>100%</b>

According to Table 1, of the 60 respondents, 33 (55%) were older than 35, and 27 (45%) were between the ages of 20 and 35. In terms of occupational characteristics, 25 respondents (41.7%) were jobless and 35 respondents (58.3%) were employed out of the 60 respondents.

#### *Characteristics of Respondents' Education Frequency*

**Table 2.** Frequency Distribution of Respondents' Education.

<b>Education</b>	<b>f</b>	<b>%</b>
Low	36	60%
Tall	24	40%

Based on table 2, it shows that of the 60 respondents, 36 respondents (60%) had low education and 24 respondents (40%) had high education.

### Characteristics of the Frequency of Interest of WUS in IVA Examination

**Table 3.** Frequency Distribution of WUS Interests.

<b>WUS Interest</b>	<b>f</b>	<b>%</b>
Interest	6	10%
Not Interested	54	90%

Table 3 indicates that of the 60 WUS respondents, 6 (10%) expressed interest in taking the IVA exam, whereas 54 (90%) did not.

### Characteristics of Respondents' Knowledge Frequency

**Table 4.** Frequency Distribution of Respondents' Knowledge.

<b>Knowledge</b>	<b>f</b>	<b>%</b>
Good	20	33.3%
Not enough	40	66.7%

Table 4 indicates that of the sixty respondents, twenty (33.3%) had high knowledge and forty (66.7%) had low knowledge.

### Characteristics of Respondents' Attitude Frequency

**Table 5.** Frequency Distribution of Respondents' Attitudes.

<b>Attitude</b>	<b>f</b>	<b>%</b>
Does not support	30	50%
Support	30	50%

Table 5 demonstrates that of the 60 respondents, 30 (or 50%) had a non-supporting attitude and 30 (or 50%) had a supportive attitude.

### Characteristics of Husband's Support Frequency

**Table 6.** Frequency Distribution of Husband's Support.

<b>Husband's Support</b>	<b>f</b>	<b>%</b>
Does not support	30	50%
Support	30	50%

Table 6 reveals that 50 respondents (50%) supported their spouses, whereas 60 respondents (50%) did not.

## Factors Influencing the Low Interest of Women of Childbearing Age in Undergoing IVA Examination

**Table 7.** Relationship between Education, Knowledge, Attitude, and Family Support with the Interest of Women of Childbearing Age in Undergoing IVA Examination at Butong Community Health Center.

Variables	Category	WUS Interest in Undertaking IVA				Total		P-Value
		Interest		Not Interested		f	%	
		f	%	f	%			
		f	%	f	%	f	%	
Knowledge	Good	5	25	15	75	20	100	0.006
	Low	1	2.5	39	97.5	40	100	
Attitude	Does not support	6	20	24	80	30	100	0.010
	Support	0	0	30	100	30	100	
Husband's Support	Does not support	6	20	24	80	30	100	0.010
	Support	0	0	30	100.0	30	100	

Table 7 demonstrates that of the 60 women with little knowledge, the majority are not interested in having a VIA test (97.5%), with a P-Value of 0.006. This indicates a link between women's desire in having a VIA examination and their level of knowledge. There is a correlation between attitudes and women's desire in having a VIA examination, as evidenced by the fact that 100% of the 30 women with supportive views do not want to have one (P-Value = 0.010). With a P-Value of 0.010, nearly all of the 30 women who got husband support had no interest in getting a VIA examination (100%). This suggests that there is a connection between women's desire in having a VIA test and husband support.

### Discussion

Considering According to the study's findings, 33 respondents (55%) who were older than 35 expressed interest in having a VIA test. Respondents over 30 believed that getting a VIA test was more crucial since they were more likely than those under 30 to have precancerous lesions. Age can also have an impact on a person's understanding and perspective. A person's understanding and perspective will improve as they age. WUS will be more interested in taking

a VIA test as they become older since they will be more mature.(Mella Yuria RA 2021, Dinni Randayani Lubis). A person is increasingly vulnerable to cervical cancer as they age, but it will be challenging for them to follow recommendations if their level of knowledge and mental maturity about the IVA test and cervical cancer is poor.(2019, Fauza). It should be simpler to adjust to your environment and comprehend the advantages of early cervical cancer screening as you age.(Nunuk Suryani, Ni Made Sri Dewi, 2013).

58.3% of the respondents were employed, according to the characteristics of their jobs Darmojo and Hadi (2004) stated that a woman who has social activities outside the home will receive more information, for example from work colleagues or friends in social activities. People who work tend to have more time to share their thoughts and experiences with coworkers since they must devote a lot of time and effort to finishing tasks that are deemed significant. The workplace enables WUS to learn about the IVA test's ability to detect cervical cancer early. Knowledge or information will boost WUS's involvement in the IVA test. This supports Mubarak's (2007) assertion that one may acquire experience and knowledge both directly and indirectly in the workplace. Individuals who work in employment where information is easily accessible will be more knowledgeable than those whose jobs make information harder to get.(Cahyaningrum and Masruroh, 2018. Occupation will affect a person's economic level, but a socioeconomic level that is too low will influence individuals to ignore the message being conveyed because they are more concerned with other, more pressing needs (Rafikasariy, 2019). Meanwhile, unemployed women have more free time to take the IVA test, but the flow of information about the IVA test tends to be less.(Jamilah, Rahmayani, and Palimbo 2022). Adult women have increasingly open job opportunities. The basic reasons women choose to work vary from one woman to another. Common reasons include financial need to expand experience, personal knowledge, and a desire to excel. However, other reasons may also be due to working women spending more time at work and not being able to take the time to undergo a VIA (Vitality Assessment) test.(Dimansari Flowers 2019). For working women, they will have a dual role, as a housewife and a career woman. The positive impact of working women will help improve the household economy, but the negative impact, when a career woman cannot divide time for family and cannot control emotions and differentiate problems between work in the office and household obligations, will certainly affect the woman's psychology and also affect family relationships. Therefore, researchers concluded that respondents who work will receive more information about the VIA examination due to the large flow of information they will receive, but will tend to spend more time at work so they tend not to have time to carry out an IVA examination and when they come home from work

will spend more time with their family, especially their children if there are still small children and even left with a nanny.

The data analysis showed a relationship between women of reproductive age who took the VIA test at the Butong Community Health Center and their level of education. According to the above table, 60% of respondents with little education took the VIA test, compared to 40% of respondents with strong education. It will be more challenging to understand the facts or message if one has little knowledge (Notoatmodjo, 2014). The study's findings contradict a number of ideas that contend that health behavior is greatly influenced by educational characteristics. The researchers concluded that even though mothers with high education had not received clear information about early detection of cervical cancer using the VIA test, mothers did not know/realize the importance of screening and awareness in seeking treatment, such as prevention is better than cure. In addition to other information, a person's behavioral characteristics in early cervical cancer diagnosis were impacted by the lack of knowledge about VIA from partners and healthcare professionals. Thus, it can be said that moms' conduct when taking the VIA exam is not noticeably influenced by higher education in the absence of knowledge of VIA. It should be noted, nevertheless, that a person with little education does not always lack information. This is due to the fact that non-formal education can also lead to improved knowledge. When information on the IVA technique of detecting cervical cancer is not taught in schools, it might be learned through the surroundings, counseling, and information media.(Palimbo, Rahmayani, and Jamilah 2022). An individual's knowledge increases as their level of education increases since it makes it simpler for them to acquire information. Mothers with lower levels of education have a harder time learning about VIA, which makes it harder for them to get tested for it. A person's knowledge and perception of the significance of everything, including the necessity of early diagnosis of cervical cancer, are greatly influenced by their level of education.(Asriwati, Sry Arina Manihuruk, 2021).

90% of respondents expressed no interest in undertaking a VIA examination, whereas 10% expressed interest in doing so. Unbeknownst to others, interest is a sense of preference and attraction to something or an activity. According to Djaali (2013), interest is essentially the recognition of a link between oneself and something outside of oneself. Health education, ignorance or lack of information leading to discomfort during the test, inconvenience, uncertainty about the test's significance, and fear of the test's actual results are some of the factors that affect interest in the VIA exam. Low interest arises because WUS do not understand the importance of the VIA examination because they have not been exposed to information through health education.(Luh, Puspita, and Sulantara 2018).

According to the characteristics of the 60 respondents' knowledge, 66.7% of them had low knowledge and 33.3% had strong knowledge. The majority of respondents in this study had poor knowledge about cervical cancer and pap smear examinations, while the remaining respondents had good knowledge. If we take a closer look at the respondents' educational background, it becomes clear that the mothers who participated in the study had lower secondary education on average, and only a small percentage had upper secondary education. (Latifah, Nurachmah, and Hiriyadi 2020), adding that most respondents had good knowledge about cervical cancer and most had secondary education (high school). In this instance, knowledge may have come from sources other than schooling alone. Knowledge is influenced by a number of factors, including economic condition, age, experience, and education. This study's findings are consistent with those of other research. (Lilia, Haryanto, and Rislina 2023) This indicates that people who took the IVA Test were more knowledgeable than those who did not. This is due to respondents' fear of the test findings, their continued belief that the procedure was forbidden, and their embarrassment of medical professionals when they examined inside female organs. In order to increase the knowledge and comprehension of women of childbearing age (WUS) and increase their willingness to undergo early detection of cervical cancer, health professionals should be more proactive in offering in-person counseling to WUS regarding the significance of the IVA Test in early detection of cervical cancer. 50% of the 60 respondents had unsupportive views, and 50% had supportive attitudes. Eighty percent were uninterested, and twenty-four responses were unsupportive. An individual's reaction based on their understanding of an object is known as their attitude. A person's perception or response to a previously known thing is typically used to identify their attitude. Attitude is the result of a person's appreciation of a particular object that has not been expressed in the form of behavior, still a point of view in one's mind. Several factors that can influence women's attitudes to VIA screening include shame, fear, and worry about pain during the examination, including knowledge about cervical cancer screening. The attitudes of women with reproductive age (WUS) are mostly in the less supportive category. There are several reasons why women are reluctant to undergo VIA examinations, namely feelings of shame and anxiety due to the assumption that it will cause vaginal pain during the examination. Therefore, to change women's attitudes toward VIA testing, efforts are being made to increase their knowledge and understanding that early prevention or early detection of a disease is better than arriving at a health service when it is already in a serious condition. This is done through routine outreach at every meeting or activity in each village or through direct counseling for women. Women's awareness of the importance of VIA testing to prevent the risk of cervical cancer can

increase awareness. Motivating women to undergo VIA testing can help them understand their cervical cancer status. Attitudes are related to interest in VIA testing because women with positive attitudes toward VIA testing are also more prepared to undergo VIA testing at the community health center. Conversely, if women have less positive attitudes, there is a tendency for them not to undergo VIA testing.(Mustari, Elis, and Maryam 2023).

based on the traits of 60 respondents' husbands' support. Eighty percent of the husband is uninterested and unsupportive. This indicates that women of reproductive age's behavior in using IVA for early cervical cancer detection in the Butong Community Health Center work area is significantly correlated with their husbands' support. This study demonstrates that many respondents do not have their husbands' support to perform early cervical cancer detection with the IVA test because their husbands work in distant fields and do not have children to care for at home. This study supports the findings of Masturoh's (2016) study, which found that the behavior of women of childbearing age (WUS) in cervical cancer screening using the IVA method in the Bangetayu Community Health Center Work Area, Semarang City, was influenced by their husbands' support (p value 0.010). Compared to women of childbearing age's knowledge, attitudes, and access to information, their husbands' support has a significant impact on their involvement in early cervical cancer diagnosis (Ayuningtiyas, 2018). IVA examinations are more common among respondents who have strong family support. This is due to the fact that responders are often motivated to improve their health by significant influence from close relatives, such as spouses. Additionally, the woman's conduct during VIA testing is greatly influenced by her husband's decision-making role. Conversely, VIA testing is less common among responders who have less family support. A wife's likelihood of undergoing routine VIA testing increases with her husband's support, which is a reinforcing influence. Women of reproductive age's interest in and conduct toward VIA testing might be influenced by their husbands. One type of social support that a woman receives throughout her life is husbandly support. A husband is the closest person to a woman and can influence her decisions. Husbandly support is a form of social support that is perceived as beneficial by family members. Therefore, a husband who supports his wife in undergoing VIA testing can encourage a woman to participate in the examination.(Anggraeni and Lubis 2022).

The results of this study indicate that support from health workers plays a significant role and is interrelated with other factors in motivating respondents to undergo Pap smears. Respondents' knowledge about cervical cancer was largely obtained through counseling provided by health workers, resulting in a positive attitude among respondents to get

themselves examined, which involved their husbands in accompanying and motivating their wives to undergo Pap smears.

#### **4. CONCLUSION**

The study's findings indicate that women of reproductive age's lack of interest in having an IVA examination at Butong Health Center is influenced by their level of education. The poor interest of women of reproductive age in having an IVA assessment at Butong Health Center is influenced by their attitudes. The low interest of women of reproductive age in having an IVA examination at Butong Health Center is influenced by their husbands' support. It is anticipated that recommendations for health professionals would enhance health promotion and regular counseling for IVA services using appealing and simple-to-understand marketing strategies. In order to raise WUS awareness of the significance of using IVA services for early cervical cancer screening. Ideas for Health professionals are expected to broaden the scope of health promotion, which includes assisting mothers and their husbands in using IVA services, educating young women about early health issues, and collaborating across sectors with religious and community leaders to support and inform the community. Suggestions for Women of Childbearing Age (WUS), it is hoped that they are more sensitive to physical changes and health conditions experienced and immediately check themselves with health workers if they are suspected of having risk factors for cervical cancer, so that they can detect cancer cells early and overcome them. Suggestions for future researchers are expected to increase the number of variables and more ways to develop research on factors that influence WUS interest in IVA examination.

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