

“Sapu Cantik” Innovation (Healthy, Safe, and Caring for Our Prospective Brides) as an Effort to Increase Motivation for Catin Health Visits

M. Suhron^{1*}, Siti Safitri Mulita², M. Hasinuddin³
^{1,2,3} STIKes Ngudia Husada Madura, Indonesia
*Corresponding Author: dsuhron@yahoo.co.id

ABSTRACT

Health service visits are decreasing at the Primary Health Care level, including a decrease in premarital couple visits. This innovation aims to provide support and cross-sector cooperation in increasing health visits for couples before marriage. The implementation method in developing this innovation is to use the Research and Development design, which has 2 stages of activity. The first stage is to evaluate a couple's premarital visit through field studies using documents, interviews, and observations and determine strategic issues. The results show that the number of premarital couple visits has not reached 100% and is not optimal. This Sapu Cantik Innovation provides solutions for premarital couples as a form of cross-sectoral concern for the health of premarital couples. This innovation hopes to help and identify premarital couples who face health problems before, during, and after marriage to improve family health.

Keywords: health, innovation, motivation, premarital couples

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BACKGROUND

Health service visits are an indicator of the quality of Puskesmas performance. However, health service visits are currently experiencing a decline at the community health center level [1], one of which is a decrease in visits by prospective bride and groom couples. The visit of the prospective bride and groom to carry out screening is a very important thing because reproductive health problems are currently increasing (Masfi & Arifin, 2022). In the development process, the age of students is said by many experts to be a staging phase, so each individual prepares themselves by carrying out a learning process to improve knowledge, and skills and determine the ideology of life. In Indonesia, awareness of screening prospective brides and grooms is still very low (Manik, 2023).

Pre-research results on students in Assiut showed that 50.9% of the students studied said that they received information about reproductive health, especially regarding premarital examinations, while 66.9% of them did not know that diseases could be detected by premarital skinning (Dwiyanti & Dewi, 2023). The results of observations made by researchers at the Blega Community Health Center, through documents and reporting, found that visits from prospective brides and grooms have decreased from year to year. In 2022 visits from prospective brides and grooms will reach 55.5%, while in 2023 it will reach 45.7%. This also shows that the achievement of visits from prospective brides and grooms has not reached the specified target of 80%. Meanwhile, the results of interviews with 10 prospective bride and groom couples, all stated that they did not know about the existence of examinations for prospective bride and groom couples (Primary Data, 2023).

Screening prospective brides and grooms is a series of health checks carried out by couples before marriage (Fujiana, 2023). Health checks for the prospective bride and groom are highly recommended by doctors and are one of the mandatory procedures that couples must carry out before the wedding because it has positive benefits for the long term of a marriage (Tawanti). Screening for prospective brides and grooms includes routine blood tests, hemoglobin analysis, Erythrocytes Sedimentation Rate (ESR), blood type and rhesus factor tests, complete urine tests, blood sugar tests, HBsAg test, VDRL/RPR test, and TORCH test. This screening is very necessary to become aware of the health of oneself and one's partner and also to prepare for having children. Apart from what has been explained, it is also to prevent diseases that can be transmitted by partners, such as HIV/AIDS (Sanah, 2019). The impact/consequences of not screening prospective brides and grooms are increased (disability, illness, or death of mothers and babies).

Factors that influence the decline in examination visits for prospective brides and grooms are due to the prospective bride and groom's ignorance about the existence of examinations before marriage. Apart from that, there is a lack of communication and coordination between sectors and unclear health regulations for health services for prospective brides and grooms. This causes many prospective bride and groom couples to miss out on health service visits. So to improve health services for prospective bride and groom, innovation is needed to attract prospective bride and groom couples to carry out examinations at health services with a cross-sector coordination and communication approach, so that the responsibility of the prospective couple's health The bride and groom are a shared responsibility.

METHODS

The design of this research is Research and Development (R&D) is a process or stage in developing a new product or improving an existing one and can be accounted for. This research uses 2 stages of activity, namely the first stage is evaluating the implementation of health services for prospective brides and grooms, while the second stage is developing innovations and trials. The independent variable is the SAPU CANTIK innovation (healthy,

safe, and caring for our prospective bride and groom) and the dependent variable is the health service visit of the prospective bride and groom.

The population in this study was prospective bride and groom couples, and the sample used was based on criteria determined by the researcher. The sample in stage one is puskesmas documentation. Meanwhile, for stage 2, there are the Head of the Department, Head of the Community Health Center, Head of BKKBN, and Head of KUA. And then for the sample trial, there were 20 prospective bride and groom couples. The sampling technique for this research used a purposive sampling method. The sampling size was 16 prospective bride and groom couples with the inclusion criteria being prospective bride and groom couples and prospective bride and groom couples in the Blega Community Health Center working area. Exclusion criteria were teenagers, and prospective bride and groom couples who were not willing to become respondents. The research instruments are in the form of health service documents for the bride and groom, Focus Group Discussion (FGD), and Check-ups, while the analytical test uses the Paired T-Test

RESULTS

Based on statistical tests using *paired t-tests* showed that there was a difference in visit motivation between before and after for male respondents who were given the SAPU CANTIK Innovation (Healthy, Safe, and Caring for Our Bride-To-Be) in the Blega Community Health Center working area with a value of $(0.000) < \alpha (0.05)$. Female respondents showed that there was a difference in visit motivation between before and after being given the SAPU CANTIK Innovation (Healthy, Safe, and Caring for Our Bride-To-Be) in the Blega Community Health Center working area with a value of $(0.011) < \alpha (0.05)$. Meanwhile, the control group showed that there were differences in visit motivation in the control group *men* in the work area of the Blega Community Health Center *with a value* $(0.020) < \alpha (0.05)$. *In the control group, women showed* There is a difference in visit motivation between before and after the control group in the Blega Community Health Center working area *with a value* $(0.032) < \alpha (0.05)$.

Univariate Analysis

Table 1. Frequency Distribution of Demographic

No		Age (Years)	
1	Under 19	16	100.0
No		Education Level	
1	High	2	12.5
2	Medium	4	25
3	Low	10	62.5
Total		16	100.0

Source: Primer (2023)

Based on age demographic data, it shows that all male and female CATIN (Prospective Bride) ages in the treatment and control groups were > 19 years old (100%). Based on the level of education, it shows that most of the education of CATIN (Prospective Brides) women have elementary/middle school (basic) education, numbering 10 (62.5%) women (62.5%) of CATIN (Prospective Brides) and women have elementary/middle school (basic) education. a total of 10 (Prospective Brides) women (62.5%). Based on employment, it shows that the majority of jobs for CATIN (Prospective Bride) Men are self-employed, numbering 14 (Prospective Bride) Men (87.5%), and the majority of jobs for CATIN (Prospective Bride) women do not work, numbering 8 (Prospective Bride) women. (50%).

Bivariate Analysis

Table 2. Differences in motivation for male CATIN (bride-to-be) visits before and after being given the SAPU CANTIK (Healthy, Safe, and Caring for Our Bride-To-Be) innovation in the Blega Community Health Center working area.

Respondent	<i>Pre Treatment Group</i>	<i>Post Treatment Group</i>
	Visit motivation	Visit motivation
1	41	58
2	42	49
3	43	52
4	43	56
5	41	54
6	45	56
7	41	57
8	40	66
<i>Mean (rate-rate)</i>	42.00	56.00
<i>Std. Deviation</i>	1.604	4.986
<i>Uji Paired T-Test P-Value</i>	0,000	

Source: Source: Primer (2023)

Table 2. Differences in Women's CATIN (Prospective Bride) Visit Motivations between before and after being given the SAPU CANTIK (Healthy, Safe, and Caring for Our Bride Prospective) Innovation in the Blega Community Health Center working area

Respondent	<i>Pre Treatment Group</i>	<i>Post Treatment Group</i>
	Visit motivation	Visit motivation
1	40	60
2	36	65
3	38	62
4	37	64
5	37	63
6	36	63
7	37	64
8	37	59
<i>Mean (rate-rate)</i>	37.25	62.50
<i>Std. Deviation</i>	1.282	2.070
<i>Uji Paired T-Test P-Value</i>	0,011	

Source: Primary Data 2024

Table 3. Differences in Male CATIN (Prospective Bride) Visit Motivation between before and after in the control group in the Blega Health Center working area.

Respondent	<i>Pre Control group</i>	<i>Post Control group</i>
	Visit motivation	Visit motivation
1	43	42
2	45	41
3	45	39
4	51	42
5	45	39
6	48	43
7	41	40
8	38	40
<i>Mean (rate-rate)</i>	44.50	40.75
<i>Std. Deviation</i>	4.00	1.488
<i>Uji Paired T-Test</i>		
<i>P-Value</i>	0,020	

Source: Primary Data 2024

Table 4. Differences in CATIN (Prospective Bride) Visit Motivation for Women in the control group in the Blega Health Center working area

Respondent	<i>Pre Control group</i>	<i>Post Control group</i>
	Visit motivation	Visit motivation
1	42	40
2	42	37
3	44	37
4	41	42
5	43	37
6	44	42
7	40	40
8	38	37
<i>Mean (rate-rate)</i>	41.75	39.00
<i>Std. Deviation</i>	2.053	2.268
<i>Uji Paired T-Test</i>		
<i>P-Value</i>	0,032	

Source: Primary Data 2024

Based on statistical tests using *paired t-tests* showed that there was a difference in visit motivation between before and after for male respondents who were given the SAPU CANTIK Innovation (Healthy, Safe, and Caring for Our Bride-To-Be) in the Blega Community Health Center working area with a value of $(0.000) < \alpha (0.05)$. Female respondents showed that there was a difference in visit motivation between before and after being given the SAPU CANTIK Innovation (Healthy, Safe, and Caring for Our Bride-To-Be) in the Blega Community Health Center working area with a value of $(0.011) < \alpha (0.05)$. Meanwhile, the control group showed that there were differences in visit motivation in the control group *men* in the work area of the Blega Community Health Center *with a value* $(0.020) < \alpha (0.05)$. *In the control group, women showed* There is a difference in visit

motivation between before and after the control group in the Blega Community Health Center working area *with a value* $(0.032) < \alpha (0.05)$.

DISCUSSION

According to researchers' assumptions, the SAPU CANTIK (Healthy, Safe, and Caring for Our Bride and Groom) Innovation as an Effort to Increase Motivation for Health Visits, Catin provides visit motivation for some respondents in the strong category. Motivation encourages someone to do beneficial things, especially for their health. This is also based on the results of the characteristics of respondents based on age, all CATIN (Prospective Bride) ages of women in the treatment and control groups are > 19 years old (100%), research results from Triratnasari (2017) show that age 19-35 years is the productive age. Adults are proof that a person has had a long life experience compared to those under 20 years of age, who are generally still studying. Then it is further strengthened by the respondent's education, namely secondary education consisting of high school and equivalent which is generally open to accepting changes or new things to maintain their health. And even respondents who work do not rule out the possibility of carrying out TT immunization. This motivation is based on a mission or goal in life.

A person who has found his life's mission works based on the values he believes in the form of love for others or has meaning in living his life. Individuals who have this kind of motivation usually have a vision that is far into the future. For him, working is not just to obtain something (money, self-esteem, pride, achievement) (Suhron, 2016;2018;2019;2020;2023) but also a learning process and a process that he must go through to achieve his life's mission. This strong motivation is also based on government participation, especially Health officers in Blega, who play a role in increasing knowledge of prospective brides and grooms about Health examinations such as TT immunization through pre-marital counseling, Health Education, as well as being a forum for providing TT immunization and KUA which has facilitated the counseling carried out so that In this case, the prospective bride not only gets what she wants to achieve, but Anita not only gets what she wants to achieve but also gets health information that is important for her and there is a strong motivation to get a TT (Tetanus Toxoid) immunization health check.

This opinion is also supported by the existing theory of Ida Bagus (Ministry of Health of the Republic of Indonesia 2000) that the experience of a person who gives birth without receiving tetanus toxoid (TT) immunization during pregnancy and the baby is born without neonatal tetanus, then this greatly influences the mother's motivation to receive tetanus immunization. toxoid (TT) in pregnancy. Motivation is a complex internal process that cannot be observed directly but can be understood by someone when doing a job. For prospective brides and grooms during health checks, such as giving tetanus toxoid (TT) immunization, because of active motivation, the prospective bride and groom will be encouraged to carry out immunizations and provide self-awareness to the individual. And if there is a lack of active motivation then there is a lack of self-awareness of the prospective bride and groom in carrying out tetanus toxoid (TT) immunization. This can be self-defeating (Yusuf, 2019; 2020) because there is no immunity to tetanus. According to researchers' assumptions, the motivation held by some respondents is in a strong category. Motivation encourages a person to do beneficial things, especially for their health (Amir, 2021).

CONCLUSION

1. There is a difference in the motivation for male CATIN (Prospective Bride) Visits between before and after being given the SAPU CANTIK (Healthy, Safe, and Caring for Our Bride and Groom) Innovation in the Blega Community Health Center working area.
2. There is a difference in the motivation for CATIN (Prospective Bride) Visits between

- before and after being given the SAPU CANTIK (Healthy, Safe, and Caring for Our Bride-To-Be) Innovation in the Blega Community Health Center working area.
3. There is a difference in motivation for male CATIN (Prospective Bride) Visits between before and after the control group in the Blega Health Center working area.
 4. There is a difference in the motivation for CATIN (Prospective Bride) Visits between before and after the control group in the Blega Community Health Center working area.

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