

Theory of Planned Behaviour for Cervical Cancer Prevention - View of Husband Support

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ABSTRACT

The husband's support is an important interpersonal factor in the prevention of cervical cancer performed by women but there are also women who have received support from their husbands who are still reluctant to make an effort related to the early detection of cervical cancer. This study aims to analyse the factors related to the husband's support behaviour in cervical cancer prevention based on the Theory of Planned Behavior. This study used a cross-sectional design. The sample consisted of 102 husbands within childbearing couples taken using a cluster sampling technique. The variables of the research included the husband's attitude, the subjective norm, perceived behavioural control, intention and support behaviour in relation to cervical cancer prevention. Data analysis was performed using Spearman Rho with $\alpha \leq 0.05$. The results showed there to be a significant relationship between attitude and intention ($p=0.000$; $r=0.377$), perceived behavioral control and intention ($p=0.003$; $r=0.289$) and the intention with the husband's support behaviour in terms of cervical cancer prevention ($p=0.000$; $r=0.431$). The subjective norms within the intention indicate a significant relationship ($p=0.059$; $r=0.188$). To improve the prevention of cervical cancer, health care providers and health institutions should involve the husband to reduce female morbidity and mortality from cervical cancer.

Keywords: women, cancer, prevention, support, husband

Introduction

The early prevention of cervical cancer is possible to do since the beginning of cervical cancer caused by infection with *the Human Papilloma Virus* (HPV) which, if not dealt with, can be severe.¹ Cervical cancer prevention efforts are varied as improving public education activities on how to behave and how to live a healthy life, thus avoiding the risk factors for cervical cancer and offering early detection tests such as VIA and Pap tests, can reduce the incidence rate of cervical cancer.²

According to the WHO in 2012, new cases of cervical cancer total as many as 530,000 cases and deaths from cervical cancer reach as much as 270,000

cases, 90% of which occur in developing countries. Cervical cancer had the highest position in Indonesia in 2013, amounting to 0.8% and the estimated number of cervical cancer victims was 98,692 women. The East Java province ranks the third highest in Indonesia with the number of cervical cancer cases amounting to 21,313 inhabitants.³

In Indonesia, the government implements prevention efforts through early detection via pap smear tests. Health workers have made efforts to reach married woman by providing counseling about cervical cancer and facilitating the inspection of facilities for the early detection of cervical cancer. There are various factors that hinder the examination and early detection of cervical cancer in women such as shame and fear, the cost factor, especially in the economically weak, experience and motivation, as well as social support, especially from the husband as the decision makers in the family.^{4,5}

Healthy behaviors arise when a woman gets support from the people nearby, one of which is the support from

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her husband. A supportive husband is decisive because it will reinforce the motivation for the prevention, including early detection, of cervical cancer.^{6,7} The researcher, J Community Health, found the husband's support to be the dominant factor in the prevention of cervical cancer, but some of the mothers who had the support of a husband did not undertake these efforts. It showed no clear point of view on part of the husband and the factors that play a role in the business of the husband and wife when it came to supporting and strengthening their motivation to take steps to prevent cervical cancer.

Research was conducted by Madhivanan about the family support related to encouraging the participation of couples of reproductive age (EFA) in the prevention of cervical cancer. This included support measures from the viewpoint of the wife. Research on the behavior of the husbands' support in the prevention of cervical cancer has not been done focused on male subjects. The factors related to the behavior of a man's support is important to consider.

The Theory of Planned Behavior (TPB) explains that the behavior displayed by the individual arises because of the intention to behave. The emergence of an intention to behave deals with three factors: the attitude towards the behavioral, the subjective norms and perceived behavioral control.⁹The aim of the study was to analyze factors related to husband's support behavior in the prevention of cervical cancer based on the Theory of Planned Behavior.

Method

This study used a cross-sectional design. The population consisted of husbands who were of fertile age, as part of a couple in the Kauman sub-district, Nganjuk. The sample size in this study was 102 respondents. The technique of the sampling used was cluster sampling. The independent variables in this study consisted of attitude, subjective norms, perceived behavioral control and intention. The dependent variable was the behavior of the husband's support for cervical cancer prevention. This study uses a demographic questionnaire. The instruments used to measure the TPB component variables including attitudes, subjective norms, behavioral control perceptions and the husband's intention was in the form of a questionnaire developed based on each parameter. The instruments of the husband's support in preventing cervical cancer

were developed based on the emotional, instrumental, informational and reward support parameters. They used a positive and negative scale in the form of Likert statements. The data classification of all of the variables was done using a T score referring to the data mean. The instrument carried out both validity and reliability tests.

Data Analysis: The descriptive statistics method was employed to analyse the data to generate the study results in forms of frequencies and percentages. This method allowed to summarize the characteristics of the study subjects based on the variables selected. Inferential analyzed using Spearman's Rho test.

Results

The respondents were aged between 26-35 years by as many as 42 people (41.2%). The majority of the respondents had completed high school education by as many as 61 people (59.8%). The dominant job was self-employment by as many as 48 people (47.1%). The average income of the respondents was more than Nganjuk's minimum wage, by as many as 48 people (47.1%).

Table 1: Demographic characteristics of the respondents (n = 102)

Criteria	n	%
Age:		
17-25 years	1	1
26-35 years	42	41.2
36-45 years	38	37.3
46-55 years	21	20.6
Education:		
Elementary school	3	2.9
Junior high school	13	12.7
Senior high school	61	59.8
Colleges	25	24.5
Occupation:		
Government official	17	16.7
Private	37	36.3
Self-employed	48	47.1
Revenue:		
≤ district wage	54	52.9
> district wage	48	47.1

The majority of the respondents had heard of cervical cancer. The experience that most of the respondents had

with cervical cancer was derived from a famous person and the authoritative resources that the husband had used to know about cervical cancer included the internet and TV.

Table 2: Information of the respondents (n = 102)

Cancer Information	n	%
Knowledge of cervical cancer		
Know	36	35.3
Ever heard	60	58.8
Do not know	6	5.9
Cancer Experience		
Family suffered	1	1
Neighbours suffered	4	3.9
Friend suffered	8	7.8
Famous person	83	81.4
No	6	5.9
Media Exposure		
Internet/TV	80	78.4
Magazine/newspaper	10	9.8
Banner/Flyers	3	3
Health education	3	2.9
No	6	5.9

There is a significant relationship between attitude ($r=0.377$), perceived behavioural control ($r=0.289$) and intention related to the behaviour of the husbands' support in the prevention of cervical cancer. The more positive the attitude and the better the perception of control in the behaviour of the respondent, the higher the intention to support cancer prevention.

There is no significant relationship between subjective norms and intention in reference to the behaviour of the husbands' support in the prevention of cervical cancer. The absence of a significant relationship arises when someone has a *belief* that is less due to people who are considered to be less important showing expectations that need to be met by such a person.

There is a significant relationship between the intention to conduct support from the husband in the prevention of cervical cancer. Spearman's correlation value of 0.431 indicates that the intention to provide support has a strong enough relationship and that it is in line with the behaviour of the husbands' support in the prevention of cervical cancer.

Table 3: Husband Support Based on the Theory of Planned Behaviour

TPB Factor		Intention				Total		Spearman's Rho Test
		Low		High		n	%	
		n	%	n	%			
Attitude	Negative	34	33.4	19	18.6	53	52	p= 0.000 (r) = 0.377
	Positive	13	12.7	36	35.3	49	48	
Normal subjective	Less	31	30.4	26	25.5	57	55.9	p= 0.059
	Good	16	15.7	29	28.4	45	44.1	
Perceived behavioural control	Less	34	33.4	24	23.5	58	56.9	p= 0.003 (r) = 0.289
	Good	13	12.7	31	30.4	44	43.1	
		Behaviour						
Intention	Low	38	37.3	9	8.8	47	46.1	p = 0.000 (r) = 0.431
	High	21	20.5	34	33.4	55	53.9	

Discussion

The majority of the respondents have a positive attitude. The supportive attitude was found in relation to the prevention of cervical cancer. They consider that the attitude of support is essential to bringing up the intention to provide support for the prevention of cervical cancer. The attitude of a significant predictor of the intention of women in terms of *screening* for HPV is involved in the early detection of cervical cancer.¹⁰

Someone is going to have a positive attitude about the behaviour of the support in the prevention of cervical cancer because they have a feeling that is focused on siding with the statement that it is crucial to assist in the study. Belief is proportional to the right attitude towards vaccination.¹¹ A positive attitude has a significant relationship with predicting the intentions of eating a healthy diet in pregnant women. The *Theory of Planned Behaviour* states that attitudes toward a particular

behaviour are a determining factor for the formation of an intention.¹²

A positive attitude tends to elicit high intention, but some of the respondents have a positive intention but they are lacking otherwise. There are also respondents who act negatively but who have good intentions. Based on the *Theory of Planned Behavior*, intention is not only influenced by attitude but also by subjective norms and perceived behavioural control. Each has their strengths regarding which factor affects the intentions of the individual, so there are always people who have a high intention and a positive attitude.¹³ The existence of other factors that affect the intention and attitude includes the demographic data such as age, education, occupation, income, knowledge, experience and media exposure as generated by the respondent.

Good subjective norms do not necessarily produce a high intention. The husband's intention to provide support for the prevention of cervical cancer was influenced by the individual. According to the research, the global burden of women's cancers is a grand challenge in global health. Some of the influential persons out of the respondents included parents, spouses, neighbours, friends and health workers. Generally, people tend to have confidence in the direction of other people. Someone special to us will significantly influence the formation of our beliefs.¹⁴

Most of the respondents have less subjective norms that showed that her husband was less influenced by those closest to them confidence. There were also respondents who had proper subjective norms and high intentions. The subjective norms and intentions were less steep, as well as the subjective norms and intentions being lesser as well.

The perception of the control behaviour of the husband in the prevention of cervical cancer is more directed at the husband and their confidence in the factors that influence the behaviour of their support and the votes that possessed the power of perception. The researchers categorised the viewpoint of behavioural control into two categories: the behavioural control perception of good and the perception of behavioural control being lacking. The control perception of good behaviour indicates that the husbands tend to be able to control their perceptions of the factors that influence the behaviour of the support in the prevention of cervical

cancer.¹⁵ The husband's perception can efficiently perform the reaction in favour of cervical cancer prevention. The perception of less behavioural control shows the tendency of the husband to be less able to control the perceptions of the factors that influence the behaviour of the support in the prevention of cervical cancer. The husbands perceived that it was difficult to support their wives in the prevention of cervical cancer.

The majority of respondents have the high intention of demonstrating a strong desire and urge in themselves to provide support in reference to the prevention of cervical cancer, even if the intention associated with the behaviour of the husbands' aid in the prevention of cervical cancer mostly shows a low intention and where actions are lacking. The intensity is generally comparable with the behaviour performed but some of the respondents have high intentions but demonstrate less supportive behaviour in the husbands. This is similar to the respondents who had low intentions but good behaviour. Other factors influence attitude - behaviour, subjective norms, the perceptions of behaviour control and specific intentions.¹⁴ A lack of facilities and infrastructure owned by the husband can be a factor that also supports the implementation of a behaviour. Facilities and infrastructure can involve time, energy, materials and facilities. It could require the husband to be able to guarantee the facilities to support cervical cancer prevention behaviour with their wife.^{17,18}

In addition to the above factors, the demographic data of the respondents can also affect the intention and practices of the support from the husband. The respondents who had heard of cervical cancer tended to have high intentions and good behaviour. As demonstrated by the high intentions, good behaviour refers to the respondents whose knowledge of cervical cancer is limited. The high intention of the prevention can arise when exposed to sufficient information and the experience gained by the respondents who most often obtained said information from their community leaders. The knowledge gained by the respondents was indirect. The respondents sought to understand the dangers of cervical cancer, and so their intention seems to be high.

Conclusion

A positive attitude about the prevention of cervical cancer means that the intention that appears in the husband will also be high. If the husband has the

perception of good behaviour related to the control of cervical cancer then this can increase the husband's intention to support the prevention of cervical cancer. The husband's subjective norm has no relationship with the husband's desire to promote the prevention of cervical cancer, which is indicated by the presence of respondents who have less subjective norms obtained from community leaders. They can increase the intention of high respondents in support of cervical cancer prevention. High intention can encourage the creation of supportive behaviour from the husbands in the prevention of cervical cancer.

The national program for the prevention and early detection of cervical cancer needs a policy involving the husbands. The recommendations for further research to increase the awareness of the husbands are directly involved in the efforts to prevent cervical cancer in their partners.

Ethical Clearance: Considering the data collection and ethical practices, the research passed the ethical review of the health research ethics committee of Faculty of Nursing, Airlangga University with certificate number 426-KEPK.

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