**SERVICE QUALITY ON INTEGRATED ANTENATAL CARE AND PARTICIPATION OF PREGNANT WOMEN ON HIV TESTS**

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**ABSTRACT**

WHO data in 2016 estimated that 36.7 million people suffered from HIV globally, and 34.5 million among them were adults. Yogyakarta Special Province in 2016 found that there were 2,954 cases of HIV with the highest cases in Sleman Regency as many as 868 cases. Mlati I Primary Health Center was a Primary Health Center with the lowest coverage of HIV testing for pregnant women, namely in 2017 there were 752 pregnant women, and only 414 (55.05%) were tested for HIV. The purpose of this study was to determine the relationship between perceptions of integrated antenatal care quality service and the participation of HIV testing of pregnant women. The study applied cross sectional research method. The population in this study were pregnant women who performed ANC examinations at Mlati I Primary Health Center in September - November 2018 with a total of 318 pregnant women. The samples in the study were 154 with the simple random sampling technique. The instrument of data collection in this study used a questionnaire. Data analysis employed chi Square and logistic regression. The results of bivariate statistical tests using chi square showed that sig value = 0.000 <0.05 with OR 13.896 meaning that women who had a good perception of the quality of ANC services had 13.896 higher chance to have HIV tests compared to those who had poor perceptions of the quality of integrated ANC services . Good perception of the quality of integrated ANC services for pregnant women had a greater chance of taking an HIV test.

Keywords : ANC Service Quality, HIV Test

References : 53 Journals, 8 Books, 9 Theses

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**INTRODUCTION**

The incidence of HIV worldwide continues to increase every year. The WHO data globally year 2016 HIV cases is estimated to be as much as 36.7 million, as much as 34.5 million of whom are adults. Of 17.8 million of the infected are women and as many as 2.1 million children under the age of 15 years. The number of deaths from AIDS, is as many as 1 million people, with the Division of 890 thousand of whom are adults and as many as 120 thousand are children less than 15 years old (WHO, 2016).

Research results (Bindoria et al., 2014) discovered that she was HIV testing and integrated with the ANC can improve prevention of HIV transmission from mother to baby. Research results Gunn et al., (2016) found that HIV testing initiated by health workers managed to increase the scope of tests on sexually transmitted infections (STI) and HIV, as compared to the control group (p = 0.008).

Service quality perceptions the ANC may well affect the participation of expectant mothers in conducting HIV testing. It is influenced by the quality of service received by pregnant women in accordance with the desired hope so cause the desire in the utilization of existing health facilities (Fawole, Okunlola, & Adekunle, 2009).

According to Panasuraman et al, in Ramseook-munhurrun, Lukea-bhiwajee, & Naidoo (2010) pelayaan is divided into five quality dimensions i.e. Tangibles, Reliability, Responsiveness, Assurence and Emphaty. The five dimensions of service quality is used to measure the quality of health services or better known as Service Quality (SERVQUAL). Quality good service will affect the decision making of the community to the repeated utilization of a continuous nature against the granting of the same service. Toha, research results (2010) shows the perception of respnsiveness is the dimension that have a relationship than most other dimensions (Assurances, tangible, emphaty and reliability).

Sleman Regency Health Office data shows the number of pregnant women by the year 2017 totaled 10171 expectant mothers who do HIV testing is 9734 (95.70%) and clinics Mlati I is the clinic with coverage of HIV testing of pregnant women on the lowest of the year 2017 totaling 752 pregnant and only 414 (55.05%) who do HIV testing Clinics then Ngemplak II as much as 507 and only 280 (55.22%) who do HIV testing (Health Office of Sleman, 2017).

**RESEARCH METHODS**

This type of research is conducted the survey with cross sectional design. The population in this research is all the pregnant women who perform the inspection of the ANC in the integrated Clinics Mlati i. sampling Technique was simple random sampling with a total sample of 154 respondents. Instruments used to measure the perception of the quality of the pelayaanan is the SERVIQUAL questionnaire (Service Quality). Test the bavariat in this study using the chi square test and test using multivariate logistic regression test.

**RESULTS AND DISCUSSION**

1. results of the Univariate

Table I Results Univariate Analysis

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Number | Variable | Category | F  (n = 154) | Percentage (%) |
| 1. | The Perception Of The Quality Of ANC Integrated | Good | 71 | 46,1 |
|  |  | Not Good | 83 | 53,9 |
|  | *Tangible* | Good | 71 | 46,1 |
|  |  | Not Good | 83 | 53,9 |
|  | *Reliability* | Good | 70 | 45,5 |
|  |  | Not Good | 84 | 54,5 |
|  | *Responsiveness* | Good | 77 | 50,0 |
|  |  | Not Good | 77 | 50,0 |
|  | *Assurance* | Good | 61 | 39,6 |
|  |  | Not Good | 93 | 60,4 |
|  | *Emphaty* | Good | 70 | 45,5 |
|  |  | Not Good | 84 | 54,5 |
| 2. | The Participation Of HIV Testing | Join The HIV Testing | 107 | 69,5 |
|  |  | Do not join the HIV testing | 47 | 30,5 |

Based on table I perceptions of pregnant women about the quality of ANC largely has the perception that not good 53.9% of the five dimensions of service quality perception SERVIQUAL perception of responsiveness is the best among them a perception of dimensions other i.e. amounting to 50% and that is not good is the perception of Assurances 60.4%, knowledge of pregnant women about HIV is mostly not good i.e. 50.6%, the attitude of the vast majority of pregnant women is not good namely 51.9 per cent and most expectant mothers do HIV testing i.e. 69.5%.

The results of this study in accordance with previous studies conducted by Munaryo (2008) in which the dimensions of the quality of the most dominant influence utilization facilities service and repeated visits inpatient HOSPITALS in Bradford is a quality dimension power responsiveness. From the results of the analysis of the responsiveness of the service quality antenatal care looks the more speed and ketanggapan midwives in providing services of higher the respondents who say a good quality of service, otherwise the more low-power tanggapmakin the respondents said no low quality.

Based on the research results Ekanem & Gbadegesin, (2009) participation of pregnant women do need HIV testing supported healthcare facilities and infrastructure. Pregnant women who received Antenatal Care Services (ANC) qualified and knowledgeable of HIV and PMTCT enough influenced the participation of mothers for voluntary counseling and test. HIV test participation is affected by access to information, the perceived benefits, health workers, support the recommendation of the husband, education and knowledge.

1. Bivariat Analysis

Table 2. Chi Square analysis the relationship of perception of pregnant women about the quality of the ANC with

integrated participation of HIV testing

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| The Perception Of Service Quality ANC | The Participation Of HIV Testing | | | | Total | | *P value* | OR |
| HIV Testing | | No HIV Testing | |  |  |
| F | % | F | % | N | % |  |  |
| Good | 65 | 60,7 | 6 | 12,8 | 71 | 46,1 | 0,000 | 10,575  (4,129-27,086) |
| Not Good | 42 | 39,3 | 41 | 87,2 | 83 | 53,9 |

Based on table 2 noted that there is a statistically meaningful relationship between perceptions of pregnant women about the service quality of the ANC with integrated intake of pregnant women HIV testing this can be seen in the value of the p value 0.00 (0.00 < 0.05) with the value OR 10.575 which can be interpreted that pregnant women who have the perception of the quality of the ANC will either 10.575 times larger to carry out HIV testing. The results of this study support the research conducted Sánchez-Gómez et al (2014) that States despite many obstacles, counselling and HIV testing can still be performed and accepted by the pregnant women who wished to lower the risk of transmitting HIV to his son if the service provided health workforce appropriate standards or quality.

The perception of service quality will affect the use of the facilities. With respect to the standard of the implementation of the integrated implementation of the ANC ANC mandate for counselling and HIV testing, there are three things the role of health worker (midwife) that support the implementation of HIV testing i.e. improving the quality of service, inform about the availability of HIV testing, knowing supporters and restricting factors when conducting HIV testing of pregnant women. Who says skrening implementation of HIV/AIDS on pregnant women at a time when the ANC is one of the activities that are proven safe and effective for the prevention effort conducted in the transmission of HIV from mother to baby.

Service of a qualified ANC on HIV must be accompanied by a good education namely counseling on HIV must be accompanied by discussion, meaning that it is possible the chance a patient/client ask and deepen his understanding about HIV and HIV status. Health workers/counselors also provide support over the State of psikologik clients. After the education and emotional mental atmosphere, whereas the patient/client is prompted for consent for HIV testing (informed consent) and continued laboratory examination of blood. Information on HIV will make it easier for patients to weigh and decide to undergo tests and gives his consent for HIV testing should be recorded by health workers (Gunn et al., 2016).

Table 3. Chi Square analysis the relationship of perception of pregnant women About 5th dimensional quality of the

ANC with integrated participation of HIV testing

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Variabel | The Participation Of HIV Testing | | | | Total | | *P value* | OR |
| HIV Testing | | No HIV Testing | |
|  | F | % | F | % | N | % |  |  |
| **Tangible** |  |  |  |  |  |  |  |  |
| Good | 61 | 57,0 | 10 | 21,3 | 71 | 46,1 |  | 4,907  (2,212-10,882) |
| Not Good | 46 | 43,0 | 37 | 78,7 | 83 | 53,9 | 0,000 |
| **Reliability** |  |  |  |  |  |  |  |  |
| Good | 66 | 61,7 | 4 | 8,5 | 70 | 45,5 |  | 17,305  (5,782-51,788) |
| Not Good | 41 | 38,3 | 43 | 91,5 | 84 | 54,5 | 0,000 |
| **Responsiveness** |  |  |  |  |  |  |  |  |
| Good | 61 | 57,0 | 16 | 34 | 77 | 50,0 |  | 2,569  (1,258-5,249) |
| Not Good | 46 | 28,6 | 31 | 66 | 77 | 50,0 | 0,001 |
| **Assurance** |  |  |  |  |  |  |  |  |
| Good | 55 | 51,4 | 6 | 12,8 | 61 | 39,6 |  | 7,228  (2,832-18,444) |
| Not Good | 52 | 48,6 | 41 | 87,2 | 93 | 60,4 | 0,000 |
| **Emphty** |  |  |  |  |  |  |  |  |
| Good | 65 | 60,7 | 5 | 10,6 | 70 | 45,5 |  | 13,000  (4,758-35,520) |
| Not Good | 42 | 39,3 | 42 | 89,4 | 84 | 54,5 | 0,000 |

Based on table 2 it can be seen that it is interpreted that the perception of the five dimensions of service quality in ANC Clinics Mlati I dimensions responsiveness is the best according to the dimensions of pregnant women i.e. amounting to 50 per cent and the least good dimensions the highest is the guarantee of 60.4% IE. The results of the analysis showed there was a meaningful relationship between the five dimensions of service quality of the ANC with the participation of HIV testing, it can be seen from the value of the p value 0.000 (0.000 < 0.05) with the value OR the highest among the five dimensions of service quality The ANC is reliability i.e. amounting to 17.303 which means that pregnant women who have the perception of reliability will either 17.303 times greater to perform HIV testing and value OR the lowest is the perception of responsiveness 2.596.

The results of this study in accordance with the results of the study Jallow et al., (2012), where the patient's perceptions about reliability of service related to the participation of HIV testing. When patients receive a good and complete information by health workers then would encourage pregnant women in utilizing the services provided by the service givers. An explanation of the benefits of HIV testing has a great influence for expectant mothers to do HIV testing because it will have benefits for both mother and fetus. The results of the research conducted by Papanikolaou & Zygiaris (2012) which declared the existence of a relationship between a guarantee with the participation of HIV testing. The ability of health workers in giving guarantees high or good to users of the service will increase the desire of service users in utilizing the facilities that have been offered by the giver of services. HIV testing is sensitive for the community because of the negative stigma in society about HIV disease.

The ability of responsiveness that is given a midwife in dealing with patients patient perception of the causes about the quality of service will be impacted positively. This is apparent from the form of wise and can persuade patients to take advantage of the facilities and get the service. Assessment of responsiveness of service is an assessment of the quality of service the most dynamic. Customer expectations about the speed of service tend to increase over time in line with advances in technology and health information are owned by customers (Achidi, 2015). The results of research performed by Nwaeze et al (2013) which declared the existence of a relationship between empathy with the participation of HIV testing. Health workers can provide good services with a focus on the patient and listen to complaints and try to be a good partner for pregnant women so that expected to cultivate an attitude of openness to patients about problems encountered.

Granting of services of quality and the ANC on HIV testing of pregnant women for free can also cause a high acceptance/desire in this research. Different things is likely to happen if service of process standards of the ANC and VCT real charged to pregnant women. Policies, systems and support from all parties need to be prepared to support the implementation of the standards of the ANC and HIV testing in an effort to prevention of HIV from mother to infant (Groves & Wyckoff, 2008).

**CONCLUSION**

There is a significant relationship between service quality perceptions the ANC with integrated participation of HIV testing with sig = 0.000 < 0.05 with OR 10.575 means mothers who have the perception of service quality will likely ANC 10.575 times test HIV compared with mothers who have integrated the service quality perceptions the ANC is not good.

**ADVICE**

Expected to improve the quality of service of the ANC so that integrated perception of service quality to be good and was able to increase participation do HIV testing

**BIBLIOGRAPHY**

Achidi, E. A. (2015). Perceptions of Antenatal Care Services By Pregnant Women Attending Government Health Centres In the Buea Health District, Cameroon: a cross sectional study, *8688*, 1–9. *BMC Research Notes*.

Agnes, M., Kusmiyati, & Iyam, M. (2010). Hubungan Pelaksanaan Standar Pelayanan Antenatal Dengan Keikutsertaan Ibu. *Jurnal Ilmiah Bidan*, 55–61.

Agus, M., & Rachmawati, T. (2015). Hubungan Kualitas Pelayanan Kesehatan dengan Kepuasaan Pasien di Kota Maksar. *Tesis*. Makasar: Universitas Hasanudin.

Amentie, M., Abera, M., & Abdulahi, M. (2015). Utilization of Antenatal Care Services and Influencing Factors among Women of Child Bearing Age in Assosa District, Benishangul Gumuz Regional State, West Ethiopia. *Global Journal of Medical Research: E Gynecology and Obstetrics*, *15*(2).

Ariningtyas, N. (2015). Kendala Pelayanan Program PPIA Pada Antenatal Care di Puskesmas Kota Yogyakarta Tahun 2015. *Jurnal Kesehatan Samodra Ilmu*, *Vol. 08 No*, 25.

Arniti, N. K. (2014). Faktor-Faktor Yang Berhubungan dengan Penerimaan Tes HIV oleh Ibu Hamil di Puskesmas Kota Denpasar. *Tesis*. Bali: Universitas Udayana.

Aswar, S. (2012). Determinan penggunaan pelayanaan VCT oleh ibu rumah tangga berisiko tinggi HIV positif di Kabupaten Biak. *Tesis.* Makasar: Universitas Hasanuddin., 2(1).

Bindoria, S. V., Devkar, R., Gupta, I., Ranebennur, V., Saggurti, N., Ramesh, S., Gaikwad, S. (2014). Development and pilot testing of HIV screening program integration within public/primary health centers providing antenatal care services in Maharashtra, India. *BMC Research Notes*, *7*(1), 1–7.

Castranova, V., Asgharian, B., Sayre, P., Virginia, W., & Carolina, N. (2016). Infant Feeding Practices Implemented by HIV-Positive Mothers in South Africa. *International Journal of HIV/AIDS and Research (IJHR)*, *69*(5), 1922–2013.

Darshan Bhagwan, Ashwini Kumar, Chythra R Rao2, A. K. (2016). Utilization Of Antenatal Care Services In A Rural Field Practice Area In Coastal. *National Journal of Community Medicine*, *7*(4), 6–8.

De Man, S., Gemmel, P., Vlerick, P., Van Rijk, P., & Dierckx, R. (2013). Patients’ and personnel’s perceptions of service quality and patient satisfaction in nuclear medicine. *European Journal of Nuclear Medicine and Molecular Imaging*, *29*(9), 1109–1117.

Demissie, A., Deribew, A., & Abera, M. (2009). Determinants of acceptance of voluntary HIV testing among antenatal clinic attendees at Dil Chora Hospital , Dire Dawa ,. *Ethiop. J. Health Dev.*, *23*(2), 141–47.

Dinas Kesehatan DIY. (2017). *Profil Kesehatan DIY Tahun 2016*. Yogyakarta: Dinas Kesehatan DIY.

Edgard-marius, O., Charles, S. J., Jacques, S., Justine, G. C., Virginie, M. A., Ibrahim, M. A., & Laurent, O. T. (2015). Determinants of Low Antenatal Care Services Utilization during the First Trimester of Pregnancy in Southern Benin Rural Setting, *3*(5), 220–228. *National Journal of Community Medicine*, *3*(5), 9–220-228.

Ekanem, E. E., & Gbadegesin, A. (2009). Voluntary counselling and testing (VCT) for Human Immunodeficiency Virus: a study on acceptability by Nigerian women attending antenatal clinics. *African Journal of Reproductive Health*, *8*(2), 91–100.

Elkhalifa, A. E. O., & Kuppuswamy, S. B. (2014). Evaluation of Midwifery Knowledge on Antenatal Care in Omdurman Maternity Hospital Sudan, *2*(2), 127–142. *International Journal of Health Sciences & Research*.

Eram, U., Anees, A., & Tamanna, Z. (2016). Knowledge Regarding Antenatal Care Services in Mothers ( 15-49 Years ) in Rural Areas of Aligarh. *International Journal of Scientific Study*, *4*(9), 9–12.

Fawole, A. O., Okunlola, M. A., & Adekunle, A. O. (2009). Clients’ perceptions of the quality of antenatal care to HIV Testing of Pregnant Women. *Journal of the National Medical Association*, *100*(9), 1052–1058.

Gebreyohannes, Y., Ararso, D., Mengistu, F., Abay, S., & Hadis, M. (2017). Improving Antenatal Care Services Utilization in Ethiopia : An Evidence – Based Policy Brief. *International Journal of Health Economics and Policy 2017; 2(3): 111-117*, *2*(3), 111–117.

Glanz, K., & Rimer, B. K. (2005). Theory at a Glance: A Guide for Health Promotion Practice. Health (San Francisco), 52. *Department Of Health And Human Services.*

Groves, A., & Wyckoff, S. (2008). HIV Testing During Pregnancy. *Open Society Institute Law and Health Initiative*

Gunn, J. K. L., Asaolu, I. O., Center, K. E., Gibson, S. J., Wightman, P., Ezeanolue, E. E., & Ehiri, J. E. (2016). Antenatal care and uptake of HIV testing among pregnant women in sub-Saharan Africa: a cross-sectional study. *Journal of the International AIDS Society*, *19*(1), 20605.

Gyar, S.D1., Reuben, C. R. ., & and Haruna, M. S. . (2015). International Journal of HIV / AIDS and Research ( IJHR ) ISSN : 2379-1586 Study on the Distribution of HIV / AIDS Infections Among Age Groups Attending General Hospital, *1*(2014), 7–10. *International Journal of HIV/AIDS and Research (IJHR) ISSN: 2379-1586.*

Halim, Y., BM, S., & Kusumawati, A. (2016). Faktor-Faktor yang Berhubungan dengan perilaku Ibu HAmil dalam Pemeriksaan HIV di Wilayah Kerja Puskesmas Halmahera Kota Semarang. *Jurnal Kesehatan Masyarakat*, *4*, 395–405.

Hidayat, A. A. (2014). *Metode Penelitian Kebidanan Teknik Analisa Data*. Jakarta: Salemba Medika.

Husnul, U., Irvani, D. Y., & Veny, E. (2015). Identifikasi Karakteristik Orang Risiko Tinggi Hiv Dan Aids Tentang Program Pelayanan Voluntary Counseling and Testing (Vct). *Jurnal Kesehatan Masyarakat*, *2*(1).

Ismail, N., Aziz, A., Essa, R. M., Nursing, G., & Nursing, F. (2017). Pregnant Women's Satisfaction with the Quality of Antenatal Care At Maternal and Child Health Centers in El-Beheira Governorate. *6*(2), 36–46. *Journal of Nursing and Health Science (IOSR-JNHS.*

Jallow, I. K., Chou, Y., Liu, T., & Huang, N. (2012). Women ’ s perception of antenatal care services in public and private clinics for HIV in the Gambia, *24*(6), 595–600. Volume 24. *International Journal for Quality in Health Care.*

Jufri, S. H. (2010). Faktor-Faktor Yang Berhubungan Dengan Persepsi Pasien Terhadap Perilaku Caring Perawat Dalam Praktek Keperawatan di Instalasi Rawat Inap Interna Rsu Massenrempulu Enrekang. *Tesis*. Makasar: Universitas Alauddin.

Kawungezi, P. C., Akiibua, D., Aleni, C., Chitayi, M., Niwaha, A., Kazibwe, A., Nakubulwa, S. (2015). Attendance and Utilization of Antenatal Care ( ANC ) Services : Multi-Center Study in Upcountry Areas of Uganda. *Journal of Preventive Medicine*, (March), 132–142.

Kemenkes RI. (2015). Pedoman Pelayanan Antenatal Terpadu. *Kementrian Kesehatan, Direktur Jendral Bina Kesehatan Masyarakat*, 1 of 40.

Kemenkes RI. (2017). *Peraturan Menteri Kesehatan Republik Indonesia Nomor 9 Tahun 2017 Tentang Eliminasi Penularan Human Immunodeficiency Virus, Sifilis, Dan Hepatitis B Dari Ibu Ke Anak*. MenKes RI, 1–36.

Kementrian Kesehatan RI. (2015). *Pedoman Pelaksanaan Pencegahan Penularan HIV dan Sifilis dari Ibu Ke Anak Bagi Tenaga Kesehatan*. Jakarta.

Komalasari. (2016a). Hubungan Antara Persepsi Ibu Hamil Dan Potensi Hambatan Terhadap Pemanfaatan Layanan VCT (Voluntary Counseling And Testing) HIV/AIDS. *Tesis*. Semarang: Universitas Negeri Semarang.

Kushwaha, P., Mehnaz, S., Ansari, M. A., & Khalil, S. (2016). Utilization of antenatal care services in periurban area of Aligarh, *5*(10). *International Journal of Medical Science and Public Health.*

Lamarque. (2013). HIV testing of pregnant women in the Fort Dauphn region of Madagascar. *Thesis*. Stellenbosch University.

Legiati, PS, T., Shaluhiyah, Z., & Suryoputro, A. (2012). Perilaku Ibu Hamil untuk Tes HIV di Kelurahan Bandarharjo dan Tanjung Mas Kota Semarang. *Jurnal Promosi Kesehatan Indonesia*.

Lolekha, R., Kullerk, N., Wolfe, M. I., Klumthanom, K., Singhagowin, T., Pattanasin, S. Voramongkol, N. (2014). Assessment of a couples HIV counseling and testing program for pregnant women and their partners in antenatal care (ANC) in 7 provinces, Thailand. *BMC International Health and Human Rights*, *14*(1), 1–10.

Mahato, P. K., Bi, P., & Burgess, T. (2013). Voluntary Counseling and Testing (VCT) services and its role in HIV/AIDS prevention and management in Nepal. *Public Health Original Research South East Asia Journal Of Public Health South East Asia Journal of Public Health*, *3*(1), 10–16.

Mehnaz, S., Abedi, A. J., Fazli, S. F., Khan, Z., & Ansari, M. A. (2016). Quality of care : predictor for utilization of ANC services in slums of Aligarh, *5*(9), 1869–1873. *International Journal of Medical Science and Public Health*.

Mendy, R., Njie, V., & Sawo, J. S. (2018). Perception on Early Antenatal Booking by Women Attending Clinic in the Western Region in The Gambia. *International Journal of Nursing & Clinical Practices*.

Montasser, N. A. E., Helal, R. M., Megahed, W. M., Amin, S. K., Saad, A. M., Ibrahim, T. R., Elmoneem, A. (2012). Egyptian Women's Satisfaction and Perception of Antenatal Care, *2*(2), 145–156. *International Journal of Tropical Disease & Heath.*

Moonesar, I. (2012). Patients ' perception on prenatal care management at Trinidad & Tobago. *Thesis*. Australia: University of Wollongong.

Munaryo. (2008). Analisis Pengaruh Persepsi Mutu Pelayanan Rawat Inap terhadap Minat Pemanfaatan Ulang di RSUD Kab. Brebes Tahun 2008. *Tesis*. Semarang: Universitas Diponegoro.

Nikkheslat, M., & Zohoori, M. (2012). The important theories in term of applying green technologies and green processes in organizations : A study of Malaysian Universities, 88–102. *Journal Of Contemporary Research In Business.*

Notoadmodjo. (2012). *Metodologi Penelitian Kesehatan*. Jakarta: Rineka Cipta.

Notoadmodjo. (2014). *Ilmu Perilaku Kesehatan*. Jakarta: Rineka Cipta.

Nwaeze, I. L., Enabor, O. O., Oluwasola, T. A. O., & Aimakhu, C. O. (2013). Perception And Satisfaction With Quality Of Antenatal Care Services Among Pregnant Women at the University College Hospital , Ibadan , Nigeria, *11*(1), 22–28. *International Journal of Nursing & Clinical Practices*.

Onyeonoro, U., Ukegbu, A., Emelumadu, O., Ezeama, N., Ifeadike, C., & Okezie, O. (2014). Perception of quality of maternal healthcare services among women utilising antenatal services in selected primary health facilities in Anambra State, Southeast Nigeria. *Nigerian Medical Journal*, *55*(2), 148.

Papanikolaou, V., & Zygiaris, S. (2012). Service quality perceptions in primary health care centres use HIV testing in Greece, 197–207. *Journnal Health Expectations.*

Parasuraman, A., Zeithaml, V. A., & Berry, L. L. (2009). Model Service Its Quality and Implications for Future, *49*(4), 41–50. *Jornal Of Marketing*.

Peters, J. A., Heunis, C., Kigozi, G., Osoba, T., & van der Walt, M. (2015). Integration of TB-HIV services at an ANC facility in Frances Baard District, Northern Cape, South Africa. *Public Health Action*, *5*(1), 30–35.

Pohan. (2013). *Jaminan Mutu Kesehatan* (Satu). Jakarta: EGC.

Puspita, I. (2009). Hubungan Persepsi Pasien Tentang Kualitas Pelayanan Dengan Citra Rumah Sakit Umum Daerah Kabupaten Aceh Tamiang. *Tesis*. FKM USU Medan.

Ramseook-munhurrun, P., Lukea-bhiwajee, S. D., & Naidoo, P. (2010). Service quality in the public service. *International Journal of Marketing and Marketing Research*, *3*(1), 37–50.

Rujumba, J., Neema, S., Byamugisha, R., Tylleskär, T., Tumwine, J. K., & Heggenhougen, H. K. (2012). “Telling my husband I have HIV is too heavy to come out of my mouth”: Pregnant women’s disclosure experiences and support needs following antenatal HIV testing in eastern Uganda. *Journal of the International AIDS Society*, *15*(2), 1–10.

Saidah, S., Asiah, N., & Aizar, E. (2016). Quality of Life of HIV-AIDS Infected Pregnant Women in Medan , North. *International Journal of Health Sciences & Research*, *6*(July), 198–204.

Sánchez-Gómez, A., Grijalva, M. J., Silva-Aycaguer, L. C., Tamayo, S., Yumiseva, C. A., Costales, J. A., Cevallos, W. (2014). HIV and syphilis infection in pregnant women in Ecuador: Prevalence and characteristics of antenatal care. *Sexually Transmitted Infections*, *90*(1), 70–75.

Sari, P. I. A., Sulistyono, A., & Notobroto, H. B. (2016). Keikutsertaan Ibu Hamil Dalam Tes Hiv Setelah Konseling Oleh Petugas Kesehatan Di Wilayah Kerja Puskesmas Turi Lamongan. *The Indonesian Journal of Public Health*, *11*(Desember), 89–98.

Selena, George, A. S., LeFevre, A. E., Mpembeni, R., Mosha, I., Mohan, D., Kilewo, C. (2015). Supply-side dimensions and dynamics of integrating HIV testing and counselling into routine antenatal care: A facility assessment from Morogoro Region, Tanzania. *BMC Health Services Research*, *15*(1),1–15.

Setyonugroho. (2010). *Umur Manusia Berkaitan dengan Kelangsungan Hidup* (Satu). Bandung: CV Medika.

Sleman, D. K. (2017). *Profil Kesehatan Kabupaten Sleman 2017*. Yogyakarta: Dinas Kesehatan Sleman.

Sofiyanti, I., Astuti, F. P., Kesehatan, F. I., Waluyo, U. N., Kesehatan, F. I., Waluyo, U. N., History, A. (2018). Hubungan karakteristik ibu hamil dengan tes hiv, *1*(1), 49–52. *Tesis.* Kendari:Universitas Haluoleo.

Sulistyaningsih. (2011). *Metodologi Penelitian Kebidanan*. Yogyakarta: Graha Ilmu.

Supranto. (2011). *Jaminan Mutu Pelayanan* (Edisi Kedu). Jakarta: Buku Kedokteran EGC.

Tafere, T. E., Afework, M. F., & Yalew, A. W. (2018). Antenatal care service quality increases the odds of utilizing institutional delivery in Bahir Dar city administration, North Western Ethiopia: A prospective follow up study. *Journal PLoS ONE*, *13*(2), 1–14.

Toha, M. (2010). Hubungan Hubungan Antara Persepsi Pasien Terhadap Dimensi Mutu Pelayanan Keperawatan dengan Kepuasan Pasien di Ruang Rawat Inap Rumah Sakit Umum PKU Muhammadiyah Temanggung. *Jurnal Penelitian* *Kesehatan Masyarakat.*

Tripathi, V., King, E. J., Finnerty, E., Koshovska-Kostenko, N., & Skipalska, H. (2013). Routine HIV counseling and testing during antenatal care in Ukraine: A qualitative study of the experiences and perspectives of pregnant women and antenatal care providers. *AIDS Care*, *25*(6), 680–685.

Turan, J. M., Steinfeld, R. L., Onono, M., Bukusi, E. A., Woods, M., Shade, S. B., Cohen, C. R. (2012). The Study of HIV and Antenatal Care Integration in Pregnancy in Kenya: Design, Methods, and Baseline Results of a Cluster-Randomized Controlled Trial. *Jornal PLoS ONE*, *7*(9).

Umar, A. S., & Bawa, S. B. (2015). Antenatal Care Services Utilization in Yobe State , Nigeria : Examining Predictors and Barriers. *International Journal of MCH and AIDS*, *4*(1), 35–46.

Wang, J. (2017). Perceptions of Individual Behavior in Green Event — From the Theory of Planned Behavior Perspective, 973–988. *American Journal of Industrial and Business Management.*

Wenny, D. M., Wijayanti, Y., & Hakimi, M. (2016). Faktor yang memengaruhi partisipasi ibu hamil melakukan skrining HIV di puskesmas Yogyakarta*.Tesis*. Universitas Ahmad Dahlan.

WHO. (2016). *Summary Of Yhe Global HIV Edemic.* Retreiced From [www.who.int/hiv/data/en/](http://www.who.int/hiv/data/en/)

Wiratno. (2011). *Mutu Pelayanan Kebidanan* *(Edisi Satu)*. Jakarta: Trans Info Media.

Wu, S., & Chen, J. (2014). A Model of Green Consumption Behavior Constructed by the Theory of Planned Behavior, *6*(5), 119–132. *Paediatrics and International Child Health.*

Zorilla CD, T. A. (2009). Pharmacologic and Non-Pharmacologic Options for The Management of HIV Infection During Pregnancy. *Journal of Health* 12.