

## The Factors Affecting the Utilization of Tetanus Toxoid (TT) Immunization Program Services Among Prospective Brides in the City of Pematangsiantar

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### ABSTRACT

*In 2023, there will be 454 prospective brides and grooms in the city of pematangsiantar with a total of 454 female brides and grooms. Based on Tetanus Toxoid (TT) immunization, in 2023 the target number of non-pregnant women of childbearing age is 43.333 with the number immunized being 351 with a percentage of 0,81%. This shows that Tetanus Toxoid (TT) immunization among women of childbearing age and prospective brides in Pematangsiantar City is still very low. The aim of this research is to determine the relationship between factors in the utilization of Tetanus Toxoid (TT) immunization program services among prospective brides in Pematangsiantar city. The type of research used is quantitative cross sectional design. The research was conducted in the city of pematangsiantar. The population was 454 female cats, the sample was 48 people, the sample was obtained using the lemeshow formula. Data analysis is univariate analysis and bivariate analysis (chi-square test) using the SPSS application. The result of the reseach show that variables related to Tetanus Toxoid (TT) immunization in prospective brides are Employment ( $p=0.311$ ), Education Level ( $p=0.131$ ), Knowledge ( $p=0.035$ ), Attitude ( $p=0.031$ ), Confidence in Health Services ( $p=0.933$ ) and Ease of Information ( $p\text{-value}= 0.000$ ). The most dominant variable related is ease of information. Conclusion in this study there are 3 factors related to the Tetanus Toxoid (TT) immunization program, namely Knowledge, Attitude and Ease of Information. The benefit of this research can be used as input in order to improve the quality of health service for the community, especially for women of childbearing age who are about to get married, It is hoped that there will be development and evaluation of interventions for Tetanus Toxoid (TT) immunization program for prospective brides.*

### KEYWORDS

*Utilization of health services, Tetanus Toxoid (TT) Immunization Program, Prospective Brides*



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**How to cite:**

**E-ISSN:**

**Published by:**

Fajriani, A et al. (2024). The Factors Affecting the Utilization of Tetanus Toxoid (TT) Immunization Program Services Among Prospective Brides in the City of Pematangsiantar. *Journal Eduvest*. 4(4): 2060-2066

2775-3727

<https://greenpublisher.id/>

## INTRODUCTION

Tetanus is caused by exotoxins produced by *Clostridium tetani* bacteria, which can result in acute and potentially fatal illness, particularly in newborns born to mothers with insufficient circulating antibodies to passively protect the baby through transplacental transfer. Prevention can be achieved through Tetanus Toxoid (TT) vaccination in pregnant or non-pregnant women, or both, and the provision of clean birthing services. Tetanus Toxoid (TT) consists of toxin processed with formaldehyde that stimulates the production of antitoxin (Demicheli et al., 2020).

Tetanus is an acute infectious disease caused by toxigenic strains of *Clostridium tetani* bacteria (*C. tetani*). *C. tetani* spores are found in the environment (in soil, saliva, dust, and manure), and spores enter the body through contaminated skin wounds or tissue injuries, including puncture wounds. This disease occurs in all ages, from newborns (neonates) known as neonatal tetanus (NT) to non-neonatal ages, including maternal tetanus (Endang et al., 2021).

In 2016, Indonesia successfully achieved maternal and neonatal tetanus elimination status, becoming the last country in the Southeast Asia region to be validated for maternal and neonatal tetanus elimination. Indonesia continues to strive to maintain this elimination status. One of the efforts made to maintain this status is strengthening routine immunization, including in the Women of Reproductive Age (WRA) group. WRA should receive immunization containing Tetanus Toxoid (TT) to reduce the risk of maternal and infant mortality (KEMENKES RI, 2023).

Elimination of Neonatal Tetanus (ENT) long-term strategies has been implemented through basic services for infants and School-Age Children Immunization Months (BIAS). However, if only based on these strategies, the protected population is only under 16 years old, resulting in delayed ENT achievement. Thus, immunization for Women of Reproductive Age (WRA) is still necessary (Rizani, 2022).

During 2000-2020, 52 priority countries implemented Supplementary Immunization Activities Tetanus Toxoid Vaccine (SIA TTCV), and 168 million (67%) out of 250 million targeted women of reproductive age received TTCV2+. In 2020, 59 million women targeted for protection by TTVC SIA were still unreached, and TTVC SIA activities aimed at targeting approximately 16 million women of reproductive age in five countries were postponed due to disruptions in immunization services related to COVID-19 (Kanu et al., 2022).

The target and achievement indicators for the P2P program's performance in the first semester of 2023 for routine immunization targets were 85%, with a achievement of 5.4% in the first semester of 2023 with a performance of 6.35% (Kemenkes RI, 2023). The target performance indicator for the Directorate of Immunization Management activities for 2022-2024 is the percentage of women of reproductive age with Td 2+ immunization status in 2023, which is 80% (SUMUT, 2020).

Promotional efforts made by the government include nutrition counseling before marriage and sex education, while Tetanus Toxoid (TT) immunization services for prospective brides are one of the preventive efforts to prevent disease through continuous, comprehensive, and standardized immunization practices, capable of

providing health protection and breaking the chain of transmission, carried out in both toddlers and adults (Rayani et al., 2022).

A special program for prospective brides promoted by the government in collaboration with the Ministry of Religion is the administration of Tetanus Toxoid (TT) immunization. This activity aims to ensure or protect prospective mothers from tetanus infection. The administration of Tetanus Toxoid (TT) immunization to prospective brides can also increase their immune system to prepare for pregnancy, protecting the fetus and reducing the risk of neonatal tetanus (MoH RI, 2017). Tetanus infection is one of the causes of maternal and infant mortality (Santy, 2022).

The implementation of Tetanus Toxoid (TT) immunization for prospective brides is regulated by the Ministry of Religion: No. 2 of 1989 No.162-I/PD.0304.EI dated March 6, 1989, regarding Tetanus Toxoid (TT) immunization for prospective brides, stating that every prospective bride must receive Tetanus Toxoid (TT) immunization at least 1 month before registering for marriage at the Religious Affairs Office (KUA), as evidenced by a vaccination certificate/bride's vaccination card (catin) and is an administrative prerequisite for marriage.

For the implementation of the Tetanus Toxoid (TT) immunization program for prospective brides, the Ministry of Health collaborates with the Ministry of Religion. This is done because the target of this program is prospective brides who usually register at the religious affairs offices (KUA). Both the Health Office and the local KUA each form divisions or departments responsible for managing the program (Mahduroh et al., 2023).

The schedule for administering Tetanus Toxoid (TT) immunization for prospective brides starts from TT2 immunization, which is 4 weeks before the wedding ceremony (reporting time or marriage advice time). It is administered intramuscularly or subcutaneously, with a dose of 0.5 ml. Severe symptoms due to previous TT doses, hypersensitivity to vaccine components, and fever or acute infections are contraindications. Side effects are rare and mild, such as weakness and temporary redness at the injection site, and sometimes fever (Sholeh, 2020).

Health service utilization is the use of health service facilities provided in the form of outpatient and inpatient care for the basic needs of every individual. A person cannot fulfill their entire life if they are in poor health. Therefore, health is the main asset for every individual to continue their life decently (Ardiah et al., 2022).

According to Alan G.E. Dever's theory (1984), there are several factors that can influence health service utilization, including consumer factors (sociodemographic, socioeconomic, sociopsychological), socio-power factors, provider factors, and organizational factors (Basith, 2020).

Research conducted by Murniati, Asriwati, Aida Fitria (2019) on the Analysis of Factors Influencing Tetanus Toxoid Immunization in Prospective Brides in Banda Sakti Sub-District, Lhokseumawe City, which stated that there was no significant influence between education and occupation with Tetanus Toxoid Immunization in Prospective Brides in Banda Sakti Sub-District, Lhokseumawe City in 2019. However, the study found a significant influence between knowledge, attitudes, beliefs, and Tetanus Toxoid Immunization in Prospective Brides in Banda Sakti Sub-District, Lhokseumawe City (Murniati, 2023).

Based on previous research conducted by Mahduroh, Jesy Fatimah, Irma Jayatmi (2023) on the Relationship between the Role of Health Workers, Knowledge, Motivation, and the Implementation of Tetanus Toxoid (Tt) Immunization for Prospective Brides in the Pulo Ampel Health Center Work Area in 2022, stating that there was a relationship between motivation and the implementation of TT immunization for prospective brides in the Pulo Ampel Health Center Work Area in 2022, and there was no relationship between knowledge and the implementation of TT immunization for prospective brides in the Pulo Ampel Health Center Work Area in 2022 (Mahduroh et al., 2023).

Research conducted by Hotmanida Ramayani, Normayanti Rambe, Juliana Lubis (2022) found a relationship between knowledge and the implementation of TT immunization for WRA at the Huta Raja Health Center. Similarly, research conducted by Rifda Neni, Waytherlis Apriani, Yuni Ramadhaniati (2023) found that there was a correlation between knowledge and attitudes with TT immunization in brides in the Padang Serai Health Center Work Area in Bengkulu City (Rayani et al., 2022).

Based on a survey conducted by the Ministry of Religion in Pematangsiantar, the number of prospective brides in Pematangsiantar city in 2023 was 454 women. Data on Tetanus Toxoid (TT) immunization in 2023, obtained by researchers from the Pematangsiantar City Health Office, targeted non-pregnant women of reproductive age totaling 43,333, with 351 immunized, representing 0.81%. This indicates that Tetanus Toxoid (TT) immunization for women of reproductive age and prospective brides in Pematangsiantar City is still very low.

Based on interviews conducted by researchers with health center officials, several causes of low Tetanus Toxoid (TT) immunization in brides include the beliefs of brides. In general, many prospective brides who are immunized with Tetanus Toxoid (TT) come from the Islamic religion because every health center in the sub-district cooperates with the local KUA in the sub-district to succeed in the Tetanus Toxoid (TT) immunization program for prospective brides. Then there are prospective brides, including MBA (Married by Accident), who cannot be immunized with Tetanus Toxoid (TT).

The attitudes of prospective brides who consider Tetanus Toxoid (TT) immunization to be unimportant are related to the knowledge of prospective brides regarding tetanus toxoid immunization, so they do not take advantage of Tetanus Toxoid (TT) immunization for brides at health centers. KUA authorities do not strictly require prospective brides to be immunized with Tetanus Toxoid (TT). Also, there is a lack of information from health workers about Tetanus Toxoid (TT) immunization for brides.

Based on the phenomena in the background above, the author is interested in conducting research with the title "factors influencing the utilization of the Tetanus Toxoid (TT) immunization program for prospective brides in Pematangsiantar city." The research aim is to determine the factors influencing the utilization of the Tetanus Toxoid (TT) immunization program for prospective brides in Pematangsiantar city. The benefits of this research can be used as input to improve the quality of health services for the community, especially for women of reproductive age (WRA) who will marry.

## RESEARCH METHOD

This study utilizes a quantitative approach with a Cross-Sectional design. The purpose of this research is to determine the factors affecting the utilization of Tetanus Toxoid (TT) immunization program services for prospective brides, through observation or data collection at a single point in time, known as the Point Time Approach. The location of this research is Pematangsiantar City. The study was conducted from February to March 2024.

The population in this study consists of prospective brides, according to data from the Ministry of Religion of Pematangsiantar in 2023, there were 454 prospective brides in Pematangsiantar city. The sample in this study consisted of 48 prospective brides, determined using the Lemeshow Cross-Sectional Design formula. The sampling technique in this study used non-probability, specifically using Accidental Sampling, where cases/sources were selected/accidentally available at the location based on the research context (Notoatmojo, 2018).

The inclusion criteria in this study are women of reproductive age who are getting married, while the exclusion criteria are women of reproductive age who are married by accident/unmarried pregnancy and women of reproductive age who are already married/widows.

Data collection consists of secondary data and primary data. Secondary data sources were obtained from the Ministry of Religion and the Health Office of Pematangsiantar city. Primary data sources were obtained directly from respondents. The data sources came from questionnaire results to determine the factors affecting the utilization of Tetanus Toxoid (TT) immunization program services for prospective brides. To avoid questionnaire bias collected from previous research by Murniati (2020), the authors attempted to maintain the questionnaire's validity and reliability by re-testing the questionnaire's validity and reliability due to different conditions and locations from previous research.

The questions on the questionnaire were based on Dever's theory (1984), namely questions about consumer factors (socioeconomic (occupation and education) and sociopsychological (knowledge)), sociocultural factors (attitudes and beliefs towards health services), and provider factors (information accessibility). They were in the form of positive/favorable statements, using Likert and Guttman scales. The Likert scale has scores of 1 (disagree), 2 (somewhat disagree), 3 (agree), 4 (strongly agree). Meanwhile, for Guttman scale questions, it's 1 (no), 2 (yes).

The collected data were then analyzed using descriptive analysis (univariate) to describe or provide an overview of the researched object, and inferential analysis (bivariate) to determine the relationship between independent variables and dependent variables through statistical tests or chi-square tests using SPSS.

## RESULT AND DISCUSSION

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## Univariate Analysis

**Table 1. Respondent Characteristics**

No	Variable	N	%
<b>1</b>	<b>Occupation</b>		
	Lecturer	1	2.1
	Teacher	4	8.3
	Student	1	2.1
	Civil Servant	2	4.2
	Student	6	12.5
	Unemployed	17	35.4
	Entrepreneur	17	35.4
<b>2</b>	<b>Education Level</b>		
	Low	0	0
	Medium	28	58.3
	High	20	41.7
<b>3</b>	<b>Knowledge</b>		
	Low	37	77.1
	Good	11	22.9
<b>4</b>	<b>Attitude</b>		
	Negative	25	52.1
	Positive	23	47.9
<b>5</b>	<b>Belief in Health Services</b>		
	Uncertain	13	27.1
	Certain	35	72.9
<b>6</b>	<b>Information Accessibility</b>		
	Difficult	29	60.4
	Easy	19	39.6
<b>7</b>	<b>Utilization of TT Immunization Program Services for Prospective Brides</b>		
	Not Utilized	30	62.5
	Utilized	18	37.5
	<b>Total</b>	<b>48</b>	<b>100</b>

Based on the table above, it is found that regarding the occupation variable, the most dominant respondents are those categorized as unemployed 17 (35.4%) and entrepreneurs 17 (35.4%). Regarding the education level, the most dominant respondents are those with a medium education level, with 28 (58.3%) respondents. In terms of knowledge, the most dominant respondents have insufficient knowledge, with 37 (77.1%) respondents. Regarding attitude, respondents with a negative attitude are more dominant, with 25 (52.1%) respondents. Regarding belief in health services, respondents have confidence in health services, with 35 (72.9%) respondents. Based on information accessibility, the dominant response is that respondents find it difficult to access information on tetanus toxoid (TT) immunization for prospective brides, with 29 (60.4%) respondents. Regarding the utilization of tetanus toxoid (TT) immunization program services for prospective

brides, the most dominant response is not utilizing the service, with 30 (62.5%) respondents.

### Bivariate Analysis

**Table 2. Cross-tabulation between independent and dependent variables**

No	Variable	Utilization of TT Immunization Program Services for Prospective Brides		Total	P-Value	PR
		Not Utilized	Utilized			
<b>1</b>	<b>Occupation</b>					
	Unemployed	8 32.3%	9 67.7%	17 100.0%	0.311	0.536
	Employed	10 47.1%	21 52.9%	31 100.0%		
	Total	18 37.5%	30 62.5%	48 100.0%		
<b>2</b>	<b>Education Level</b>					
	Medium	8 28.6%	20 71.4%	28 100.0%	0.131	0.400
	High	10 50.0%	10 50.0%	20 100.0%		
	Total	18 37.5%	30 62.5%	48 100.0%		
<b>3</b>	<b>Knowledge</b>					
	Poor	17 45.9%	20 54.1%	37 100.0%	0.035	0.595
	Good	1 9.1 %	10 90.9%	11 100.0%		
	Total	18 37.5%	30 62.5%	48 100.0%		
<b>4</b>	<b>Attitude</b>					
	Negative	5 21.7%	18 78.3%	23 100.0%	0.031	0.256
	Positive	13 52.0%	12 48.0%	25 100.0%		
	Total	18 37.5%	30 62.5%	48 100.0%		
<b>5</b>	<b>Belief in Health Services</b>					
	Uncertain	13 37.1%	22 62.9%	35 100.0%	0.933	0.945
	certain	5 38.5%	8 61.5%	13 100.0%		

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Total	18 37.5%	30 62.5%	48 100.0%		
<b>6 Information Accessibility</b>					
Difficult	0 0.0%	29 100.0%	29 100.0%		
Eazy	18 94.7%	1 5.3%	19 100.0%	0.000	0.053
Total	18 37.5%	30 62.5%	48 100.0%		

Based on the above table, bivariate analysis using chi-square test yields a p-value for the occupation variable of  $p=0.311$ , indicating no relationship between occupation and utilization of TT immunization program services for prospective brides. For the education level variable,  $p=0.131$ , indicating no relationship between education level and utilization of TT immunization program services for prospective brides. For the knowledge variable,  $p=0.035$ , indicating a significant relationship between knowledge and utilization of TT immunization program services for prospective brides.

For the attitude variable,  $p= 0.031$ , indicating a significant relationship between attitude and utilization of TT immunization program services for prospective brides. For belief in health services variable,  $p=0.933$ , indicating no relationship between belief in health services and utilization of TT immunization program services for prospective brides. For information accessibility variable,  $p=0.000$ , indicating a significant relationship between information accessibility and utilization of TT immunization program services for prospective brides.

### **Relationship Between Occupation and Utilization of Tetanus Toxoid (TT) Immunization Program Services for Prospective Brides**

Based on the research findings, the p-value obtained (0.311) indicates that there is no relationship between occupation and the utilization of Tetanus Toxoid (TT) immunization program services for prospective brides. Out of 48 bride candidates who utilized the TT immunization program, 18 individuals (37.5%) did not utilize it, while 30 (62.5%) did. Among the unemployed bride candidates, consisting of 17 individuals, 8 (47.1%) did not utilize the TT immunization, while 9 (52.9%) did. Furthermore, out of 31 employed bride candidates, 10 (32.3%) did not utilize the TT immunization, while 21 (67.7%) did.

The researcher assumes that occupation is not related to the utilization of TT immunization program services for prospective brides. Generally, occupation serves as an individual's information source in decision-making, especially regarding health service utilization for their health. Additionally, occupation serves as a channel for the dissemination of information, thus enhancing awareness, especially regarding Tetanus Toxoid (TT) immunization for prospective brides.

This research aligns with the study by Muniarti (2023), indicating no relationship between occupation and the utilization of TT immunization program services for prospective brides. Occupation is one of the social structural factors in Health



System Models theory that can encourage individuals to take action for their health (Notoatmodjo, 2012).

### **Relationship Between Education Level and Utilization of Tetanus Toxoid (TT) Immunization Program Services for Prospective Brides**

Based on the research findings, the p-value obtained (0.131) indicates that there is no relationship between education level and the utilization of Tetanus Toxoid (TT) immunization program services for prospective brides. Out of 48 bride candidates who utilized the TT immunization program, 18 individuals (37.5%) did not utilize it, while 30 (62.5%) did. Among the bride candidates with a medium education level, totaling 28 individuals, 8 (28.6%) did not utilize the TT immunization, while 20 (71.4%) did. Furthermore, out of 20 bride candidates with a high education level, 10 (50.0%) did not utilize the TT immunization, while 10 (50.0%) did.

The researcher assumes that education is not related to the utilization of TT immunization program services for prospective brides because the majority of respondents have a medium education level, followed by those with a high education level, indicating good education among respondents. Education, in this study, cannot be the cause of rejection of TT immunization for prospective brides because generally, the higher someone's education, the higher their relative utilization of health services.

This research aligns with the study by Muniarti (2023), indicating no relationship between education and the utilization of TT immunization program services for prospective brides. Education is one of the socioeconomic factors influencing individuals in utilizing health services (Dever, 1984). Education affects an individual's awareness of the importance of health for themselves and their environment, thus encouraging the need for health services (Notoatmodjo, 2010).

### **Relationship Between Knowledge and Utilization of Tetanus Toxoid (TT) Immunization Program Services for Prospective Brides**

Based on the research findings, the obtained p-value (0.035) indicates that there is a relationship between knowledge and the utilization of program services. Out of 48 bride candidates who utilized the TT immunization program, 18 individuals (37.5%) did not utilize it, while 30 (62.5%) did. Among the bride candidates with insufficient knowledge, totaling 37 individuals, 17 (45.9%) did not utilize the TT immunization, while 20 (54.1%) did. Furthermore, out of 11 bride candidates with good knowledge, 1 (9.1%) did not utilize the TT immunization, while 10 (90.9%) did.

Based on observations, this is due to the information obtained, such as health education for brides at health centers. For brides who are unaware of Tetanus Toxoid (TT) immunization but receive Health Education and Counseling (KIE) from the health center, there is a chance they will utilize the TT immunization program before marriage. However, if brides do not receive KIE from the health center, they will not utilize the TT immunization program before marriage.

The researcher assumes there is a relationship between knowledge and the utilization of TT immunization program services for prospective brides because

knowledge can influence an individual's acceptance or rejection of bride immunization. Someone with good knowledge is likely to accept TT immunization for prospective brides, while someone with insufficient knowledge may reject it.

This research is in line with the study by Hotmanida et al. (2022) titled "The Relationship Between Knowledge and the Implementation of TT Immunization for Bride Candidates at Huta Raja Health Center." The Chi-Square test results show a p-value of 0.001 ( $<0.05$ ), meaning  $H_a$  is accepted and  $H_0$  is rejected. These results prove that there is a significant relationship between knowledge and the implementation of TT immunization for bride candidates.

However, this research is not in line with the study by Mahduroh (2023) titled "The Relationship Between the Role of Health Workers, Knowledge, and Motivation on the Implementation of Tetanus Toxoid (TT) Immunization for Bride Candidates in the Pulo Ampel Health Center Work Area in 2022." The Chi-Square test obtained a P-Value = 0.265 (P-value  $> 0.05$ ). This means  $H_0$  is accepted and  $H_a$  is rejected, indicating no significant relationship between knowledge and the implementation of Tetanus Toxoid (TT) Immunization for Bride Candidates in the Pulo Ampel Health Center Work Area in 2022.

### **Relationship Between Attitude and Utilization of Tetanus Toxoid (TT) Immunization Program Services for Prospective Brides**

Based on the research findings, the obtained p-value (0.031) indicates that there is a relationship between attitude and the utilization of program services. Out of 48 bride candidates who utilized the TT immunization program, 18 individuals (37.5%) did not utilize it, while 30 (62.5%) did. Bride candidates with a negative attitude, totaling 25 individuals, had 13 (52.0%) utilize the TT immunization, while 12 (48.0%) did not. Furthermore, out of 23 bride candidates with a positive attitude, 5 (21.7%) did not utilize the TT immunization, while 18 (78.3%) did.

Based on observations, this is due to the perception of brides towards immunization, where the belief that immunization is forbidden still persists among some brides. Additionally, the post-immunization effects such as pain, fever, swelling, and stiffness, although mild, are feared to cause discomfort in some female brides.

The researcher assumes there is a relationship between attitude and the utilization of TT immunization program services for prospective brides because attitude depends on an individual's knowledge in decision-making, particularly in health service utilization.

This research aligns with Muniarti (2023) titled "Analysis of Factors Affecting Tetanus Toxoid Immunization in Bride Candidates in Banda Sakti District, Lhokseumawe City." The Chi-Square test results show a variable attitude (p-value of 0.001  $<0.05$ ), indicating a significant relationship between attitude and tetanus toxoid immunization (TT) for bride candidates.

Similar results were also found by Yulinda Aswan et al. (2020) titled "The Relationship Between Knowledge and Attitude of Women of Childbearing Age (WUS) to the Provision of Tetanus Toxoid Immunization in Batang Baruhar Jae Village, Padang Bolak Subdistrict, North Padanglawas Regency, 2020." The Chi-Square test results show a variable attitude (p-value of 0.000  $<0.05$ ), indicating a

significant relationship between attitude and tetanus toxoid immunization (TT) in women of childbearing age.

Attitude is an individual's awareness that determines actual or potential behavior in social activities. Attitude consists of three main components, one of which is the Cognitive Component, which includes knowledge and perception obtained through a combination of direct experience with the attitude object and information about that object obtained from various sources (Laoli et al., 2022).

### **Relationship Between Belief in Health Services and Utilization of Tetanus Toxoid (TT) Immunization Program Services for Prospective Brides**

Based on the research findings, the obtained p-value (0.933) indicates that there is no relationship between belief in health services and the utilization of program services. Out of 48 bride candidates who utilized the TT immunization program, 18 individuals (37.5%) did not utilize it, while 30 (62.5%) did. Brides who were uncertain about health services, totaling 13 individuals, had 5 (38.5%) utilize the TT immunization, while 8 (61.5%) did not. Furthermore, out of 35 brides who were confident about health services, 13 (37.1%) did not utilize the TT immunization, while 22 (62.9%) did.

The researcher assumes that belief in health services does not relate to the utilization of TT immunization program services for prospective brides because generally, people are confident in the health services provided. However, not all health center institutions in the city of Pematangsiantar implement the TT immunization program for female brides, so the belief in health services regarding the utilization of TT immunization program services for female brides cannot influence the rejection behavior towards TT immunization for female brides.

### **Relationship Between Information Accessibility and Utilization of Tetanus Toxoid (TT) Immunization Program Services for Prospective Brides**

Based on the research findings, the obtained p-value (0.000) indicates that there is a relationship between information accessibility and the utilization of program services. Out of 48 bride candidates who utilized the TT immunization program, 18 individuals (37.5%) did not utilize it, while 30 (62.5%) did. Brides who found it difficult to access information, totaling 29 individuals, had none (0.0%) utilize the TT immunization, while all 29 (100.0%) did. Furthermore, out of 19 brides who found it easy to access information, 18 (94.7%) did not utilize the TT immunization, while 1 (5.3%) did.

The researcher assumes that the ease of information is related to the utilization of TT immunization program services for prospective brides because promotional services or Health Education and Counseling (KIE) are still not maximal, both from the health center and counseling from the Office of Religious Affairs (KUA) regarding immunization. In this study, the ease of information is the cause of the low utilization of TT immunization program services for prospective brides.

Health Information Systems are a set of components that include data, information, indicators, procedures, devices, technology, and also human resources (HR) that are interrelated and managed in an integrated manner (Chotimah, 2022).

Similar research results were also explained by Gita Kostania et al. (2020) titled "Development of Pre-Marital Booklet as Information Media in Health Services for Prospective Brides." The research results indicate a difference in respondent's knowledge before and after counseling using pre-marital booklets.

## CONCLUSION

Therefore, it can be concluded that the utilization of Tetanus Toxoid (TT) immunization program services for prospective brides in this study, out of 48 respondents, 18 individuals (37.5%) utilized it, while 30 (62.5%) did not.

Based on Dever's theory (1984), there are four factors influencing health service utilization. In this study, there are three factors influencing the utilization of Tetanus Toxoid (TT) immunization program services for prospective brides, namely consumer factors, sociocultural factors, and provider factors. Consumer factors consisting of psychosocial factors such as knowledge and sociocultural factors such as attitude are significant factors. Additionally, provider factors such as information accessibility are the most significant factors in the utilization of Tetanus Toxoid (TT) immunization program services for prospective brides.

Based on the Prevalence Ratio (PR) test, it was found that female brides with good knowledge have a 0.959 times greater chance of utilizing Tetanus Toxoid (TT) immunization services compared to those with insufficient knowledge. Similarly, female brides with a positive attitude have a 0.256 times greater chance compared to those with a negative attitude. Furthermore, female brides who have easy access to information also have a 0.053 times greater chance of utilizing Tetanus Toxoid (TT) immunization services compared to those who find it difficult to obtain information about Tetanus Toxoid (TT) immunization for prospective brides.

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