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LITERATURE REVIEW OF DETERMINANTS OF COMPLIANCE OF TRIPLE ELIMINATION EXAMINATION IN PREGNANT WOMEN

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ABSTRACT

One of the biggest challenges in maternal and perinatal health today is the risk of vertical transmission of infections from the pregnant woman to the fetus she is carrying. The three infectious infections that are of major concern globally because they have the same transmission route and high morbidity and mortality impact are *Human Immunodeficiency Virus* (HIV), Syphilis, and Hepatitis B. The risk of mother-to-child transmission for HIV is 20%-45%, for Syphilis it is 69-80%, and for Hepatitis B it is more than 90%. In 2024, it will be found that as many as 2,584 (0.08%) pregnant women are HIV positive, as many as 49,097 (1.45%) pregnant women are detected as a result of detecting reactive HBsAg, and as many as 4,340 (0.14%) pregnant women are tested positive for Syphilis. Therefore, the Government of Indonesia mandates the Triple Elimination program, which is a simultaneous effort to break the chain of transmission of HIV, Syphilis, and Hepatitis B from mother to child. Every pregnant woman is required to undergo screening or integrated laboratory examination at least once during the antenatal visit. Purpose of the study: To carry out a systematic review of the determinants of compliance with triple elimination examinations in pregnant women. This research uses the literature review (LR) method which was conducted in June 2026. This literature search uses Google Scholar and Garuda databases by selecting 7 articles to review that are relevant to the research object. The findings of the literature review: the compliance of pregnant women in undergoing triple elimination examinations is significantly influenced by three main factors, namely knowledge, family support and information sources. Conclusion: There is a relationship between knowledge factors, family support and information sources with compliance with triple elimination examination compliance in pregnant women. For health workers, it is recommended to optimize the provision of education and the dissemination of easy-to-understand information about triple elimination examinations directly during ANC visits and actively involve husbands or other family members in pregnancy counseling activities.

Keywords: Compliance, triple elimination, pregnant women, factor

Introduction

Maternal and child health is one of the main indicators of the success of health development in a country. One of the biggest challenges in maternal and perinatal health today is the risk of vertical transmission of infections from the pregnant woman to the fetus she is carrying. The three infectious infections that are of major concern globally because they have the same transmission route and high morbidity and mortality impacts are *Human Immunodeficiency Virus* (HIV), Syphilis, and Hepatitis B. Data from the *World Health Organization* (WHO) show that the burden of the disease is still very massive; for example, chronic Hepatitis B infection globally infects millions of people with perinatal transmission as the main route of chronicity, while hundreds of thousands of children are born with congenital syphilis each year due to inadequate early detection during pregnancy (WHO, 2021).

HIV, Syphilis, and Hepatitis B infections in children are more than 90% contracted from their mothers. The prevalence of HIV, Syphilis and Hepatitis B infection in pregnant women was 0.3%, 1.7% and 2.5%, respectively. The risk of mother-to-child transmission for HIV is 20%-45%, for Syphilis it is 69-80%, and for Hepatitis B it is more than 90%. As a strategic step, the Government of Indonesia mandated the Triple Elimination program, which is a simultaneous effort to break the chain of transmission of HIV, Syphilis, and Hepatitis B from mother to child. Through this program, every pregnant woman is required to undergo screening or integrated laboratory examination at least once during the antenatal visit, ideally in the first trimester. Failure to carry out this early detection has fatal impacts, including miscarriage, *stillbirth*, congenital defects (congenital syphilis), low birth weight (BBLR), to chronic infections that reduce the quality of life and survival of children in the future (Ministry of Health of the Republic of Indonesia, 2017).

Although regulations and examination facilities at the primary health service level such as Puskesmas have been integrated, the achievement of coverage nationally is considered not to be completely consistent in achieving the absolute target (triple elimination examination target of 100%). In 2024, there will be 3,389,523 (69.63%) pregnant women who will be tested for HIV in Indonesia. From the examination, 2,584 (0.08%) pregnant women were HIV positive. The provinces with the highest percentage of HIV-positive pregnant women are Mountainous Papua Province at 1.88%, Papua at 1.16% and Central Papua at 0.71%. The percentage of pregnant women carrying out DDHB (early detection of hepatitis B) in 2024 is 69.76%. The number of pregnant women who will be examined for Hepatitis B using RDT HBsAg in 2024 is 3,396,010 people out of 4,867,979 pregnant women who are targeted. The results of the examination found that as many as 49,097 (1.45%) pregnant women showed reactive results. Provinces with the highest reactive HBsAg were found in Central Papua Province with 4.65%, followed by West Papua Province at 4.64%, and South Papua Province at 4.21%.

Pregnant women who underwent syphilis screening were 3,062,080 (62.90%), of

which as many as 4,340 (0.14%) pregnant women tested positive. The province with the highest syphilis-positive pregnant women is South Papua Province with a percentage of 3.01%, followed by Papua Province at 2.4% and West Papua Province at 1.79% (Indonesian Health Profile, 2024).

Compliance of pregnant women in triple elimination examinations is a multifactorial health behavior. Based on the theory of health behavior, this compliance is influenced by internal and external factors, including knowledge, family support, and access to information sources. Mother's lack of knowledge about the dangers of asymptomatic infections such as Hepatitis B or HIV often triggers resistance, because the mother feels herself healthy and does not need additional blood tests. On the other hand, external factors such as family support (especially husbands) act as psychological and financial support systems that encourage mothers to comply with clinical recommendations (Susmiyati & Achmad, 2023; Chinthya et al., 2023). Finally, exposure to information sources, both through digital media, KIA books, and intensive direct education from cadres and midwives, is an important stimulus that shapes the positive perception of pregnant women towards this screening service (Ministry of Health of the Republic of Indonesia, 2019).

A number of early studies have emphasized the real correlation of these variables to compliance rates. Research by Ellen et al. (2024) at the Waena Health Center shows that there is a statistically significant relationship between family support and the level of compliance with triple elimination examinations in pregnant women. This is reinforced by studies by Fatiah et al. (2024) and Nurlaila & Sari (2021) which confirm that interventions to increase knowledge and optimize exposure to health information sources are significantly correlated with the willingness and compliance of pregnant women to undergo a triple elimination test in the first trimester of pregnancy. On the other hand, the lack of information and weak family support trigger a high *drop-out* rate or non-compliance with examinations.

Given the importance of the triple elimination program in reducing the perinatal mortality rate and in order to achieve the 100% elimination target, an in-depth investigation of the most dominant factors influencing the compliance behavior of pregnant women is very urgent. Through the identification of specific determinant factors such as the level of knowledge, the contribution of family support, and the effectiveness of information sources received by mothers, it is hoped that targeted clinical and educational intervention strategies can be formulated at the level of basic obstetric services.

Research Method

This research uses the literature review (LR) method, which is a process to collect, analyze, evaluate, integrate, and present data from various relevant research sources about a specific problem. The literature search will be conducted in June 2026. The data used in this study was collected from previous research published in national journals with the Google Scholar & Garuda

database using the last 6 years (2021 - 2026) with the keywords: compliance, triple elimination, pregnant women, factors. Based on the search results from the database, it was found that around 7 articles passed the relevance identification process.

Discussion

Triple Elimination is an effort program to eliminate the infection of three infectious diseases directly from mother to child, namely HIV/AIDS, Syphilis and Hepatitis B infection which are directly integrated into the maternal and child health program (Ministry of Health of the Republic of Indonesia, 2019). Infectious diseases detected through triple elimination examination include three main types of infections that are interrelated and require serious treatment. The first disease is *the Human Immunodeficiency Virus* (HIV), which is an RNA retrovirus that specifically attacks the human immune system. HIV infection results in a drastic decrease in the body's immune system, making the sufferer's body very weak and experiencing difficulties to failure to fight onset or opportunistic infections caused by viruses, fungi, bacteria, and parasites.

The second disease is syphilis, which is one of the sexually transmitted infectious diseases (STIs) caused by infection with *the bacterium Treponema pallidum*. This sexually transmitted infection is one of the crucial factors that greatly affects HIV transmission. The presence of wounds or ulcerations on the genitals of people with syphilis will increase the risk of HIV infection when having unprotected sexual intercourse with a healthy partner. Various studies in many countries have even reported that this syphilis infection is able to increase the risk of HIV transmission by 3 to 5 times.

The last disease detected in this examination is Hepatitis B, which is an inflammatory condition of the liver or liver caused by the hepatitis B virus. This disease is categorized as acute hepatitis if hepatic inflammation occurs after an incubation period of the virus of 30 to 180 days with an average of 60 to 90 days, and will develop into chronic hepatitis if the condition has lasted for more than 6 months. Given the chronic nature of Hepatitis B disease and often asymptomatic or without obvious clinical symptoms but capable of causing death, laboratory tests are necessary to establish the diagnosis early in order to provide adequate treatment.

Based on the screening that has been carried out, 7 articles were obtained that met the criteria that have been set in accordance with the limitations of this research topic. The following are the results of the identification of the articles reviewed in this study related to the determinants of compliance with triple elimination examinations in pregnant women.

Table 1. Identify Articles Reviewed in Research

	Label	Author	Title	Year	Research Results
	P1	Dewi Astuti, Hasrida	Factors related to compliance with triple elimination examination compliance in pregnant women in the working area of the Batujaya Health Center, Karawang Regency	2025	There was a relatic of pregnant wome of pregnant wor employment of p 0.05) with compli checks at UPTD E
	P2	Susmiyati, Achmad Fauzi	Factors Related to Pregnant Women's Participation in the Triple Elimination Program at Mangunjaya Health Center	2023	Almost all pregnant women participated in triple elimination programs (72.7%), 20-35 years old (76.1%), secondary education (62.5%), well-informed (70.5%), and received family support (75%). There is a relationship between age, education, knowledge and family support with the participation of pregnant women in the triple

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				elimination program at the Mangunjaya Health Center
P3	Ellen Vinardya Sude, Dolfinus Yufu Bouway, Agustina Regina Yufuai, Hasmi, Mina Blandina Ayomi, Muhammad Akbar Nurdin	Compliance of Pregnant Women in *Triple* Elimination Examination at Waena Health Center	2024	Respondents who complied in the *Triple* Elimination examination were 73.3% while respondents who did not comply were 26.7%. The results of the bivariate analysis showed that there was a correlation between attitudes (*P-value* = 0.005), family support (*P-value* = 0.028), the role of health workers (*P-value* = 0.001) with the compliance of pregnant women in *the Triple* Elimination examination
P4	Titin Sumarni, Masluroh	The Relationship of Information Sources, Family Support and Health Worker Support with	2023	Pregnant women are not interested in doing *triple elimination examinations* 50.8%, get information sources from health workers 76.2%, families

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			the Interest of Pregnant Women in Conducting *Triple Elimination Examinations* in the Working Area of the Cikeusal Health Center, Serang Regency Banten	support 63.5% and health workers support 81%. The results of the bivariate analysis found that there was a significant relationship between the source of information (*p* value = 0.022), family support (*p* value = 0.000) and the support of health workers (*p* value = 0.005) with the interest of pregnant women to carry out *triple* elimination examinations
P5	Nur Akila, Nur Ulmy Mahmud, Sartika	2024	Determinants of Pregnant Women's Behavior Towards *Triple Elimination Examination (HIV, Syphilis, Hepatitis B)* at the Kassi-Kassi Health Center, Makassar City	There was a relationship between the level of knowledge (*p value* 0.020 < 0.05), attitude (*p value* 0.000 < 0.05), family support (*p value* 0.000 < 0.05) and Triple Elimination examination in pregnant women at the Kassi-Kassi Health Center, Makassar City

P6	Ria Puspita Eka Sari, Susanti Suhartati, Putri Yuliantie, Yayuk Puji Lestari	The Relationship of Perception, Information Sources and Attitudes of Pregnant Women Towards Triple Elimination Checks	2024	Pregnant women who have had an examination triple elimination as many as 21 people (52.5%), pregnant women with positive perception 21 people (52.5%), pregnant women with bad information sources 22 people (55%), pregnant women with positive attitudes 34 people (85%). The results of the analysis showed that there was a relationship between perception (p value = 0.000), source of information (p value = 0.000) and attitude (p value = 0.007) towards triple elimination examination
P7	Novita, Putu Lusita	The Role of Knowledge,	2025	Most of the respondents did

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	Nati Indriani, Arie Anggraini, Erma Puspita Sari	Motivation and Information Resources in Triple Elimination Audit Compliance In the Working Area of the Betung Health Center	not comply with triple elimination checks (62%), lack of knowledge (60%), low motivation (70%) and being informed (60%). The results of *the chi-square test* were the variables of knowledge (*P-value* = 0.000), motivation (*P-value* = 0.000) and information sources (*P-value* = 0.004). There is a relationship of knowledge, motivation and sources of information simultaneously with compliance with triple elimination checks in the work area of UPTD Betung Health Center

Based on Table 1 of the analysis of 7 articles, it can be seen that all the independent variables that are the focus of this research are: Knowledge, Family Support and Information Sources. Although some other studies found other variables,

this variable was the most dominant (consistent) related to the factor of compliance with triple elimination examination in pregnant women.

3.1 The Relationship of Knowledge Factor with Triple Elimination Examination Compliance in Pregnant Women

Knowledge is a result of knowing about a certain object after sensing is carried out through the five human senses including sight, hearing, smell, taste and touch. Humans acquire knowledge mostly from the eyes and ears and with this knowledge a person's actions or behaviors will be formed (Susmiyati & Achmad, 2023).
Based on the articles that have been reviewed, it can be seen that there are 4 articles (57.14%) that discuss the relationship between the knowledge factor and compliance with triple elimination examinations in pregnant women.
According to Dewi & Hasrida's research, of the 58 respondents from the data analysts, 61.3% of respondents knew and complied with the importance of triple elimination examinations, 38.7% of respondents knew about triple elimination but did not comply with the examination, 44.4% of respondents did not know and did not comply with the triple elimination examination, and finally 55.6% of respondents who did not know but complied with triple elimination examinations.

Based on Susmiyati & Achmad's research, of the 88 respondents, 62 people (70.5%) were knowledgeable, and 26 people (29.5%) were less knowledgeable. Of the 62 well-informed respondents, 53 people (85.5%) followed the triple elimination program, and of the 26 respondents who were less knowledgeable, most did not participate in the triple elimination program, as many as 15 people (57.7%).

The results of Nur et al's research, out of 147 respondents, most of them had sufficient knowledge, 85 respondents (57.8%) and 62 respondents (42.2%) lacked. Respondents who had less knowledge and did a triple elimination examination were as many as 50 respondents (56.5%), who had less knowledge and did not conduct a triple elimination examination, namely 12 respondents (19.4%). Then respondents who had a sufficient level of knowledge and conducted a triple elimination examination were 84 respondents (98.8%), while respondents who had sufficient knowledge and did not conduct a triple elimination examination were 1 respondent (1.2%).

Meanwhile, Novita et al's research found that out of 50 respondents, 21 respondents were obedient (17 respondents were good knowledge and 4 respondents were less knowledge) and 29 respondents were non-compliant (3 respondents were good knowledge and 26 respondents were less knowledge). The results of the analysis obtained OR: 36,833, meaning that good knowledge has a chance of compliance with the triple elimination examination of 36,833 times compared to less knowledge.

The results of the study found that respondents who routinely carried out triple elimination examinations were respondents with good knowledge and showed a meaningful relationship between knowledge and triple elimination examinations, this is because well-informed pregnant women understand and

understand the benefits of triple elimination. The insight and knowledge that pregnant women have about triple elimination will be the basis for respondents to behave and act like conducting a triple elimination examination. In addition, pregnant women with good knowledge will certainly care more about the health of themselves and their babies.

3.2 The Relationship of Family Support Factors with Triple Elimination Examination Compliance in Pregnant Women

Family support is help that is emotionally useful and provides a positive influence in the form of information, instrumental assistance, emotions, and assessments given by family members consisting of husbands, parents, in-laws, and other relatives (Nur et al., 2024).

Based on the articles that have been reviewed, it can be seen that there are 4 articles (57.14%) that discuss the relationship between family support factors and compliance with triple elimination examinations in pregnant women.

According to Susmiyati &Achmad's research, of the 88 respondents, 66 people (75.0%) received support from their families, and 22 (25.0%) did not receive support from their families. Of the 66 respondents who received support from their families, 54 people (81.8%) participated in the triple elimination program, and of the 22 respondents who did not receive support from their families, most did not participate in the triple elimination program, as many as 12 people (54.5%).

This research is also in line with the results of Ellen et al's research, from 60 respondents, it is known that respondents received family support, namely 38 people (63.3%) and respondents did not receive family support, namely 22 people (36.7%). Of the total respondents who received family support, namely 38, there were 32 respondents (84.2%) who were obedient and 6 respondents (15.8%) who were not compliant.

Based on Titin & Sumarni's research, of the 63 pregnant women, most of them were not interested in doing a triple elimination examination as many as 32 people (50.8%). 40 people (63.5%) did not receive family support and 23 people (36.5%) received support. The results of the Chi-Square test obtained an OR value of 9.865, so it can be stated that pregnant women who receive family support are 9.865 times more likely to be interested in doing a triple elimination examination than pregnant women who do not receive family support.

In line with the research of Nur et al, of the 147 respondents, most respondents received less support from their families as many as 106 respondents (72.1%) and 41 respondents received support or (27.9%). Respondents who did not support and conducted triple elimination checks were 93 respondents (87.7%), who did not support and did not conduct triple elimination checks, namely 13 respondents (12.3%). Then respondents supported and carried out the Triple Elimination examination, namely 41 respondents (100%), while the respondents who supported and did not carry out the Triple Elimination examination were 0 respondents (0%).

The results of the study found that the majority of respondents who routinely performed triple elimination examinations were respondents who received family support and showed a meaningful relationship between family support and triple elimination examinations.

The support of the husband, family and environment greatly impacts the motivation in the ANC examination in pregnant women, the family that receives the pregnancy will have a positive impact on the psychological state of the baby conceived. The role of the mother's family or husband during pregnancy greatly supports the health of the mother and the baby to be born, as well as the risk during pregnancy until the delivery process occurs. Through good support from the family, mothers will pay more attention to the health of themselves and the fetus. The role of the family or husband in supporting pregnant women to carry out triple elimination examinations is one of them by escorting them to ANC services at the nearest Health Center, accompanying during the triple elimination test, discussing infectious diseases with wives and health workers.

3.3 The Relationship of Information Source Factors with Triple Elimination Examination Compliance in Pregnant Women

Sources of information are media that play an important role for a person in determining attitudes and decisions to act. The source of information can be obtained freely from friends, books, movies, videos, and even easily open websites via the internet (Novita et al., 2025).

Based on the articles that have been reviewed, it can be seen that there are 3 articles (42.85%) that discuss the relationship between information source factors and compliance with triple elimination examinations in pregnant women.

Based on Titin & Sumarni's research, of the 63 pregnant women, most of them were not interested in doing triple elimination examinations as many as 32 people (50.8%), obtained information sources from health workers as many as 48 people (76.2%) and obtained information sources from non-health workers as many as 15 people (23.8%). Mothers who received information sources from health workers, who were interested in doing triple elimination examinations were 28 people (58.3%) and 20 people (41.7%) were not interested. Meanwhile, mothers who received information sources from non-health workers, who were interested in doing triple elimination examinations were 3 people (20%) and 12 people (80%) were not interested. The OR value is 5,600, so it can be stated that pregnant women who get information sources from health workers are 5,600 times more likely to be interested in doing triple elimination examinations than pregnant women who get information sources from non-health workers.

According to the research of Novita et al., the results of the univariate analysis were obtained from 50 respondents who were studied, as many as 30 respondents (60%) received information and 20 respondents (40%) did not receive information. These results show that most of the respondents get information about triple elimination checks. Respondents who received

information that there were 18 respondents (36%) who complied with the triple elimination examination and 12 respondents (24.0%) did not comply with the triple elimination examination. OR value: 8,500 means that exposure to information sources has a chance of compliance with triple elimination checks of 8,500 times compared to not being informed.

In line with the research of Ria et al, of the 40 respondents, 18 pregnant women with good sources of information (45%) and pregnant women with bad sources of information were 22 people (55%). The respondents received the most information from health workers, namely 35 people (87.5%). Pregnant women with good sources of information and did triple elimination examinations for 17 people and did not perform triple elimination examinations for 1 person. Meanwhile, pregnant women with bad information sources and did triple elimination examinations were 4 people and did not conduct triple elimination examinations as many as 18 people. The existence of a relationship between the source of information and the compliance of pregnant women in conducting a triple elimination examination, this indicates that the source of information plays an important role for a person to determine an attitude or decision to act, therefore it is necessary to carry out health counseling about the importance of the examination and the use of persuasive media to increase public awareness. Through the source of information that the mother gets from health workers, the mother can contact directly and ask if the mother does not understand. Information about the benefits of doing triple elimination examinations must always be disseminated in order to increase the awareness of pregnant women to conduct triple elimination examinations using clear and easy-to-understand language.

Conclusion and Suggestion

Based on the results of this literature review, it can be concluded that the compliance of pregnant women in undergoing triple elimination examinations which include HIV, Syphilis, and Hepatitis B does not stand alone, but is significantly influenced by three main factors. The first factor is knowledge, where a good understanding of the importance and benefits of triple elimination examination is able to encourage internal awareness from within pregnant women to check themselves. In addition, the family support factor also plays an important role, because the active role and motivation of the immediate environment, especially the husband, can be a psychological and accommodating reinforcement that is very meaningful for mothers. The last factor is the source of information, where easy access to accurate information, both from health workers and the mass media, has been proven to make it easier for mothers to make decisions to carry out early detection.

Furthermore, the findings of this research are expected to be used as consideration in determining related policies. For health workers, it is recommended to optimize the provision of education and the dissemination of easy-to-understand sources of information about triple

elimination examinations directly during ANC (*Antenatal Care*) visits. Meanwhile, for the family, existing policies or programs should be directed to actively involve husbands or other family members in pregnancy counseling activities, so that they can provide the full support needed by pregnant women.

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