

THE PICTURE OF LEVEL EDUCATION OF HIV/AIDS PATIENTS OF JAYAPURA PROVINCE YEAR 2013

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ABSTRACT

*The HIV cases in Jayapura District until September 2013 are about 130 cases. For Jayapura province the number will be increase. The information about the level of education of patients HIV in Jayapura is still in question. Research on this cases still continue each year. **The aim** of this research is to determine the influence of education on the number of HIV/AIDS in the city of Jayapura and determine the influence of gender on the number of HIV/AIDS in the city of Jayapura. Research method for this study is a kind of exploratory research (Eksplorative research), descriptive analytic which aims to identify the situation of research and special purpose or data needed for further research. **The Result Research** is been seen that the majority of HIV respondents in this study only a high school graduate as many as 44 people or 44%, 21% or 21 junior high school graduates, 15 people or 15% is a Graduate, 13 people or 13% are graduates of the Academy, 4 people or 4% of graduates SD, and there are 3 people or 3% not in school. Education (X_3) significantly affects the variable People with HIV/AIDS (Y). With 59% of them are woman.*

Keywords: HIV, level education, woman

I INTRODUCTION

1.1 BACKGROUND

AIDS first time case reported by Centre for Disease Control (CDC) in United States in cluster clan queer in California and New York in year 1981. First AIDS case in year 1988 in Latin reported achieve 48.139 persons, that consisting of 7.215 case that engulf young clan aged 20- 49 year that most is clan queer. HIV / AIDS spread is very fast to spread throughout the world, since become epidemic inclusive year 2011, HIV infected more than 60 million people and that suffer AIDS approached rate 20 million people. Although international society has responded HIV / AIDS event pandemic, HIV continues spread cause more than 14.000 new infection every day. Now AIDS works main cause of death in an African, and quarter part of the world. The prevalence nationally

AIDS case in Indonesia in year 2011 totally 10,62 per 100.000 residents. Province with highest prevalence is Papua Province (175,91), Bali overtaken, Jakarta DKI, Riau Isles, and Kalimantan West. Based on HIV data development and AIDS in Indonesia inclusive December 2011, cumulative number HIV case that reported 76.879 case and cumulative number AIDS case from year 1987 inclusive year 2011 29.879 case. HIV data case and AIDS in Papua Province that issued by Health Division of Papua Province per 31st of December 2012 is 13.276 case. It so happens breakdown obtained is totaled 5.362 HIV case and 7.914 AIDS case as well as 1.076 persons already died. Inclusive end 2012, from the number is new around 35 percent HIV / AIDS patient that get ARV treatment. HIV source transmission is maximum through sexual relation namely 12.891 case. Risk factor is second is transmission from mother to baby namely 243 case. Risk factors in homosexual 17 cases, while the rest

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from bisexual risk factor, IDU, blood transfusion, and unnoticed 94 case. HIV transmission between man and poised woman, number in men-men totalled 6.

756 case or 50,88 percent and woman totalled 6,409 case or 49,11 percent. Based on Health Division of Jayapura town, new data HIV's number case in Jayapura town from January inclusive December in year 2011 (774 case) and in year 2012 (807 case). First cumulative AIDS case in Kota Jayapura right up to year 2012 as big as 2.041 case. Transsexual HIV case in Jayapura town, even though from the number case is very low, but if reviewed from population transsexual that existing in Jayapura town, so HIV case in fabulous transsexual namely where from 90 patient AIDS commission of Jayapura transsexual, 30 persons experienced VCT and from its result examination 6 persons stated positive suffer HIV. Most HIV infection from sexual intercourse without fender inter individual that one of them positive HIV. HIV transmission sexually happened when being intermediate contact liquid vagina or preseminal liquid someone with genitalia or membrane from the couple mouth mucosa.

Risk enter his HIV from person that is infected towards person who not yet infected through sexual relation anal greater than vaginal sex relationship risk and oral sex. Reason, relative thin anus skin wall and easier injured compared to vagina skin wall, until HIV easier stepped into blood flow. Caste is Indonesian that make anal sexual relation is homosexual and one of them clan transsexual or hermaphrodite.

Epidemiology activity form that most often used is descriptive form epidemiology, namely epidemiology activity form which give picture or information about situation as well as health status spread nature and disruption health as well as disease at one particular certain group resident (particularly according to person characteristic nature, time dan place). According to Bloom, factor behavior provide greatest contribution in

determining health status individual as well as community. In view of factor disease more complex until in epidemiology, we very need to make approach in individual behavior factor as well as community because assign value risk that often occurs in analysis epidemiology about disease incidence in society.

HIV / AIDS risk transmission actually reducible or prevented with behavioural modification toward sex that is healthy and not at risk namely with usage condom favorably and true. Foker LSM Papua survey results about the health situation in Papua, 2005). HIV and AIDS cases continues to increase, the number of people living with HIV and AIDS in Papua is 15 577 people, Papua Provincial Health Office report published by the KPA Jayapura City, 30 September 2013 states that: 1). Papua province has a number of people living with HIV and AIDS are clarified as follows where HIV: 6,100 people, while the AIDS 9477 people, while for the city of Jayapura has 379 number of HIV and AIDS 2863 people, of cases of HIV/AIDS 70% are native Papua.

1.2 Formulation Of The Problem

Based on the description in the background, the questions in this study can be formulated as follows:

1. Does the work affect the number of people living with HIV/AIDS in the city of Jayapura?
2. Does age affect the number of people living with HIV/AIDS in the city of Jayapura?
3. Does education affect the number of people living with HIV/AIDS in the city of Jayapura?
4. Does gender affect the number of people living with HIV/AIDS in the city of Jayapura?

1.3 Research Purposes

Based on the formulation of the problem mentioned above, the objectives of this research are:

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1. Determine the influence of work on the number of HIV/AIDS in the city of Jayapura.
2. Determine the influence of age on the number of people living with HIV/AIDS in the city of Jayapura.
3. Determine the influence of education on the number of HIV/AIDS in the city of Jayapura.
4. Determine the influence of gender on the number of HIV/AIDS in the city of Jayapura.

II. RESEARCH METHODS

Type research used for this research namely descriptive research by using cross sectional approach is namely to describe level of education and sexual behavior through gender. Cross sectional research conducted without follow journey disease but only conducted by observation a moment or in a certain period and every subject study only conducted once observation during research, made at the city of Jayapura since date 11th of April 2013 inclusive 3rd of May 2013. Population in this research is All transsexual that domiciled in Jayapura city that totalled 90 people, Sampel in this research is transsexual that willing become respondent research and domiciled in Jayapura town in year 2013 that totalled 95 people Transsexual is a population that measuring up to that difficult to be reached, to facilitate withdrawal data, author at this time choose selection criteria, namely inclusion criteria and exclusion. Inclusion criteria are subject of research at general characteristic in target population and population reached. An exclusive criterion is half of subject that met inclusion criteria which should be issued from study because various among others: subject already not live in Jayapura city and subject refuse to participate. Subject that we scanned is subject that is true participate and been observe, this group is a part of sample intended reduced with *drop out*, the respondent which then refuse participate.

The design of this study describes the following:

- a. This study includes a survey research methods, namely primary data collection method that uses an instrument that is a questionnaire that range in scope such as social environment, activities, opinions and attitudes (Bungin, 2011).
- b. This study also includes research explanation (explanatory research) is a study that seeks to explain the relationship between the variables through hypothesis testing (Singarimbun and Effendi, 1995).
- c. Based on data analysis, this research is a quantitative research, because analyzing the data sample with inductive statistical and descriptive statistics were generalized to the conclusion population (Indriartoro and Supomo, 2002).

The data collected is a cross-sectional nature of data, obtained from the respondents in response to variables related to income, the cost of health, occupation, age, education, and gender.

2.2. Location and Time Research

This research was conducted in the city of Jayapura. Nationally, Papua has the first rank of HIV/AIDS, where the city of Jayapura is the highest among districts / cities. Location of the study is considered to represent the city of Jayapura based research is Abepura District, Jayapura District South, and North.

The location was taken because it has the highest population, has elite areas and slum areas are clear, and pekerja active sex and alcohol drinkers man widely spread in the area. The study was conducted in January 2014 Until January 2015 by distributing questionnaires / instruments to the HIV/AIDS patients who seek treatment at the Regional Hospital.

2.3. Population and Sample

Population is the whole object of the study consisted of a group of people, events, or anything that has certain characteristics. Population or universe is the total number of units of analysis will allegedly characteristics (Indriartoro and Supomo, 2003). The population in this study is the HIV/AIDS patients who

seek treatment at the Regional Hospital in Month January 2014 to January 2015. The number of patients in Jayapura is 2,292 people.

Study using a representative sample results have the ability to generalize. Criteria representative sample depends on two (2) inter-related aspects, namely: accuracy and precision. Determination of sample size by using the formula Slovin in precision between 10% -15% with the following calculation:

$$n = \frac{N}{1 + N(e)^2}$$

Specification:

n = sample size

N = population size

E = percent leeway inaccuracy due to sampling error that can be tolerated or desirable (Setiawan, 2007)

. 2292

$$n = \frac{2292}{1 + 2292(10\%)^2}$$

n = 99.59 rounded person or 100 people

In this study, the sampling is done by using simple random sampling method (simple random sampling) to HIV/AIDS patients more than 1 year. The number of samples to be studied by 100 respondents.

2.4. Method Of Collecting Data

Collecting data in this study are:

1. The field research (field research), namely in the area of data collection / research sites with data collection techniques of observation, interviews and questionnaires.
2. Observation is a technique that is used to describe the state of the field with the observations made by the author on sex pepekerja active and active drinkers who always objective factual.
3. Interview (interview) is a technique used to obtain accurate and complete information about sex and drink pepekerja active, then conducted interviews with informants and respondents.

4. The questionnaire was used to record data on the activities of the respondents. Charging is done in a structured questionnaire by using a list of questions that have been prepared.

5. The research literature (library research) is research through several books, literature and scientific explanations to obtain the underlying theory in analyzing the data obtained from the study site.

2.5 Types and Sources of Data

Primary data specifically collected by researchers to answer the research question (Indiriantoro, 1999). In this study the data taken under diwawancara questionnaires to respondents. Primary data includes the identity of respondents, the level of consumer income, the number of prostitutes and booze alcohol and the total costs incurred for sex workers and consumption of liquor in a day. This data is sourced from sex workers and consumers liquor men.

In this study, the data obtained from the Central Bureau of Statistics the city of Jayapura, the Ministry of Health, journals, reports, documents, books and other literature that discussed the study materials and other supporting data that are considered to support this research.

2.6. Data Analysis Methods

Model analysis used in this study according to Sugiyono (1999), are as follows:

$$Y = a + b_1X_1 + b_2X_2 \dots bnXn + e$$

where:

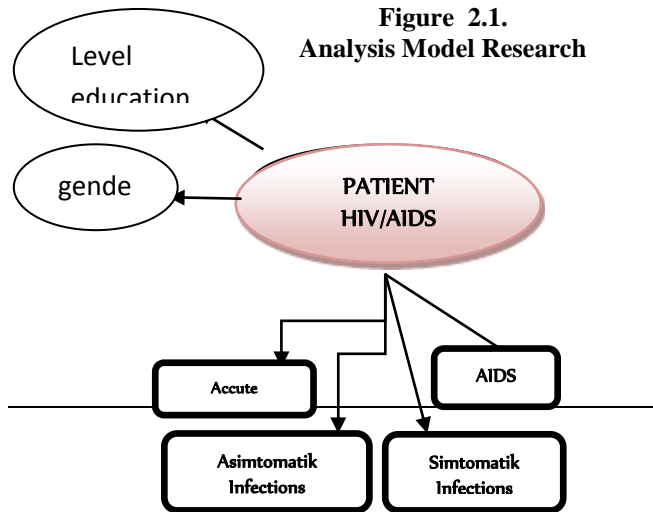
Y = the dependent variable

b₁ bn = regression coefficient

X₁ X_n = independent variable

E = Error (Sugiyono, 2002),

Figure 2.1.
Analysis Model Research



Thus, in this study be:

$$Y = a + b_1X_1 + b_2X_2 + b_3X_3 + b_4X_4 + b_5X_5 + b_6X_6 + e$$

Where:

Y = People with HIV/AIDS

A = constant (intercept)

$b_1, - b_5$ = regression coefficient

X_1 = Revenue

X_2 = Cost of Health

X_3 = Work

X_4 = Age

X_5 = Education

X_6 = Sex

Hypothesis testing to see whether the relationship between the independent variables (income, medical expenses, occupation, education, age, and gender) simultaneously empidemic significant effect on HIV/AIDS, done by comparing between Fhitung with Ftable. If Fhitung greater than F table, then the hypothesis raised in this study received, and vice versa.

Then the hypothesis testing can be done by comparing the value of the significant (F) with a level of significant value (LOS) of 0.05. if the value is significant (F) is smaller than the value LOS = 0.05, then the hypothesis in this study received, and vice versa.

Once known to influence the dependent variable and the independent variables simultaneously, then to determine which variable among the independent variables that have a dominant influence, by way of partial test of the hypothesis.

Test of hypothesis to see whether income, medical expenses, occupation, education, age, and gender either simultaneously or partial Penderitac significant effect on HIV/AIDS, done by comparing between tcount with ttable. If t count greater than t table, then the hypothesis raised in this study received, and vice versa.

Then the hypothesis testing can be done by comparing the value of the significant (t) with a level of significant value (LOS) of 0.05. if the value is significant (t) is smaller than the value LOS = 0.05, then the hypothesis in this study received, and vice versa.

Regression Testing Assumptions

1. Normality

The normal distribution is a theoretical distribution and continuous random variables. To test whether the sample is kind of a normal distribution, the Kolmogorov-Smirnov test used Goodness of Fit Test with the test criteria:

- Figures significance (sig.) > 0.05, then the normal distribution of data.
- Figures significance (sig.) < 0.05, then the data is not normally distributed.

2. Heteroskidastity

An important assumption of the classical linear regression model is that the disorder (disturbance) that appear in the population regression is homoskedastisitas (non heteroscedasticity), ie all of the interruption have the same variance. If the variances are not equal then the variable or heteroskedastic disruption.

The method will be discussed here is the test of Spearman's rank correlation (Gujarati, 2004) using the formula:

$$r_s = 1 - 6 \left[\frac{\sum d_i^2}{N(N^2 - 1)} \right]$$

where $i = j - 1$ = the difference in rank which are matched to two different characteristics of each respondent to i and $N =$ number of respondents in the ranking.

Significant level r then tested by t test. If the calculated value exceeds the significance of t error rate of 5% (0.05), then the non-heteroscedasticity assumption fulfilled.

3. Autocorrelation (Freedom inter remnant)

The term autocorrelation can be defined as a sequence of conditions or disorders that test disturbance into the population regression function.

Gujarati (2004: 201) states autocorrelation is the correlation between the members of a set of observations, sorted by time (as in the data row of the time) or space (as in the data cross-sectional). One important assumption of the classical linear regression is that the u_i are entered into the population regression function is random or not correlated.

The detection of the presence of autocorrelation here using trial Durbin Watson. Durbin Watson testing method is as follows:

- a. Do it and get the OLS regression residuals e_i .
- b. Calculate d by the formula

$$d = \frac{\sum_{i=2}^{i=N} (e_i - e_{i-1})^2}{\sum_{i=1}^{i=N} e_i^2}$$

- c. For a given sample size and the number of variables that explain specific, get the critical value of dL and dU .
- d. If the value of d lies between $4 - dU$ dU and then nonautokorelasi assumptions are met. If the value of d lies between 0 to dL , then there is a positive autocorrelation, whereas if the value of d lies between $4 - dL$ to 4 then there is negative autocorrelation.

The assumption is not fulfilled if the value of the autocorrelation statistics durbin watson located between and $4 - dU$ dU .

4. Multicollinearity

Multicollinearity means the linear relationship that "perfect" or certainly among some or all of the variables that explain the regression model. Non multicollinearity test is necessary because if there is perfect collinearity between X , indefinite regression coefficient and standard error infinity. If collinearity is high but not perfect, estimating the regression coefficient is possible, but the standard errors tend to be large. As a result, the value of the coefficient of the population can not be estimated precisely.

Multicollinearity indicates a high linear correlation (almost perfect) in between the two/more independent variables (Gujarati, 1991). Multicollinearity tested by calculating the value of VIF (Variance Inflating Factor). When the VIF value is less than 5 then there is no multicollinearity or non multicollinearity.

5. Linearity

This linearity testing needs to be done, to know the model demonstrated a linear model or not. Linearity test is done by looking at the scatter plot between residual standard with predictions. If the distribution does not show a specific pattern, then said to the assumption of linearity qualify.

III. RESEARCH RESULT.

Based on that methods mention above, we have shown the result:

Description of Work variables as in Table3.1.

Tabel 3.1
working variable Description (X_1)

Pekerjaan	Frekuensi	Percentage
JObless	28	28.00
Working	72	72.00
Total	100	100.00

Source: Data processed, 2015

The majority of respondents in this study is a worker as many as 72 people or 72%. While the rest are as many as 28 people or 28% are no longer working.

The age variable descriptions are presented in Table 3.2.

Tabel 3.2.
Age Description (X₂)

Revenue	Frekuensi	Persentase (%)
< 20 years	12	12.00
21 - 30 years	34	34.00
31 - 40 years	26	26.00
41 - 50 years	18	18.00
> 50 years	10	10.00
Total	100	100

Source: Data processed, 2015

Seen that the majority of respondents in this study were aged between 21-30 years as many as 34 people or 34%, 26 persons or 26% between 31-40 years old, 18 people or 18% between 41-50 years old, 12 people or 12% aged <20 years, and only 10 or 10% of people aged > 50 years. Description Education variables are presented in Table 5.6.

Tabel 3.3.
Variabel of Education (X₃)

Education	Frekuensi	Persen (%)
Tidak Sekolah	3	3.00
SD	4	4.00
SLTP	21	21.00
SMA	44	44.00
Akademi	13	13.00
Sarjana	15	15.00
Total	100	100

Source: Data processed, 2015

Seen that the majority of respondents in this study only a high school graduate as many as 44 people or 44%, 21% or 21 junior high school graduates, 15 people or 15% is a Graduate, 13 people or 13% are graduates of the Academy, 4 people or 4% of graduates SD, and there are 3 people or 3% not in school. Description of the variable Gender is presented in Table 3.4.

Tabel 3.4.
Deskripsi variable Jenis Kelamin (X₄)

Gender	Frekuensi	Persentase
Woman	59	59.00
Men	41	41.00
Total	100	100.00

Source: Data processed, 2015

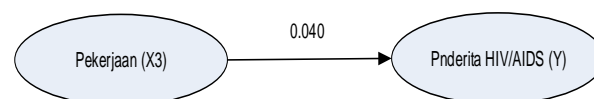
Based on the above table, it is seen that the majority of respondents in this study were female as many as 59 people or 59%, and 41 or 41% were male.

5. Discussion.

4.1 Effect of Work (X₁) on HIV/AIDS (Y)

Hypothesis testing the effect of Employment (X₁) on HIV/AIDS (Y) is presented as a drawing pad follows:

Figure 4.1.
Testing Hypothesis X₁



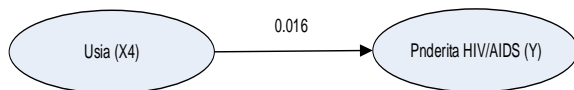
Based on the analysis, the variable Occupation (X₃) on HIV/AIDS (Y) obtained tcount of 0.230 with a significance t by 0818. Because smaller tcount table (0230 > 1984) or the significance of t greater than 5% (0818 > 0.05), then the partial variable Occupation (X₃) did not significantly influence the variable People with HIV/AIDS (Y). This means that any type of job (X₃), will not result in a change in the level of the number of people with HIV/AIDS (Y) in the city of Jayapura.

Transmission of HIV/AIDS is not because of work but because of the behavior described in the background in the Introduction. One of the most controversial thing about the Demerit goods with regard to addiction. Exact requirement of free sex and alcohol and the other is the type of goods that contain addictive substances. Free sex addiction and alcoholism that may deeply regret habits acquired it; however, as that is the nature of addiction, it is difficult to eliminate the habit if it becomes established.

5.2. Effect of Age (X₂) against HIV/AIDS (Y)

Testing hypotheses Age (X₂) against HIV/AIDS (Y) are presented in the following picture :

Figure 4.2
Testing Hypothesis X₂



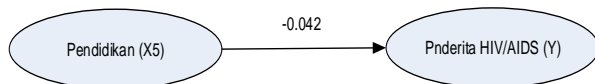
Based on the analysis, the variables age (X₄) against HIV/AIDS (Y) obtained tcount of 2475 with a significance of 0.015 t. Since the absolute value greater tcount ttable (2475 > 1984) or the significance of t less than 5% (0.015 < 0.05), then the partial variable Age (X₄) significantly affects the variable People with HIV/AIDS (Y). Based on the regression coefficient (0.016) is positive, indicating a positive effect. This means that the higher age (X₄), the higher the risk in people with HIV/AIDS (Y). Conversely, the lower age (X₄), the lower the HIV/AIDS (Y).

This means that the more mature age of a person more at risk as patient as in Jayapura city teenage promiscuity so freely and this triggers the transmission of HIV/AIDS through a syringe (drug users) or through casual sex. Adolescents are particularly vulnerable to HIV/AIDS because there is a very strong influence of the mechanisms of transmission of HIV/AIDS and development of physical, psychological, social, and economic.

5.3. Influence of Education (X₃) on HIV/AIDS (Y).

Testing the hypothesis of Education (X₅) on HIV/AIDS (Y) are presented in the following picture:

Figure 4.3.
Testing Hypothesis X₃



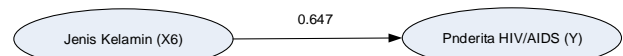
Based on the analysis, the variables Education (X₅) on HIV/AIDS (Y) obtained tcount at -2000 with the significance of t by 0048. Since the absolute value greater tcount ttable (2000 > 1984) or the significance of t less than 5% (0048 < 0.05), then in partial Education (X₅) significantly affects the variable

People with HIV/AIDS (Y). Based on the regression coefficient (-0042) is negative, indicating a negative influence. This means that the higher education (X₅), the lower the HIV/AIDS (Y). Conversely, the lower the Education (X₅), the higher HIV/AIDS (Y).

4. Influence of Gender (X₆) on HIV/AIDS (Y)

Testing the hypothesis Gender (X₄) on HIV/AIDS (Y) are presented in the following picture:

Figure 4.4
Testing Hypothesis X₆



Based on the analysis, the variable Gender (X₆) on HIV/AIDS (Y) obtained tcount of 3737 with t significance of 0000. Since the absolute value greater tcount ttable (3737 > 1984) or the significance of t less than 5% (0.000 < 0.05), then the partial variable Gender (X₆) significantly affects the variable People with HIV/AIDS (Y). Based on the regression coefficient (0647) is positive, indicating a positive effect. Meaning Gender female (X₆) have vulnerable people with HIV/AIDS (Y) than male gender.

This is similar to the research conducted by Educate Setiawan, Indri Hapsari, and Sri Lestari Widyastuti of the Faculty of Pharmacy, University of Muhammadiyah Purwokerto. The results showed patients more women than men, it is in accordance with the data KPA Banyumas mention of HIV/AIDS by 56% of the female sex were male gender 44% (Supraptini, 2007).

1. Work (X₁) did not significantly influence the variable People with HIV/AIDS (Y). This means that any type of job (X₁), does not result in a change in the level of HIV/AIDS (Y).
2. Age (X₂) significantly affects the variable People with HIV/AIDS (Y). Based on the regression coefficient (0.016) is positive, indicating a positive effect. This means that the higher age (X₂), the higher the HIV/AIDS (Y). Conversely, the lower age (X₄), the lower the HIV/AIDS (Y).

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3. Education (X_3) significantly affects the variable People with HIV/AIDS (Y). Based on the regression coefficient (-0042) is negative, indicating a negative influence. This means that the higher education (X_5), the higher the risk to get HIV/AIDS (Y). Conversely, the lower the Education (X_5), the lower the awareness that the higher risk of contracting as HIV/AIDS (Y).
4. Gender (X_4) significantly affects the variable People with HIV/AIDS (Y). Based on the regression coefficient (0647) is positive, indicating a positive effect. Meaning Gender female (X_4) have vulnerable people with HIV/AIDS (Y) than male gender.
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