FACTOR RELATED TO THE SELECTION OF IUD CONTRACEPTION WOMEN METHOD IN THE COMMUNITY HEALTH CENTER

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ABSTRACT

Background: The main problem faced in Indonesia is high population growth rate, so there is a government program, namely Family Planning, to space pregnancies using contraceptive methods and create economic and social prosperity. However, there are factors that cause the Family Planning Program to not be optimal, some of which are the level of knowledge, age, education and husband's support. The aim of the study was to examine factors related to the choice of IUD contraceptive method among women of childbearing age.Method: This research is quantitative with correlative descriptive of cross sectional approach. The sample was 52 respondents using cluster sampling technique. Research instrument used factors related quisonaire. Result: There was a relationship between the level of knowledge (p-value 0.016) and husband's support (p-value 0.009) with the choice of IUD contraception method, but there was no relationship between age (p-value 0.888) and maternal education (p-value 0.046) with the choice of IUD contraception method.Conclusion: Husbands become aware that support from their husbands is very important for the success of the IUD family planning program.

Keywords: Contraceptive Method, IUD, Woman

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INTRODUCTION

The population of Indonesia in 2023 is around 280.73 million people in December 2023. This number has increased by 10 million people compared to the total population in 2020 and is ranked 4th (fourth) most populous in the world. Approximately half of the population is under 30 years old. This is because both the birth rate and fertility rate are decreasing rapidly. Conversely, the working age population is increasing rapidly, while the overall population of Indonesia is growing slowly. This situation shows that the number of productive age population is very large. The rate of population growth is determined by population growth, which is the standard for population development of a country(Tegal, 2023).

Based on the distribution of provinces, the highest prevalence rate of family planning use is South Kalimantan (67.9%) while the lowest is Papua (15.4%). The pattern of choosing the type of modern contraceptive method in 2022 shows that most acceptors choose to use injections at 59.9%, followed by pills at 15.8% while for IUD acceptors only 8%. Intrauterine Contraceptive Devices (IUDs) are devices or objects that are inserted into the uterus that are very effective, reversible, and long-term, and can be used by all women. The advantages of IUDs are that they are a contraceptive method that can be used long-term, which is highly effective, does not interact with drugs and has no hormonal side effects(RI, 2021).

Tegal Regency, the number of active KB in 2022 was 280,953, but the number of MKJP users is still relatively low, namely 26,977 Intra Uterine

Devices (IUDs), 46,186 implants, 51,656 injections, 143,484 pills, 8,864 condoms, 735 MOPs and 3,051 MOWs. Central Java has a target of 41,060 IUD and implant acceptors during the MJKP month, but currently only <50% has been achieved. Meanwhile, in Tegal district, only 644 acceptors used IUDs out of a total of 9,544 KB acceptors(BKKBN, 2022).

The working area of the Tarub Health Center in Tegal district consists of 12 villages. Data on IUD KB acceptors at the Tarub Health Center in Tegal district for the past 3 years has not yet reached the IUD KB coverage target. In 2021 and 2022, only 16 acceptors used IUDs per year and there was no increase, in 2023 it increased to 36 IUD KB acceptors but had not yet reached the target. An interview with the coordinating midwife explained that efforts that had been made to increase the number of IUD KB users included the Tarub Health Center routinely conducting KB safaris every month and Bikor also holding crosssectoral meetings, and socialization regarding the use of IUD KB for pregnant women to married WUS.

Based on a preliminary survey conducted at the Tarub Health Center, it showed that out of 10 (ten) women of childbearing age (WUS), 4 (four) mothers used contraceptive injections, 2 (two) mothers used contraceptive pills, 2 (two) mothers used contraceptive implants, and 2 (two) mothers did not use contraceptives (calendar system). Of the 10 (ten) mothers, only 7 (seven) mothers knew about the IUD contraceptive, but only knew about did not understand the advantages (effectiveness) of the contraceptive, and all the mothers said they were embarrassed, because the installation of the IUD contraceptive was done through the vagina and thought that the IUD could cause cancer, could come off on its own, and spread to the heart. The results of the preliminary study also showed that 8 (eight) out of 10 (ten) mothers said they were not interested in using the IUD contraceptive because they were afraid, anxious, and were not allowed by their husbands because their husbands thought that using the IUD contraceptive would interfere with intercourse. The aim of the study was to examine

factors related to the choice of IUD contraceptive method among women of childbearing age.

METHOD

This research is a quantitative research type, namely descriptive correlative with a crosssectional approach. The study was conducted in November 2024 - January 2025. The population in this study were all women of childbearing age who were married in the Tarub Health Center area in September 2024, totaling 67 people. The sample in this study was 57 people calculated using the Slovin formula. The side technique used Cluster Sampling. Inclusion criteria women in work area Tarub Health Centre with married status, age women of 20th-40th and have 2 or more children. Exclusion criteria is pregnancy woman, woman with cervical erosion, and woman suspected uterine cancer. Data analysis is expressed in the form of frequency distribution and percentages and then analyzed univariately. The test used in this study is the Chi Square test, namely a test used to find the relationship between two or more variables.This research was conducted considering the basic principles of research ethics which include Ethical Clearance with letter number 190 / KEP / UNKAHA / SLE / XI / 2024, Informed Consent, Anonymity, and Confidentiality...

RESULTS

Univariate analysis describes the level of maternal knowledge, maternal age, maternal education, husband's support, and choice of IUD contraceptive method using frequency distribution with the following result:

Table 1. Overview of Univariate Analysis

Variable of responden	n	%
Knowledge		
Poor	15	26,3
Sufficient	27	73,7
Good	15	26,3
Age		
Old Reproduction	16	26,1
Healthy Reproduction	41	71,9
Education		
Junior High School	19	33,3
Senior High School	38	66,7
Husband Support		
Does not support	27	47,7
Support	30	52,6

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IUD Contraseption Choice		
Yes	24	42,1
No	33	57,9
Total	57	100

Table 1 shows that, majority of respondents have sufficient knowledge of 27 people (73.3%). Meanwhile, those who are knowledgeable in the less and good categories are the same, namely 15 people each (26.3%).

The majority of respondents are of healthy reproductive age of 41 people (71.9%). While those who are old in reproduction are 16 people (26.1%).

The majority of respondents have senior high school of 38 people (66.7%). While those who have junior high school are 19 people (33.3%).

The majority of respondents receive support from their husbands of 30 people (52.6%). While those who do not receive support from their husbands are 27 people (47.7%). The data normality test was conducted to determine the average value (median) of the results of the husband's support questionnaire measurement, because the husband's support questionnaire does not have a standard measurement result normality benchmark. The test used Kolomogorov Smirnov. The results of the normality test in this study p-value (0.001) <0.05 means that the data distribution is not normal. The majority of respondents did not choose the IUD contraceptive method, amounting to 33 people (57.9%). Meanwhile, who chose those the contraceptive method were 24 people (42.1%).

Bivariate analysis uses Chi Square to analyze the relationship between maternal knowledge, maternal age, maternal education, and husband's support with the choice of IUD contraceptive method.

Table 2. Overview of Bivariate Analysis

N	No		es es	P
n	%	n	%	value
11	73,3	4	26,7	0.016
18	66,7	9	33,3	0,016
4	26,7	11	73,3	
10 23	62,5 56,1	6 18	37,5 43,9	0,888
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Reproduction					
Education					
Junior High School	15	78,9	4	21,1	0,046
Senior High School	18	47,4	20	52,6	
Husband Support					
Does not support	21	77,8	6	22,2	0,009
Support	12	40	18	60	

Table 2 shows that, Most of the women of childbearing age who have sufficient knowledge do not choose IUD as their contraceptive, which is 18 respondents (66.7%), while the majority of women of childbearing age who have less knowledge also do not choose IUD as their contraceptive, which is 11 respondents (73.3%). Respondents who have good knowledge mostly choose IUD as their contraceptive, which is 11 respondents (73.3%). The results of the Chi-Square (Continuity Correction) test obtained a value with a p-value of 0.016. Therefore, the p-value of 0.016 $<\alpha$ (0.05), it is concluded that there is a relationship between the level of maternal knowledge and the choice of IUD contraceptive methods in women childbearing age.

Most women of reproductive age who are of old reproductive age do not choose IUD as their contraceptive, namely 10 respondents (62.5%), while only 18 respondents (56.1%) of women of reproductive age who are of healthy reproductive age choose IUD. The results of the Chi-Square (Continuity Correction) test obtained a value with a p-value of 0.888. Therefore, the p-value of 0.888> α (0.05), it is concluded that there is no relationship between maternal age and the choice of IUD contraceptive method in women of reproductive age.

Most of the women of childbearing age with basic education (elementary school, junior high school) did not choose IUD as their contraceptive, namely 15 respondents (78.9%) and women of childbearing age with secondary education (high school/vocational school) mostly chose IUD as their contraceptive, namely 20 respondents (52.6%). The results of the Chi-Square (Continuity Correction) test obtained a value with a p-value of 0.046. Therefore, the p-value of 0.046 < α (0.05), it is concluded that there is a relationship between maternal education and the choice of IUD

contraceptive method in women of childbearing age.

Women of childbearing age who do not receive husband support mostly do not choose IUD as their contraceptive, which is 21 respondents (77.8%) and women of childbearing age who receive husband support mostly choose IUD as their contraceptive, which is 18 respondents (60%). The results of the Chi-Square (Continuity Correction) test obtained a value with a p-value of 0.009. Therefore, the p-value of 0.009 < α (0.05), it is concluded that there is a relationship between husband support and the choice of IUD contraceptive method in women of childbearing age.

Education affects the learning process, the higher a person's education, the easier it is for that person to receive information. With higher education, a person will tend to get information, both from other people and from the mass media(EW, 2015).

The proportion of highly educated women is more likely to receive modern contraceptive methods than uneducated women, the opportunity to receive information from the mass media is greater for educated women to receive information services from health workers(RDC, 2017).

In general, the higher a person's education, the easier it is to receive information. Education is thought to be related to the mother's knowledge of IUD contraception, this is related to the mother's level of knowledge that someone with a higher education will have broader knowledge compared to a low level of education. Education shows a positive relationship with the use of contraceptive types, meaning that the higher the education, the they are to use more likely effective contraception(S, 2018).

Whether or not husband's support is obtained depends on the intimacy of the relationship, the existence of meaningful communication, and the existence of problems or concerns about costs(Nasution, 2019)

According to Green's theory, reinforcing factors are also factors that determine a person's attitude, especially the attitude of the closest environment in this case the husband is very important in acting to choose a contraceptive

method. The husband as the head of the family in a patriarchal society plays a very important role as a decision maker in the health of the family including the wife. So that information about choosing the IUD contraceptive method is not only for WUS who need to be given counseling about choosing the IUD contraceptive method but their husbands also need to get the right information so that they can provide support to their wives(EW, 2015; Oktavianah, 2023).

Husbands who are part of a family that has a good understanding of healthy behavior will provide support to their wives. Husband's support can provide emotional benefits, namely providing a sense of comfort and giving encouragement for individuals to carry out health actions. Therefore, the role of the husband is very important for individual actions, especially in choosing the IUD contraceptive method. Especially in the context of using long-term contraception such as the Intra Uterine Device (IUD), husband's support is becoming increasingly important. Government data shows that it has prioritized the use of MKJP, including IUDs, in family planning programs. However, the success of IUD use does not only depend on technical aspects, but also involves the husband's support in the selection implementation process(al, 2016).

For breastfeeding mothers, IUD also does not affect the smoothness or content of breast milk (ASI)(Hartanto, 2014). Some possibilities for the failure of the family planning program include being influenced by the mother's level of knowledge and other supporting factors. To have a positive attitude about family planning, good knowledge is needed, conversely, if knowledge is lacking, compliance with the family planning program will decrease. The low number of mothers using IUD contraception is caused by a lack of information about the benefits of using IUD contraception so that the mother's attitude in choosing an IUD is still very low, which has an impact on the action in choosing IUD contraception. This situation greatly influences the mother's decision to use IUD contraception(al, 2016).

According to the researcher's assumption, the low number of mothers using IUD contraception is caused by a lack of information about the benefits

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of using IUD contraception so that the mother's attitude in choosing an IUD is still very low, which has an impact on the action in choosing IUD contraception. This situation greatly influences the mother's decision to use IUD contraception. However, based on research, because they are afraid to have an IUD installed or insert objects into the body and are embarrassed due to the installation of an IUD contraception which is located in the uterus.

DISCUSSION

The low level of knowledge about choosing the IUD contraceptive method is an obstacle to increasing awareness and changing human attitudes. On the other hand, good knowledge in women of childbearing age will form a positive attitude towards choosing the IUD contraceptive method(al, 2016). According researcher, education determines how to behave and act so that the better the education, the better the attitudes and actions and full of mature thinking.

The age of the mother who is still young also has no experience in choosing a contraceptive compared to multiparous mothers who already have previous experience(Oktavianah, 2023). According researcher, experience is the most valuable lesson to provide input for a decision so that mothers can consider it in a balanced way between the knowledge they have and the real experience they have experienced. so that if there is no experience, the mother's attitude and actions will easily be carried away by the current.

The older a person is, the choice of contraceptives towards devices that have higher effectiveness, namely long-term contraceptive methods. The results of previous studies found that there was a relationship between the wife's age and the choice of IUD contraception. The study was conducted in the Batang Hari Health Center Work area, Lampung Regency(A., 2018). The type of contraception must consider the age of the acceptor, if the age is over 35 years, it is more effective long-term contraceptive to use methods(S, 2018). According researcher. consideration of profit and loss and benefits is very important, with the experience and insight possessed, it is enough to be material for being

more selective in taking a woman's own health decisions.

Women over 35 years of age will experience morbidity and mortality if they become pregnant. Therefore, women over 35 years of age need safe and effective contraception. The mother's age is related to the interest in using an IUD because the use of contraception at the age of over 30 years, the opportunity to limit births also increases. The study is also in line with research on the relationship between age and IUD participation, those aged >35 years tend to choose an IUD compared to those aged 20-35 years. This is in line with the pattern of need for family planning which according to age can be grouped into 15-19 year olds, women in the 45-49 year old age group and age group level between years(Čepulienė, 2012).

CONCLUSION

There was a relationship between the level of maternal knowledge (0.016), maternal education (0.046), and husband's support (0.009) with the choice of the IUD contraceptive method. Suggestions for women of childbearing age who are married to apply the results of this study as a source of information for husbands that support from husbands can help the success of the IUD KB program. In addition, to be able to improve the knowledge of mothers, families and husbands, it is necessary to consider educational programs for families of women of childbearing age. so that increasing the knowledge of mothers will be balanced with the optimal role of the family both in terms of knowledge and support.

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