

THE CORRELATION OF INTERNAL AND EXTERNAL FACTORS OF IUD ACCEPTORS WITH USE IUD

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ABSTRACT

In Indonesia, based on data from BKKBN, the majority of family planning participants until June 2023 are dominated by family planning participants who use Non-Long-Term Contraceptive Methods (Non MKJP), which is 83.18% of all family planning participants. Intrauterine Device, namely IUD is a contraceptive device inserted into the uterus, effective, reversible and long-term. The use of intrauterine devices (IUDs) is influenced by several factors such as internal and external factors. The general objective in this study is to determine the relationship between internal and external factors of IUD acceptors with the use of Intrauterine Devices in the Working Area of Puskesmas Ibrahim Adjie Bandung City.

The type and design of research to be used is an analytical method, using a cross sectional study approach. Using primary data obtained from questionnaires and observations of subjects will be carried out once during the study IUD users in the working area of the Ibrahim Adjie Health Center fall into the age group ≥ 25 to 35 years as many as 42 (46.2%), have parity ≥ 2 children as much as 83 (91.2%), have good knowledge 42 (46.7%), have husband support 82 (90%) and get midwife support 86 (94.4%).

From the results of the study, it was concluded that internal and external factors that have a relationship with the use of Intrauterine Devices (IUDs) are knowledge, husband support and midwife support. The better the knowledge, the higher the support of husbands and midwives, the more acceptors use IUDs.

Keywords: Internal factors, external factors, Users of intrauterine devices (IUD)

INTRODUCTION

One of the most important problems faced by developing countries, such as in Indonesia, is the population explosion. The population explosion resulted in a rapid population growth rate, this was due to the lack of knowledge and cultural patterns in the local community. To overcome these problems, the Indonesian government has implemented the Family Planning (KB) program of the National Family Planning Movement aimed at controlling the rate of population growth and also to improve the quality of human resources. (1)

Family planning is an effective way to prevent maternal and child mortality because it can help married couples avoid high-risk pregnancies. Birth control cannot guarantee the health of mothers and children, but by protecting families against high-risk pregnancies, birth control can save lives and reduce the morbidity of pregnancy and childbirth. Birth control is one method to temporarily delay pregnancy and control population growth, regulate birth spacing, and the ideal age of childbirth. Among the various contraceptive methods available, there is the Intrauterine Device Method (IUD), IUD is a method of birth control using a device or object inserted into the uterus that is very effective, reversible and long-term, can be used by all women of reproductive age. (2)

One of the strategies for implementing the family planning program itself as stated in the 2020-2024 Medium-Term Development Plan, especially in the first West Java Province, is strengthening the capacity of health facilities and networks serving family planning, especially

long-term contraceptive methods and postpartum birth control as well as increasing the use of long-term contraceptive methods such as IUDs. (3)

Based on BKKBN data for family planning participants nationally, until March 2023, there are 2,020,510 participants, namely 137,067 (6.78%) IUD participants, 32,503 (1.61%) MOW participants, 5,382 (0.27%) MOP participants, 125,512 (6.21%) Condom participants, 164,872 (8.16%) Implant participants, 1,008,577 (49.92%) Injection participants, and 546,597 (27.05%) Pill participants. The majority of family planning participants in March 2023 were dominated by birth control participants who used Non-Long-Term Contraceptive Methods (Non MKJP), which amounted to 83.18% of all birth control participants. While new birth control participants who used long-term methods such as IUD, MOW, MOP and Implant only amounted to 16.82%. (4)

From the data above, it can be concluded that the use of IUD in Indonesia is still quite low. While BKKBN in its program emphasizes users of IUD contraception, especially the CuT380 A type which is the prima donna of BKKBN because it provides the following benefits, namely, effective immediately after installation, is a long-term method (10 years of protection and does not need to be replaced), the failure rate is only one in 125-170 pregnancies, the acceptor does not need to remember when he should have birth control, there is no influence on sexual activity, increase comfort without fear of pregnancy, no hormonal side effects with Cu T380 A, does not affect the volume of breast milk, can be installed immediately after childbirth or after abortion, can be used until menopause, re-examination only 1 time a year, cheap, fertility returns immediately after the IUD is removed. (5)

The research will be carried out in the Ibrahim Adjie Health Center area in Bandung City in 2023. At the Ibrahim Adjie Health Center in Bandung City in 2022, there are 4,011 active family planning participants and 457 new family planning participants with the use of 2,830 (71%) injectable birth control, 840 (21%) IUD participants, 248 (6%) pills, and 93 (2%) implants. For IUD use in 2023 from January to June 2023, there were 36 new IUD birth control participants, 169 participants, 6 participants in Pills, and 3 new KB participants. (6)

Based on the data above, when viewed from the method of using birth control, namely long-term contraception and short-term contraception, it can be seen that long-term contraceptive use is still low. The low use of long-term contraceptive methods such as intrauterine devices (IUDs), implants, Female Operational Methods and Male Operational Methods due to lack of knowledge and awareness of couples of childbearing age to use this contraceptive method, economic weakness also affects public participation in the use of contraception in utero.

METHOD

The type and design of research to be used is an analytical method, using a cross sectional study approach. Using the primary data to be obtained from the questionnaire and observations of subjects will be made once during the study. The population in this study is all IUD and non-IUD acceptors from May 2023 to June 2023 in the working area of the Ibrahim Adjie Health Center in Bandung City with a total sample of 182 samples. The data used by researchers includes primary data taken directly through questionnaires. The type of instrument presented in this study is a questionnaire for knowledge variables in the form of closed questions so that respondents only need to give a check mark / checklist (✓) in the answer column. As for the variables of husband support and health worker support, it was carried out

using an instrument in the form of a Likert scale with answers in the form of gradations of one type of quality (level of quality lightness).

Data analysis was carried out after the questionnaire was collected. To facilitate analysis, questions that are answered correctly are coded 1 and if incorrectly coded 0, then poured into the form of a table with analysis calculations. Analysis of the research data was carried out using a bivariate statistical test, which was carried out using the Chi-Square formula.

RESULT

Table 1 Overview of Internal Factors of Respondents Use of IUD and non-IUD in the Working Area of Puskesmas Ibrahim Adjie Bandung City

Internal Factors	IUD Acceptor Users			
	Yes	No	F	%
Age				
< 20 Year	8	8,8	52	57,1
20 - 35 Year	42	46,2	25	27,5
> 35 Year	41	45,1	14	15,4
Total	91	100	91	100
Parity				
< 2 Child	8	8,8	52	57,1
≥ 2 Child	83	91,2	39	42,9
Total	91	100	91	100
Knowledge				
Good	42	46,2	24	26,4
Enough	41	45,1	41	45,1
Less	8	8,8	26	28,6
Total	91	100	91	100

Table 2 Overview of External Factors of IUD and non-IUD Use Respondents in the Working Area of Puskesmas Ibrahim Adjie Bandung City

External factors	IUD Acceptor Users			
	Yes	No	F	%
Husband Support				
Support	82	90,1	54	59,3
Not Supported	9	9,9	37	40,7
Total	91	100	91	100
Midwife Support				
Support	86	94,5	62	68,1
Not Supported	5	5,5	29	31,9

	Total	91	100	91	100
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Table 3 Relationship Between Knowledge and IUD Use

IUD Acceptor Users	Knowledge						P value	X2		
	Good		Enough		Less					
	f	%	f	%	f	%				
Yes	42	46,7	41	44,4	8	8,9	91	100		
No	24	26,4	41	45,1	26	28,6	91	100		

Table 4 Relationship between spousal support and IUD use

IUD Acceptor Users	Husband Support						P value	X2		
	Support		Not Supported		Total					
	f	%	f	%	f	%				
Yes	82	90	9	10	91	100	0,000	22,861		
No	54	59,3	37	40,7	91	100				

Table 5 Relationship Between Midwife Support and IUD Use

IUD Acceptor Users	Midwife Support						P value	X2		
	Support		Not Supported		Total					
	f	%	f	%	f	%				
Yes	86	94,4	5	5,6	91	100	0,000	20,853		
No	62	68,1	29	31,9	91	100				

DISCUSSION

1. Relationship Between Knowledge and IUD Use

The test results with the Chisquare statistical test obtained a value of $x^2 = 15.752$ with a value of $p = 0.003$, this shows that there is a relationship between knowledge and the use of IUD ($p < 0.005$). Good knowledge of family planning participants about the nature of family planning programs will influence them in choosing methods or contraceptives to be used including flexibility or freedom of choice, suitability, effective choice or not, comfort and safety, as well as in choosing a more suitable and complete place of service because the insight is better, so that thus their awareness is high to continue to use services. (7)

This is in accordance with Blum's opinion quoted by Notoatmojo which states that the actions of an individual including his independence and responsibility in behavior are strongly influenced by the cognitive domain or knowledge. The more tangible act of independence of each individual will be more lasting and gradual if it is based on strong knowledge.

Notoatmojo suggests that knowledge is the result of human knowledge after sensing a certain object. Sensing occurs through the five human senses, namely the senses of sight, hearing, smell, taste and touch. Knowledge or cognitive is a very important domain in shaping a person's actions (overt behavior). (8)

2. The relationship between husband support and IUD use

The test results with the Chisquare statistical test obtained a value of $x^2 = 22.861$ with a value of $p = 0.000$ which is meaningful ($p = 0.000$), thus it can be concluded that there is a relationship between husband support and the use of IUD.

The results of this study show that most husbands will support their wives in choosing contraception to choose an IUD. This shows that the husband plays a role in supporting family planning programs. The husband began to realize that the family planning program is a vehicle to achieve happiness and family welfare. Therefore, it is very good if the husband always supports his wife in using contraceptive methods and is included in every counseling about birth control.

This is in accordance with the theory that the role of the husband is not limited to the decision-making process, but also moral support to the wife from the time her pregnancy is known, until the period of labor and puerperium, as well as in decision making on the use of contraceptives. Weak decision-making by women is due to women's economic dependence on breadwinners so that women do not have control over the finances owned by the family.

In some cases, it requires women to obtain their husband's consent before obtaining family planning services. Various cultures support the belief that men have the right to fertility

of their wives. Though women have the right to determine the number of children, births and selection of the type of contraception according to their wishes. (9)

3. The Relationship Between Midwife Support IUD Acceptor and IUD Use

The test results with the Chisquare statistical test obtained a value of $\chi^2 = 20.853$ with a value of $p = 0.000$ which means ($p < 0.005$). Thus, it can be concluded that there is a relationship between midwife support and the use of Intrauterine Devices (IUDs).

Health workers are very influential on the use of contraceptives, health workers play a role in providing service information, information, counseling, and explaining about contraceptives. Health workers play a very large role in the final stages of the selection and use of contraceptives. Prospective acceptors who are still hesitant in the use of contraceptives finally decide to use contraceptives after getting encouragement from health workers. Health workers are the ones who take a role in the final stages of the process of selecting and using contraception.

Health workers are also figures who are still considered role models in the community, so that recommendations or decisions made will be implemented by the community. Likewise, in terms of the use of contraceptives, there is a close relationship between nurses or midwives and the community, making it easier for them to move the community, not just the relationship between clients and health workers. This relationship makes it easier for them if the prospective acceptor wants to use contraceptives. (10)

Counseling is a very important aspect of family planning and reproductive health services. By doing counseling means the officer assists the client in choosing and deciding the type of contraception to be used according to his choice. Besides that it can make clients feel more satisfied. In an action, a positive attitude is absolutely necessary as well as in this case, the attitude of midwives in terms of counseling must show a positive attitude so that the counseling process, between counselors and their clients can run smoothly, so that in the end the Indonesian population, can use family planning, with the aim that the population growth rate can be suppressed. Unmet family planning needs in Indonesia reach 9%, this can be caused by various things, one of which is the lack of attitude of health workers, especially midwives, in conducting family planning counseling. (11)

Juliantoro said that in contraceptive services, the relationship between service providers and contraceptive consumers is not the same as the relationship between doctors and patients. In contraceptive services, clients are not sick people who want to be cured by resignation to all decisions made by service providers. Contraceptive consumers are people who come in good health, have awareness and the ability to make choices so that family planning services must be different from services for sick people. If this is considered, the utilization of family planning services can increase.

This is in accordance with the theory where the support of health workers (midwives) is very influential on the decision making of family planning acceptors, as we already know that a midwife has many duties and functions of midwives including managing public health service activities, especially maternal and child health and family planning according to plan. (12)

CONCLUSIONS AND SUGGESTIONS

Internal and external factors that have a relationship with the use of intrauterine devices (IUDs) are knowledge, husband support and midwife support. The better the knowledge, the more IUD use, and the higher the husband's support and midwife's support, the higher and more acceptors use IUDs.

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