

The Influence of Predisposing, Enabling and Reinforcing on the Participation of the Partners of the Subur (PUS) Become a Iud Kb Acceptor in the Region Tanah Luas Puskesmas Work Kabupaten Aceh Utara

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Abstract

The low support of fertile age couples in the IUD KB program has resulted in low interest in IUD acceptors. The preliminary survey of Family Planning Field Officer (PLKB) data in the Extensive Public Health Center in 2017 was 3956 PUS, with active participants of 2053 couples of childbearing age. The achievement is only 57.21% and 42.79% is Unmeet Need. This is a descriptive analytic with a cross sectional design approach. The results showed that there was a relationship between knowledge, attitudes, socio-culture, quality of family planning services, husband's support, and information sources with PUS participation as IUD KB acceptors. In addition, these six variables predominantly influence the participation of fertile age couples (PUS) to IUD family planning acceptors because they have the same high EXP (B) value as other variables. The results of multiple logistic regression tests obtained multivariate analysis of pus women had the opportunity of 4,514 times to participate as IUD KB acceptors. Suggestions The respondents are expected to be able to increase knowledge about IUD family planning so that they are aware of the use of IUD contraceptives and understand the functions, benefits and effectiveness of IUD contraception so that community participants get to know and use IUD contraceptives.

Keywords: Predisposing, Enabling and Reinforcing, PUS Participation, KB IUD

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## Introduction

The population growth rate (LPP) in Indonesia is still high (1.49%) per year so that the Indonesian population will increase by around 3.5 million people each year.

According to the World Health Organization (WHO) (2014) contraceptive use has increased in many parts of the world, especially in Asia and Latin America and is lowest in Sub-Saharan Africa. Globally, modern contraceptive users have increased not significantly from 54% in 1990 to 57.4% in 2014. Regionally, the proportion of fertile couples aged 15-49 years reported the use of modern contraceptive methods has increased in the last six years. In Africa from 23.6% to 27.6%, in Asia it has increased from 60.9% to 61.6%, while Latin America and the Caribbean have increased slightly from 66.7% to 67.0%.

According to data from the Province of Aceh in 2017, active family planning (KB) participants were around 76.26%, namely 678,513 couples. For MOW contraception (Female Contraception Method) (1.33), MOP (Male Contraception Method) (0.02), IUD (Intra Uteri Devices) (3, 63%), Implant (3.91%), Injections (47, 03%), PIL (35.70), Condoms (8.32%) (Representative of Aceh BKKBN, 2015).

Aceh's National Population and Family Planning Board (BKKN) noted that family planning or family planning participants in Aceh province until November 2017 reached 101,598 couples of childbearing age. The number of registered KB participants was only realized around 54 percent while the target of 2017 KB participants was set at 108,023 pairs. BKKBN seeks to socialize the family planning program to realize a prosperous and quality family.

Based on data from the North Aceh Regency Women's Empowerment and Family Planning Agency (BP2KB), the number of Sub-district Health Officers in 2016 was 94,830 couples, the number of students in 2015 was 13 PUS from 94,817 PUS. ), (43.4%) injections (44.4), (2%), MOP / MOW (0.8%), condoms (6.5%), implants (1.9%), Pills (44, 3%). Based on the Profile of the North Aceh Health Office in 2016, for a comparison of the closest Puskesmas to the Puskesmas Tanah. The total number of IUDs used in the North Aceh Health Office consisting of Puskesmas Tanah Pasir using Contraception is 0.9%, Puskesmas Syamtalira Aron is 1.3 %, while for Field Health Centers amounted to 2.4%.

The Puskesmas that uses the least IUD contraception is the Tanah Luas Health Center. Many factors influence the use of MKJP (IUD) both in terms of programs related to service availability, in terms of the environment related to the role of the closest people, and the mass media in providing information and in terms of each individual as a service user. The use of

IUD is strongly influenced by individual factors, because the decision to use or not the type of contraception is at the individual level (BKKBN, 2013).

The results of interviews conducted in the large public health centers with 10 family planning acceptors, there were some women who, despite knowing IUD family planning services, still had mothers who did not use IUD contraceptives because mothers had a poor understanding of IUD birth control. 3 of the 10 acceptors who said that they actually knew about IUD KB but did not use the KB, the reason was because they felt afraid to use it. And 4 out of 10 acceptors said they only knew about the IUD KB but did not understand the advantages and disadvantages due to lack of information. Based on the mother did not choose KB IUD. Furthermore, 3 out of 10 acceptors were not supported by their husbands, because husbands did not provide support to their wives to use IUDs mostly due to their husband's ignorance of contraception. From the results of a preliminary survey data on Family Planning Field Workers (PLKB) in the Extensive Public Health Center in 2017 was 3956 PUS, with active participants of 2053 couples of childbearing age. Based on active family planning participants, IUD contraception (0.1%), Pills (43.4%), injections (44.4), MOP / MOW (0.8%), condoms (7.1%), implants (2.3 %). The achievement is only 57.21% and 42.79% is Unmeet Need.

Based on the description above, with the still gap between PUS acceptors and predispotion factors, IUD contraceptive services, information media and husband's support, the study was interested in knowing the influence of Predisposing, Enabling and Reinforcing factors on EFA participation into IUD family planning acceptors in Tanah Tanah Puskesmas Working Areas. North Aceh Regency 2018.

## Materials and Methods

The type of research used was descriptive analytic with a cross sectional design approach, which aimed to find out the predisposing, enabling and reinforcing effects of PUS participation into IUD KB acceptors. In other words, this study is to look at the relationship between independent variables (knowledge, attitude, culture, quality of family planning services, husband support and information) with the dependent variable, namely the EFA participation to become an IUD KB acceptor. The research was carried out at Tanah Luas Health Center, North Aceh Regency.

## Results

### Univariate Analysis

**Table 1** Frequency Distribution Factors predisposing, enabling and reinforcing PUS participation in the Tanah Luas Health Center Work Area in 2018.

No	Knowledge	Frequency	(%)
1	Less	26	27.4
2	Enough	41	43.2
3	Good	28	29.5
	<b>Total</b>	<b>95</b>	<b>100</b>

  

No	Attitude	Frequency	(%)
1	Negative	36	37.9
2	Positive	59	62.1
	<b>Total</b>	<b>95</b>	<b>100</b>

  

No	Socio-cultural	Frequency	(%)
1	Less	33	34.7
2	Good	62	65.3
	<b>Total</b>	<b>95</b>	<b>100</b>

  

No	KB Service Quality	Frequency	(%)
1	Not available	37	38.9
2	Available	58	61.1
	<b>Total</b>	<b>95</b>	<b>100</b>

  

No	Resources	Frequency	(%)
1	There is no	39	41.1
2	There is	56	58.9
	<b>Total</b>	<b>95</b>	<b>100</b>

  

No	Family support	Frequency	(%)
1	Support	66	69,5
2	Does not support	29	30,5
	<b>Total</b>	<b>95</b>	<b>100</b>

Based on the table above it can be seen that the frequency distribution of EFA attitudes at Tanah Luas Health Center is positive for 59 people (62.1%). Good socio-cultural frequency distribution of 62 people (65.3%). Frequency distribution is available to receive 58 IUD

family planning services (61.1%). Frequency distribution of information sources was 56 people (65.3%) and there were no sources of information 33 people (34.7%). The distribution of frequencies that provide support is 66 people (58.9%).

### Bivariate Analysis

**Table 2 Cross Tabulation of the Influence of Knowledge with the Participation of Infertile Age Couples (PUS) to Become IUD Family Planning acceptors at Tanah Luas Public Health Centers in 2018**

Variable Independent	Category	PUS Participation Becomes IUD KB Acceptor						P value
		Yes		No		total		
		N	%	N	%	n	%	
<b>Knowledge</b>	Less	38,5	16	61,5	26	27,4	10	0,009
	Enough	75,6	10	24,4	41	43,2	31	
	Good	64,3	10	35,7	28	29,5	18	
<b>Attitude</b>	Negative	24	18.3	77	58.8	101	77.1	0,000
	Positive	17	13	13	9.9	30	22.9	
<b>Socio-cultural</b>	Less	33	25.5	51	38.9	84	64.1	0,000
	Good	8	6.1	39	29.8	47	35.9	
<b>KB Service Quality</b>	Not available	28	21.4	17	13	45	34.4	0,000
	Available	13	9.9	73	55.7	86	65.6	
<b>Resources</b>	There is no	14	10.7	58	44.3	72	55	0,000
	There is	27	20.6	32	24.4	59	45	
<b>Family support</b>	Support	38	29	8	6.1	46	35.1	0,000
	Does not support	3	2.3	82	62.6	85	64.9	

Based on the above table Good knowledge with the participation of EFA as many as IUD KB acceptors (64.3%), who did not participate (35.7%). Knowledge is sufficient with the participation of PUS as much as IUD KB acceptors (75.6%), who did not participate (24.4%). Whereas those with less knowledge with EFA participation were IUD KB acceptors (38.5%), who did not participate (61.5%).

From the results of statistical tests obtained p value = 0.009 < 0.05 which means that there is an influence between the knowledge of EFA and the participation of EFA into IUD KB acceptors.

### Analisis Multivariasi

**Tabel 3. Hasil Analisis Regresi Logistik Berganda Model Regresi Logistik Tahap Pertama terhadap Keikutsertaan Pasangan Usia Subur (PUS) Menjadi Akseptor KB IUD di Puskesmas Tanah Luas Tahun 2018.**

Variable	B	Sig.	OR	95% C.I	
				Low	Upper
<b>Knowledge</b>	.468	.612	1.596	.262	9.733
<b>Attitude</b>	-2.886	.040	.056	.004	.871
<b>Socio-cultural</b>	-2.374	.056	.093	.008	1.063
<b>KB Service Quality</b>	-1.778	.244	.169	.008	3.357
<b>Resources</b>	1.167	.374	3.212	.245	42.181
<b>Family support</b>	.270	.861	1.311	.063	27.130
<b>Total</b>	2.592	.001	13.358		

Data in the table shows that the husband's support variable has a value of  $p < 0.05$  while the attitude variable with the value ( $p = 0.040$ ;  $OR = 0.056$ ).

### Discussion

Based on Table 1, it shows that out of 95 respondents with good knowledge of PUS participation as many as IUD KB acceptors (64.3%), who did not participate (35.7%). Knowledge of sufficient EFA participation as much as IUD KB acceptors (75.6%), who did not participate (24.4%). Whereas the knowledgeable participants lacked EFA participation as much as IUD KB acceptors (38.5%), who did not participate (61.5%). From the results of statistical tests obtained  $p$  value =  $0.009 < 0.05$  which means that there is an influence between the knowledge of EFA and the participation of EFA into IUD KB acceptors.

The results of this study are in line with Destyowati's study entitled Effect of maternal knowledge about IUD contraception with interest in IUD contraception in the village of Harjobinangun, Grabak District, Purworejo District in 2011. The results of this study were the level of maternal knowledge about IUD contraception with the interest of IUD contraception in the village of Harjobinangun, Kec. Purworejo District respondents who have knowledge about IUD contraception are 62.5% interested in using an IUD. Respondents who had sufficient knowledge about IUD were 84.0% interested in using an IUD, less than 100% of respondents' knowledge about IUD contraception were not interested in using an IUD. The results above are in line with Notoatmodjo's opinion that one of the factors that determine

behavior about one's health is knowledge, the higher a person's knowledge, the more he can utilize that ability.

High respondent knowledge can illustrate broader insights so as to facilitate and accept new innovations in appropriate decision making. Good knowledge of family planning participants about the nature of family planning programs will affect them in choosing methods or contraceptives used. This opinion is also strengthened by research conducted by haloho (2015) which states that there is an influence between knowledge and the selection of contraceptives in the coastal areas of the Banteng sub-district. This is because knowledge of the respondent influences the participation of PUS in family planning.

Based on research that has been done on the participation of EFA into IUD acceptors in the Tanah Luas Health Center Work area as many as 95 respondents, with the majority of knowledge is 44 people (46.31%), it can be concluded that respondents feel afraid of the risk of using this type of IUD contraception due to respondents knowing that IUD contraceptives should be inserted into the mother's womb. Coupled with false information circulating about IUD contraception that can cause bleeding and disrupt the pleasure of having sex. That is why respondents prefer to use contraceptives such as pills or injections which are considered safer and have less risk. as much as IUD KB acceptors (9.1%), those who did not participate as much (83.3%).

From the results of statistical tests obtained  $p$  value = 0,000 <0,05, which means that there is an influence between the social culture of EFA and the participation of EFA to become IUD KB acceptors. The culture referred to in this study is the habits around the community that can support in making decisions to choose contraceptives such as social and religious, so that the public is aware of the importance of participating in family planning programs where family planning is not because of invitation but because of their own awareness and belief. The above results are in line with Soekanto's opinion that social culture is a complex matter which includes knowledge, beliefs, arts, morals, laws, customs, abilities and habits obtained by humans as members of society.

Socio-culture consists of everything that is learned from normative behavior patterns, which means covering all ways or patterns of thinking, feeling and acting. 63 respondents (66.31%) who were of good or supportive culture but did not use IUD contraceptives, could be due to several factors, among others, because the respondents' knowledge of IUD contraceptive use was still lacking, such as length of use, form, mechanism of action, place of service, who has the right to install, the right time or time to install, the time of revocation

and the weaknesses and strengths. With sufficient knowledge about IUD contraception, it is expected that more and more will choose IUD contraception. Sufficient knowledge about the participation of EFA into IUD acceptors is expected to be more and more who choose IUD contraception.

Another factor that caused the respondents to not use the IUD even though the culture was good in the installation process was afraid of using the IUD because the IUD could go out on its own if it was active, afraid to use the IUD because when menstruation came out longer and more. According to the assumption that good socio-cultural majority researchers are another environmental factor no less important is the public's trust in the government, that the government is a community figure who will try to bring the community towards a better life. The involvement of community leaders will increase the participation of acceptors in the KB movement.

The socio-cultural factors that influence the IUD contraception include, among other things, the local community in the use of IUD contraception, the view that the IUD can affect comfort in sexual influence, the views of certain religions prohibit or prohibit the use of IUDs. Factors of tradition, there is a tradition that only boys can continue their offspring so that women get pregnant several times and the number of children exceeds the recommended program. This is a person's view does not influence to take an action or decision. Demonstrated that out of 95 respondents with quality family planning services available, participation in EFA became as much as IUD KB acceptors (86.2%), those who did not participate were (13.8%). The quality of family planning services is not available for PUS participation as many as IUD KB acceptors (24.3%), those who do not participate (75.7%).

From the results of statistical tests obtained  $p$  value = 0,000 < 0,05, which means that there is an influence between the quality of PUS family planning services and the participation of PUS into IUD KB acceptors. The results of this study are in line with Santosa's study entitled the analysis of factors that influence family planning acceptors in choosing IUD contraceptives in the village of Wonosari, Tanjung Morawa Subdistrict, Deli Serdang District, 2012.

From previous studies, there are many factors that influence family planning acceptors in choosing IUD contraceptives. knowledge, number of children, safety of IUD, availability of IUD contraceptives, place of family planning services, health workers, media information, installation costs and husband support. Based on research that has been carried out for IUD family planning service quality for EFA participation into IUD acceptors in the Tanah Luas

Community Health Center Work area as many as 95 respondents, namely the majority of IUD family planning services are 64 people (67.38%) with EFA participation into IUD KB acceptors, it can be seen from the results that the respondents considered the quality of their services for the IUD KB acceptors who were given the health workers visited was good. This is because the contraceptive service destination is determined by respondents based on certain considerations, where respondents tend to choose the place of contraception service. According to the majority of researchers' assumptions, having a quality service is a motivating factor for mothers who participate as KB IUD acceptors.

### **Conclusion**

There is the influence of knowledge with the participation of fertile age couples (PUS) to become IUD family planning acceptors in the work area of Tanah Luas Puskesmas North Aceh District in 2018. This can be seen from the large number of knowledgeable pus women who simply choose to become IUD KB acceptors. There is an influence of attitude with the participation of fertile age couples (PUS) into IUD family planning acceptors in the work area of Tanah Luas Puskesmas North Aceh District in 2018. This can be seen from the large number of women who have positive attitudes who choose to become IUD KB acceptors. There is a socio-cultural influence with the participation of fertile age couples (PUS) to become IUD KB acceptors in the work area of the Tanah Luas Puskesmas in North Aceh District in 2018. This can be seen from the large number of social and cultural pus women who choose to become IUD KB acceptors. There is an effect of the quality of family planning services with the participation of fertile age couples (PUS) into IUD family planning acceptors in the work area of Tanah Luas Community Health Center North Aceh District in 2018. This can be seen from the many quality family planning services available and pus women choose to become IUD KB acceptors. There is the influence of husband support with the participation of fertile age couples (PUS) to become IUD KB acceptors in the work area of Tanah Luas Puskesmas North Aceh District in 2018. This can be seen from the many husbands who support women who choose to become IUD KB acceptors. There is the influence of information sources with the participation of fertile age couples (PUS) to become IUD KB acceptors in the work area of Tanah Luas Puskesmas North Aceh District in 2018. This can be seen from the many available sources of information so that pus women choose to become IUD KB acceptors.

It is also concluded that the most dominant variable influencing the participation of IUD family planning acceptors based on the results of the study is the attitude of women of childbearing age.

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