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The effect of knowledge and attitude of family planning acceptances on iud contraception selection during the COVID-19 pandemic



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ABSTRACT

Introduction: Although several studies on the influence of knowledge and education of family planning (KB) acceptors on the selection of intrauterine contraceptive devices (IUDs) have been carried out previously, research on knowledge and attitudes of family planning acceptors towards the selection of IUDs during the COVID-19 pandemic is still limited. The purpose of this study was to assess the effect of knowledge and attitudes of family planning acceptors on the selection of an intrauterine device (IUD) during the Covid-19 pandemic.

Methods: The data used in this study were obtained from filling out questionnaires involving 162 respondents. This study was analyzed descriptively analytically with the parameters of knowledge and attitudes towards the selection of intrauterine devices (IUD) using a bivariate table.

Results: This study showed that 38.4% had sufficient knowledge, only 1.2% chose to use the IUD with a p-value of 0.348 > 0.05 and of the 66% who had a positive attitude only 2.5% chose to use the IUD with a p-value 0.146 > 0.05.

Conclusion: Although family planning acceptors have sufficient knowledge and a positive attitude, it does not affect the selection of the IUD as an effective long-term contraceptive, so the use of other contraceptives is still recommended as an effort to control fertility according to the needs of the acceptor during the Covid pandemic.

Keywords: Knowledge, Attitude, IUD Selection.

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INTRODUCTION

The population problems faced by Indonesia are a large population with a relatively high population growth rate, uneven population distribution, a young age structure, and the quality of the human resources that still need to be improved. Efforts to suppress the fertility rate must continue until it can reach 2.28% in 2019, accompanied by an increase in the percentage of contraceptive use (Contraceptive Prevalence Rate / CPR) to 66%. Through this strategic target, the BKKBN must be able to increase the use of contraception, because one of the important indicators in the success of the family planning and family development population program (KKBPK) is the prevalence of family planning.1,2

In its implementation, efforts are made so that all methods and contraceptives provided and offered to the community provide optimal benefits by minimizing side effects and complaints caused. Intrauterine contraception (IUD) is highly effective as a method of contraception. However, the number of acceptors is lower than other types.

Although research on the selection of contraceptives in terms of various influencing factors including the level of knowledge and attitudes of acceptors has been widely carried out, research on the selection of IUD contraceptives seen from the level of knowledge and attitudes of acceptors during the Covid-19 pandemic has not been widely carried out.

METHODS

Study Design

This study is a descriptive-analytic study with a cross-sectional approach, which describes the knowledge and attitudes of family planning acceptors regarding the selection of IUD contraception only once.

Data Collection

The population in this study were all acceptors who visited for contraceptive services at PMB Maulina Hasnida, M.MKes during May – December 2020. The sample was taken by Simple Random several 162 family planning acceptors who were willing to become respondents with inclusion criteria, namely: respondents who already had children, family planning acceptors, both IUD, and non-IUD, who can read, write, and are mentally healthy. This research was conducted by giving a knowledge questionnaire of 25 questions and 10 attitude questions to the respondents.

Data Analysis

The research data were analyzed using Chi-Square with $\alpha = 0.05$.

RESULTS

This data describes the characteristics of respondents which include:

Table 1 below shows that of the 162 family planning acceptors, most of them are aged 20–30 years, 80 are family planning acceptors (49.4%), most of them are > 30 years old, 75 are family planning acceptors (46.2%) and only a small part is <20 years old. family planning acceptors (4.3%).

Table 2 below shows that of the 162 family planning acceptors, most of them were multiparous, with as many as 112 family planning acceptors (69.1%), most of them were primiparous as many as 49 family planning acceptors (30.3%) and a small proportion of grande multiparas were 1 family planning acceptor (0.6%).

Table 3 shows that of the 162 KB acceptors, most of them had received information about the Intra Uterine Device (IUD) as many as 135 KB acceptors (83.3%) and a small portion had never received information about the Intra Uterine Device (IUD) as many as 27 KB acceptors (16.7%).

This data describes knowledge about the Intra Uterine Device (IUD) and crosstabulation of the relationship between knowledge and attitudes of family planning acceptors about the Intra Uterine Device (IUD).

Table 4 below shows that of the 162 family planning acceptors, almost most of the respondents have sufficient knowledge of 59 family planning acceptors (36.4%), almost most of the respondents have good knowledge of 55 acceptors (34%) and almost some have less knowledge of 48 family planning acceptors (29.6%).

Table 5 shows that out of 162 family planning acceptors, most of them had a positive attitude, 107 family planning acceptors (66%) and almost 55 family planning acceptors had a negative attitude (34%).

In table 6, there are 47 family planning acceptors (29.0%) who have good knowledge of the IUD, 2 family planning acceptors (1.2%), and 45 family planning acceptors (27.8%) who do not choose to use the IUD. There were 62 family planning acceptors who chose to use the IUD, 2 family planning acceptors (1.2%),

Table 1. Distribution of the frequency of family planning acceptors by age.

No.	Age	Frequency	Percentage
1.	< 20 years	7	4,3
2.	20 – 30 years	80	49,4
3.	> 30 years	75	46,2
	Total	162	100

Table 2. Frequency distribution of family planning acceptors based on parity.

No.	Parity	Frequency	Percentage	
1.	Primipara	49	30,3	
2.	Multipara	112	69,1	
3.	Grande Multipara	1	0,6	
	Total	162	100	

Source: Primary and secondary data, 2020

Table 3. Frequency distribution of family planning acceptors based on information about the Intra Uterine Device (IUD).

No.	Information	Frequency	Percentage
1.	Ever Got	135	83,3
2.	Never Got	27	16,7
	Total	162	100

Source: Primary and secondary data, 2020

Table 4. Frequency distribution of family planning acceptors based on knowledge.

No.	Knowledge	Frequency	Percentage	
1.	Kurang	48	29,6	
2.	Cukup	59	36,4	
3.	Baik	55	34	
	Total	162	100	

Source: Primary and secondary data, 2020

Table 5. Frequency distribution of family planning acceptors' attitudes about the IUD.

No.	Attitudes	Frequency	Percentage
1.	Positif	107	66
2.	Negatif	55	34
	Total	162	100

Source: Primary and secondary data, 2020

and those who did not choose to use an IUD as many as 60 family planning acceptors (37%). There were 53 KB acceptors who did not choose to use the IUD (0.0%) and 53 acceptors who did not choose to use the IUD (32.7%). The results of the Chi-Square statistical test analysis were obtained (p-value 0.348 > 0.05), then it was found that there was no significant relationship between knowledge and the selection of IUD contraceptive devices during the Covid-19 pandemic.

Table 7 shows that of the 162 family planning acceptors who have a positive attitude, 102 family planning acceptors (66%), who have a positive attitude choose

to use the IUD, 4 family planning acceptors (2.5%) and those who have a positive attitude do not choose to use the IUD as many as 103 acceptors. KB (63.6%). Family planning acceptors who have a negative attitude are 55 family planning acceptors (34%), none of them who have a positive attitude choose to use the IUD (0%) and 55 family planning acceptors who have a negative attitude do not choose to use an IUD (34%). The results of the Chi-Square statistical test analysis were obtained (p-value 0.146 > 0.05), so there was no significant relationship between attitude and the selection of IUD contraceptives during the Covid-19 pandemic.

DISCUSSION

Of the 162 family planning acceptors, most of them were aged 20 – 30 years, 80 were family planning acceptors (49.4%), almost half were > 30 years old, 75 were family planning acceptors (46.2%) and only a small part was aged < 20 years, 7 were family planning acceptors (4, 3%). Age is very influential in regulating the number of children born. The older a person is, the more mature a person is in thought and behavior. According to Bernadus et al 2013 said that age above 20 years is a period of spacing, preventing pregnancy so the choice of contraception is more directed to long-term contraception.³

Of the 162 family planning acceptors, most of them were multiparous as many as 112 family planning acceptors (69.1%), almost some were primiparous as many as 49 family planning acceptors (30.3%) and a small proportion of grande multiparous was 1 family planning acceptor (0.6%). The number of children is one of the most fundamental factors influencing the behavior of EFA in using contraception. In line with the BKKBN slogan "two children are healthier", the use of IUD contraception is an effective long-term contraceptive method in controlling the population. According to Hartanto in 2003 it was said that EFAs between the ages of 20-35 years are recommended to use longterm effective contraceptive methods, one of which is the IUD.1,4

Of the 162 family planning acceptors, most of them had received information about the Intra Uterine Device (IUD) as many as 135 KB acceptors (83.3%) and a small portion had never received information about the Intra Uterine Device (IUD) as many as 27 KB acceptors (16.7%).

In table 6, there are 47 family planning acceptors (29.0%) who have good knowledge of the IUD, 2 family planning acceptors (1.2%), and 45 family planning acceptors (27.8%) who do not choose to use the IUD. There were 62 family planning acceptors who chose to use the IUD, 2 family planning acceptors (1.2%), and those who did not choose to use an IUD as many as 60 family planning acceptors (37%). Less knowledgeable acceptors as many as 53 family planning acceptors, none of them chose to use the IUD (0.0%).

Table 6. Frequency Distribution of Knowledge with IUD Selection During the Covid-19 Pandemic.

		Selection IUD		
No.	Knowledge	Choosing an IUD Percentage	Not Choosing an IUD Percentage	Total Percentage
1.	Good	1,2	27,8	29,0
2.	Enough,	1,2	37,0	38,3
3.	Less	0,0	32,7	32,7
	Total	2,5	97,5	100

 $\rho = 0,348$ $\alpha = 0.05$

Table 7. The Relationship between the Attitude of Family Planning Acceptors and the Selection of IUD Contraceptives During the Covid-19 Pandemic.

		Selec	Total	
No.	Attitude	Choosing an IUD Percentage	Not Choosing an IUD Percentage	Total Percentage
1.	Positif	2,5	63,6	66,0
2.	Negatif	0,0	34,0	34,0
	Total	2,5	97,5	100

 $\rho = 0, 146$ $\alpha = 0,05$

This is in line with Susilo's research in 2016 which stated that there was no relationship knowledge between mother's attitudes in choosing IUD contraception (IntraUterine Devices) at the Banyuputih Health Center, Sumberwaru Village, Situbondo Regency with a value of $(\alpha =$ 0.05) p > 0.679.5 During this pandemic, various policies were also made by the Indonesian government to control the rate of spread of Covid-19 cases, one of the policies felt by the community directly was an appeal to stay at home, prevention of pregnancy is also better done during this Covid-19 Pandemic, however, Due to the difficulty of accessing health facilities or meeting directly with health workers during the Covid-19 pandemic, our husband and wife are advised to use the PIL KB as a temporary contraceptive.⁶

Of the 162 family planning acceptors who have a positive attitude, 102 family planning acceptors (66%), who have a positive attitude choose to use the IUD as many as 4 family planning acceptors (2.5%) and those who have a positive attitude do not choose to use an IUD as many as 103 family planning acceptors (63, 6%). Family planning acceptors who have a negative attitude are 55 family planning acceptors (34%), none of them who have a positive attitude choose to use the IUD (0%) and 55 family planning acceptors who have a

negative attitude do not choose to use an IUD (34%). The results of the Chi-Square statistical test analysis were obtained (p-value 0.146 > 0.05), so there was no significant relationship between Attitude and the Selection of IUD Contraceptives During the Covid-19 Pandemic Period at PMB Maulina Hasnida Surabaya. This is not in line with Tiara Sari's research in 2016, which stated that there was a relationship between knowledge and mother's attitude in choosing long-term contraceptive methods at WUS with the results of the analysis using the Spearman rank correlation statistical test, p-value of $0.017 (<\alpha = 0.05).^{7}$

According to Rensis Likert (1932) in Notoatmodjo, 2005 a person's attitude towards an object is a feeling of supporting or taking sides (positive) or feelings of not supporting or taking sides (negative) on a particular object.8 According to Rensis Likert (1932) in Notoatmodjo, 2005 a person's attitude towards an object is a feeling of supporting or taking sides (positive) or feelings of not supporting or taking sides (negative) on a particular object.9 Attitude is also a person's closed response to a certain stimulus or object, which already involves the opinion and emotion factors concerned (happy-not happy, agree-disagree, good-bad, and so on). According to Champbell (1950) in

Notoatmodjo, 2005 defines very simply, namely "An individual's attitude is a syndrome of response consistency with regard to object". So it is clear, here it is said that attitude is a syndrome or collection of symptoms in response to a stimulus or object so that the attitude involves thoughts, feelings, attention, and other psychological symptoms. Attitude is a tendency to approach or avoid, positive or negative towards various social situations, whether it is an institution, a person, a situation, an idea, a concept and so on. 11

From the discussion above, it can be seen that the attitude of family planning acceptors about the IUD is very important to be considered by health workers, especially midwives because it will affect the behavior of family planning acceptors about the next IUD. Therefore, it is necessary to continue to provide information to family planning acceptors about the IUD, either through mass media or electronic media, the attitude of a health worker also brings messages to family planning acceptors about the IUD.

CONCLUSION

Most of the family planning acceptors have sufficient knowledge of 59 family planning acceptors. Most family planning acceptors have a positive attitude 107 family planning acceptors. There is no significant relationship between Knowledge and Attitude with the Selection of IUD Contraceptives During the Covid-19 Pandemic Era.

DISCLOSURE

Author Contribution

All authors have contributed to this research process, including conception and design, analysis and interpretation

of the data, drafting of the article, critical revision of the article for important intellectual content, final approval of the article, collection and assembly of data.

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Conflict of Interest

There is no conflict of interest for this manuscript.

Ethical Consideration

This research was approved by the Health Research *Ethics* Committee of Nahdlatul Ulama Surabaya University. Letter of exemption Ref. No. 2367/KEPK/UNUSA//2020

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