

## **The Influence Of Economic Status In The Selection Of Iud Contraceptive Devices In Sengkol Public Health Center, Pujut District, District Central Lombok**

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### **ABSTRACT**

According to the World Health Organization (WHO), family planning is an attempt to measure the number and distance of children desired. In order to achieve this, several ways or alternatives are made to prevent or delay pregnancy. These include contraception or pregnancy prevention and family planning (WHO, 2016). Based on the results of interviews with the coordination midwife at the Sengkol Public Health Center, a survey data of 15 people showed that there were still many women who were not interested in using an IUD. The purpose of this study was to analyze the effect of economic status on the interest in choosing IUD contraceptives for family planning acceptors in the Sengkol Community Health Center in 2023. Based on the scope of the study, including the type of quantitative research with a correlation design, that is, it only connects between research variables with cross-sectional research. The research was the Sengkol Community Health Center with the population in this study were all breastfeeding mothers who visited the Sengkol Community Health Center in 2023 with samples taken using the Sampling Purposive Sampling technique, total of 22 respondents. The independent variable in this study is economic status with an ordinal scale and the variable depending on the interest in choosing an IUD contraceptive device on an ordinal scale using a questionnaire research instrument that is distributed directly to respondents. In collecting data from respondents, was processing the data by editing, coding, scoring, tabulating, data entry, and cleaning. The data analysis in this study used the chi square test. In the chi square test analysis, it was found that  $p\text{-value} = 0.003 < \alpha = 0.05$  ( $p\text{-value} < \alpha$ ) which means that  $H_0$  is rejected and  $H_1$  is accepted, which means that there is an effect of economic status on maternal interest in IUD family planning.

**Keywords:** Economic Status, Interests, IUD

### **INTRODUCTION**

Intrauterine contraceptive devices (IUD), also called spiral or coil is a device contraception small, often 'T' shaped, containing copper or levonorgestrel, which is inserted into the uterus. It is a form of reversible long-term contraception and is the most effective method of birth control. The IUD is the most recommended method of delaying pregnancy to prevent pregnancy, especially to keep the distance between pregnancies. According to *World Health Organization* (WHO) Family planning is an attempt to measure the desired number and spacing of children. In order to achieve this, several ways or alternatives are made to prevent or delay pregnancy. These methods include contraception or prevention of pregnancy and family planning (WHO, 2016).

Based on the results of the 2013 Indonesian demographic and health survey, it was found that the TFR in West Nusa Tenggara was 2.3, exceeding the RJMP target of 2.36. West

Nusa Tenggara's Contraceptive Prevalence Rate (CPR) is 62.4 and the RPJM target is 60.1%, while West Nusa Tenggara's unmet need is 6.7% which is still close to the RPJM target of 6.5%. Meanwhile, participation in MPJK family planning in West Nusa Tenggara is still low at 19.1% of the national target of 27.5% (Suparmi, 2013). Based on the results of interviews with the coordinating midwives of the Sengkol Health Center, survey data of 15 users of family planning acceptors from January to June 2019 in the Sengkol area, researchers will conduct research related to the relationship between economic level and the use of intrauterine contraceptives. Based on the results of interviews with the coordinating midwife at the Sengkol Health Center in August 2018 the results between socioeconomic status and IUD use from 22 respondents who used IUDs, most used by respondents with high socioeconomic status (PNS / Private) as many as 16 respondents (45.7%), while those with low socioeconomic status (Farmers) were 1 respondent (12.5%) and moderate (Traders) 5 respondents (11.1%). In addition, the use of non-IUD contraception was mostly in moderate socioeconomic status at 88.9% or 40 respondents. The consideration factor that forms the basis of this research is the factor of a person's economic status in choosing contraceptives is cost, where the cost of obtaining contraception has a large effect on the choice of contraceptives (Hartanto, 2015). The aim of this research is to analyze the effect of economic status on the interest in choosing IUD contraception for family planning acceptors in the Sengkol Health Center area in 2023.

## METHODS

Based on the scope of research including the type of research quantitative by design correlation that is only connecting between research variables with the type of cross-sectional research. The research was conducted from December 2022 to May 2023 in the Sengkol Health Center area. The population in this study were all breastfeeding mothers who visited the Sengkol Health Center area in 2023 with samples taken using the sampling technique using accidental *sampling* which amounted to 22 respondents. The independent variable in this study was economic status on an ordinal scale and the variable depending on interest in choosing IUD contraception on an ordinal scale using a questionnaire research instrument which was directly distributed to respondents. In this study, prior to data collection, submit a letter of introduction from the Faculty of Health Sciences Midwifery Study Program, Institut Ilmu Kesehatan STRADA Indonesia, then submit it to the hospital to request permission for initial data collection. After obtaining permission, the researcher then asked the respondent's permission to be used as a subject in conducting a preliminary study. How to collect data by using observation. Researchers proceed to the preparation of the proposal. After the research proposal is carried out, it is then followed by the preparation of a thesis. Furthermore, data processing is carried out which includes editing, *coding*, *scoring*, *coffin*, *cleaning*, *entry data* and analyzed using test *chi squares* by using spss 16 and a coefficient level of 0.05%. When  $p \text{ value} < \text{level of significant}$  (0.05) so the conclusion is that  $H_0$  is rejected and  $H_1$  is accepted, meaning that there is an influence of economic status on the interest in choosing IUD contraception for family planning acceptors in the Sengkol Health Center area of Central Lombok, West Nusa Tenggara in 2023.

## RESULT

### Economic Status

Table 3. Frequency distribution of respondents based on Economic Status

No	Income	F	%
1	High	6	27
2	Medium	10	45
3	Low	6	27
	<b>Total</b>	<b>22</b>	<b>100</b>

Source: Primary research data 2023

Based on table 3 above, it shows that of the 22 respondents, the majority (45%) have middle income, namely 10 respondents.

### Interest of UID

Table 4. Frequency distribution of respondents based on *Interest of UID*

No	Interest	F	%
1	Interest	4	18
2	Not Interested	18	82
	<b>Total</b>	<b>22</b>	<b>100</b>

Source: Primary research data 2023

Based on table 4 above, it shows that of the 22 respondents, the majority (82%) were not interested in using IUD contraception, namely 18 respondents.

### The Influence of Economic Status on Mother's Interest about IUD

#### Income Interest IUD Cross Tabulation

		Threatens IUD		Total
		Interest	Not Interested	
Income	High	Count	1	5
		% Of Total	4.5%	22.7%
	Medium	Count	3	7
		% Of Total	13.6%	31.8%
	Low	Count	0	6
		% Of Total	.0%	27.3%
Total		Count	4	18
		% Of Total	18.2%	81.8%

On test analysis of *chi squares* obtained p-value = 0.003 <  $\alpha$  = 0.05 (*p-value* <  $\alpha$ ) which means  $H_0$  rejected and  $H_1$  accepted which means that there is an influence of economic status on the mother's interest in IUD KB.

## DISCUSSION

### **Economic Status**

Based on table 3 above, it shows that of the 22 respondents, the majority (45%) have middle income, namely 10 respondents.

Economic status is the position or position of a person in society, that socio-economic status is a picture of a person's condition or the corner of society from a social perspective, this picture is like level, education, income and so on. Economic status is the position or position of a person in society, that socio-economic status is a picture of a person's condition or the corner of society from a social perspective, this picture is like level, education, income and so on. Economic status is most likely a form of family lifestyle. Adequate family income will support the growth and development of children, because parents can provide all the needs of children, both primary and secondary. According to Varney, namely the ability of women or married couples to be more effective in family planning can be increased or hampered by economic status (4). This means that respondents who have a high economic level will prefer contraceptive methods that are more effective than respondents who have a low economic level.

Respondents in the Sengkol Health Center area of Central Lombok, West Nusa Tenggara in 2020 are mostly middle income, this is because both husband and wife have income.

### **Mother's interest in IUD contraception**

Based on table 4 above, it shows that of the 22 respondents, the majority (82%) were not interested in using IUD contraception, namely 18 respondents.

The things that encourage most couples of childbearing age to choose contraception are due to suitability, limited costs, the many types of contraceptive choices, which are more familiar to many people. Factors that influence the choice of contraceptives are socio-cultural, occupational and economic factors, religion, law, physical, relationship, psychological and current health status and genetic history (Pradini et al., 2012). According to Isnaini Avia Nita's research (2018) The results of bivariate analysis with the chi square test showed that socioeconomic status had a significance value of 0.001 and the closeness of the relationship was obtained  $C_{max} - C (0.338) < C (0.362)$ , this means the degree of closeness of the relationship between the independent variables (socioeconomic) and the dependent variable (IUD use) closely. Based on these bivariate results, it can be concluded that there is a relationship between socioeconomic status and IUD use ( $p > 0.05$ ).

Based on the data above, most respondents are not interested in using IUD KB, this is due to a lack of information about IUD KB, so it is hoped that health workers will always provide information to the community about IUD KB. In addition, respondents who used the type of effective contraception were selected because of the success rate of the tool. But also for respondents who chose non-effective contraceptives because of the suitability of the contraceptive itself and IUD KB whose use required medical procedures and internal examinations so that respondents were taboo about this.

### **Effect of Economic Status on Mother's interest in IUD contraception**

On test analysis of chi squares obtained  $p\text{-value} = 0.007 < \alpha = 0.05$  ( $p\text{-value} < \alpha$ ) which means  $H_0$  rejected and  $H_1$  accepted which means that there is an influence of economic status on the mother's interest in IUD KB

This research is in line with Hartanto's theory that experience shows that when choosing contraception, prospective acceptors are faced with a supermarket, where prospective acceptors can choose the method of contraception they want themselves. Factors in choosing a contraceptive method are partner factors, health factors and contraceptive method factors (effectiveness, minor side effects, losses, complications, and costs). Based on the results of Eny Astuti's research (2017), it was found that knowledge factors influenced mothers' interest in

using IUD contraception by 58 respondents (58.94%), religious factors 76 respondents (80%), economic factors 58 respondents (61.05%), cultural factors as many as 63 respondents (66.31%). From the data above it was found that all factors influenced the mother's interest in using IUD contraception, because some respondents did not know the success of using IUD contraception. So it can be concluded that the provision of information and education has not been carried out properly by health workers, in this case, midwives

In this study, economic status influences the choice of IUD contraception. The choice of contraception is basically the client's choice voluntarily without coercion, which is based on rational considerations from the point of view of the purpose or technique of use, medical health conditions, and the socio-economic conditions of each partner. So that the economic level also affects the choice of contraceptives.

## CONCLUSION

Of the 22 respondents, the majority (45%) had middle income, namely 10 respondents. of the 22 respondents, the majority (82%) were not interested in using IUD contraception, namely 18 respondents. On test analysis of *chi squares* obtained  $p\text{-value} = 0.003 < \alpha = 0.05$  ( $p\text{-value} < \alpha$ ) which means  $H_0$  rejected and  $H_1$  accepted which means that there is an influence of economic status on the mother's interest in IUD KB.

## REFERENCES

- Alawiyah, Syarifatul. (2009). *Dinamika Keyakinan Ibu Hamil Terhadap Mitos- Mitos Kehamilan (Studi Kasus di Dusun Tumpangrejo, Desa Nganep, Kecamatan Karangploso, Kabupaten Malang)*. Universitas Negeri Malang : Fakultas Ilmu Pendidikan, Jurusan Bimbingan Konseling dan Psikologi
- Al-Tirmidzi. *kitab al-Rodho'* no. 1082, Ahmad, *Kitab Baqi Musnad al-Muhtsirin* no. 7095, Ibn Majah, *Kitab al-Nikah* no. 1968.
- Ana, S. (2010). *Lengkap segala hal trimester pertama kehamilan anda Fase-fase paling menedebarkan* (1st ed.). Yogyakarta: Buku Biru.
- Arikunto, S. (2011). *Manajemen Penelitian* (11th ed.). Jakarta: Rineke Cipta.
- Artikel Departemen Kesehatan Republik Indonesia <http://www.depkes.go.id/article/view/17081700004/-inilah-capaian-kinerja-kemenkes-ri-tahun-2015--2017.html> diakses pada tanggal 22 April 2018 Pukul 20:20 WITA.
- Astuti, D. P. T., & Sari, K., K. A. (2017). Tingkat Pengetahuan dan Perilaku Antenatal Care Ibu Hamil terhadap Kehamilan dengan Risiko di Wilayah Kerja UPT Puskesmas I Negara Kabupaten Jembrana Tahun 2016. *Jurnal Fakultas Kedokteran Universitas Udayana*, 6(6) : 1–9.
- Departemen Kesehatan Republik Indonesia (2009) tentang pembagian umur ibu hamil berdasarkan kategori berisiko dan tidak berisiko.
- Dhevy, F. N., & Aufarul, M. (2017). Implementasi Program Kesehatan Ibu dan Anak Bidang Pelayanan Antenatal Care dan Nifas di Puskesmas Bandarharjo Kota Semarang. *Departemen Administrasi Publik Fakultas Ilmu Sosial Dan Ilmu Politik Universitas Diponegoro*, 6(4) : 1-18.
- Effendy, D. N. (1998). *Dasar-dasar keperawatan kesehatan masyarakat* (Kedua). Jakarta: Penerbit Buku Kedokteran EGC.

- Fitrayeni, dkk. (2015). Penyebab Rendahnya Kelengkapan Kunjungan Antenatal Care Ibu Hamil Di Wilayah Kerja Puskesmas Pegambiran. *Jurnal Kesehatan Masyarakat Universitas Andalas*, 10(1) : 101-107
- Gamelia, E., Sistiarani, C., & Masfiah, S. (2013). Determinant of Mother's Prenatal Care Behaviour. *National Public Health Journal*, 8(3) : 133-138.
- Green, L. (2005). *Health Education Planing A Diagnostik Approach*. The Johns Hapkins niversity: Mayfield Publishing Company.
- Hasana, U., Dkk. (2014). Faktor Yang Berhubungan Dengan Pemanfaatan Antenatal Care Di Puskesmas Antara Kota Makassar. *Jurnal Fakultas Kesehatan Masyarakat Universitas Hasanuddin*, 1-8