

Factors Influencing Intrauterine Contraceptive Device Uptake

Ricca Nophia Amra, Rizka Sititah Rambe, Fitriani Bancin

Midwifery Academy of Medica Bakti Persada, Aceh, Indonesia

Received: 19 September, 2023; Accepted: 04 October, 2023; Available online: 16 November, 2023

ABSTRACT

Background: The Intrauterine Contraceptive Device (IUD) is an effective long-term reversible contraceptive method suitable for women of reproductive age. However, its uptake is low in Aceh province, Indonesia. This study aimed to analyze factors influencing IUD uptake among women of reproductive age in Aceh.

Subjects and Method: This was a case control study conducted at the Simpang Kiri Health Center, Subulussalam, Aceh from January to June, 2023. A total of 106 women of reproductive age were selected for this study. The dependent variable was IUD uptake. The independent variables were age, education, knowledge, parity, attitudes, sociodemographic variable, and the role of health personnel. Data on IUD uptake were obtained from medical records in Subulussalam District Health Office and the Simpang Kiri Health Center, in Aceh. The other data were collected by questionnaire and observation. The data were analyzed by multiple logistic regression.

Results: Factors increasing the IUD uptake in women of reproductive age were good knowledge (OR= 11.11; 95% CI= 3.29 to 37.58; $p < 0.001$) and the active role of health personnel (OR= 8.36; 95% CI= 2.73 to 25.61; $p < 0.001$). Positive attitude increased IUD uptake, but it was statistically non-significant (OR= 1.26; 95% CI= 0.39 to 3.97; $p = 0.697$).

Conclusion: Factors increasing the IUD uptake in women of reproductive age are good knowledge and the active role of health personnel. Positive attitude increases IUD uptake, but it is statistically non-significant.

Keywords: intrauterine contraceptive device, case control, reproductive.

Correspondence:

Ricca Nophia Amra. Midwifery Academy of Medica Bakti Persada. Jl. Pinang Baris Desa Lae Oram Dusun Indah No. 193, Simpang Kiri, Subulussalam, 24781, Aceh, Indonesia. Email: ricca.ubudiyah@gmail.com. Mobile: 082294425839.

Cite this as:

Amra RC, Rambe RS, Bancin F (2023). Factors Influencing Intrauterine Contraceptive Device Uptake. *J Matern Child Health*. 08(06): 696-705. <https://doi.org/10.26911/thejmch.2023.08.06.03>



© Ricca Nophia Amra. Published by Master's Program of Public Health, Universitas Sebelas Maret, Surakarta. This open-access article is distributed under the terms of the [Creative Commons Attribution 4.0 International \(CC BY 4.0\)](https://creativecommons.org/licenses/by/4.0/). Re-use is permitted for any purpose, provided attribution is given to the author and the source is cited.

BACKGROUND

The main problem faced in Indonesia is in the field of population where population growth is still high. Such a population situation has made efforts to improve and equalize people's welfare difficult. The higher the population growth, the greater the efforts made to maintain people's welfare.

According to data from the 2017 Indonesian Demographic Health Survey (SDKI), it shows that the TFR is 2.4, meaning that each Indonesian woman gives birth to an average of 2.4 children during her reproductive period. This shows a decrease compared to 2012 with a TFR of 2.6. This decrease in TFR was also followed by an

increase in the contraceptive prevalence rate (CPR) from 61.9 percent in 2012 to 63.6 percent in 2017 (SDKI, 2017).

The Long-Term Contraceptive Method (MKJP) can be used for a long period of time, more than 2 years, is effective and efficient for the purpose of spacing pregnancies for more than 3 years or terminating pregnancies in couples who no longer want to have more children. The types of methods included in MKJP are Female Surgical Methods (MOW), Male Surgical Methods (MOP), IUDs and Implants. National MKJP prevalence achievement in 2022, amounting to 22.6% of the target in 2024 (BKKBN, 2022).

Based on Indonesian health profile data in 2018, it was found that PUS was 37,338,265 people and 23,606,218 (63.22%) were active family planning acceptors, 6,776,415 (18.15%) had used family planning and 6,966 had never used family planning. .632 (18.63%). There were 1,688,685 (7.15%) PUS who were family planning acceptors based on the type of contraceptive device for IUDs, 655,762 (2.78%) MOWs, 124,262 (0.53%) MOPs, 1,650,227 (6.99%) implants, 1,650,227 (6.99%) injectables 14,817,663 (62.77%), condoms 288,388 (1.22%) and pills 4,069,844 (17.24%). The prevalence of modern family planning is 62.39% and the percentage of EFA participants who use MKJP is 17.45%. Meanwhile, Unmed need data which had a target of 10.26 was found to be realized at 17.5 (58.63%) and the target for active MKJP participants was 21.5 and the realization was found to be 21.7 (99.07%) (Ministry of Health, 2018).

Based on data obtained from the Simpang Kiri Community Health Center's family planning program, Subulussalam City, until December 2022, it was found that PUS was 4,324 and PUS 4T (too young, too old, too many children, too close between

pregnancies and too far between pregnancies) was 865, active family planning participants were 2,498 participants Old family planning 2,243, new family planning participants 275 (11%), postpartum 45 people (1.8%), PUS 4T with KB 150, drop out (drop out of family planning acceptors without reason) 22 people, condoms 107 people (4.2%), Pills 1,105 people (44.2%), injected 1,270 people (50.8%) MOP 0, MOW 2 people and IUD 32 people (1.2%). From this data, it can be seen that there is still a low rate of PUS mothers using the IUD type of contraception.

This study aimed to determine the factors that influence the use of IUD contraception in the Simpang Kiri Community Health Center Working Area, Subulussalam City in 2023.

SUBJECTS AND METHOD

1. Study Design

This was a case-control study conducted in the Simpang Kiri Community Health Center, Subulussalam, Ace, Indonesia from January to June 2023.

2. Population and Sample

The population in this study were all reproductive age women in the Simpang Kiri Community Health Center. The sample in this study was divided into IUD and Hormonal groups with a ratio of 1:1 for the IUD and Hormonal groups. A sample size of 106 women of reproductive age was selected using purposive sampling and divided into two groups equally. 53 women with IUD (case group) and 53 women with hormonal contraceptives (control group).

3. Study Variables

The dependent variable was IUD uptake. The independent variables were age, education, knowledge, parity, attitude, socio-demographics, and role of health personnel.

4. Operational Definition of Variables

The use of an IUD is the public's willingness to use a contraceptive device that is inserted into a woman's uterine cavity which works to prevent sperm from entering the fallopian tubes. Code 0 to use. Code 1 is not to use.

Age is the age of a person which is calculated from the year of birth. Code 0 for 20-35 years. Code 1 for 36-60 years.

Education is the level of education that has been obtained and proven by a diploma. Code 0 for high. Code 1 for low (elementary school, middle school, high school).

Parity is the number of living children. Code 0 for 1-2 people. Code 1 for > 2 people.

Knowledge is the result of someone knowing about the IUD. Code 0 for good. Code 1 for less.

Attitude is a closed response from a person regarding the IUD. Code 0 is positive. Code 1 is negative.

Sociodemographic is the distance traveled to reach health services. Code 0 for close. Code 1 for remote.

The role of health personnel is the participation of health personnel in health efforts to use the IUD. Code 0 for no role. Code 1 for none.

5. Study Instruments

This study instrument uses a questionnaire. The knowledge questionnaire consists of 10 questions, the role of health personnel consists of 5 questions using the Guttman scale, the attitude questionnaire uses a Likert scale consisting of 10 questions, data processing techniques include editing, coding, data entry, cleaning and tabulating techniques.

5. Data analysis

Data analysis in this study is univariate, bivariate and multivariate analysis. Univariate analysis consists of frequency distribution and percentage of each variable.

Bivariate analysis used the chi-square statistical test with a significance level of 5% ($\alpha = 0.05$). Multivariate analysis using multiple logistic regression test (multiple logistic regression).

6. Research Ethics

Study ethics are using informed consent, anonymity, confidentiality. A letter of approval for ethical permission for the study was obtained from the Health Research Ethics Committee of the Medica Bakti Persada Midwifery Academy. No.003/YCKB/AKBID-MBP/2022, on 20 May 2022.

RESULTS

Based on Table 1, it can be seen that the majority of subjects in the IUD group were of productive age, 47 people (88.6%) and the majority in the Hormonal group were 48 people (90.5%) of productive age. Based on subject education, the majority in the IUD group was low, 37 people (69.8%) and the majority in the Hormonal group had low education, 47 people (88.6%). Based on the sociodemographics of the subjects, the majority in the IUD group were 38 people close (71.6%) and the majority in the Hormonal group were close as many people (81.1%). Based on subject parity, the majority in the IUD group was >2, 50 people (94.4%) and the majority in the Hormonal group was >2, 46 people (86.8%). Based on subject knowledge, the majority in the IUD group was good, 48 people (90.5%) and the majority in the Hormonal group was poor, 34 people (64.2%). Based on the subject's attitude, the majority in the IUD group was positive, 41 people (77.3%) and the majority in the Hormonal group was negative, 30 people (56.7%). Based on the role of health personnel, the majority in the IUD group was 45 people (84.9%) and the majority in the Hormonal group was none, 37 people (69.9%).

Table 1. Characteristics of Respondents

Independent Variable	IUD		Hormonal	
	n=53	%	n=53	%
Age				
Age Productive	47	88.6	48	90.5
Non-Productive Age	6	11.4	5	9.5
Education				
Low	37	69.8	47	88.6
High	16	30.2	6	11.4
Sociodemographic				
Near	38	71.6	43	81.1
Far	15	28.4	10	18.9
Parity				
1-2	3	5.6	7	13.2
>2	50	94.4	46	86.8
Knowledge				
Good	48	90.5	19	35.8
Not good	5	9.5	34	64.2
Attitude				
Positive	41	77.3	23	43.3
Negative	12	22.7	30	56.7
Role of Health personnel				
There is	45	84.9	16	30.1
There isn't any	8	15.1	37	69.9

Table 2. Results of bivariate tests of factors influencing the use of IUDs

Independent Variables	IUD		Hormonal		Crude OR (95% CI)	p
	n	%	n	%		
Age						
Age Productive	47	88.6	48	90.5	0.82	0.750
Non-Productive Age	6	11.4	5	9.5	(0.23 to 2.86)	
Education						
Low	37	69.8	47	88.6	0.61	4.646
High	16	30.2	6	11.4	(0.43 to 0.86)	
Sociodemographic						
Near	38	71.7	43	81.1	0.58	0.253
Far	15	28.3	10	18.9	(0.24 to 1.47)	
Parity						
1-2	3	5.6	7	13.2	0.39	0.184
>2	50	94.4	46	86.8	(0.09 to 1.62)	
Knowledge						
Good	48	90.5	19	35.8	17.18	<0.001
Not good	5	9.5	34	64.2	(5.84 to 50.51)	
Attitude						
Positive	41	77.3	23	43.3	4.45	<0.001
Negative	12	22.7	30	57.7	(1.92 to 10.34)	
Role of Health Personnel						
There is	45	84.9	16	30.1	13.01	<0.001
There isn't any	8	15.1	37	69.9	(5.01 to 33.76)	

Table 2 shows that IUD use increased with good knowledge variables (OR= 17.18; 95% CI= 5.84 to 50.51; p<0.001); positive attitude (OR= 4.45; 95% CI= 1.92 to 10.34; p<0.001); and the role of health personnel (OR= 13.01; 95% CI= 5.01 to 33.76; p<0.001), and these results were statistically significant. Meanwhile, IUD use decreased with the non-productive age variable (OR= 0.82; 95% CI= 0.23 to 2.86; p = 0.750); low education (OR= 0.61; 95% CI= 0.43 to 0.86; p= 4.646); sociodemographic (OR= 0.58; 95% CI= 0.24 to 1.47; p= 0.253); parity >2 (OR= 0.39; 95% CI= 0.09 to 1.62; p=0.184).

Table 3 shows that there is an influence between good knowledge and the role of health personnel on the use of IUDs in

PUS in the Simpang Kiri Community Health Center working area, Subulussalam City in 2023. PUS with good knowledge increases the use of IUDs by 11.11 times compared to PUS with poor knowledge, and this result is statistically significant (OR= 11.11; 95% CI= 3.29 to 37.58; p<0.001). The role of health personnel increased IUD use in EFA by 8.36 times compared to no role of health personnel, and this result was statistically significant (OR= 8.36; 95% CI= 2.73 to 25.61; p <0.001). Meanwhile, PUS with a positive attitude increased IUD use by 1.26 times compared to PUS with a negative attitude, but this was not statistically significant (OR= 1.26; 95% CI= 0.39 to 3.97; p<0.001).

Table 3. Results of multiple logistic tests of factors influencing the use of IUDs

Independent Variables	OR	95% CI		P
		Lower limit	Upper limit	
Knowledge (good)	11.11	3.29	37.58	<0.001
Attitude (positive)	1.26	0.39	3.97	0.697
The role of energy health (Yes)	8.36	2.73	25.61	<0.001
N observations = 106				
-2 log likelihood = 91.48				
Nagelkerke R ² = 54 %				

DISCUSSION

1. The Influence of Age on the IUD uptake

Based on the results of the study using statistical tests, p= 0.750, meaning that the age of the subject does not influence the use of IUDs in the work area of the Simpang Kiri Community Health Center, Subulussalam City in 2023.

According to a study by Marikar (2015), the older one gets, the level of maturity and strength, the more mature a person will be in thinking and working. In a person, the older they get, the more maturity they have in thinking and acting, which makes it easier to accept new information. As a person's age increases and the ideal number of children has been achieved, it

will encourage couples to limit births, this will increase the respondent's chances of using an IUD.

According to researchers' assumptions, mothers at certain ages 20-35 years and >35 years will consider appropriate contraceptives to regulate the number and spacing of pregnancies and terminate pregnancies. In this study, we found mothers aged 20-35 who used the IUD contraceptive option, but we also met mothers who used hormonal so it can be concluded that age does not affect the use of IUD contraception and some mothers said they felt comfortable with using hormonal.

2. The influence of education on the IUD uptake

Based on the results of the study using

statistical tests, it was obtained that $p=4.646$, meaning that the subject's education does not influence the use of IUDs in the work area of the Simpang Kiri Community Health Center, Subulussalam City in 2023.

This study is not in line with Mahmudah (2015), who stated that education level influences IUD use ($p=0.015$). Education will influence a person's attitude in making decisions because the higher the level of education, the more rational they will be in making decisions. This will also apply in making decisions to choose appropriate, appropriate and effective contraceptives for mothers to space their pregnancies or limit the number of births. The results of this study illustrate that the use of contraceptive methods is influenced by the level of education, which means that the previous level of education of female family planning acceptors will influence female family planning acceptors in their IUD selection practices.

In this study, researchers concluded that a high level of education does not guarantee the use of IUD contraception. Therefore, the importance of health promotion as the first step to increase the active role of the community as an effort to create conducive public health behavior. Therefore, health personnel need skills in how to convey messages so that they can be understood and understood by the public regarding the use of IUD contraception.

3. The Effect of Parity on the IUD uptake

Based on the results of the study using statistical tests, it was obtained that $p=0.184$, meaning that subject parity does not influence the use of IUDs in the work area of the Simpang Kiri Community Health Center, Subulussalam City in 2023.

This study is in line with Sari's (2022) study which states that there is no effect of

parity with the use of an IUD (0.214). Mothers who have a history of multipara tend to choose the IUD as the right choice for the mother because the IUD is considered appropriate and effective, the mother does not have to frequently come to the health center or midwife to get birth control injections or birth control pills. On the other hand, the mother may still have the desire to increase the number of children, so the mother feels afraid and thinks that after removing the IUD, her fertility will return for a long time, so the mother prefers hormonal contraception. Meanwhile, acceptors who have a history of multiparas and are over 35 years of age think that using the IUD for too long will make it difficult to remove it.

According to researchers' assumptions, mothers who have had 2 or more children are more likely to be interested in using hormones compared to IUDs. Because mothers still have insufficient knowledge about IUDs, on the other hand, mothers who have good knowledge even though their children are only 2 are still willing to use IUDs. This may also be due to the high level of public opinion that many children have a lot of good fortune, so this is not in line with the goals of the BKKBN. like the slogan "two children are better". Therefore, it can be concluded that the family planning program running in society is still weak.

4. The Influence of Sociodemography on the IUD uptake

Based on the results of the study using statistical tests, it was obtained that $p=0.253$, meaning that the subject's travel distance does not affect the use of IUDs in the work area of the Simpang Kiri Community Health Center, Subulussalam City in 2023.

This study is in line with Purnasari's (2023) study, which states that there is no significant relationship between the distance of the service location and IUD use

(0.123).

According to Amru (2019), the farther the health facility is from the mother's residence, the more difficult it is to access the health facility, which will reduce the mother's motivation to visit health services. The long distance will make mothers think twice about making a visit because of the ease for individuals to get to the location in the form of physical distance, costs and time spent by individuals to get to the required health service center. Affordability to service locations really helps someone in looking for family planning services, the closer the distance, the easier it will be for mothers to use family planning services.

According to the researchers' assumptions, distance to health services has no influence on the use of IUD contraception. This can be seen in the number of subjects using almost as many hormonal IUDs as in the distance of health services. It is known that the distance between health services near and far to the subject does not influence the subject to use an IUD. The existing health facilities have been used efficiently by the community because the location of the service centers is within a radius of many communities and is mostly centered in cities and the location of the facilities is affordable in terms of transportation.

5. The influence of knowledge on the IUD uptake

Based on the results of the study using statistical tests, $p < 0.001$, meaning that the subject's knowledge influences the use of IUDs in the work area of the Simpang Kiri Community Health Center, Subulussalam City in 2023. Calculating the risk estimate obtained an odds ratio (OR) value of 17.18 (95% CI= 5.84 to 50.51) means 17.18 times the estimated probability that good knowledge will use an IUD compared to poor knowledge.

According to Mutika (2018), knowledge is an important but insufficient factor in changing health behavior. Apart from that, high knowledge does not necessarily guarantee that someone will have good behavior. Knowledge about IUDs can be obtained from TV, radio, leaflets, friends, relatives, family, even health workers and health cadres.

This study is also in line with research by Nuryati (2014), Knowledge of family planning acceptors will influence the choice of contraceptive method because good knowledge will change the perspective in determining appropriate contraception and considering the effectiveness and convenience of the method.

In this study, the low level of knowledge of subjects in the Hormonal group was due to a lack of more detailed information about IUD contraception from health workers and health cadres. So, this causes the low willingness of PUS mothers to use the IUD as a contraceptive. Increasing the subject's knowledge about the IUD can be done by providing outreach. The better the knowledge about the IUD, it is hoped that more PUS mothers will use IUD contraception.

6. The influence of attitudes on the IUD uptake

Based on the results of the study using statistical tests, $p < 0.001$, meaning that the subject's attitude influences the use of IUDs in the work area of the Simpang Kiri Community Health Center, Subulussalam City in 2023. Calculating the risk estimate obtained an odds ratio (OR) value of 4.45 (95% CI = 1.92 to 10.34) means 4.45 times the estimated probability that a positive attitude will use an IUD compared to a negative attitude.

According to Kusumawati (2022), attitude is also a general evaluation that humans make of themselves, other people or circulating issues. If someone's reaction

or response is positive then that person's behavior also tends to be positive, and vice versa. Apart from that, attitude is also a product of the socialization process so that reactions are in accordance with the stimuli they receive so that if someone agrees or has a positive attitude towards the use of IUD contraception.

According to Bernadus (2013), attitude shows approval or disagreement with something or liking or disliking something, in this case regarding contraceptives. Respondents who have a good attitude towards something can be caused by positive beliefs held by the respondent, and vice versa.

The study assumes that attitude is a closed reaction or response to stimulation and attitude also consists of various levels, namely accepting, responding, appreciating and being responsible. It is not enough just to have knowledge that mothers must master, but more than that, accepting conditions must be addressed or responded to with a sense of responsibility to prevent health problems, especially those related to reproductive organs in women.

7. The influence of the role of health personnel on the IUD uptake

Based on the results of the multiple logistic regression test analysis, the most dominant influence on the use of IUDs in the Simpang Kiri Community Health Center working area, Subulussalam City in 2023 is the role of health workers. It was found that the p value was <0.05 , obtained an OR of 8.363 with a 95% CI of 2.731-25.613, meaning the use of IUD contraception was 12,189. times more likely to be influenced by the presence of the role of health workers compared to the absence of the role of health workers.

According to Subiyatun (2015), health personnel provide information about the importance of using contraception for PUS mothers and encourage mothers to use the IUD as a long-term contraceptive through

good communication, motivation and cooperation, most importantly without forcing. This use is voluntary for willing mothers. Increase awareness of PUS mothers by providing information and motivation to use IUD contraception.

The study assumes that subjects who receive support from health personnel will be more likely to become IUD acceptors compared to those who do not receive support from health personnel. This is because most of the subjects in the study place think that health personnel know more about their own health problems so that they are more involved in making decisions about things to do regarding health.

AUTHOR CONTRIBUTION

In this study, Rizka Sititah Rambe, Fitriani Bancin and Ricca Nophia Amra collaborated to create a conceptual framework and study methodology. Ricca Nophia Amra collected data. Ricca Nophia Amra, Rizka Sititah Rambe and Fitriani Bancin collaborated to analyze the data.

FUNDING AND SPONSORSHIP

This study is self-funded.

ACKNOWLEDGEMENT

We would like to thank all the staff of Simpang Kiri Community Health Center, Simpang Kiri District, Subulussalam City who have allowed us to visit to carry out this study.

CONFLICT OF INTEREST

There are no conflicts of interest.

REFERENCE

Amru DE (2019). Hubungan tingkat pengetahuan, sikap dan keterjangkauan jarak pelayanan kesehatan terhadap kejadian drop out alat kontrasepsi suntik pada pasangan usia subur

- (PUS) di Wilayah Kerja Puskesmas Sekupang Kota Batam (The relationship between the level of knowledge, attitudes and affordability of distance from health services to the incidence of drop out of injectable contraceptives in couples of childbearing age (PUS) in the Sekupang Community Health Center Working Area, Batam City). *Jurnal Bidan Komunitas*, 2(2): 107. <https://doi.org/10.33085/jbk.v2i2.4341>
- BKKBN (2022). Kebijakan dan strategi akselerasi program kependudukan, KB dan pembangunan keluarga (Policies and strategies for accelerating population, family planning and family development programs). Retrieved from: <http://www.bkkbn.go.id>
- Bernadus JD, Madianung A, Masi G (2013). Faktor-faktor yang berhubungan dengan pemilihan Alat Kontrasepsi Dalam Rahim (AKDR) Bagi akseptor KB di Puskesmas Jailolo (Factors related to the selection of an intrauterine contraceptive device (IUD) for family planning acceptors at the Jailolo Community Health Center). *Jurnal Keperawatan Ilmiah*. 1(1). <https://doi.org/10.35790/ens.v1i1.1760>
- Kementerian Kesehatan RI, (2022). Situasi dan analisis keluarga berencana. Retrieved from: <http://www.depkes.go.id>
- Kusumawati DR, Murwati M, Habibi, J (2022). Faktor-faktor yang mempengaruhi rendahnya pemakaian kb alat kontrasepsi dalam rahim (AKDR) di Puskesmas Talang Rimbo Lama Kabupaten Rejang Lebong Tahun 2022. *Jurnal Kebidanan Manna*. 1(2): 89–104. <https://doi.org/10.58222/jkm.v1i2.176>
- Mahmudah NL, Indrawati F (2015). Analisis faktor yang berhubungan dengan pemilihan Metode Kontrasepsi Jangka Panjang (MKJP) pada akseptor KB wanita di Kecamatan Banyubiru Kabupaten Semarang (Analysis of factors related to the choice of Long-Term Contraceptive Method (MKJP) among female family planning acceptors in Banyubiru District, Semarang Regency). *Unnes Journal of Public Health*. 4(3): 76-85. <https://doi.org/10.15294/ujph.v4i3.7222>
- Marikar APK, Kundre R, Bataha Y (2015). Faktor-faktor yang berhubungan dengan minat ibu terhadap penggunaan Alat Kontrasepsi Dalam Rahim (AKDR) di Puskesmas Tumiting Kota Manado (Factors related to maternal interest in using intrauterine contraceptive devices (IUD) at Tumiting Community Health Center, Manado City). *Jurnal Keperawatan*. 3(2): 1-6. <https://doi.org/10.35790/jkp.v3i2.9948>
- Mutika WT, Lalusu EY (2018). Hubungan karakteristik ibu dengan pengetahuan ibu usia reproduktif tentang kontrasepsi Intra Uterine Device (IUD) di Dusun Kuwungsari Kelurahan Sragen Kulon Kecamatan Sragen Kabupaten Sragen (The relationship between maternal characteristics and reproductive age mothers' knowledge about intrauterine device (IUD) contraception in Kuwungsari Hamlet, Sragen Kulon Village, Sragen District, Sragen Regency). *Berita Kedokteran Masyarakat*, 34 (5). <https://doi.org/10.22146/bkm.35653>
- Nuryati S, Fitria D (2014). Pengaruh faktor internal dan faktor eksternal terhadap pemilihan alat kontrasepsi pada akseptor KB Baru di Kabupaten Bogor (The influence of internal factors and external factors on the choice of con-

- traceptives among new family planning acceptors in Bogor Regency) *Jurnal Ilmiah Kesehatan*: 5(1): 632-638
- Purnasari H, Ardayani T, Triana H (2023). Faktor-faktor yang mempengaruhi Akseptor KB dalam penggunaan alat Kontrasepsi IUD di Desa Babakan Ciparay (Factors that influence family planning acceptors in using IUD contraception in Babakan Ciparay Village). *Jurnal Vokasi Keperawatan (JVK)*. 6(1): 88-99. <https://doi.org/10.33369/jvk.v6i1.27300>
- Sari O, Efendi H, Silaban T (2022). Faktor-faktor yang berhubungan dengan penggunaan Alat Kontrasepsi Intra Uterine Device (IUD) oleh akseptor KB di Desa Kurup Kabupaten Ogan Komerling Ulu (Factors associated with the use of intrauterine contraceptive devices (IUD) by family planning acceptors in Kurup Village, Ogan Komerling Ulu Regency). *Jurnal Ilmu Kesehatan*. 11(1): 25-33. <https://doi.org/10.32534/jik.3024>
- SDKI (2017). Hasil Capaian BKKBN (BKKBN Achievement Results). Retrieved from: sdki.bkkbn.go.id
- Subiyatun S, Dasuki D, Budi W (2015). Hubungan antara pemberian informasi dengan pemilihan metode alat kontrasepsi rasional (The relationship between providing information and choosing a rational contraceptive method). *Jurnal Kebidanan dan Keperawatan*. 5(2): 101-107. <https://doi.org/10.22146/bkm.3410>