

Factors Related to Willing Mom for Post Placenta IUD Installation

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ABSTRACT

The most ideal contraception for postpartum mothers childbirth and breastfeeding is not suppressing the production of breast milk, namely the Intra Uterine Device (IUD). The purpose of this study was to determine the factors associated with the mother's willingness to insert a post-placental IUD. This research is a quantitative research using the dynamics of correlation between phenomena with a cross sectional study design . The population in this study were all pregnant women over 30 weeks in April. The sample of this research was 47 pregnant women with gestational age above 30 weeks which were taken from the total sampling technique . Based on the results of the chi square statistical test with a 95% confidence level ($\alpha = 0.05$) it was found that there was a significant relationship between knowledge (P 0.000), attitude (P 0.002), husband's support (P 0.001), mother's interest (P 0.001) , the support of health workers (P 0.001) with the mother's willingness to insert a post-placental IUD. It is hoped that mothers will be able to participate in the use of contraceptives.

Keywords:

Attitude, Husband's Support, Interest, Health Worker Support, IUD

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1. INTRODUCTION

Contraceptive use has increased in many part world, especially in Asia and America Latin and Lowest in Sub-Saharan Africa. by global, user contraception modern has increase no significant from 54% on year 1990 Becomes 57.4% on 2014. Regionally, the proportion of couples of childbearing age 15-49 years reported the use of method contraception IUD has increase at least the last 6 years. In Africa from 23.6% Becomes 27.6%, di Asia has improved from 60.9% Becomes 61.6%, whereas America Latin and Caribbean go on a little from 66.7% to 67.0% [13].

Program Service Family Planned (SFP) in Indonesia experience something state stagnant which be marked with no increasing several indicators of family planning services that is number participation SFP (Contraceptive Prevalence Rate = CPR) and unmet need. Second indicators are additional indicators in Sustainable Development Goals (SDGs), where indicators main is labor by power health which connected with Number Dead Mother (BATTERY) (Profile Health Indonesia, 2018).

Effort enhancement service SFP especially post-partum is considered to be a strategy which appropriate because a number of Thing. First, scope service Antenatal Care (ANC) and scope labor by power health is quite high (K1 : 92.7%; K4 : 61.4%; and Pn : 82.2%, based on data Riskesdas 2018). Coverage of active family planning participants according to BKKBN in 2018 was 7.5% IUD. Still low use Method Contraception Period Long (MKJP) because knowledge still [2].

IUD KB participants reached 30,612 participants or 57.9%, SFP with Medical Operation method Male (MOP) reached 3,671 participants or 74.0% and Medical Operation woman (MOW) reach 10,176 participant or 72.3%, SFP Condom reach 49,431 participant or 141.9 %, SFP Implants reached 58,034 participants or 57.4%, SFP Inject reach 135,252 participant or 159.2% and PIL SFP reached 132,515 participants or 108.4% [2]. Data BKKBN Regency Tapanuli Southamout PUSSY 24,851 (58.65%) with method type contraception injection 10,027 (40.29%), Pil 7,299 (29.33%), implant 4,128, operation man 67 (0.026%) [2].

Likewise in Sayur Matinggi District Regency Tapanuli South year 2017. Based on data which there is amount couple childbearing age 644. Number of active family planning acceptors 385 (59.78%), contraceptive method used

is injection 89 (14.80%), pill 127 (32.98%), IUD 39 (10.12%), implant 65 (16.88%), condoms 57 (11.1%), MOW 8 (2%) and MOP no there is [8].

Results studies preliminary in Public health center High Vegetable month October 2020 until January 2021 that of 10 pregnant women who stated different reasons for their willingness to install a post-placental IUD, among others, only 4 mothers were willing to use post-placental IUD contraception or in the fourth stage, 2 people stated that they did not know that the IUD can and may be inserted after giving birth, 2 people refuse because they are afraid to insert an object into the vagina because they have just given birth and are worried that it will hurt, 1 person stated that it is not time for family planning or it could be after childbirth so they are reluctant to install an IUD postpartum, while 1 other person stated that her husband was not allowed to because it could interfere with sexual relations. Based on this, researchers are interested in taking the title "Factors Related to Mother's Willingness to Insert IUD" Post Placenta In Public health center High Vegetable Regency Tapanuli South year 2021".

2. METHOD

Type study this is study Quantitative. Design which used in study this is cross sectional that is variable on the object of research being measured or collected in time which together, collection data for all variables are done together or all at once [5]. The population in this study is all mothers pregnant over 30 weeks in the month April 2021 at Sayurmatangi Health Center South Tapanuli Regency as many as 47 people. The sampling technique used is total sampling that is whole population in study this made sample. technique collection data in earn from respondents by using a questionnaire. Data analysis conducted is univariate analysis for describe characteristics every variable and produce distribution frequency and percentage from every variable. Then analysis bivariate used for look for connection Among variable independent and dependent through test statistics. Test statistics which used that is test Chi square for knowing factor which relate with willingness mother for installation IUD post placenta.

3. RESULTS AND DISCUSSION

3.1. Results

3.1.1. Analysis Univariate

Table 1. The Characteristics of the Respondents, the Most Maternal Age

Variable	f	(%)
Mother's Age		
- 15-25 Years	10	21.3
- 26-35 Years	28	59.6
- 36-45 Years	9	19.1
Work		
- civil servant	3	6.4
- Private employees	7	14.9
- Self-employed	7	14.9
- Farmer	17	36.2
- housewife	13	27.7
parity		
- Nullipara	4	8.5
- Primipara	13	27.7
- Multipara	24	51.1
- Grande Multipara	6	12.8

Based on table 1 above, it is known that the characteristics of the respondents, the most maternal age are in the age range of 26-35 years as many as 28 people (59.6%), the most mothers work is farmers as many as 17 people (36.2% and the parity of pregnant women is the highest). many multiparous as many as 24 people (51.1%).

Table 2. The Mother's Knowledge about the Post Placenta IUD

No	Knowledge	F	(%)
1	Not enough	25	53.2
2	Enough	9	19.1
3	Well	13	27.7
Amount		47	100

Based on table 2 above, it is known that the mother's knowledge about the Post Placenta IUD is the most with less knowledge as many as 25 people (53.2%) and the least is sufficient knowledge as many as 9 people (19.1%).

Table 3. The Most Negative Attitudes

No	Attitude	F	(%)
1	Negative	27	57.4
2	Positive	20	42.6
Amount		47	100

Based on table 3 above, it is known that the most negative attitudes were 27 people (57.4%) and the least positive attitudes were 20 people (42.6%).

Table 4. The Known that at Most 29 People Do Support

No	Husband Support	F	(%)
1	Does not support	29	61.7
2	Support	18	38.3
Amount		47	100

Based on Table 4 above, it is known that at most 29 people do not support (61.7%) and at least 18 people support (38.3%).

Table 5. The Mother's Interest in the Post Placental IUD

No	Mother's Interest	F	(%)
1	Low	13	27.7
2	Currently	21	44.7
3	Tall	13	27.6
Amount		47	100

Based on table 5 above, it is known that the mother's interest in the Post Placental IUD has the most moderate interest as many as 21 people (44.7%) and the least interest is low and high interest respectively as many as 13 people (27.6%).

Table 6. The Most Support From Health Workers

No	Support Officer Health	F	(%)
1	Does not support	29	61.7
2	Support	18	38.3
Amount		47	100

Based on Table 6 above, it is known that the most support from health workers did not support as many as 29 people (61.7%) and the least support as many as 18 people (38.3%).

Table 7. The Most Willingness to Install the Post Placental IUD

No	Willingness to insert IUD	F	(%)
1	Not	20	57.4
2	Yes	27	42.6
Amount		47	100

Based on Table 7 above, it is known that the most willingness to install the Post Placental IUD is not as many as 27 people (57.4%) and the least willingness to install the Post Placental IUD is as many as 20 people (42.6%).

3.1.2. Analysis Bivariate

Table 8. Mother's Willingness to Install a Post-Palsenal IUD

Attitude	Mother's Willingness to Install a Post-Palsenal IUD				Total	P.value
	Not		Yes			
	F	%	F	%		
Negative	22	46.8	6	12.8	28	0.002
Positive	5	10.6	14	29.8	19	
Amount	27	57.4	20	42.6	47	

Based on table 8 of 47 respondents there were 22 people (46.8%) who had a negative attitude by not being willing to install a post-placental IUD while for a positive attitude and being willing to install a post-placental

IUD as many as 5 people (29.8%). The results of the chi-square analysis obtained a p value <0.05 (0.002), then Ho was rejected, meaning that there was a significant relationship between attitudes and maternal willingness to install a post-placental IUD.

Table 9. Mother's Willingness to Install a Post-Placental IUD

Husband Support	Mother's Willingness to Install a Post-Placental IUD				Total		P.value
	Not		Yes				
	F	%	F	%	F	%	
Does not support	22	46.8	7	14.9	29	61.7	0.002
Support	5	10.6	13	27.7	19	38.3	
Amount	27	57.4	20	42.6	47	100	

Based on table 9 of 47 respondents there were 22 (46.8%) husbands who did not support and were not willing to install the post-placental IUD, while the husbands who supported and were willing to install the post-placental IUD were 13 people (27.7%). The results of the chi-square statistical test analysis obtained p value (0.002) < (0.05) then Ho was rejected, meaning that there was a significant relationship between husband's support and mother's willingness to install a post-placental IUD.

Table 10. Mother's Willingness to Insert the Post Placenta IUD

Mother's Interest	Mother's Willingness to Insert the Post Placenta IUD				Total		P.value
	Not		Yes				
	F	%	F	%	F	%	
Low	11	23.4	2	4.2	13	27.7	0.006
Currently	13	27.7	8	17.1	21	44.6	
Tall	3	6.4	10	21.2	13	27.7	
Amount	27	57.5	20	42.5	47	100	

Based on table 10 of 47 respondents there were 13 people (27.7%) who had moderate interest and were not willing to install the post-placental IUD, while the mother's interest was high and willing to install the post-placental IUD, there were 10 people (21.2%) and willing with postplacental IUD insertion. The results of the chi-square analysis obtained p value <0.05 (0.006), then Ho was rejected, meaning that there was a significant relationship between mother's interest and mother's willingness to install a post-placental IUD.

Table 11. Mother's Willingness to Install IUD Post

Health Officer Support	Mother's Willingness to Install IUD Post				Total		P.value
	Not		Yes				
	F	%	F	%	F	%	
Does not support	22	46.8	7	14.9	29	61.7	0.001
Support	5	10.6	13	27.7	18	38.3	
Amount	27	57.4	20	42.6	47	100	

Based on table 11 of 47 respondents, 23 (46.8%) health workers did not support and were not willing to install a post-placental IUD, while there were 13 (27.7%) health workers who supported and were willing to install a post-placental IUD. The results of the chi-square analysis obtained p value <0.05 (0.001), then Ho was rejected, meaning that there was a significant relationship between the support of health workers and the mother's willingness to install a post-placental IUD.

3.2. Discussion

3.2.1. Connection Knowledge With Willingness Mother For Installation IUD Post Placenta

Results analysis Among knowledge with willingness mother for installation IUD Post Placenta, from 47 respondents there were 20 people (42.6%) respondent have knowledge not enough with no ready with installation IUD post placenta whereas for knowledge good and ready with There are 9 postplacental IUD installations (19.1%). Results analysis chi-square obtained p value < 0.05 (0.004) then Ho is rejected meaning show there is connection which significant between knowledge and mother's willingness to installation IUD post placenta.

This is in accordance with Nurbaiti's research [7] which mention that low usage contraception IUD because lack of knowledge acceptor about advantages method the. Ignorance acceptors about the advantages of contraceptive methods IUD caused information which be delivered officer service FPS not enough complete. Results study this no in accordance with study [15] is known that no there is relationship between knowledge and choice FPS. Respondent's knowledge is good and not enough good about FPS no influence they in choose method or tool

which will be used. They have the flexibility or freedom of choice by considering things such as compatibility, effectiveness or not, comfort or safety from side effects of contraception.

According to the researcher's assumptions, based on the results of the study, there is a significant relationship between the mother's level of knowledge about contraceptives and the willingness to become a postnatal family planning acceptor where the higher the level of knowledge of a mother about contraceptives, the more interest in becoming a postnatal family planning acceptor will increase.

3.2.2. The Relationship between Attitude and Mother's Willingness for Post Placenta IUD Insertion

The results of the analysis of 47 respondents there were 21 people (44.6%) who had a negative attitude by not being willing to install a post-placental IUD while for a positive attitude and being willing to install a post-placental IUD as many as 6 people (12.8%). The results of the chi-square analysis obtained a p value <0.05 (0.002), then H_0 was rejected, meaning that there was a significant relationship between attitudes and maternal willingness to install a post-placental IUD.

In line with Sumarni's research [10] In the working area of the Patumbak Health Center, there are connection which significant Among attitude with the duration of the IUD use incontinence in the work area of the Patumbak Health Center with a p value of 0.036. Attitude is also related to a person's knowledge and education. There are many myths about IUDs, such as being able to interfere with the comfort of a husband-wife relationship, being easily separated if you work too hard, causing infertility, and so on that might discourage mothers from inserting an IUD.

The results of this study are in accordance with Putri's research [9] which states that many women are afraid to use an IUD because they think the IUD can be stuck on the face, head, and body of an unborn child, can cause cancer, and be implanted in the uterus. The results of this study are reinforced by research by Dzalya [3] which states that there is an influence between attitudes and the use of the IUD. This is evident from the many who are afraid of the installation method, the weaknesses and side effects of using the IUD.

Based on this, the researcher assumes that respondents with positive traits can also be encouraged not to be willing to install a post-placental IUD and vice versa because there are other things related to the mother's actions or attitudes, including the mother's willingness to install a post-placental IUD as a contraceptive choice. which is good for spacing her pregnancies.

3.2.3. Relationship of Husband's Support with Mother's Willingness for Post Placenta IUD Insertion

Of the 47 respondents there were 22 (46.8%) husbands who did not support and were not willing to install the post-placental IUD, while the husbands who supported and were willing to install the post-placental IUD were 13 people (27.7%). The results of the chi-square analysis obtained p value <0.05 (0.002), then H_0 was rejected, meaning that there was a significant relationship between husband's support and mother's willingness to install a post-placental IUD. The results showed that there was a relationship between husband's support and the mother's willingness to insert a post-placental IUD with a p-value of 0.002 <0.05 . In line with Saiful Batubara's research [1], it shows that there is a relationship between husband's support and the willingness of mothers to give birth for the installation of a Post Placenta IUD in the Batu Aji Health Center Work Area, Batam City with a p-value of 0.043 <0.05 .

Based on the results of research by Musdalifah, et al [5], it shows that there is a significant relationship between the husband's support variable and the variable use of hormonal contraception. If the husband does not allow or does not support, then only a few wives who dare to continue to install the contraceptive. Husband's support is very influential in making decisions to use or not and what method to use. In support, mutual understanding will be created between individuals so that they can work together and exchange the necessary resources, not only in the form of material and information but advice and considerations that are very useful for individuals in solving the problems they face.

In addition to the important role in supporting decision-making, the role of the husband in providing information is also very influential for the wife. Roles such as participating in consultations with health workers when the wife is going to use contraceptives, reminding the wife to take medication or schedule for control, reminding the wife what not to do when using contraceptives and so on will play a very important role for the wife when she will or has used the device. contraception [11].

According to the researcher's assumptions, based on the results of the study, there is a significant relationship between husband's support and willingness to become a post-delivery family planning acceptor at the Sayurmatangi Health Center, which means that mothers who receive support from their husbands will tend to become postplacental family planning acceptors, whereas if mothers do not receive support, husband, then tend not to be willing to become post-placental family planning acceptors.

3.2.4. The Relationship of Maternal Interest with Maternal Readiness for Post Placental IUD Installation

The results of the analysis of 47 respondents there are 13 people (27.7%) who are interested in mothers are and are not ready with post -placental IUD installation, while mothers are high and ready with post -placental IUD installation there are 10 people (21.2%) and ready with post -placental IUD installation. The results of chi-square analysis obtained a value of p <0.05 (0.006) then H_0 rejected the meaning of showing a significant relationship

between maternal interest and maternal readiness for post-placental IUD installation.

One of the internal factors that influence interest is the response. Response is the number of events that remain in memory after making observations. The response occurs after making observations, the more clearly the individual observes an object, the more positive the response. Someone who has a positive response will form a perception, namely the process of identifying something, then the response directly affects an object or stimulus. There are also external factors that form interest, namely the environment, both the physical environment such as the availability of access to health services and the social environment where there is a reaction between one individual and another that can have a certain influence on the individual. In addition, the role of cadres and health workers in providing health promotion can affect postpartum mothers' interest in using intra uterine device (IUD) contraception [19]

3.2.5. Relationship between Health Officer Support and Mother's Willingness for Post Placenta IUD Insertion

Based on table 4.9 of 47 respondents, 23 (46.8%) health workers did not support and were not willing to install a post-placental IUD, while there were 13 (27.7%) health workers who supported and were willing to install a post-placental IUD. The results of the chi-square analysis obtained p value <0.05 (0.001), then H_0 was rejected, meaning that there was a significant relationship between the support of health workers and the mother's willingness to install a post-placental IUD.

The results of this study are in accordance with Sumarni research [10] which says there is no relationship between the attitude of health workers and the use of IUD contraceptives (MKJP). If the health workers are good, the decision to use the IUD contraceptive will be even greater. The results of this study are reinforced [14] that the attitude of health workers does not directly affect the use of contraceptives. According to the researcher's assumption, the support of health workers has no relationship or influence on the use of IUD contraceptives because the attitudes of others will not be a barrier to choosing or using contraceptives according to their needs.

According to the researcher's assumption, the support of health workers is good, but they still do not use the IUD contraception. This is proven, that respondents who do not use an IUD in the work area of the Sayurmatangi Health Center because they are afraid to insert objects into their bodies, are afraid that they will not be able to work hard anymore, afraid that at any time the IUD can spread. Another reason respondents did not use the IUD even though health workers provided counseling, they did not want to limit children, especially boys, to at least 2 people in one family because boys are the successors of the clan and descendants of the Batak people.

4. CONCLUSION

The majority of respondents aged 26-35 years were 28 people (59.6%), the majority of respondents' occupations were farmers as many as 17 people (36.2%) and the majority of parity respondents were multiparas as many as 24 people (51.1%). The distribution of knowledge about the mother's willingness to post-placental IUD insertion there are 25 people (53.2%) who lack knowledge. Distribution of attitudes about the mother's willingness to post-placental IUD insertion there were 28 people (59.6%) who had a negative attitude. Four Distribution of husband's support regarding the mother's willingness to post placental IUD insertion there were 29 people (61.7%) who gave negative support. Distribution of interest about maternal willingness to post placental IUD insertion there were 21 people (44.7%) who had moderate interest. The distribution of support from health workers regarding the mother's willingness to insert a post-placental IUD was 29 people (61.7%) who gave poor support. There is a relationship between knowledge, attitude, husband's support, mother's interest and support from health workers with the mother's willingness to install a post-placental IUD at the Sayurmatangi Public Health Center in 2021.

The results of this study are expected to help students in learning about contraceptive methods, especially the post-placental IUD so that students can develop similar research with different variables. Health workers can change people's interests and attitudes towards the IUD contraception for the better, it is necessary to make more intensive approaches and health education to mothers and husbands. Can develop similar research with different variables.

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