

# The Effect Of Counseling On Decision Making In The Selection Of Equipment Iud Contraception In Accepters KB At The Mandrehe Health Center North in 2022

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## ARTICLE INFO

*Keywords:*  
Counseling,  
IUD,  
Contraceptive Decision  
Making

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## ABSTRACT

Indonesia is one of the most populous countries in the world. This population explosion occurred because of the very high rate of population growth. The government provides a series of efforts to suppress the rate of population growth so that a larger population explosion does not occur. One way that the government does is to promote family planning programs. The purpose of this study was to determine the effect of counseling on decision making in the selection of IUD contraceptives for family planning acceptors at the North Mandrehe Health Center. This type of research uses a pre-experimental design approach with one-group pretest-posttest design. The population in this study were all EFA mothers who visited the Puskesmas in the working area of the North Mandrehe Health Center, namely Hilimayo Village, as many as 84 people with the sampling technique of accidental sampling, a sample of 26 people was obtained. Bivariate data analysis used the Wilcoxon signed rank test. The results of this study indicate that the mean value of each is 0.00 (Pre) and 24 (Post). The results of statistical tests using the Wilcoxon test are known that the p value  $(0.000) < (0.05)$  means that  $H_0$  is rejected. The conclusion of the study is that there is a significant influence of counseling with decision making in the selection of IUD contraceptives on family planning acceptors at the North Mandrehe Health Center in 2022. It is recommended for midwives to improve the quality of counseling provided, especially related to politeness, simplicity of language and affirmation of all counseling materials, because These three things have the strongest impact on understanding so that they also affect the stability of the acceptor.

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## 1. INTRODUCTION

Indonesia has policies to control population growth, including through the Family Planning (KB) program. Family planning is an effort made by humans to intentionally regulate pregnancy in the family not against the law and Pancasila morals for family welfare. Through the family planning program, population growth will be controlled so as to increase the level of health and welfare for families. Quality family planning services are not only related to services in marketing contraceptives, but also related to the provision of Interpersonal communication/Counseling (KIP/K) to acceptors [1].

Where the use of short-term contraceptive methods (non-MKJP) continued to increase from 46.5% to 47%, while long-term contraceptive methods (MKJP) tended to decrease, from 10.9% to 10.6% [2]. Modern contraceptives used by married women 15-49 years in Indonesia increased gradually over the three decades to 2017. However, the use of IUDs and implants continued to decline from 16.4% in 1991 to 7.2% in 2012 and then began to increase in 2017 to 9.4% [3].

The results of research from Fendriyanti Gobel (2016) showed that there was an effect of counseling with ABPK on the choice of contraceptives for mothers at RSTN Boalemo District. This is evident from the statistical analysis using the chi square test, the results of the chi square test show that the p-value =  $0.037 < 0.05$  [4].

Meanwhile, according to Agustina (2012) that knowledge of new IUD family planning acceptors about the IUD family planning method is still lacking, namely 63.83% [5]. To increase the knowledge

of IUD family planning acceptors, one way to do this is to provide counseling before and after IUD installation according to standard steps.

According to the results of family planning services at the Mandrehe Utara Health Center in West Nias Regency, in 2020 there were 58 IUDs installed, in 2021 there were 29 people and until September 2022 there were 9 people. (2022).

North Mandrehe District consists of 12 villages, one of which is Hilimayo Village, which has a population of 832 people, the number of PUS is 84 people. Of these PUS, 49 acceptors are active family planning participants, while 6 new family planning participants are acceptors, while 2 acceptors are MKJP family planning acceptors [5]

Based on the initial survey in Hilimayo Village, Mandrehe Utara District, 10 PUS found reasons for not using MKJP, 6 people because of side effects, 4 people because they did not know about MKJP. The IUD should be good for use because it is a long-term method and can space pregnancies, because PUS in North Mandrehe has >3 children. Many family planning acceptors in North Mandrehe use pills, injections and implants. While the use of KB IUD has the least number of users.

The importance of quality counseling on contraceptive issues by every health worker, especially midwives and doctors, must be increased. Because there are still many young mothers who already have children, they don't understand what contraception to use after giving birth. They have very little information about contraception, so that with early counseling, pregnant women have been given knowledge about the contraceptives to use or choose later after giving birth [6].

## 2. METHOD

This type of research uses Pre-Experiment, which is a research design that is used to find cause and effect with the involvement of researchers in manipulating the independent variables[7]. This research uses parametric statistical analysis, namely statistical parts whose parameters from the population follow a certain distribution[8]. The study used a one-group pretest-posttest design, a technique to determine the effects before and after giving treatment [7].The population in this study were all women of childbearing age who visited the Community Health Center in the working area of the North Mandrehe Health Center, namely Hilimayo Village, totaling 84 people. The sampling technique in this study was accidental sampling. Data analysis was carried out to support the proof of the hypothesis, using Univariate Analysis and Bivariate Analysis.

## 3. RESULTS AND DISCUSSION

### Univariate analysis

#### Characteristics of respondents

The sample size in this study was 26 PUS women from Hilimayo Village who visited the North Mandrehe Health Center in 2022. In this study grouped by age, education, occupation, and parity. The characteristics of the respondents are described in table 1 as follows:

Table 1. Characteristics of Respondents in Hilimayo Village in 2022

No	Demographic Data	Frekuensi	Presentase (%)
1.	<b>Age</b>		
	<25 years	5	19,2
	≥25 years	21	80,8
2.	<b>Education</b>		
	Low Education (Not Completed, Elementary, Middle School)	16	61,5
	Higher Education (High School, Diploma, Bachelor)	10	38,5
3.	<b>Work</b>		
	Doesn't work	18	69,2
	Work	8	30,8
4.	<b>Parity</b>		
	<2 children	6	23,1
	≥2 children	20	76,9

Based on Table 1 above, it is known that the characteristics of respondents based on age are the majority aged  $\geq 25$  years as many as 21 people (80.8%). The education of the respondents is the majority with low education as many as 16 people (61.5%). The majority of the respondents' occupations were not working as many as 18 people (69.2%). and based on parity, the majority had  $>2$  children as many as 20 people (76.9%).

### Decision Making on IUD Contraceptive Devices Prior to Counseling in Hilimayo Village in 2022

Decision-making data prior to counseling in Hilimayo Village in 2022 can be seen in table 2 below:

Table 2 Frequency Distribution of Decision Making on IUD Contraceptive Devices Prior to Counseling in Hilimayo Village in 2022

Decision-making	Frekuensi	%
Agree	0	0
Don't agree	26	100,0
<b>Amount</b>	<b>26</b>	<b>100</b>

Based on Table 2, it shows that the majority of the decision making regarding contraceptive methods before counseling was carried out in Hilimayo Village in 2022 did not agree, namely 26 respondents (100.0%).

### Decision Making for IUD Contraceptive Devices After Counseling in Hilimayo Village in 2022

Decision-making data prior to counseling in Hilimayo Village in 2022 can be seen in table 3 below:

Table 3 Distribution of Frequency of Making Decisions on IUD Contraceptive Devices After Counseling in Hilimayo Village in 2022

Decision-making	Frekuensi	%
Agree	24	92,3
Don't agree	2	7,7
<b>Amount</b>	<b>26</b>	<b>100</b>

Based on Table 3 it shows that the majority agreed to make decisions on contraceptives after counseling in Hilimayo Village in 2022, namely 24 respondents (92.3%)

### Normality test

The normality test was carried out to find out whether the data was normally distributed or not and to determine the statistical test to be used.

Table 4 Data Normality Test with Shapiro-Wilk

Pengambilan Keputusan	p-value	Keterangan
Sebelum	0,000	Tidak Normal
Sesudah	0,000	Tidak Normal

From Table 4 where the normality test using the Shapiro-Wilk test obtained the value of  $\rho$  before counseling = 0.000 and the value of  $\rho$  after being given counseling = 0.000, which means  $\rho < 0.05$  which indicates that the data is not normally distributed, then the statistical test can be continued with an alternative test, namely with the Wilcoxon test to determine differences in decision making before and after being given treatment.

## Bivariate Analysis

### The Influence of Counseling on Family Planning Acceptors in Making Decisions on IUD Contraceptive Devices in Hilimayo Village in 2022

This analysis is used to determine the effect between the two variables, namely whether there are differences in decision making before and after counseling with the statistical test used, namely the Wilcoxon test, which can be seen in table 5 below:

Table 5 Decision Making Before and After Counseling in Hilimayo Village in 2022

Decision-making	Median (minimum-maximum)	Z	Rank Change	F	P value
- Before	0,00		Negative Rating	0,00	0,000
- After	24	-4,899	Positive Rating ties	12,50 2	

Information :

- Negative ratings are changes in decision making before and after giving counseling from "agree" to "disagree".
- Positive ranking is a change in decision making before and after giving counseling from "disagree" to "agree"
- Ties is no change in decision making before and after counseling.

From table 5 it can be seen that decision making for family planning acceptors after being given treatment is higher than decision making before being given treatment, indicated by the respective mean values of 0.00 (Pre) and 24 (Post). The results of the change in the decision-making ranking revealed that 2 family planning acceptors did not experience any changes before and after the counseling was carried out. Based on the results of statistical tests using the Wilcoxon test, it is known that the value of  $p(0.000) < \alpha(0.05)$  means that  $H_0$  is rejected, so there are differences in decision making for family planning acceptors before and after counseling. These results prove that there is a significant effect of counseling on decision making for family planning acceptors in Hilimayo Village in 2022.

## Discussion

### Decision Making on Family Planning Acceptors Before Counseling

At the beginning before counseling was carried out, all respondents were in the disagree category, namely as many as 26 respondents. The decision to disagree is caused by many factors including education and employment.

The level of education of mothers, most of whom have low education, has an effect on increasing the knowledge and attitudes of mothers regarding the choice of contraceptives. Education affects the learning process, the lower a person's education the more difficult it is for that person to receive information. Someone with a high level of education will tend to get information, both from other people and from the mass media. The more information that comes in, the more knowledge one gets about health [9]

Most of the respondents' jobs were unemployed or housewives as many as 18 people (69.2%). This will affect the choice of contraceptives used in relation to financing. Because a wife who doesn't work tends to ask her husband's approval first because this involves a large amount of financing. For some people, the IUD is expensive, so they tend to prefer other contraceptive methods [10].

This is in line with research conducted by Dewi (2015) in the intervention group before treatment, the majority of respondents disagreed about the choice of IUD contraception, namely 26 people (78.79%).

According to Purwoastuti (2015) Counseling is an assistance provided by a trained counselor to individuals (can be 1 person or more) who are experiencing problems (clients), face to face, which aims to enable these individuals to make decisions independently on the problems they face [11]. both psychological, social, and other problems with the hope of being able to solve the problem, understand himself, orient himself according to his abilities and potential so as to achieve adjustment to his environment.

According to the researchers' assumptions, counseling is very useful for helping clients in dealing with problems, ranging from trivial to very complex problems. Seeing the client's condition in general

and individually is important in providing counseling. Midwives need to pay attention to what appears and what is in the client.

### **Decision Making for Family Planning Acceptors After Counseling**

The results of the study after counseling the majority of respondents agreed, namely as many as 24 respondents. There were 2 family planning acceptors who disagreed in making decisions after counseling.

The results in Table 4.5 show that there were 2 respondents who did not agree with the decision to choose IUD contraception. This is because respondents feel they still believe in the myths circulating in society, so respondents choose contraception according to their own wishes even though they have been given proper counseling. Counseling is carried out for those who need help or assistance in choosing contraceptive methods or tools/drugs, for example because they do not know, their knowledge is still lacking or it could be because their knowledge is not correct or wrong about the use of contraceptives. Counseling carried out by health workers, especially midwives, can be carried out with the aim of identifying and accommodating negative feelings, doubts or concerns regarding contraceptive methods [4]

The number of parity respondents is 20 people who have children  $\geq 2$  children. This influences the decision to choose an IUD contraceptive device. A family that already has  $> 2$  children tends to be more interested in using long-term contraception because they feel they have enough to have children and they don't want to have more children. This is in line with Mayasari's research (2016) which realized that the number of children affects mothers' interest in choosing the ideal family planning contraception [12].

The results of this study are also in line with research conducted by Amperiana (2014) concerning the effect of family planning counseling on interest in choosing IUD contraception in postpartum women which shows that increased information provided by health workers can influence mothers' interest in choosing contraception as desired and also according to conditions. body so that it can be concluded that there is an influence of counseling on the interest in choosing IUD contraception in Sampu Village, Ngancar District, Kediri Regency.

Counseling is a very important aspect of family planning and reproductive health services. Thus counseling means officers who assist clients in choosing and deciding which type of contraception to use according to their choice, besides that it can make clients feel more satisfied. Family planning counseling can help mothers get out of various choices and alternatives to reproductive health and family planning (KB) problems. The information given to the client must be conveyed in a complete, honest and correct manner about the contraceptive method that will be held by the family planning candidate/client [4].

According to the researchers' assumptions, being given counseling greatly influences the decision making of prospective KB acceptors to choose IUD contraception.

### **The Effect of Counseling on Decision Making in the Selection of IUD Contraceptive Devices in Family Planning Acceptors at the North Mandrehe Health Center**

Based on the research results, it can be seen that family planning acceptors' decision making after being given counseling is higher than before being given counseling, indicated by the mean values of 0.00 (Pre) and 24 (Post) respectively.

The results of statistical tests using the Wilcoxon test show that the value of  $p (0.000) < \alpha (0.05)$  means that  $H_0$  is rejected, so there are differences in decision making before and after being given counseling.

This research is in line with the results of Sandrinilta's research (2015) which stated that the results of the chi square correlation test obtained  $\chi^2$  count of 6,131 with a significant value of 0.013  $p$  - Value  $< 0.05$ , this means that  $H_a$  is accepted, namely there is a relationship between counseling and the accuracy of choosing contraceptives[10].

The results of this study indicate that the percentage of decision making is greater than 24 people. This can be seen due to the increase in respondents' knowledge about IUD family planning so that they are aware of the importance of the benefits of the IUD family planning program, as well as in influencing the decisions to be made in choosing IUD contraceptives.

In this case counseling can be considered effective enough to increase stability in decision making. In this case, through the counseling approach, the counseling method stimulates the views of officers regarding the contraceptives that acceptors should choose. Little by little the officers conveyed the various advantages, disadvantages, effectiveness and efficiency of each contraceptive device. Through counseling techniques the target is given the freedom to choose contraceptives on the basis of consideration of the advantages, disadvantages, effectiveness and efficiency of each contraceptive with all the risks.

#### 4. CONCLUSION

Decision making for family planning acceptors before counseling was carried out in Hilimayo Village in 2022, the majority disagreed as many as 26 people. Decision making for family planning acceptors after counseling was carried out in Hilimayo Village in 2022, the majority agreed as many as 24 people. There is a significant effect of counseling on decision making for family planning acceptors in Hilimayo Village in 2022.

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