

IMPORTANCE FAMILY PLANNING EDUCATION ON WOMEN CHILDBEARING AGE IN INCREASING KNOWLEDGE AND CONTRACEPTIVE SELECTION

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ABSTRAK : PENTINGNYA PENDIDIKAN KELUARGA BERENCANA PADA PEREMPUAN USIA SUBUR DALAM MENINGKATKAN PENGETAHUAN DAN PEMILIHAN KONTRASEPSI

Latar belakang: Program Keluarga Berencana (KB) merupakan strategi penting dalam pengendalian pertumbuhan penduduk dan peningkatan kualitas kesehatan reproduksi. Meskipun beragam metode kontrasepsi tersedia, tingkat pengetahuan dan penggunaan kontrasepsi di kalangan Wanita Usia Subur (WUS) masih belum optimal. Data menunjukkan bahwa angka kehamilan tidak direncanakan dan komplikasi kesehatan akibat jarak kelahiran yang terlalu dekat masih menjadi masalah kesehatan masyarakat yang signifikan. Kurangnya pemahaman komprehensif tentang berbagai metode kontrasepsi, manfaat, efek samping, serta ketepatan dalam pemilihan metode yang sesuai dengan kondisi individu menjadi faktor utama permasalahan ini.

Tujuan: Menganalisis efektivitas pendidikan Keluarga Berencana (KB) dalam meningkatkan pengetahuan dan keputusan memilih kontrasepsi pada perempuan usia subur (WUS).

Metode: Desain penelitian pra-eksperimental dengan pendekatan one-group pre-test post-test, penelitian dilakukan pada 15 WUS di TPMB Hj.Robiatul Munawaroh yang berlokasi di Ketapang Kademangan, Kota Probolinggo, Jawa Timur 67222. Intervensi tersebut berupa program pendidikan KB intensif selama satu bulan.

Hasil: Hasil menunjukkan peningkatan skor pengetahuan yang signifikan dari 56,4 (pre-test) menjadi 82,7 (post-test) dengan nilai $p < 0,05$. Dari 15 responden tersebut, 11 orang (73,3%) memutuskan untuk memasang alat kontrasepsi setelah mengikuti program pendidikan. Metode kontrasepsi yang paling banyak dipilih adalah MKJP (Metode Kontrasepsi Jangka Panjang) sebanyak 7 orang (63,6% dari mereka yang melakukan pemasangan).

Kesimpulan: Studi ini menyimpulkan bahwa pendidikan KB komprehensif efektif dalam meningkatkan pengetahuan dan mendorong keputusan pemilihan kontrasepsi di WUS, meskipun dalam ukuran sampel yang terbatas.

Saran: Berdasarkan hasil penelitian, disarankan untuk: (1) Mengintegrasikan program pendidikan KB yang komprehensif ke dalam layanan kesehatan primer dengan melibatkan berbagai media pembelajaran; (2) Meningkatkan keterlibatan suami/pasangan dalam sesi edukasi KB untuk memperkuat dukungan keluarga; (3) Menguatkan kapasitas tenaga kesehatan dalam memberikan konseling KB yang berkualitas melalui pelatihan berkala; (4) Mengembangkan materi edukasi yang disesuaikan dengan karakteristik sosial-budaya masyarakat setempat; dan (5) Melakukan monitoring dan evaluasi berkelanjutan terhadap efektivitas program pendidikan KB untuk perbaikan berkelanjutan.

Kata kunci : Pendidikan Keluarga Berencana, Wanita Usia Subur, Pengetahuan Kontrasepsi dan Pemilihan Alat Kontrasepsi

ABSTRACT

Background: The Family Planning Program (KB) is an important strategy in controlling population growth and improving the quality of reproductive health. Although a variety of contraceptive methods are available, the level of contraceptive knowledge and use among Women of Childbearing Age is still not optimal. Data shows that unplanned pregnancies and health complications due to too close a birth distance are still a significant public health problem. The lack of a comprehensive understanding of various contraceptive methods, benefits, side effects, and accuracy in choosing a method that suits individual conditions are the main factors in this problem.

Objective: To analyze the effectiveness of Family Planning (KB) education in improving knowledge and decision to choose contraception in women of childbearing age (WUS).

Methods: Pre-experimental research design with a one-group pre-test post-test approach, the research was conducted at 15 WUS at TPMB Hj.Robiatul Munawaroh located in Ketapang Kademangan, Probolinggo City, East Java 67222. The intervention is in the form of an intensive family planning education program for one month.

Results: The results showed a significant increase in knowledge score from 56.4 (pre-test) to 82.7 (post-test) with a value of $p < 0.05$. Of the 15 respondents, 11 people (73.3%) decided to install contraceptives after participating in an educational program. The most chosen contraceptive method was MKJP (Long-Term Contraceptive Method) as many as 7 people (63.6% of those who did the installation).

Conclusions: This study concluded that comprehensive family planning education was effective in increasing knowledge and driving contraceptive selection decisions in WUS, albeit in a limited sample size.

Suggestion: Based on the results of the study, it is recommended to: (1) Integrate a comprehensive family planning education program into primary health services by involving various learning media; (2) Increase the involvement of husbands/spouses in family planning education sessions to strengthen family support; (3) Strengthening the capacity of health workers in providing quality family planning counseling through periodic training; (4) Developing educational materials that are adapted to the socio-cultural characteristics of the local community; and (5) Conduct continuous monitoring and evaluation of the effectiveness of family planning education programs for continuous improvement.

Keywords : Family Planning Education, Women Of Childbearing Age, Contraceptive Knowledge And Contraceptive Selection

INTRODUCTION

Family Planning (KB) is a program that aims to regulate the number and distance of child births, as well as improve the quality of family life (Iga Retia mufti 2025). Family planning helps couples to plan the desired number of children, the distance between pregnancies, and create a healthy and prosperous family (Armand and Setyowati 2024). Family Planning (KB) is one of the main strategies in improving the quality of family life and reducing maternal and child mortality rates (Mardhiah, Dewi, and Aminy 2020) Women of childbearing age, are women aged 15–49 years, the success of this program is largely determined by the level of knowledge and understanding of WUS regarding the various contraceptive methods available (Silfina indriani 2024) The Indonesian government's efforts to improve the quality of the population through birth control, family resilience coaching, and improving family welfare, namely through the Family Planning (KB) program (Pratiwi et al. 2018). Although the family planning program has been implemented for decades, there are still various challenges in its implementation, especially related to the low knowledge and accuracy of the selection of contraceptives in women of childbearing age (WUS) (Hardati', Rahayu', and Karsinah 2017) Fear of side effects, and cultural influences often make women hesitate or delay using contraceptives (Sedlander et al. 2018)

In 2020, the increase in the number of people was uncontrolled and difficult to solve in a short time According to DUKCAPIL, the number of people in the first semester of 2020 was 263,583 people in June with an average increase of 0.88% per year. This makes Indonesia the number four developing country after China, India, and the

United States (Sangadji 2024). The number of couples of childbearing age in Probolinggo City in 2023 is 41,691 with 28,292 active family planning participants or 67.86%. The most widely used contraceptive method option is the injection method of 50, 45% and the least is the 0% MAL method. The highest percentage of Postpartum Family Planning is in Kanigaran District at 67.70% and the lowest in Wonoasih District at 23.30%. The overall percentage of Postpartum Family Planning in Probolinggo City in 2023 is 48.70%, greater than 43.5% in 2022 (Probolinggo City Health Office 2024)

Research shows that family planning education provided by health workers directly or through digital media is able to increase women's understanding and awareness in choosing more effective contraceptives and according to their needs (Sedlander et al. 2018). Community-based education has also been proven to increase adherence to contraceptive use and reduce the rate of family planning discontinuation (Pety Merita S, Ayu Rosita D 2022). The selection of contraceptives is a crucial aspect of healthy and planned family planning (Kriel et al. 2019). Women of childbearing age need to have adequate knowledge about various contraceptive methods in order to be able to choose the tool that best suits their health conditions, preferences, and reproductive plans (Binturu and Larompong 2022). Lack of knowledge can lead to errors in use, inconsistencies in methods, and even contraceptive failures, leading to unplanned pregnancies (Aryati, Sukamdi, and Widyastuti 2019). Good knowledge also helps women to choose more effective and efficient long-term contraceptive methods (MKJP) such as IUDs and implants (Paramita, Dwi Hartati2, Sumiati3 2025). Unfortunately, this method is often avoided

due to myths and a lack of education from health workers (Natalia 2024). In the study (Yani et al. 2023) on a previous qualitative study, it examined the decision-making process of women of childbearing age (WUS) in choosing contraceptives in the womb (AKDR) in Batooge Village. WUS has limited knowledge about AKDR contraceptives. The majority of WUS prefer implant-type long-term contraception compared to IUD/IUD (Anggraini et al. 2024).

One of the keys to the success of the family planning program is the participation of individuals, both wives and husbands, in the use of contraceptives (Irmayanti A. Oka¹, Eka Fadillah Bagenda² 2023). Maternal knowledge and husband's support greatly influence the choice of long-term contraception (Olavia, Yusrawati, and Afriwardi 2021). Several previous studies have shown a relationship between the level of knowledge about birth control and the choice of contraceptive method where the mother's knowledge can influence an individual's decision to choose the method that best suits their needs and preferences (Priskatinda and Ronoatmodjo 2021). Other research also shows that husband support also influences the choice of contraceptive methods (Khalimah et al. 2025). WUS has inadequate knowledge about birth control methods, effectiveness, side effects, and contraindications to their use. This has an impact on the incorrect selection of contraceptives, inconsistent use, and the occurrence of contraceptive drop-outs. (Blessed 2022). The side effects of long-term birth control can vary depending on the type, but some common side effects include changes in menstrual patterns, weight gain, mood swings, and breast pain. (Triwahyuningsih 2025). However, long-term contraception has very effective advantages, which can provide longer protection against unwanted pregnancies (Massay et al. 2024)

Comprehensive and sustainable family planning education is one of the important strategies to overcome these problems (Asvio et al. 2022) However, studies on the effectiveness of family planning education in improving knowledge and decisions on the selection of contraceptives in the context of a small sample at the Independent Practice Midwife level are still limited. This study aims to analyze the importance of family planning education at WUS in improving knowledge and decisions on the selection of contraceptives, focusing on a limited sample at TPMB Ketapang, Kademangan, Probolinggo City. The results of the study are expected to provide empirical evidence on the effectiveness of family planning education even

though it is applied on a small scale in First-Level Health Facilities (FKTP)

RESEARCH METHODS

This study uses a pre-experimental design with a one group pre-test post-test approach. This design was chosen to evaluate changes in knowledge and contraceptive selection decisions before and after the birth control education intervention. The research was carried out at TPMB Ketapang Kademangan, Probolinggo City in December 2024. The research population is all WUS who visit TPMB Ketapang Kademangan, Probolinggo City.

A total of 15 WUS samples were taken using purposive sampling techniques with inclusion criteria: aged 15-49 years, married, have not used contraception or are considering changing methods, not pregnant, and be willing to participate in the entire research series. The intervention is in the form of an intensive family planning education program for one month consisting of: group education session (2 sessions, @90 minutes) with material on the basics of family planning, types of contraception, effectiveness and side effects, as well as indications and contraindications, Individual counselling (1 session, @45 minutes) to discuss specific contraceptive needs, provision of educational media in the form of booklets and family planning return sheets and discussion session with spouses (1 session, @60 minutes) for 10 respondents whose husbands are willing to attend. The Research Instruments used include: a questionnaire of KB knowledge (20 items) that has been validated with a reliability value of cronbach's alpha of 0.85, contraceptive selection form and observation sheet for the installation of contraceptives.

Data were analyzed descriptively and inferentially. Descriptive analysis includes frequency distribution, percentage, mean, and standard deviation. Inferential analysis used the Wilcoxon Signed Rank Test to compare knowledge scores before and after the intervention. Spearman's correlation analysis was used to test the relationship between knowledge and contraceptive selection.

This research has received ethical approval from the Health Research Ethics Committee with the number: NJ-T06/014/KEPK/F.Kes/12.2024. All respondents signed informed consent before participating in the study.

RESEARCH RESULTS

Characteristics of Respondents. Table 1 shows the characteristics of 15 respondents who participated in the study. The majority of

respondents were 26-35 years old (53.3%), had a high school education/equivalent (46.7%), and had 1-2 children (66.7%).

Table 1
Characteristics of Respondents (n=15)

Characteristics	Frequency (n)	Percentage (%)
Age (years)		
15-25	4	26,7
26-35	8	53,3
36-49	3	20,0
Education		
Elementary/equivalent	2	13,3
Junior High School/Equivalent	5	33,3
High School/equivalent	7	46,7
College	1	6,7
Work		
Housewives	9	60,0
Farmer/Labourer	2	13,3
Self employed	3	20,0
Private Employees	1	6,7
Number of Children		
Not having children yet	2	13,3
1-2 child	10	66,7
≥3 child	3	20,0
Family Planning Use History		
Belum pernah	6	40,0
Pills	3	20,0
Injection	5	33,3
IUD	1	6,7

Knowledge about Family Planning Before and After Education

The results of the analysis showed a significant increase in the respondents' knowledge score about family planning after the educational intervention, as shown in Table 2.

Table 2
Change in Knowledge Score about Family Planning Before and After Education (n=15)

Variable	Pre-test	Post-test	Difference	p-value
	*Mean±SD	Mean±SD		
Knowledge of family planning	56,4±12,8	82,7±9,5	26,3	0,001
Knowledge of the types of contraceptives	59,2±14,3	84,5±10,2	25,3	0,001
Knowledge of MKJP	48,6±15,7	80,3±11,8	31,7	0,001
Knowledge of side effects	53,1±13,6	78,9±12,4	25,8	0,001
Knowledge of contraindications	51,2±14,5	77,1±13,2	25,9	0,001

*Wilcoxon Signed Rank Test, significant at p<0.05

Table 2 shows that the average score of knowledge about family planning increased from 56.4 (pre-test) to 82.7 (post-test) with a difference of 26.3 points. The largest increase occurred in the domain of knowledge about MKJP (31.7 points).

From 15 respondents who participated in the family planning education program, 11 people (73.3%) decided to install contraceptives, while 4 people (26.7%) had not installed them for various reasons.

Table 3
Distribution of Contraceptive Selection and Installation Decisions (n=15)

Variable	Frequency (n)	Percentage (%)
Installation Results		
Performing the installation	11	73,3
Haven't installed yet	4	26,7
Types of Contraceptives Chosen	(n=11)	
MKJP		
IUD	3	27,3
Implan	4	36,4
Non-MKJP		
Inject 3 months	3	27,3
Pills	1	9,1

Table 3 shows that of the 11 respondents who had contraceptives, 7 people (63.6%) chose MKJP (IUD and implant), while 4 people (36.4%) chose non-MKJP (injections and pills).

Reasons for Not Installing Contraceptives
Four respondents who have not installed contraceptives conveyed several reasons, as shown in Table 4.

Table 4
Reasons for Not Installing Contraceptives (n=4)

Reason	Frequency (n)	Percentage (%)
Still want to discuss with my husband	2	50,0
Fear of side effects	1	25,0
Want to delay until the next period	1	25,0

The Relationship of Knowledge with Contraceptive Selection Decisions

The results of Spearman's correlation analysis showed a significant positive relationship between post-test knowledge score and contraceptive selection decision ($r=0.683$, $p=0.005$). This means that the higher the knowledge about family planning, the more likely it is to choose and install contraceptives.

DISCUSSION

The Effect of Family Planning Education on Knowledge Improvement. The results showed a significant increase in the respondents' knowledge score about family planning after the educational intervention with a difference of 26.3 points. These findings are in line with the research of Susilawati et al. (2022) which reported an increase in family planning knowledge by 24.7 points after multimedia education interventions. Although the number of samples in this study was limited (n=15), a

significant increase in knowledge showed the effectiveness of the intensive family planning education program implemented. The largest increase occurred in the domain of knowledge about MKJP (31.7 points), which suggests that educational interventions successfully address information gaps about long-term contraceptive methods. This is important considering that the use of MKJP in Indonesia is still relatively low compared to other countries in Southeast Asia (Lubis 2021). A comprehensive family planning education program with various methods (group education, individual counseling, and educational media) has proven effective in improving respondents' understanding of various aspects of family planning. This multi-method approach allows for a more comprehensive delivery of information that is in accordance with individual needs (Karuniawati et al. 2024). (Ernawati et al. 2023)

The Effect of Family Planning Education on the Decision on the Selection and Installation of

Contraceptives, Of the 15 respondents who participated in the family planning education program, 11 people (73.3%) decided to install contraceptives. This figure is quite high given the limited number of samples and the relatively short intervention time (one month). These findings indicate that intensive and comprehensive family planning education can drive contraceptive use decisions in a relatively short time.. Interestingly, of the 11 respondents who had contraceptives, 7 people (63.6%) chose MKJP (IUD and implant). This shows a shift in preference from non-MKJP methods which are generally more popular in Indonesia. This shift is likely due to a significant increase in knowledge about MKJP after educational interventions. These findings are in line with previous research that found that family planning education focused on MKJP can increase the use of long-term methods by up to 58.7%. Although on a smaller scale, this study shows a similar tendency (Mujahadatuljannah, Indriani, and Rabiattunnisa 2023)

The Relationship of Knowledge with Contraceptive Selection Decisions. The results of the correlation analysis showed a significant positive relationship between the post-test knowledge score and the decision to choose contraceptives ($r=0.683$, $p=0.005$). These findings confirm the theory that knowledge is one of the important determinants in decision-making related to reproductive health. Respondents with higher knowledge scores were more likely to choose MKJP compared to non-MKJP methods. This can be explained by a better understanding of the effectiveness, long-term benefits, and myths surrounding MKJP after participating in an educational program.

Factors Affecting the Installation of Contraception. Four respondents (26.7%) had not had contraceptives fitted for a variety of reasons, including the need for further discussions with the husband, concerns about side effects, and technical reasons (waiting for the next menstruation). These findings suggest that despite increased knowledge, contraceptive use decisions are influenced by a variety of social, cultural, and personal factors. The involvement of the husband in family planning decision-making is still an important factor, as shown by two respondents who wanted to discuss further with the husband. This is in line with research (Halawa 2015) which found that husband support is a significant predictor of contraceptive use in Indonesia, as well as similar research conducted (Putri 2023) on partner communication

greatly influencing the choice of long-term contraception.

Advantages and Limitations of Research, This research has several advantages, including: a comprehensive educational approach with various methods, clear outcome measurement (increased knowledge and installation of contraceptives), and the involvement of the spouse in the educational process. However, this study also has some limitations that need to be considered: The limited number of samples ($n=15$) which limits the generalization of results, a pre-experimental design without a control group that limits the ability to control confounding factors, the relatively short follow-up period so that the continuity of contraceptive use in the long term cannot be ascertained, and the research was only conducted in one health center so that the local context might affect the results.

CONCLUSION

Based on the results of the study, it can be concluded that: Comprehensive and intensive family planning education significantly increases WUS's knowledge about family planning, especially in the aspect of MKJP, Family planning education programs were effective in encouraging decisions on the selection and installation of contraceptives, with 73.3% of respondents installing contraceptives after intervention. The majority of respondents who had contraceptive devices installed (63.6%) chose MKJP (IUD and implant). There is a significant positive relationship between increased knowledge and contraceptive selection decisions and Factors such as the need to discuss with the husband, concerns about side effects, and technical reasons become obstacles in the installation of contraceptives despite having received education.

SUGGESTION

Based on the results of the study, it is recommended: For Health Centers: develop an intensive family planning education program that focuses on MKJP, Involve spouses (husbands) in family planning education sessions to increase support and participation and provide follow-up counseling for WUS who are still hesitant to use contraception. For Health Workers: improve communication skills and family planning counseling, especially in addressing concerns about side effects and provide ongoing support for new acceptors to ensure continuity of contraceptive use. For the Next Researcher: conduct research with a stronger design (RCT) and a larger sample count, develop and test the effectiveness of various family planning

education models that are in accordance with the socio-cultural characteristics of the community and conduct long-term follow-up to assess the continuity of contraceptive use.

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