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The Influence Of Health Education Using Backsheets On Knowledge About Intra Uterine Device (IUD) Among Mothers At The Sukaraja Health Center Tasikmalaya District

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ABSTRACT

Background & Objective : Based on Indonesia's health profile (2022), IUD contraceptive users are 23,383, in West Java Province 8.04%, and in Tasikmalaya Regency 17,979 people, while in Sukaraja Community Health Center 907 people (19%). The low use of long-term contraception has several factors, one of the influencing factors is the lack of information provided to prospective family planning participants. By providing complete and sufficient information about IUD contraception, many prospective contraceptive participants understand and are not afraid to use IUD contraception. The aim of the research was to determine the effect of health education using flip sheets on knowledge about Intra Uterine Devices (IUD) among mothers at the Sukaraja Community Health Center, Tasikmalaya Regency. **Method:** This research uses a type of quantitative research, namely quasi experimental design research with a one group pretest and posttest design. The population in this study was all 48 mothers at the Sukaraja Community Health Center who gave questionnaires before and after being given treatment. **Result:** Based on the results of research using the Wilcoxon test, it was found that the probability value of the sample experiencing an increase in knowledge about IUD contraception before and after being given health education was Asymp. Sig. (2-tailed) 0.000 < 0.05, then providing health education using flip sheets about IUD family planning to mothers has an influence on the level of knowledge. **Conclusion:** The conclusion from this research is that there is an influence on the level of knowledge in providing education.

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Introduction

The results of the 2019 population census show that the population of Indonesia continues to increase to 265 million, consisting of 133.17 million men and 131.88 million women. Based on the Human Development Index (HDI) data in 2018, Indonesia ranks 124th out of 187 countries in the world. Even in the Southeast Asian region, Indonesia ranks 6th out of 10 ASEAN countries. Based on 2018 Riskeìsdas data, contraceptive use in Indonesia is 66% (Ministry of Women's Empowerment and Child Protection, 2018). Based on the 2020 Indonesian health profile, the number of family planning participants using injections is 63.7%, pills 17%, condoms 1.2%, implants 7.4%, AKDR/IUD 7.4%, MOIW 2.7% and MOIP 0.5%. The number of family planning participants in March 2021 throughout Indonesia included 23,383 IUD users, implants 51,536, injections 341,109, pills 146,767, and condoms 19,583 acceptors (BKKBN, 2021).

The number of family planning acceptors in West Java in 2022 was 1,423,800 people. IUD users accounted for 8.04%, MOIP users accounted for 0.29%, MOIW users accounted for 2.65%, implant users accounted for 2.50%, injection users accounted for 55.36%, pill users accounted for 29.85%, and condom users accounted for 1.31%. The number of active family planning acceptors in Tasikmalaya Regency in 2022 was 89,702 people, with 17,979 people using IUDs. Meanwhile, in the Sukaraja District, there were 6,924 active family planning acceptors, with 1,938 people using IUDs.

Based on a report from the Sukaraja Community Health Center, the number of couples of childbearing age (PUS) reached 5,384 couples, the coverage of new family planning participants as of November 2022 was 329 couples, while the coverage of active family planning participants was 4,769 people. The percentage of family planning participants using condoms was 87 people (1.8%), pills 819 people (17.2%), injections 2,776 people (58.2%), IUDs 907 people (19%), implants 77 people (1.6%), MOIW 99 people (2.1%), while MOIP 4 people (0.1%) (PKM Sukaraja Profile, 2022).

Contraception used by couples of childbearing age (PUS) in Indonesia mostly uses modern family planning methods (SDKI, 2017). The Population, Family Planning, and Family Development Program (KKBPK) encourages the use of Long-Term Contraceptive Methods (MKJP), such as Intrauterine Devices (IUD), implants, Male Sterilization (MS) and Female Sterilization (FS) (SDKI, 2017). Considerations in choosing LFM are identified as being related to factors including education level, knowledge, culture, welfare level, communication, information, and education received by couples of childbearing age (Armini and Hadisuyatmana, 2020).

The most ideal contraception for postpartum and breastfeeding mothers is one that does not suppress breast milk production, namely the Intrauterine Device (IUD) (BKKBN, 2019). Knowledge about family planning can be obtained by seeking information related to contraception. In learning about family planning, one thing that must be considered is knowledge about choosing a contraceptive method. Things to consider when choosing contraception include effectiveness, ease of use, safety, the possibility of restoring fertility, and the availability of various types and kinds of contraceptive devices. It is hoped that higher education and knowledge about

contraception among women of childbearing age can help them choose an effective method of contraception. Health education media play an important role in providing health education because they can support other components. One of the media used is flip charts. Flip charts are in the form of messages or information in the form of flip charts.

Objective

The purpose of this study was to determine the effect of health education using feedback sheets on knowledge about intrauterine devices (IUDs) among mothers at the Sukaraja Community Health Center in Tasikmalaya Regency.

Method

This type of research is quantitative descriptive with a quasi-experimental design and uses a one-group pretest and posttest design. The total sample consisted of 48 mothers in the Sukaraja Community Health Center area, Tasikmalaya Regency, using total sampling technique. The instrument used in this study was a questionnaire about knowledge of IUDs, which was analyzed using the Wilcoxon test. The study was conducted at the Sukaraja Community Health Center in Tasikmalaya Regency from May to June 2024.

Result

Table 1. Frequency Distribution of Mothers' Knowledge Levels Before Receiving Counseling on IUD Contraception

Knowledge Level (Pretest)	N	%
Good	7	14.6
Fair	19	39.6
Poor	22	45.8
Total	**48**	**100**

Table 1 shows that the pretest results indicate that the majority of respondents have insufficient knowledge, totaling 22 people (45.8%), the remaining respondents had sufficient knowledge, totaling 19 people (39.6%), and respondents with good knowledge totaled 7 people (14.6%).

Table 2. Frequency Distribution of Mothers' Knowledge Levels After Receiving Counseling on IUD Contraception

Knowledge Level (Posttest)	N	%
Good	34	70.8
Fair	14	29.2
Poor	0	0
Total	**48**	**100**

Table 2 shows that the post-test results indicate that the majority of respondents had good knowledge, totaling 34 people (70.8%), and respondents with sufficient knowledge totaled 14 people (29.2%).

Table 3. The Effect of Health Education on IUD Contraception on Mothers' Knowledge Levels

Measurement	Health Education Using Flipchart	Mean	Statistical Test Sig. (2-tailed)
Knowledge about IUD Contraception	Pre-test	12.17	0.000
	Post-test	16.79	

Table 3 shows the results of the Wilcoxon Signed Rank Test, which indicates that the average knowledge score about IUDs before receiving health education using a questionnaire at the Sukaraja Community Health Center in Tasikmalaya Regency was 12.17. and after receiving health education using flipcharts, the average score was 16.79. The results of this study show that there is an effect of health education using flip charts on knowledge about Intrauterine Devices (IUD) among mothers at the Sukaraja Community Health Center in Tasikmalaya Regency, with a significant value of 0.000 because it is < α (0.05).

Discussion

The results of the study on the level of knowledge of mothers before receiving health education using a questionnaire showed that the majority of respondents had insufficient knowledge, with 22 respondents (45.8%). After receiving health education using the feedback form, their knowledge improved to a good level in 34 people (70.8%).

The results of statistical analysis using the Wilcoxon nonparametric test using the application obtained an Asymp. Sig. value of 0.000 or a p-value of <0.05, meaning that Ha was accepted. Therefore, it can be concluded that health education using flipcharts has an effect on mothers' knowledge about IUDs at the Sukaraja Community Health Center in Tasikmalaya Regency.

This is in line with research conducted by Izzatul, et al (2020), which states that the level of knowledge of women of childbearing age before and after being given health education about IUD contraception with T-test results -Test p value 0.001 < (P 0.05), meaning that statistically there is a significant difference in the level of knowledge of women of childbearing age before and after being given health education.

Noitoadmojo (2017) states that education is directly related to a person's knowledge, so it can be assumed that the higher the level of education, the greater a person's knowledge. Health education media plays an important role in providing health education because it can support other components.

In this study, the majority of respondents had a secondary education, totaling 33 people (47.9%). According to Pratami (2021), the higher the level of education, the more it will influence a person's opinions, thoughts, attitudes, independence, and rationality in making decisions. In addition, it also increases awareness about the benefits of using IUDs. Education influences the learning process; the higher a person's education, the easier it is for that person to accept information (Riyanto, 2016). The level of education of respondents greatly influences the process of receiving

the information conveyed and will have an impact on the decisions and attitudes that will be taken.

The increase in mothers' knowledge can also be caused by age factors. In this study, the majority of mothers were aged 20-35 years (68.8%). According to (Maryati & Indirani, 2021) , the basic pattern of rational contraceptive use is between the ages of 20-35 because at that age, mothers, especially women of childbearing age, still want to have children and are in the period between pregnancies, so long-term contraception is more needed. A mother's age can influence her comprehension and way of thinking. As she gets older, her comprehension and way of thinking will also improve, so that her knowledge will increase (Riyantoì, 2016). Between the ages of 20 and 35, mothers will choose to have children and space out their pregnancies. With increasing age, their comprehension will be affected when counseling is provided.

Flip charts are in the form of messages or information in the form of flip pages. They are usually in the form of a book, where each page contains an illustration and on the back is information and messages related to the illustration. Noìtoìatmoìdjoì (2017) states that flip charts were chosen because, according to the researcher, this medium is well received by all respondents, regardless of their level of education. because flipcharts contain images and material presented by researchers. Flipcharts are also more affordable and durable in use.

This is in line with research conducted by Nugraheini, et al. (2019), which states that there was an increase in knowledge before and after counseling using feedback sheets. Similarly, research conducted by Martiyana (2018) states that discussion methods using leaflets and lectures with feedback sheets are equivalent to increasing individual knowledge, attitudes, and beliefs, thus both can be alternatives for health education.

The author believes that the level of knowledge about IUD contraception is influenced by the level of education. With less education, people understand less about IUD contraception. The higher a person's education, the easier it is for them to accept information and the more knowledge they have. Conversely, a low level of education will hinder the development of a person's attitude towards receiving information and knowledge. Therefore, researchers assume that a high level of education and knowledge in a person is one of the efforts to solve every problem or take action, a decision that lies within themselves. Health education about contraception is closely related to the choice of contraception. To overcome the respondents' lack of knowledge, the action taken by the respondents to increase their knowledge was through counseling/consultation on various types of contraception for mothers, especially those of childbearing age.

Conclusion

Based on the findings of this study, it can be concluded that the level of knowledge of mothers before being given counseling using a flip chart about IUD contraception was mostly in the low category, and after being given counseling, it was

mostly in the good category. The effect of health education using flipcharts on knowledge about intrauterine devices (IUDs) among mothers at the Sukaraja Community Health Center in Tasikmalaya Regency. It is recommended that the Sukaraja Community Health Center create a routine program schedule to provide health education to mothers, especially women of childbearing age, so that women of childbearing age at the Sukaraja Community Health Center are aware of information and developments regarding IUD contraception.

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Author Contribution

Metty Nurherliyany and Indri Damayanti contributed to the study design, data collection, data analysis, interpretation of results, and manuscript writing, while Yuyun Rahayu provided supervision, guidance, and critical revision of the manuscript, and Yanti Srinayanti contributed to the supervision, methodological review, and final approval of the manuscript.

Conflict of Interest

The author declares no conflict of interest related to the research, authorship, or publication of this article.

Ethical Clearance

This study received ethical approval.

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