

## Factors Related to the Behavior of Using IUD Contraceptives in Women of Childbearing Age in The Koto Baru Health Center Work Area, Sungai Penuh City in 2021

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### ABSTRACT

Population growth in Indonesia is always increasing. Until now, Indonesia is still ranked fourth in the world. One effort to overcome the population problem is to participate in the Family Planning (KB) program, but the prevalence of using the IUD method in 2015-2017 in developing countries has decreased even though the effectiveness of the IUD is 97-99% in preventing pregnancy and long-term use. This type of research is descriptive analytic with a cross sectional approach. The population in this study were all women of childbearing age in the working area of the Koto Baru Health Center as many as 651 people with proportional random sampling technique with a sample of 87 people. The results showed that out of 87 respondents, 68 (78.2%) did not use an IUD, 74 (85%) did not receive husband's support as many as 61 (70.1%) and the quality of family planning services was not good 64 (73.6%). From the chi square statistical test the relationship between knowledge and husband's support with IUD contraceptive use behavior  $p\text{-value} = 0.000$ , while the statistical test of the relationship between family planning service quality and IUD contraceptive use behavior  $p\text{-value} = 0.002$ .

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## 1. Introduction

Increasing population growth will result in greater efforts being made to maintain people's welfare, large population with a relatively high population growth rate, uneven population distribution, young population structure, population quality that still needs to be improved (Septianingrum, Wardani, and Kartini 2018). The world's population in 2019 reached 7.7 billion people. This figure grew by 1.08% from 2018 which was 7.6 billion people. During the last ten years, the world's population has steadily increased with a growth range of 1-1.2% per year. The population growth rate in Indonesia in 2020 tends to increase very quickly. In 2010 the population of Indonesia was 243 million and in 2020 it was 271 million.

One of the efforts to overcome the population problem is to participate in the Family Planning (KB) program. This program is intended to assist couples and individuals in achieving quality reproductive health goals. In addition, this program can reduce the Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) as well as overcome reproductive health problems in order to build quality small families, and to prepare life in supporting efforts to improve the quality of future generations (BKKBN, 2017).

Contraception is an effort to prevent pregnancy can be temporary or permanent. There are two methods of contraception, namely MKJP (IUD, implant, MOW, and MOP) and Non-MKJP (pills, injections and condoms). According to BKKBN (2012) women of childbearing age (WUS) after delivery should use MKJP to maintain maturity for the next gestational age while maintaining a safe and healthy pregnancy distance. The IUD is one of the contraceptives that is prioritized for use by the BKKBN.

IUD (Intra Uterine Device) is a contraceptive device that is inserted into the uterus, made of materials such as plastic, some are wrapped in copper, and have various shapes. in the womb by health personnel (doctors, trained midwives). Before the spiral is installed, the mother's health must be checked first to ensure its suitability. On the other hand, the IUD is installed during menstruation or immediately 40 days after giving birth (Subrata, 2013).

The effectiveness of the IUD is quite high in preventing pregnancy, contraception that does not have hormonal side effects, is effective and can be used shortly after delivery, but the prevalence of using the IUD method in 2015-2017 in developing countries has decreased (Lubis, 2017), even though the effectiveness of the IUD is 97-99 % can prevent pregnancy and long-term use. The current condition, the use of long-term effective contraceptive methods, especially the IUD, has relatively decreased, while the use of hormonal contraceptive methods such as injections dominates the use of contraception (BKKBN, 2013). According to the research of Neri et al (2017), the contraceptive effect is very good with safety and acceptability, especially in relation to maintaining a good quality of life, sexuality and decreasing desminorrhea.

Several factors that influence the use of contraception include predisposing factors, supporting factors, driving factors and environmental factors (Priyoto, 2014). Predisposing factors (knowledge, attitudes, beliefs, values, traditions, and lifestyles), supporting factors for the availability of health facilities, access to health facilities, health regulations, physical environment, family norms, and availability of food sources and driving factors (husband's support, family, community leaders, attitudes of officers, and friends (Notoatmojo, 2014). In choosing a contraceptive method, all women of childbearing age have several factors to consider, including the couple's factors, health factors and factors from the contraceptive method itself, where in these three factors there are job factors, perceived effectiveness,

One of the most important factors in the use of contraception is the quality of services that provide information, education and communication to family planning acceptors (Maheasy & Indrawati, 2015). The quality of family planning services is a very important element in achieving long-lasting use of contraceptives. Quality of care is a key component of adaptable program efforts to reduce contraceptive drop out rates and contribute to fertility decline. Good service quality will provide knowledge about various contraceptive methods that will be used by clients (Hariastuti, 2011).

## **2. Methods**

This research is a quantitative study with an analytical descriptive study, namely research or study of the relationship between two variables in a situation or group of subjects (Sugiyono, 2017), with a cross sectional design. The design of this study was used to examine an event at the same time or at one time. The dependent and independent variables in this research design were assessed simultaneously (Nursalam, 2017). The time of this research was carried out on August 1-14, 2021. The population of this study were women of childbearing age in the working area of the Koto Baru Health Center in 2020 as many as 651 people. The population of this study were women of childbearing age in the working area of the Koto Baru Health Center in 2020 as many as 651 people. The sample in this study were women of childbearing age (WUS). The sampling technique in this study used a proportional random sampling technique which took subjects from each working area of the Koto Baru Health Center with a large population from each village. Primary data were obtained directly through interviews with respondents who had been selected based on sample criteria by using a questionnaire regarding the factors related to the behavior of using the IUD contraceptive device. Secondary data were obtained from the medical records of the Koto Baru Health Center regarding the number of WUS. The sampling technique in this study used a proportional random sampling technique which took subjects from each working area of the Koto Baru Health Center with a large population from each village. Primary data were obtained directly through interviews with respondents who had been selected based on sample criteria by using a questionnaire regarding the factors related to the behavior of using the IUD contraceptive device. Secondary data were obtained from the medical records of the Koto Baru Health Center regarding the number of WUS. The sampling technique in this study used a proportional random sampling technique which took subjects from each working area of the Koto Baru Health Center with a large population from each village. Primary

data were obtained directly through interviews with respondents who had been selected based on sample criteria by using a questionnaire regarding the factors related to the behavior of using the IUD contraceptive device. Secondary data were obtained from the medical records of the Koto Baru Health Center regarding the number of WUS.

### 3. Results

#### 3.1 Univariate Analysis

##### a. Characteristics of Respondents

The general characteristics of respondents are the characteristics inherent in the respondent. In this study, the characteristics of the respondents shown are age group, number, years of service, education and occupation. The distribution of respondents' characteristics is as follows:

**Table 1**  
Frequency Distribution of Respondents' Characteristics by Age Category, Number of children, education and occupation of women of childbearing age in the working area of Koto Baru Public Health Center, Sungai Penuh City in 2021

| Characteristics           | Frequency (n) | Percentage (%) |
|---------------------------|---------------|----------------|
| <b>Age ( Years)</b>       |               |                |
| <20 years                 | 4             | 4.6            |
| 20-35 years old           | 56            | 64.4           |
| >35 years old             | 27            | 31             |
| <b>Number of children</b> |               |                |
| 2                         | 16            | 18.4           |
| > 2                       | 71            | 81.6           |
| <b>Education</b>          |               |                |
| SD                        | 20            | 23             |
| JUNIOR HIGH SCHOOL        | 38            | 43.6           |
| SENIOR HIGH SCHOOL        | 26            | 30             |
| College                   | 3             | 3.4            |
| <b>Profession</b>         |               |                |
| IRT                       | 61            | 70.1           |
| civil servant             | 4             | 4.6            |
| Private employees         | 12            | 13.8           |
| Poetani                   | 10            | 11.5           |

Source: Primary Data, 2021

Based on table 1 regarding the characteristics of respondents, it shows that of the 87 respondents, the highest age category is the age of 20-35 years as many as 56 respondents (64.4%), the number of respondents' children is mostly 2 people as many as 71 respondents (81.6%), most of them have junior high school education as many as 38 respondents (43.6 %), and most of them work as housewives as many as 61 (70.1%).

##### b. Frequency distribution of respondents based on IUD contraceptive use

The following will describe behavioral data on the use of IUD contraceptives in women of childbearing age in the working area of the Koto Baru Public Health Center. Data regarding husband's support are described in table 2.

**Table 2**  
Frequency Distribution of Respondents Based on the use of IUD contraception in the working area of Koto Baru Public Health Center, Sungai Full City in 2021 (n=87)

| Use of IUD KB | Frequency (n) | Percentage (%) |
|---------------|---------------|----------------|
| Use           | 19            | 21.8           |
| Do not use    | 68            | 78.2           |
| Amount        | 87            | 100            |

Based on table 2, it is known that 68 respondents (78.2%) did not use IUD contraception.

##### c. Frequency distribution of respondents based on knowledge.

The following will describe the knowledge of women of childbearing age regarding the use of

IUD contraception in the working area of the Koto Baru Health Center. Data regarding husband's support are described in table 3:

**Table 3.**  
Distribution of the frequency of knowledge of women of childbearing age in the working area of Koto Baru Public Health Center, Sungai Full City in 2021 (n=87)

| No           | Knowledge | Frequency<br>(n) | Percentage (%) |
|--------------|-----------|------------------|----------------|
| 1            | Well      | 13               | 15             |
| 2            | Not good  | 74               | 85             |
| <b>Total</b> |           | <b>87</b>        | <b>100</b>     |

Based on table 3, it is known that most of them have poor knowledge as many as 74 respondents (85%).

**d. Frequency distribution of respondents based on husband's support**

In the following, data regarding husband's support in the use of IUD contraception will be described in the working area of the Koto Baru Health Center. Data on husband's support are described in table 4:

**Table 4.**  
Frequency Distribution of Respondents Based on husband's support in the use of IUD contraceptives for women of childbearing age in the working area of Koto Baru Health Center, Sungai Penuh City Year 2021 (n=87)

| Family support   | Frequency<br>(n) | Percentage<br>(%) |
|------------------|------------------|-------------------|
| Support          | 26               | 29.9              |
| Does not support | 61               | 70.1              |
| Amount           | 87               | 100               |

Based on table 4 shows that as many as 61 respondents (70.1%) did not receive support from their husbands in the use of IUD contraception, and as many as 26 respondents (29.9%) received support from their husbands.

**e. Frequency distribution of respondents based on quality of family planning services**

In the following, data regarding the quality of family planning services in the working area of the Koto Baru Health Center will be described. Data on husband's support are described in table 5:

**Table 5.**  
Frequency Distribution of Respondents Based on the quality of family planning services in the working area of the Koto Baru Public Health Center, Sungai Penuh City in 2021 (n=87)

| KB service quality | Frequency<br>(n) | Percentage<br>(%) |
|--------------------|------------------|-------------------|
| Well               | 23               | 26.4              |
| Not good           | 64               | 73.6              |
| Amount             | 87               | 100               |

Based on table 4.5 shows that most of the quality of family planning services is not good as many as 64 respondents (73.6%).

**3.2 Bivariate Analysis**

**a. Normality test**

Normality test is used to determine whether the data used is normally distributed or not. From the results of data analysis with the help of IBM Statistics, the results are normal with alternative analysis by using the significance coefficient price. Is the significance value of significance > alpha (5%) meaning normal with a significant level of 5% ( $\alpha = 0.05$ ). After knowing that the data is normally distributed, then the data is analyzed using the Chi Square test.

**b. The relationship between knowledge and the use of IUD contraceptives in women of childbearing age in the working area of Koto Baru Health Center, Sungai Full City in 2021**

The statistical results of the relationship between knowledge and the use of IUD contraception in the working area of the Koto Baru Public Health Center, Sungai Penuh City in 2021, can be seen in table 4.6 as follows:

**Table 6.**

The relationship between knowledge and the use of IUD contraception in women of childbearing age in the working area of the Koto Baru Health Center Tanah Kampung Sungai Penuh City Year 2021 (n=87)

| Knowledge | IUD Contraception |      |            |      | Amount |     | p value |
|-----------|-------------------|------|------------|------|--------|-----|---------|
|           | Use               |      | Do not use |      | n      | %   |         |
|           | n                 | %    | n          | %    |        |     |         |
| Well      | 6                 | 35.3 | 11         | 64.7 | 17     | 100 | 0.000   |
| Not good  | 11                | 26.8 | 30         | 73.2 | 41     | 100 |         |
| Total     | 19                | 21.8 | 68         | 78.2 | 87     | 100 |         |

Based on table 6, it can be seen that the proportion of not using an IUD and having poor knowledge of 30 respondents (73.2%) is higher than that of good knowledge of 11 respondents (64.7%). There is a relationship between knowledge and behavior in using IUD contraception, p-value = 0.000 because (p < 0.05) Ho is rejected and Ha is accepted. The interpretation is that there is a relationship between the respondent's knowledge and the behavior of using IUD contraception in the working area of the Koto Baru Public Health Center in Sungai Penuh City in 2021.

**c. The relationship between husband's support and the use of IUD contraceptives in women of childbearing age in the working area of Koto Baru Health Center, Sungai Full City in 2021**

The statistical results of the relationship between husband's support and the use of IUD contraception in the working area of Koto Baru Public Health Center, Sungai Penuh City in 2021, can be seen in table 7 as follows:

**Table 7.**

The relationship between husband's support and the use of IUD contraception in women of childbearing age in the working area of the Koto Baru Health Center Tanah Kampung Sungai Penuh in 2021 (n=87)

| Husband's support | IUD Contraception |      |            |      | Amount |     | p value |
|-------------------|-------------------|------|------------|------|--------|-----|---------|
|                   | Use               |      | Do not use |      | n      | %   |         |
|                   | n                 | %    | n          | %    |        |     |         |
| Support           | 14                | 53.8 | 12         | 46.2 | 26     | 100 | 0.000   |
| Does not support  | 5                 | 8.2  | 56         | 91.8 | 61     | 100 |         |
| Total             | 19                | 21.8 | 68         | 78.2 | 87     | 100 |         |

Based on table 7, it can be seen that the proportion of not using the IUD and the husband not supporting 56 respondents (91.8%) is higher than having the husband's support as many as 12 respondents (46.2%). There is a relationship between husband's support and behavior in using IUD contraception, p-value = 0.000 because (p < 0.05) Ho is rejected and Ha is accepted. The interpretation is that there is a relationship between the respondent's husband's support and the behavior of using IUD contraception in the work area of the Koto Baru Public Health Center in Sungai Penuh City in 2021.

**d. The relationship between the quality of family planning services and the use of IUD contraceptives in women of childbearing age in the working area of Koto Baru Public Health Center, Sungai Full City in 2021**

The statistical results of the relationship between the quality of family planning services and the use of IUD contraception in the working area of the Koto Baru Public Health Center, Sungai Penuh City in 2021, can be seen in table 4.8 as follows:

**Table 8.**

The relationship between the quality of family planning services and the use of IUD contraception in women of childbearing age in the working area of the Koto Baru Health Center Tanah Kampung Sungai Penuh City in 2021 (n=87)

| KB service quality | IUD Contraception |      |            |      | Amount |     | p value |
|--------------------|-------------------|------|------------|------|--------|-----|---------|
|                    | Use               |      | Do not use |      | n      | %   |         |
|                    | n                 | %    | n          | %    |        |     |         |
| Well               | 9                 | 39.1 | 14         | 60.9 | 23     | 100 | 0.002   |
| Not good           | 10                | 15.6 | 54         | 84.4 | 64     | 100 |         |
| Total              | 19                | 21.8 | 68         | 78.2 | 87     | 100 |         |

Based on table 4.89 it can be seen that the proportion of not using an IUD and the quality of family planning services is not good 54 respondents (84.4%) is higher than the quality of good family planning services as many as 14 respondents (60.9%). There is a relationship between

husband's support and behavior in using IUD contraception,  $p$ -value = 0.002 because ( $p < 0.05$ )  $H_0$  is rejected and  $H_a$  is accepted. The interpretation is that there is a relationship between the quality of family planning services and the behavior of using IUD contraception in the working area of the Koto Baru Public Health Center in Sungai Penuh City in 2021.

#### **4. Discussion**

##### **4.1 Univariate Analysis**

###### **a. The behavior of using IUD contraception in women of childbearing age in the Koto Baru Health Center Work Area, Sungai Penuh City in 2021**

The results showed that most of the respondents did not use IUD contraception as many as 68 respondents (78.2%), but there were still 19 respondents who used IUD contraception (21.8%). The results of this study are in line with the research of Septika Veronica, et al (2019) that of 80 respondents, 12 respondents (15%) did not use the IUD contraception. The results of this study are also in line with research conducted by Nurbaiti (2013), that women of childbearing age who use IUDs are associated with many factors from within women of childbearing age who use contraceptives.

###### **b. Knowledge of women of childbearing age about the use of IUD contraception in the Koto Baru Health Center Work Area Sungai Full City in 2021**

The results showed that 13 respondents (15%) had knowledge about the use of IUD contraception in a good category and 74 respondents (85%). These results indicate that respondents do not understand about the use of IUD contraception.

The results of this study are in line with Anderi's research (2017) that of the 48 respondents studied, respondents who have good category knowledge are 18 respondents (37.5%) and 30 respondents (62.5%). Lack of knowledge about the use of IUD contraception is caused by low education where in this study most of the respondents had a junior high school education amounting to 38 respondents (43.6%) and elementary school totaling 20 respondents (23%). According to Riyanto and Budiman (2014), education is an effort to develop personality and abilities inside and outside school (both formal and informal), lasts a lifetime, where high education will affect a person's mindset and capture power of information. The level of education greatly affects how a person acts, and looks for solutions in his life, therefore an educated person will be more receptive to new ideas, as well as in deciding something must be related to the knowledge he knows (Manuaba, 2010).

###### **c. Husband's support in the behavior of using IUD contraceptives in women of childbearing age in the Koto Baru Health Center Work Area, Sungai Penuh City in 2021.**

The results showed that of the 87 respondents, most of the respondents did not receive the support of their husbands in the use of IUD contraception as many as 61 respondents (70.1%), and as many as 26 respondents (29.9%) received support from their husbands. The results of this study are in accordance with research conducted by Ma'Rifatul Auliah (2015) with the title "Husband Support Using Long-Term Contraception Methods" shows that most mothers get less support, namely 48 respondents (53.9%).

The results of this study are also in line with Mufitroh's research (2019) regarding the description of husband's support with the selection of IUD KB at PUS that of the 32 respondents most of the husbands do not support (59.4%). According to Mufdlilah & Aryekti (2016) husband's support is an expression that can be realized with respect, affection, tolerance and helping partners or partners. Husband's support is a transaction process of sources between one individual and aims to improve welfare. The transaction process of these sources is expected to provide assistance, encouragement, acceptance and attention. In support, mutual understanding will be created between individuals so that they can work together and exchange the necessary resources. not only material and information materialized but also advice or considerations that are very useful for individuals in solving the problems they face. (Indrayani, 2014).

###### **d. Quality of service in the behavior of using IUD contraceptives in women of childbearing age in the Koto Baru Health Center Work Area, Sungai Penuh City in 2021**

The results showed that most of the quality of family planning services at the Koto Baru Public Health Center was in the poor category as many as 64 respondents (73.6%) and the quality of family planning services was good as many as 23 respondents (26.4%).

## 4.2 Bivariate Analysis

### a. The relationship between knowledge and behavior in using IUD contraception in women of childbearing age in the working area of Koto Baru Public Health Center, Sungai Full City in 2021

Based on the results of the study showed that the proportion of not using an IUD and having poor knowledge of 30 respondents (73.2%) was higher than that of good knowledge of 11 respondents (64.7%). There is a relationship between knowledge and behavior in using IUD contraception,  $p$ -value = 0.000, meaning that there is a significant relationship between respondents' knowledge and the use of IUD contraception.

The results of this study are in accordance with Ratnasari's research (2018) which shows that knowledge has a relationship with the use of IUD contraceptives with  $p = 0.016 < 0.05$ , which means that the knowledge variable has a significant influence on the use of IUD contraceptives. This is also in line with research by Nurbaiti (2013) which states that the low use of IUD contraception is due to the acceptor's lack of knowledge about the advantages of this method. The ignorance of the acceptors about the advantages of the IUD contraceptive method was due to the incomplete information provided by the family planning service officer.

### b. Relationship between husband's support and use of IUD contraception in the working area of Koto Baru Health Center, Sungai Full City in 2021

Based on the results of the study showed that the proportion of not using the IUD and husbands not supporting 56 respondents (91.8%) was higher than having husband's support as many as 12 respondents (46.2%). There is a relationship between husband's support and behavior of using IUD contraceptives,  $p$ -value = 0.000. This result shows that there is a relationship between husband's support and behavior of using IUD contraceptives.

This study is in line with Ismi's research (2015) in the work area of the Kalideres District Health Center which states that there is a significant relationship between husband's support and the choice of contraceptive use and in line with Efy's research (2013) which states that there is a close relationship between husband's support with the use of MKJP.

### c. The relationship between the quality of family planning services and the use of IUD contraception in the working area of the Koto Baru Public Health Center, Sungai Penuh City.

Based on the results of the study that the proportion of not using an IUD and the quality of family planning services was not good 54 respondents (84.4%) was higher than the quality of good family planning services were 14 respondents (60.9%). There is a relationship between the quality of family planning services and the behavior of using IUD contraception,  $p$ -value = 0.002.

These results are in accordance with research conducted by Sari (2012) that there is a relationship between the quality of family planning services and the continued use of contraceptives. Acceptors who received poor quality family planning services had a 0.8 times risk of discontinuing contraceptive use compared to respondents who received quality training.

The results of this study are also in accordance with the research of Lia et.al (2020) that there is a relationship between the quality of family planning services and the choice of long-term contraceptive method (MKJP) with  $p$  value = 0.000. The more availability of IUD contraception, the more choice of IUD contraception.

## 5. Conclusion

Based on the results of the analysis of the variables studied regarding the factors related to the behavior of using IUD contraceptives in women of childbearing age in the work area of Koto Baru Health Center, Sungai Penuh City, it can be concluded that:

1. Most of the respondents did not use IUD contraception as many as 68 respondents (78.2%).
2. Most respondents have poor knowledge about the use of IUD contraception as many as 74 respondents (85%).
3. Most of the respondents did not receive support from their husbands in the use of IUD contraception as many as 61 respondents (70.1%).
4. Most of the quality of family planning services at the Koto Baru Health Center was in the

- poor category as many as 64 respondents (73.6%).
5. There is a relationship between knowledge and the use of IUD contraception with p-value = 0.000 ( $p < 0.05$ ) in women of childbearing age in the Koto Baru Health Center working area, Sungai Penuh City in 2021.
  6. There is a relationship between husband's support and the use of IUD contraception with p-value = 0.000 ( $p < 0.05$ ) in women of childbearing age in the Koto Baru Health Center work area, Sungai Penuh City in 2021.
  7. There is a relationship between the quality of family planning services and the use of IUD contraception with p-value = 0.002 ( $p < 0.05$ ), in women of childbearing age in the Koto Baru Public Health Center working area, Sungai Penuh City in 2021.

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