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# WOMEN'S INTENTIONS TO BECOME ACCEPTORS IN FAMILY PLANNING POST COVID-19: THEORY OF PLANNED BEHAVIOR

#### Rd. Gita Mujahidah

Undergraduate Nursing Study Program, Sekolah Tinggi Ilmu Kesehatan Indramayu, Jl. Wirapati Sindang - Indramayu, Sindang, Sindang, Indramayu, Jawa Barat 45222, Indonesia <a href="mailto:gitafkep2010@gmail.com">gitafkep2010@gmail.com</a>

### **ABSTRACT**

Post-Covid-19 shows that the level of contraceptive use and the need for family planning cannot be met at both the district and city levels, seen from the large variations that show disparities in the implementation of family planning programs, this causes stagnation in the number of contraceptive use and the need for family planning is not met in Indonesia. During the pandemic, there was a decrease in the use of contraceptives and an increase in unplanned pregnancies. Intention is an important component in generating behavior. A person can carry out or not carry out a behavior depending on that person's intentions, so that the attitude of women of childbearing age towards carrying out family planning depends on their intentions. This study aims to see a picture of the intentions of women of childbearing age to become family planning acceptors. Descriptive research method with a population of women of childbearing age in Indramayu Regency who were selected using simple random sampling totaling 83 people. Data collection was carried out by respondents filling out a questionnaire developed by researchers referring to guidelines for making instruments based on the Theory of Planned Behavior and analyzed using statistical tools. The research results show that the intention of women of childbearing age in carrying out family planning after Covid-19 has a strong intention of 86.7% and a weak intention of 13.3%. So, from the results of this research, it is important for nurses to pay attention to the intentions of women of childbearing age in carrying out family planning and to develop strategic health promotion that can reach all groups.

Keywords: family planning; intentions; woman

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# INTRODUCTION

The Covid-19 pandemic has an impact on the entire fabric of life in the world, including in Indonesia, one of which is the implementation of the Family Planning (KB) program (BKKBNa, 2020). The Family Planning (KB) program is a movement to form healthy and prosperous families by limiting births which has been carried out by the Indonesian government since 1957 (BKKBN, 2020b). So even during the Covid-19 pandemic, family planning programs must continue to run as planned. The decline in the use of contraceptives reached 47 percent during the pandemic, which resulted in an increase in unplanned pregnancies resulting in a significant increase in population (Anna, 2020). The family planning service program during the pandemic experienced several obstacles. Firstly, the number of family planning acceptors has stagnated, showing that the level of contraceptive use and needs cannot be met at both district and city levels, due to one of the differences in the implementation of family planning programs, this causes some community groups not to get their rights (Yudistira Imandiar, 2020). Second, the varying levels of commitment

between districts or cities and even stock-outs often occur, which affects the availability of contraception and family planning services, coupled with social, cultural and economic factors which also influence access to family planning services (BKKBN, 2020b).

Third, the difficulty of accessing family planning services during the pandemic was limited by PSSB (Large-Scale Social Restrictions) so that people were afraid to leave the house, especially going to health services (Manrique De Lara & De Jesús Medina Arellano, 2020) and were prohibited from leaving the house (Sharma et al., 2020) but by staying at home the intensity of meeting your partner will be more frequent and you will have more free time, thereby triggering the need for a husband and wife relationship (Diamond et al., 2020) . Fourth, family planning services so far still rely on face-to-face socialization, counseling and providing contraceptive services so that during the Covid-19 pandemic, face-to-face services were not effective (Anna, 2020). Due to this problem, it is important to change services from face-to-face to online so that PUS can continue to provide and obtain information on family planning and contraceptive methods. This is also supported by a decrease in the use of contraceptives. Data shows a decrease in the use of contraceptives reaching 47% (Anna, 2020). According to the National Population and Family Planning Agency (BKKBN, 2020b) compared to 2019, family planning services decreased by around 1 million acceptors from January to April 2020. 70% of the use of contraceptives in Indramayu Regency was the injection method so that during the Covid-19 pandemic the community do not want to visit family planning services either at community health centers or other places for reasons of fear of leaving the house, restrictions on services and many Independent Practicing Midwives who did not receive services during the pandemic, resulting in a significant decline of 29% (DPPKB, 2020).

Apart from the reduction in the number of family planning acceptors, there is a decrease in activity in activity groups as well as a decrease in operational mechanisms in the field so that monitoring does not run optimally. However, the growing stigma in society about the influence of family planning also creates feelings of uncertainty about the use of contraceptives, even though family planning is not only about contraceptive methods, but beyond that, family planning is a family planning program to improve quality (Tri, 2020). The decline in the use of contraceptives is also reinforced by data on the increase in pregnancies in Indonesia, which is estimated at more than 400,000 unplanned pregnancies (BKKBN, 2021), including in West Java (Salsabila, 2020). An increase also occurred in Indramayu Regency where the number of pregnant women, which was initially recorded at 1,215, increased to 2,740 people. So it is predicted that the birth rate in Indonesia will reach 420,000 from unplanned pregnancies during large-scale social restrictions (PSBB) (BKKBN, 2021). The increasing pregnancy rate also increases the birth rate, in this case the BKKBN is making various efforts to overcome this.

Efforts made by the Central and Provincial National Population and Family Planning Agency (BKKBN) are to ensure the continued use of contraceptive devices and drugs during the Covid-19 pandemic, including: mobile family planning services, visits to Couples of Childbearing Age who need contraception. Meanwhile, efforts to reduce the rate of contraceptive discontinuation which results in unplanned pregnancies are by optimizing the role of PKB/PKLB and mobilizing family planning information units to the community as a form of Communication, Information and Education (KIE) for Covid-19 Prevention (BKKBN, 2020a.). Through this family planning, couples age Lush is tasked with continuing to run the family program planned during the pandemic to prevent pregnancy No planned.

Couples are expected to be able to determine their attitude in making decisions, including the decision to carry out the family program well or not. Decision making is influenced by several factors, namely cultural factors which have a big influence on health beliefs and behavior in going to family planning services, psychological factors namely knowledge and problem solving, individual characteristics, physiological factors as well as economic and environmental factors. To explain the emergence of family planning acceptor behavior, researchers use the Theory of Planned Behavior. The choice of Planned Theory of Behavior departed from the statement (Tornikoski & Maalaoui, 2019) about how good and comprehensive psychosocial theory is in explaining health behavior. Health behavior choices are influenced by the individual's thought process, the individual's perception of reality and the social environment in which the individual finds himself. By using psychosocial theory, we can see and understand how cognitive and social factors interact with each other and influence a person's health behavior choices.

This research is also related to health behavior, where the health behavior in question is family planning behavior. This theory is a theory that has been widely used in other research in the field of health psychology, especially research related to health maintenance and health behavioral change. Research (Putri, 2018) explains in detail about the intention to carry out family planning. Apart from that, the results of research conducted by (Wen et al., 2021) also show that the TPB is proven to be able to provide a good and comprehensive explanation of breastfeeding intentions among health behavior and the factors that influence it. TPB also has a logical framework, well defined, proven methodology and reliable and valid predictability. Starting from the Theory of Planned Behavior (TPB) which states that intention is a direct determinant of behavior, it can be concluded that an individual's behavior is directly proportional to his intention. Likewise, in this study, if WUS have their own intention in family planning services, then WUS will carry out family planning service visits well because an individual's intention can provide an accurate prediction of the behavior that appears. Other research suggests that attitudes have a strong relationship with behavior, while intentions are the most common predictor of behavioral performance (Riebl, Estabrooks, Dunsmore, Frisard, 2015).

As a first step in improving family planning services after the pandemic, it is important to look at the intentions of women of childbearing age to become family planning acceptors in the hope that family planning services will continue to run so that they can increase the number of family planning services again in order to limit the number of births and reduce the impact of baby booms. Therefore, researchers conducted research on how women of childbearing age describe their intentions to become family planning acceptors after Covid-19.

# **METHOD**

Study This done for see description intention woman age fertile with use design study descriptive quantitative with amount population woman age fertile Regency Indramayu as many as 23,078 people. The sample taken was 83 respondents who were selected using simple random sampling techniques. Respondents were selected based on research ethics. Before conducting the research, respondents received a written explanation regarding the objectives of the research, procedures for filling it out, rights and obligations as well as advantages and disadvantages during the research. Respondents who have filled out the informed consent can only complete the questionnaire. The instrument used in this research is

a questionnaire in the form of structured questions. This instrument was developed by researchers referring to the guidelines for making instruments based on the Theory of Planned Behavior by (Achmat, 2019). In this questionnaire there are 60 question items which are equated in each section, namely 4 statement items. The validity test carried out by the researcher was content validity and face validity and then used a statistical test with a p value < 0.05 and was declared valid. Reliability test with Cronbach's alpha score = 0.789, thus this instrument is declared reliable so that the statements in the questionnaire asked to the WUS several times will produce the same size. This research has received ethical approval from the Research **Ethics** Committee of Padjadjaran University, Bandung, 727/UN6.KEP/EC/2021. As a consideration, research ethical principles include four broad principles used to protect respondents' rights, namely autonomy, beneficence, anonymity and justice.

### **RESULTS**

Table 1. Respondent characteristics (n= 83)

Respondent characteristics	f	%	
Age			
15-19 years old	4	4.8	
20-35 years	61	73.5	
36-45 years old	18	21.7	
Religion			
Islam	81	97.6	
Christian	2	2,4	
Education			
Low	14	16.9	
Intermediate	32	38.5	
Tall	37	44.6	
Work			
Doesn't work	38	45.8	
Work	45	54.2	

Table 1 shows that almost all respondents are Muslim 97.6% and Christian 2.4%. Most were in the 20-35 year age range or in the healthy reproductive age range, 73.5% with a history of higher education, 44.6%. Employment status is working woman—as much as 54.2%.

Table 2.

Overview of Aged Women's Intentions Fertile (n= 83)

Category	1	%
Intention		
Weak	11	13.3
Strong	72	86.7

From table 2, It can be concluded that 86.7% of the 72 respondents had strong intentions.

Table 3 the results show that strong intentions are in the 20-35 year age range, namely 59.1, where this age is a healthy reproductive age. Some of the respondents were Muslim, so the research results showed that 84.3% of Muslim respondents had strong intentions and 13.3% had weak intentions and the strongest intentions were in higher education, namely 38.5%. Meanwhile, intentions based on employment status were higher among working mothers at 44.6%.

Table 3.

Description of Intentions Based on Respondent Characteristics (n= 83)

-	Intention				
Category	Strong		Weak		
	f	%	f	%	
Age					
15-19 years old	2	2,4	2	2,4	
20-35 years	49	59.1	12	14.4	
36-49 years old	15	18.1	3	3.6	
Religion					
Islam	70	84.3	11	13.3	
Christian	2	2,4			
Education					
Low	10	12.1	4	4.8	
Intermediate	24	28.9	8	9.6	
Tall	32	38.5	5	6.1	
Work					
Doesn't work	29	34.9	8	9.7	
Work	37	44.6	9	10.8	

### **DISCUSSION**

Intention is a statement of a person's readiness to carry out a behavior and is considered a direct antecedent of the behavior. Family planning itself is a government program launched to reduce the population increase. From the results of this research, it can be seen that 86.7% of respondents had strong intentions and 13.3% had weak intentions. Almost all respondents have a strong intention to become family planning acceptors. The process of changing a person's behavior begins with a change in thinking. Thoughts will influence understanding, then form an attitude, where in turn this attitude will influence the behavior of women of childbearing age in responding to or dealing with information or problems. The strength of this intention may also be influenced by religious background, with the majority being Muslim. As a Muslim, before carrying out anything, you must start with a stated intention in your heart. As in the hadith 'All deeds depend on intention, and each person only gets what he intended' (HR Bukhari Muslim).

Research explains that gender, age and level of education have been shown to have a relationship to a person's intention to seek care. Several studies have been conducted on (Satria, 2015) which compared the factors that influence the behavior of choosing a vasectomy contraceptive method in married couples based on the TPB with a case control research design. The results of the Mann Whitney U test were 0.002 or p-value <0.005, which means that intentions influence husband and wife in choosing a contraceptive method. Other research on health promotion using TPB is research conducted by (Ardelia & Dewi, 2017) that with health promotion intentions can emerge. Based on research conducted by (Rosyidah, 2017) in Madiun, it shows that the value of p = 0.000 and p < 0.01 where there is a significant relationship between the behavioral intention to use contraceptives and the behavior of family planning acceptors as proven by becoming active family planning acceptors. Based on this research, it is also explained that family planning behavior is influenced by how much intention the prospective family planning acceptor has. Several factors that influence this intention include support from the husband regarding family planning and contraceptive choices in addition to material support provided by the husband, the existence of information from health cadres about the type of contraception and its side effects, the existence of health facilities that support family planning, but other factors The biggest influence on the behavior of family planning acceptors is the couple's intentions (Wolstenholme et al., 2021).

There was research conducted by (Septiyanti, 2009) which showed a perception t-count of 13.113 and a significance of 0.000. p < 0.05. while the t-count for attitude is -20.270 and the significance is 0.000. p < 0.05. and subjective norm t-count -21.930 and significance 0.000. p < 0.05, which means that for all aspects, including perceptions, attitudes and subjective norms, there are significant differences between family planning acceptors contraception and not a contraceptive acceptor Excellent . Acceptors of steady contraception have perceptions, attitudes and subjective norms that are clearly positive, while non-acceptors of steady contraception have perceptions that tend to be positive, while attitudes and subjective norms tend to be negative. Supported by other research conducted by (Boyoh et al., 2017) that PUS's intention to become a family planning acceptor Behavior is influenced by personal experience and other people and is motivated by people closest to them such as their husband.

The research mentioned above states that the Theory of Planned Behavior (TPB) explains that a person can do or not do a behavior depending on the person's intentions. This means it can be said that a woman's behavior in becoming a family planning acceptor depends on her intentions. The stronger a woman's intention to carry out family planning, the better her behavior will be. Vice versa, the weaker a woman's intention to carry out family planning, the lower the woman's behavior in becoming a family planning acceptor. A behavior is based on encouragement from friends, family, places, opportunities and beliefs that they believe in to give rise to a behavior. According to (Icak Ajzen, 2005) there are external variables that influence intentions indirectly. These external variables can be personality, age, gender, ethnicity, religion, education, emotions, intelligence, race, ethnicity, information media and also intervention. In this study, researchers examined one of the underlying factors, namely age, gender, religion and education because in line with developments over time, more and more people are using online information media. According to this theory, intention is the closest determinant of the behavior displayed. This intention will remain a tendency to behave until the efforts made by the perpetrator give rise to a behavior that originates from the intention. A person will have an intention when he evaluates that the behavior is positive and supported by the people around him. This intention indicates how hard a person tries or how much effort is made to perform a behavior (John & Leigh, 2018).

## **CONCLUSION**

Research result state that there are women for become acceptor family planning to choose a strong one of 86.7% in the range aged 20-35 years with education tall as well as working woman so that promotion health family plan can improved again so you can reach target more acceptors wide.

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