

## The Influence Of Socio-Demographic And Fp Services On Pus Participation In Fp In Kuta Raja Area, Banda Aceh City Year 2021

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### ABSTRACT

Indonesia is a developing country and cannot escape population problems. The main population problems faced by Indonesia are a large population with a relatively high population growth rate, unequal population distribution, a young age structure, and the quality of the population that must be improved. The sampling technique was purposive sampling with the following sample criteria: Couples of Reproductive Age (women) aged 20-35 years, Couples of Reproductive Age who have 2 children, Couples of Reproductive Age who are not pregnant or sick, the sample in this study was 83 people. The results of statistical tests using the Chi-Square test showed that there was a significant relationship between the number of children and family planning participation in Kuta Raja District, Banda Aceh City in 2021, with a value of  $P = 0.000$  ( $P < 0.05$ ). The results of the analysis of the relationship between the number of children and family planning participation, of the 38 people (45.8%) who had children 0-1, there were 18 people (21.7%) who stated that they took part in family planning, this was because the respondents wanted to set the distance between the first child with the next child. Meanwhile, of the 45 people (54.2%) who had  $\geq 2$  children, there were 2 people (2.4%) who stated that they did not participate in family planning.

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### 1. INTRODUCTION

Health development is part of national development which aims to increase awareness, willingness and ability to live healthily for everyone in order to realize the highest degree of public health. This health development is an effort of all the potential of the Indonesian nation, both the community, the private sector and the government (RI Ministry of Health, 2016). Indonesia's population is very large  $\pm 210$  million or no. 4 in the world. The fast growth rate is around 1.85% per year with an uneven population distribution, most or about 70% live on the islands of Java and Bali (Beni, 2013).

The National Population and Family Planning Agency (BKKBN), 201 in the implementation of the family planning program is still experiencing several obstacles. According to the 2012-2015 Indonesian Demographic and Health Survey (IDHS), around 40% of couples of childbearing age (PUS) were not yet participants in family planning, apart from the group of women who firmly refused family planning, the IDHS also found 14% of women who were still unsure will participate in family planning or not in the future (Hatmaji, 2016). The results of the National Socioeconomic Survey (Herlianto, 2018), show that the Indonesian contraceptive prevalence rate is 56.71%. This means that one out of two PUS in Indonesia in 2016 is using birth control.

Based on the profile of the Rokan Hulu District Health Office, the number of PUS in Surau Gading Village, Rambah Samo District in 2013 with active family planning acceptors (58.09%), IUD contraceptive use (6.26%), pills (48.92%), injections (37.26%), implants (6.26%), condoms (0.43%) and others (0.86%). Whereas in 2015 active family planning acceptors (42.09%), used IUD contraception (8.04%), pills (35.44%), injections (46.44%), implants (7.94%), condoms (1.12%), and others (1.02%). The achievement of active family planning acceptors is still low compared to the national target (75%).

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The family planning program in Indonesia before and after the implementation of the International Conference on Population and Development (ICPD) in Cairo in 1994 experienced real changes. In the 70s to early 90s, family planning services placed great emphasis on demographics, namely controlling birth rates. One of the main aspects of the family planning program was the quality of the services provided. Improving the quality of service will increase the number of family planning participants which will increase the prevalence and reduce the birth rate (BKKBN, 2018). According to the BKKBN, the reality on the ground shows a tendency for family planning services to decline, so that acceptors are less satisfied with the services provided. Based on the 2015 BKKBN survey,

Family planning services aim to create quality families through planning the number of families in a planned manner in an effort to create small families. The results of the research conducted (Kasmiati, 2018), reported that socio-demographic factors, socio-psychology, and family planning services were factors related to family planning participation. and the results of the study (Mantra, 2018), reported the factors of age, number of children, the value of the children to the family, knowledge, distance from the location to family planning services, staff behavior were factors related to the participation of PUS mothers in the family planning program.

Based on the above background, reducing the risk of maternal death through preventing pregnancy, delaying pregnancy, spacing pregnancies or limiting pregnancies if the child is considered sufficient. Thus family planning services are the most basic and primary preventive health service efforts (Meilani, 2018). So it is necessary to do research to determine the socio-demographic effect and family planning services with the participation of PUS in family planning in Kuta Raja District, Banda Aceh City in 2021.

## 2. METHOD

This type of research is correlation research using a cross sectional approach, namely research by measuring or observing at the same time. The research was carried out from August 2020 – February 2021. The research was conducted in Kuta Raja District, Banda Aceh City in 2021. The population in this study were all Reproductive Age Couples (PUS) in Kuta Raja District in 2021, totaling 250 people. The sampling technique used was purposive sampling, so the number of samples in this study was 83 people.

## 3. RESULTS AND DISCUSSION

Table 1. Distribution of Respondents by Age in Kuta Raja District, Banda City Aceh

No	Age	(N)	%
1	20-25 year	22	26,5
2	26-30 year	47	56,6
3	31-35 year	14	16,9
<b>Amount</b>		<b>83</b>	<b>100</b>

The majority of respondents were aged 26-30 years with a total of 47 people (56.6%) and a minority of respondents were aged 31-36 years with a total of 14 people (16.9%).

Table 2 Distribution of Respondents by Education in Kuta Raja District, Banda Aceh City

No	Education	(N)	%
1	Tall	11	13,3
2	Currently	48	57,8
3	Low	24	28,9
<b>Amount</b>		<b>83</b>	<b>100</b>

The majority of respondents with moderate education are 48 people (57.8%) and a minority of respondents with higher education are 11 people (13.3%).

Table 3. Distribution of Respondents by Number of Children in Kuta Raja District, Banda Aceh City  
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No	Children Amount	(N)	%
1.	0-1 person	38	45,8
2.	≥ 2 persons	45	54,2
<b>Amount</b>		<b>83</b>	<b>100</b>

The majority of respondents had ≥ 2 children, 45 people (54.2%) and a minority of respondents had 0-1 children, 38 people (45.8%).

Table 4. Distribution of Respondents by Income in Kuta Raja District, Banda Aceh City

No	Family Income	(N)	%
1.	Tall	53	63,9
2.	Low	30	36,1
<b>Amount</b>		<b>83</b>	<b>100</b>

The majority of respondents have a high family income of 53 people (63.9%) and a minority of respondents have a low family income of 30 people (36.1%).

Table 5. Distribution of Respondents According to Family Planning Services in Kuta Raja, Banda Aceh City

No	Service	(N)	%
1.	Well	11	13,2
2.	Enough	56	67,5
3	Not enough	16	19,3
<b>Amount</b>		<b>83</b>	<b>100</b>

The majority of respondents with sufficient family planning services were 56 people (67.5%) and a minority of respondents who had good family planning services were 11 people (13.2%).

Table 6. Distribution of Respondents According to Family Planning Participation in Kuta Raja, Banda Aceh City

No	Opt-in KB	(N)	%
1.	Follow	61	73,5
2.	Do not participate	22	26,5
<b>Amount</b>		<b>83</b>	<b>100</b>

The majority of respondents who took part in family planning were 61 people (73.5%) and a minority of respondents who did not take part in family planning were 22 people (26.5%).

Table 7. The Relationship between Education and Family Planning Participation in Kuta Raja, Banda Aceh City

Respondent fish educator	Opt-in KB				Jl	X <sup>2</sup> P
	Follow		Not Follow			
	N	%	N	%		
Low	11	13,3	13	15,7	24	
Currently	41	49,4	7	8,4	48	13,3
Tall	9	10,8	2	2,44	11	20,0
<b>Amount</b>	<b>61</b>	<b>73.5</b>	<b>22</b>	<b>26.5</b>	<b>83</b>	

Statistical test results showed that there was a significant relationship between education and family planning participation, with a value of  $P = 0.001$  ( $P < 0.05$ ). The results of the analysis of the relationship between education and family planning participation show that out of 24 people (28.9%) with low education, there were 11 people (13.3%) who stated that they had participated in family

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planning and 13 people (15.7%) who stated that they did not participate. -KB, out of 48 people (57.8%) with moderate education there were 41 people (49.4%) who stated that they had participated in family planning and 7 people (8.4%) who stated that they had not participated in family planning, and from 11 people (13.3%) with higher education, there were 9 people (10.8%) who stated that they had participated in family planning and 2 people (2.4%) who stated that they had not participated in family planning.

Table 8. Relationship between age and family planning participation in Kuta Raja, Banda Aceh City

age Respon den	KB Participation				Amount	X <sup>2</sup> P
	Follow		Do not participate			
	N	%	N	%		
20-25 year	16	19,3	6	7,2	22	1,340
26-30 year	6	39,8	14	16,9	47	
31-35 year	33	14.5	2	2,4	14	0.512
<b>Amount</b>	<b>61</b>	<b>73.5</b>	<b>22</b>	<b>26.5</b>	<b>83</b>	

Statistical test results found that there was no significant relationship between age and family planning participation, with a value of  $P = 0.512$  ( $P > 0.05$ ). The results of the analysis of the relationship between age and family planning participation show that out of 22 people (26.5%) aged 20-25 years, there were 16 people (19.3%) who said they were taking family planning and 6 people (7.2%) who stated that they did not take part in family planning, out of 47 people (56.6%) aged 26-30 years there were 33 people (39.8%) who stated that they took part in family planning and 14 people (16.9%) who stated that they did not take part family planning, and out of 14 people (16.9%) aged 31-35 years there were 12 people (14.5%) who stated that they took part in family planning and 2 people (2.4%) stated that they did not participate KB.

Table 9 Relationship between Number of Children and Family Planning Participation in Kuta Raja District, Banda Aceh City

Amount Child	Opt-in KB				J lh	X <sup>2</sup> P
	Follow		Not Follow			
	N	%	N	%		
0-1	18	21,7	20	24,1	38	24,557
≥ 2	43	51.8	2	2,4	45	0.000
<b>Amount</b>	<b>61</b>	<b>73.5</b>	<b>22</b>	<b>26.5</b>	<b>83</b>	

The results of statistical tests found that there was a significant relationship between the number of children and family planning participation, with a value of  $P = 0.000$  ( $P < 0.05$ ). The results of the analysis of the relationship between the number of children and family planning participation show that out of 38 people (45.8%) who had 0-1 children, there were 18 people (21.7%) who stated that they were participating in family planning and 20 people (24.1%) ) which stated that they did not participate in the KB. Meanwhile, of the 45 people (54.2%) who had  $\geq 2$  children, there were 43 people (51.8%) who stated that they had participated in family planning and 2 people (2.4%) who stated that they had not participated in family planning.

Table 10 Relationship between family planning services and family planning participation in Kuta Raja, Banda Aceh City

Family planning services	Opt-in KB				Jl h	X <sup>2</sup> P
	Follow		Not Follow			
	N	%	N	%		
Well	11	13,3	0	0.0	11	
Enough	43	51.8	13	15,7	56	11,545

Not enough	7	8,4	9	10,8	16	0.003
<b>Amount</b>	<b>61</b>	<b>73.5</b>	<b>22</b>	<b>26.5</b>	<b>83</b>	

Statistical test results found that there was a significant relationship between family planning services and family planning participation, with a value of  $P = 0.003$  ( $P < 0.05$ ). The results of the analysis of the relationship between family planning services and family planning participation can be seen that out of 11 people (13.3%) who received good service, there were 11 people (13.3%) who stated that they had participated in family planning and stated that they did not participate in family planning. 56 people (67.5%).

Table 11 Relationship between family income and family planning participation in Kuta Raja, Banda Aceh City

Family Income	KB Participation				Jl h	X <sup>2</sup> P
	Follow		Not Follow			
	N	%	N	%		
Tall	44	53.0	9	10,8	53	6,829
Low	17	20.5	13	15,7	30	0.010
<b>Amount</b>	<b>61</b>	<b>73.5</b>	<b>22</b>	<b>26.5</b>	<b>83</b>	

The results of statistical tests found that there was a significant relationship between family income, with a value of  $P = 0.010$  ( $P < 0.05$ ). The results of the analysis of the relationship between low family income and family planning participation show that out of 17 people (20.5%) who have low family income and do not participate in family planning, it can be seen that out of 13 people (15.7%).

### Relationship between Socio-Demographic Factors (Age, Education, Number of Children, and Family Income) with Family Planning Participation

The results of statistical tests using the Chi-Square test showed that there was no significant relationship between age and family planning participation in Medan Tuntungan in 2021, with a value of  $P = 0.512$  ( $P > 0.05$ ). There is no relationship because the respondents in this study belong to productive age who do not have a risk in pregnancy. According to (Siswosudarmo, 2015). The results of the BKKBN analysis in the 2018 IDHS stated that those aged under 20 years and over 35 years were at high risk in using contraception, pregnancy and childbirth. The reproductive period of women can basically be divided into three periods, namely the young reproductive period (15-19 years), the healthy reproductive period (20-35 years), and the old reproductive period (36-45 years).

The results of statistical tests using the Chi-Square test show that there is a significant relationship between education and family planning participation in Medan Tuntungan in 2021, with a value of  $P = 0.001$  ( $P < 0.05$ ). The results of the analysis of the relationship between education and family planning participation show that out of 24 people (28.9%) with low education there were 13 people (15.7%) who said they did not participate in family planning. thinkers who still adhere to traditions in society, that is, many children have a lot of fortune so there is no desire to have family planning, while of the 48 people (57.8%) with moderate education there were 7 people (8.4%) who stated that they did not participate in family planning and with higher education there were 2 people (2.4%) who stated that they did not participate in family planning, this is because the respondent still has one child so that the respondent has the desire to have another child. Meanwhile, according to (Nursalam, 2016), the level of education greatly influences how a person acts and looks for causes and solutions in his life. People with higher education will usually act more rationally. Therefore, educated people will more easily accept new ideas. This is also the case with determining patterns of family planning and basic patterns of contraceptive use as well as improving family welfare. People with higher education will usually act

more rationally. Therefore, educated people will more easily accept new ideas. This is also the case with determining patterns of family planning and basic patterns of contraceptive use as well as improving family welfare. People with higher education will usually act more rationally. Therefore, educated people will more easily accept new ideas. This is also the case with determining patterns of family planning and basic patterns of contraceptive use as well as improving family welfare.

The results of statistical tests using the Chi-Square test showed that there was a significant relationship between the number of children and family planning participation in Medan Tuntungan in 2021, with a value of  $P = 0.000$  ( $P < 0.05$ ). The results of the analysis of the relationship between the number of children and family planning participation can be seen that out of 38 people (45.8%) who had 0-1 children, there were 18 people (21.7%) who stated that they were participating in family planning, this was because the respondents wanted to arrange the distance between the first child and the next child. Meanwhile, of the 45 people (54.2%) who had  $\geq 2$  children, there were 2 people (2.4%) who stated that they did not participate in family planning, this was because the respondent's family wanted a boy, even though the respondent had have 2 daughters, so the respondent decided not to have family planning. This is in accordance with the opinion (Ritonga, 2013), said that the possibility of a wife to have more births depends on the number of children she has given birth to. A wife may use contraception after having a certain number of children and also the age of the children who are still alive. The more often a woman gives birth to a child, the higher the risk of death in childbirth. This means that the number of children will greatly affect the health of the mother and can increase the standard of living of the family to the fullest.

The Family Planning Program (KB) is an effort to control population numbers and improve the quality of Indonesian families. The Family Planning (KB) program has succeeded in changing the public's perspective that the fewer children, the better. Contraceptive use has increased dramatically from 5% to 60%, the number of girls of childbearing age has decreased from 5.6% to 2.3%, the average age of first marriage for women has increased to 19 years, unwanted pregnancies have decreased, and there are still many successes others (BKKBN, 2018).

The results of statistical tests using the Chi-Square test show that there is a significant relationship between family income and family planning participation in Medan Tuntungan in 2021, with a value of  $P=0.010$  ( $P<0.05$ ). The results of the analysis of the relationship between family income and family planning participation show that out of 53 people (63.9%) who had high incomes, there were 9 people (10.8%) who stated that they did not participate in family planning, this was because the respondents thought that the more children, sustenance also increases. Meanwhile, of the 30 people (36.1%) who had low incomes, there were 17 people (20.5%) who stated that they had participated in family planning, this was because the respondents did not have sufficient funds to meet family needs if the number of children was  $\geq 2$  people because respondents said the more children in the family, then the cost of living will increase so that the respondent decides to have family planning. Income is defined as receipts in the form of money or goods, both from other parties and the parties themselves from the work or activities that we do and are valued in money at the current price. One's income can be said to increase if one's basic needs will increase. Meanwhile, the definition of family income is the total real income of all family members donated to meet joint or individual needs (Saifuddin, 2018). both from other parties and the parties themselves from the work or activities that we do and are valued in money at the current price. One's income can be said to increase if one's basic needs will increase. Meanwhile, the definition of family income is the total real income of all family members donated to meet joint or individual needs (Saifuddin, 2018). both from other parties and the parties themselves from the work or activities that we do and are valued in money at the current price. One's income can be said to increase if one's basic needs will increase. Meanwhile, the definition of family income is the total real income of all family members donated to meet joint or individual needs (Saifuddin, 2018).

### **Relationship between family planning services and family planning participation**

The results of statistical tests using the Chi-Square test show that there is a significant relationship between family planning services and family planning participation in Medan Tuntungan in 2021, with a value of  $P = 0.003$  ( $P < 0.05$ ). The results of the analysis of the relationship between family planning

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services and family planning participation show that out of 11 people (13.3%) who received good service, there were 11 people (13.3%) who stated that they had participated in family planning and said they did not participate in family planning. 56 people (67.5%) who received sufficient service, there were 13 people (15.7%) who stated that they did not participate in family planning, this was because some of the respondents did not have children and some only had 1 child, so the respondents decided not to KB. Meanwhile, of the 16 people (19.3%) who received less service, there were 7 people (8.4%) who stated that they had participated in family planning. This is because the respondent already has more than 2 children and the respondent feels that he has a burden if the number of children exceeds the limit of 2 people. Family planning services are an important element in efforts to achieve reproductive health services as stated in the action program of the International Conference on Population and Development, (Siswosudarmo, 2015). Specifically, this includes the right of everyone to obtain information and access to various methods of contraception that are safe, effective, affordable and acceptable (Soekanto, 2018). The National Family Planning Coordinating Board (BKKBN) targets around 7.1 million family planning participants to be served in 2014. Of the target, 3.7 million of them are pre-prosperous, prosperous I, and poor families. The new paradigm of the National Family Planning (KB) program has changed its vision from realizing the Small Happy Prosperous Family Norms (NKKBS) to become a quality family in 2018 to create a quality family that is a family that is prosperous, healthy, advanced, independent, has an ideal number of children, insightful forward, responsible, harmonious, and pious to God Almighty. This success absolutely must be considered and even continuously improved because this achievement has not been evenly distributed. Meanwhile, family planning activities when viewed from the method of use of contraceptives can be said that Intra Uterine Devices (IUD) 4.32%, Tubectomy 1.12%, Vasectomy 0.20%, Condoms 13.75%, Implants 10.54%, Injections 43.35%, and Pills 26.76% (BKKBN, 2018).

The results of the research conducted by Sakhnan reported that age, number of children, the value of children to the family, knowledge, distance from the location to family planning services, behavior of health workers were factors related to the participation of PUS mothers in the family planning program. (Suratun, 2018), said that the factors influencing reasons for choosing contraceptive methods include economic level, employment, and the availability of affordable health services (Tatarini, 2018).

#### 4. CONCLUSION

Based on the results of the study, socio-demographic factors (age, education, number of children, and family income) and family planning services can be concluded that: Not there is a relationship between age and family planning participation in Kuta Raja District, Banda Aceh City in 2021, with the results of the statistical test  $P = 0.512$  ( $P > 0.05$ ). There is a relationship between education and family planning participation in Kuta Raja District, Banda Aceh City in 2021, with the results of the statistical test  $P = 0.001$  ( $P < 0.05$ ). There is a relationship between the number of children and family planning participation in Medan Tuntungan District in 2021, with the results of the statistical test  $P = 0.000$  ( $P < 0.05$ ). There is a relationship between family income and family planning participation in Kuta Raja District, Banda Aceh City in 2021, with the results of the statistical test  $P = 0.010$  ( $P < 0.05$ ). There is a relationship between family planning services and family planning participation in Kuta Raja District, Banda Aceh City in 2021, with the results of the statistical test  $P = 0.003$  ( $P < 0.05$ ).

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