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The Effect Counseling on the Knowledge Women of Fertile Age (Wus) About Mow Contraception (Women's Surgery Method)

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MOW contraception is a long-term contraceptive method that has a relatively low failure rate and is free from side effects. However, interest in MOW contraception is still low, compared to other long-term contraceptives. The low interest of mothers in choosing female surgical contraception (MOW) can be influenced by several factors. These factors include internal factors or factors within the individual such as age, number of children, health factors, education, knowledge, and attitudes. Meanwhile, external factors include facilities and infrastructure, costs and side effects of the contraceptive, husband's support, support from health workers, and information about the MOW contraceptive method. The purpose of this study was to determine the effect of counseling on the knowledge of women of fertile age (WUS) about female surgical contraception (MOW). The research design used is a pre-experimental research design, namely One Group Pre-Test and Post-Test. The population in this study were all WUS in RT 02 RW 02 Sidomulyo Village, Semen District, Kediri Regency, totaling 33 people with a total sampling technique. The independent variable in this study is counseling about the MOW contraceptive method and the dependent variable is the knowledge of PUS women about the MOW contraceptive method. Counseling was given to groups of women of childbearing age who already have children. The counseling media used were MOW contraceptive counseling materials, LCDs, and laptops. Data collection used a questionnaire totaling 15 questions. The questionnaire for the pre-test and post-test was the same and had been tested for validity and reliability. Data processing used editing, coding, scoring, tabulating and presented. The analysis used was the Wilcoxon Match Pair test. The results of the study showed that of the 33 respondents studied, before the counseling, most had sufficient knowledge, namely 25 respondents (75.76%), after the counseling, most had good knowledge, namely 28 respondents (84.84%). From the results of the data analysis test, the Z result was -5.533 with a significance level (σ) of 0.000 (σ ≤ 0.05). Because σ ≤ 0.05, H1 is accepted, which means there is an effect of counseling on the knowledge of women of fertile age (WUS) about female surgical methods (MOW) of contraception. Based on the research results above, counseling has an impact on the knowledge of women of childbearing age. Counseling has a positive impact on increasing knowledge of women of fertile age about MOW contraception. Therefore, counseling from health workers is crucial and essential to increase knowledge and support women of fertile age (WUS) in choosing female surgical methods (MOW) of contraception.

Keywords: Counseling, Knowledge, Women of fertile Age, MOW Contraception

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1. Introduction

MOW contraception is a long-term contraceptive method with a relatively low failure rate and is free of side effects. However, demand for MOW contraception remains low compared to other long-term contraceptives [1]. According to the East Java Province BKKBN Representative Office, the number of family planning acceptors reached 81,637 in the first quarter of 2023. Of the seven contraceptive methods, injectables and pills were the most popular. Of these, injectables accounted for 47%, pills 13.99%, condoms 2.97%, implants 19.02%, IUDs 13.41%, MOW 3.2%, and MOP 0.1% [2].

Women who wish to avoid pregnancy can choose to use tubectomy contraception (Female Operation Method/MOW). This method involves cutting or simply tying the fallopian tubes, preventing sperm and egg from meeting. Tubectomy contraception has the lowest failure rate in contraceptive use. Tubectomy contraception has been proven to be the most effective [3]. Public perception of the MOW contraceptive method remains limited. This is due to limited public knowledge about the advantages of this method, limited facilities, and limited number of trained personnel. The public generally prefers non-MWJP contraceptive methods, particularly injectables and birth control pills [4].

The low interest of mothers in choosing female surgical contraception (MOW) may be influenced by several factors. Several factors influence a person's choice of contraceptive method. These factors include internal factors, such as age, number of children, health, education, knowledge, and attitudes. External factors include facilities and infrastructure, cost, and side effects of the contraceptive, husband's support, support from health workers, and information about the MOW contraceptive method [5].

In contraceptive use, several factors can influence the choice of contraceptive, including internal and external factors. Internal factors include knowledge, education, age, occupation, number of children (parity), and attitude. External factors include husband's support, family support, health care providers, economic and socio-cultural factors [6].

According to research (Chania Forcepta & Rodiani, 2017), education and knowledge influence the choice of female surgical method (MOW) contraception. This can be concluded because education can influence a person's knowledge [7]. A person with a higher level of education is directly proportional to their level of knowledge. Furthermore, research by Nastiti et al. (2022) states that the most influential factor in the choice of MOW is knowledge [5}.

Low knowledge will impact contraceptive use due to a lack of information, which can be obtained from various media [8]. Contraceptive use is related to reproductive health, which is part of maternal health. Ineffective contraception used by women of childbearing age who wish to terminate a pregnancy can lead to unwanted pregnancies [9].

Understanding why women of childbearing age choose or do not use MOW contraception is crucial for planning and developing family planning programs. Therefore, to increase knowledge among women of childbearing age, education from health workers is needed about what MOW contraception is, its benefits, and side effects. This study aims to determine the effect of education on women of childbearing age's knowledge about MOW contraception (Female Operation Method).

2. Methods

The design used in this pre-experimental research is One Group Pre-Test and Post-Test. The variables in this study are independent and dependent variables. The independent variable in this study is counseling about the MOW contraceptive method and the dependent variable is the knowledge of PUS women about the MOW contraceptive method. The population in this study was all WUS in RT 02 RW 02 Sidomulyo Village, Semen District, Kediri Regency, totaling 33 people with a total sampling technique. Counseling was given to groups of women of childbearing age who already have children. The counseling media used were MOW contraceptive counseling materials, LCDs, and laptops. Data collection used a questionnaire totaling 15 questions. The questionnaire for the pre-test and post-test was the same and had been tested for validity and reliability. The analysis used was the Wilcoxon Match Pair test.

3. Results and Discussion

Based on the research conducted, the following results were obtained:

Table 1 Characteristics of Respondents Based on Age

No.	Age	Frequency	Percentage
1	21-30	6	18,18
2	31-40	19	57,58
3	41-50	8	24,24
Amount		33	100

Based on Table 1 above, from 33 respondents, it was found that the majority of respondents were aged 31-40 years sebanyak 19 orang (57,58%)

Table 2 Characteristics of Respondents Based on Education

No.	Education	Frequency	Percentage
1	SD	7	21,21
2	SMP	14	42,42
3	SMA	12	36,37
4	PT	0	0
	Amount	33	100

Based on Table 2 above, from 33 respondents, it was found that the majority of respondent education was junior high school 14 respondents (42,42%)

Table 3 Characteristics Respondent based on Ever or not they have received information

No.	Received information	Frequency	Percentage
1	Ever received information	23	69,70
2	Never received information	10	30,30
Amount		33	100

Based on table 3 above, from 33 respondents, most respondents had ever received information, as many as 23 respondents (69.70%)

Table 4 Distribution of WUS knowledge about MOW contraceptive methods before counseling

No.	Knowledge	Frequency	Percentage
1	Good	0	0
2	Sufficiently	25	75,76
3	Less	8	24,24
Amount		33	100

Based on table 4 above, shows that of the 33 respondents, the majority, namely 25 respondents (75.76%), had sufficient knowledge and a small number of respondents had good knowledge, namely 0 respondents (0%).

Table 5 Distribution of WUS knowledge about MOW contraceptive methods after counseling

No.	Knowledge	Frequency	Percentage
1	Good	28	84,84
2	Sufficiently	5	15,16
3	Less	0	0
Amount		33	100

Based on table 5 above, shows that of the 33 respondents the highest percentage was 28 respondents (84.84%) who had good knowledge and the lowest percentage was 0 respondents (0%) who had poor knowledge.

Table 6 Cross tabulation of the effect of counseling on WUS knowledge about the MOW contraceptive method

Counseling	Before		After	
Knowledge	N	%	N	%
Good	0	0	28	84,84
Sufficiently	25	75,76	5	15,16
Less	8	24,24	0	0
Amount	33	100	33	100
Uji Wilcoxon Match Pair Test : Z = -5.533 dengan (σ)	=	0.000 ($\sigma \leq 0,05$).		

Based on Table 6 above, 33 respondents: Before the counseling, the majority had sufficient knowledge, namely 25 respondents (75.76%), 8 respondents (24.24%) had insufficient knowledge and 0 respondents (0%) had good knowledge. After the counseling, the majority had good knowledge, namely 28 respondents (84.84%), 5 respondents (15.16%) had sufficient knowledge and 0 respondents (0%) had insufficient knowledge. Based on the data from the cross tabulation, the data analysis test showed a Z result of -5.533 with a significance level (σ) of 0.000 (σ ≤ 0.05). Because σ ≤ 0.05, H1 is accepted, which means there is an effect of counseling on the knowledge of women of childbearing age (WUS) about female surgical methods (MOW) of contraception.

Discussion

Based on Table 6 above, out of 33 respondents, counseling has impacted the knowledge of women of childbearing age (WUS) regarding female surgical methods (MOW) of contraception. Data from the study before the counseling showed that 0 respondents (0%) had good knowledge, 25 respondents (75.76%) had sufficient knowledge, and 8 respondents (24.24%) had insufficient knowledge. After counseling on the MOW method of contraception, 28 respondents (84.84%) had good knowledge, 5 respondents (15.16%) had sufficient knowledge, and 0 respondents (0%) had insufficient knowledge.

Knowledge is the result of "knowing" and occurs after a person senses a particular object. Sensing an object occurs through the five human senses: sight, hearing, smell, taste, and touch. The time from sensing to producing knowledge is greatly influenced by the intensity of perceptual attention to the object [10].

Respondents' knowledge of MOW contraception increased after the counseling. This was due to the explanations and new knowledge they received. Respondents who previously didn't understand the MOW method became more aware of it, allowing them to better determine which contraceptive option to use. Respondents' knowledge is influenced by several factors, including age, education, occupation, and previous exposure to information. According to Table 1, the majority of 33 respondents (19 respondents, 57.58%) were between 31 and 40 years old.

According to KBBI, age is the length of time a person has lived [11] Age influences a person's comprehension and thought patterns. As age increases, comprehension and thought patterns develop, thus enhancing the knowledge gained. Research has shown that a woman's age influences a person's knowledge. Essentially, someone with sufficient age has a more streamlined comprehension and thought process, and the knowledge gained can be applied to desired goals.

Another influencing factor is education. Table 2 shows that the majority of respondents had a junior high school education (14 respondents (42.42%), a high school education (12 respondents (36.37%), an elementary school education (7 respondents (21.21%), and a university education (0%). Education level influences a person's ability to grasp or accept information; the higher a person's education, the greater the knowledge gained.

A person's education determines how easily they absorb and understand the knowledge they acquire. In general, the higher a person's education, the greater their knowledge [12]. Besides education, a contributing factor is whether or not a person has ever received information. The research results in Table 3 show that of the 33 respondents, the majority (23 respondents, 69.70%) have received information.

Information can be defined as a technique for collecting, storing, manipulating, announcing, analyzing, and disseminating information for a specific purpose. The development of technology will provide a variety of mass media that can influence public knowledge about new innovations. As a means of communication, various forms of mass media such as television, radio, newspapers, magazines, and others have a significant influence on the formation of people's opinions and beliefs. In conveying information as its main task, mass media also carries messages containing suggestions that can direct a person's opinion. The existence of new information about something provides a new cognitive foundation for the formation of knowledge about it [13].

Technological advancements provide a variety of media, such as television, radio, newspapers, magazines, and others. Current technological developments significantly impact people's lives. The more sophisticated the technology, the better their quality of life. Besides being a means of communication, technology also serves as a source of information.

One aspect that influences how information is received is a person's level of expertise. Clients with good information tend to be more active participants, make better judgments, and adapt [14]. This aligns with the findings of a study by Sujiatin et al. (2020) entitled "The Effect of Health Education on Family Planning Using Booklets on Mothers' Knowledge in Choosing Contraceptives." This study surveyed 31 women of childbearing age and found that, after education, the majority of women of childbearing age (27 respondents, or 87.1%) had good knowledge about contraceptives [15]. This indicates that health education using booklets does indeed impact the knowledge of women of childbearing age in choosing contraceptives. This higher level of information regarding the meaning of MOW, its benefits and limitations, and potential side effects.

Counseling is a form of intervention on behavioral factors, namely an effort to create community behavior that is conducive to health. This means that health education seeks to make the community aware and know how to maintain their health, how to avoid or prevent things that are detrimental to health [16].

Based on the research results, the analysis test showed a Z result of -5.533 with a significance level (σ) of 0.000 ($\sigma \leq 0.05$). Because $\sigma \leq 0.05$, H1 is accepted, meaning there is an effect of counseling on the knowledge of women of fertile age (WUS) about female surgical methods (MOW) of contraception. From the data above, there is an increase in knowledge of women of fertile age (WUS) about the MOW contraceptive method after counseling, and it can be seen that individuals have different levels of comprehension and memory.

4. Conclusion

The research results above conclude that counseling has an impact on women of childbearing age's (WUS) knowledge about female surgical methods (MOW) of contraception. Understanding why women of

childbearing age choose or do not choose to use MOW is crucial for determining the planning and development of family planning programs. Therefore, health workers should play an active role in providing knowledge about female surgical methods of contraception through health education

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5. Reference

[1] Ischa, Naila. 2017. Analisis Faktor Penggunaan Kontrasepsi Metode Operatif Wanita (Mow) Pada Wanita Usia Subur. Jurnal Ilmiah Kesehatan Media Husada. https://ojs.widyagamahusada.ac.id/index.php/JIK/article/download/43/28.

[2] Jatimnewrooms. 2023. Triwulan Pertama, Akseptor KB di Jatim Capai 81 Ribu. https://kominfo.jatimprov.go.id/berita/triwulan-pertama-akseptor-kb-di-jatim-capai-81-ribu

[3] BKKBN.2017. Laporan Akuntabilitas Kinerja Instansi Pemerintah 2017. pdf. (n.d.).diunduh pada Senin, 28 Agustus 2020.

[4] Kementrian Kesehatan Republik Indonesia. (2018). Profil Kesehatan Indonesia Tahun 2018. Kementrian Kesehatan RI.

[5] Nastiti,dkk. 2022. Faktor Yang Berhubungan Dengan Pemilihan Kontrasepsi Metode Operasi Wanita (MOW). Jurnal Penelitian Perawat Profesional, Volume 4 No 2, Mei 2022 Hal 575 – 580 Global Health Science Group. https://jurnal.globalhealthsciencegroup.com/index.php/JPPP/article/download/941/674/

[6] Gaol, E. L. (2017). Pengaruh Faktor Predisposisi, Pendukung Dan Pendorong Terhadap Pemanfaatan KB MKJP Pada Wanita Pasangan Usia Subur Di Wilayah Kerja Puskesmas Hutapaung Tahun 2017.

[7] Chania Forcepta & Rodiani. (2017). Faktor-Faktor Penggunaan Alat Kontrasepsi Medis Operasi Wanita (MOW) pada Pasangan Wanita Usia Subur. Fakultas Kedokteran Universitas Lampung, 6(1).

[8] Palentari, Lizia (2021) Pengaruh Penyuluhan Metode Kontrasepsi Jangka Panjang (MKJP) Terhadap Pengetahuan Dan Sikap Pada Wanita Usia Subur (WUS)Di Wilayahkerja Puskesmas Batu Brak Lampung Barat. Diploma thesis, Poltekkes Tanjungkarang.

[9] Winner, B., Peipert, j., Zhao, Q., Buckel, C., Madden, T & Allswort, J., 2012. Effectiveness of Long-Acting Reversible Contraception. New England Journal of Medicine, 2(1): pp 1998-2008. Tersedia di: http://www.nejm.org/doi/full/10.105 6/NEJMoa1110855#t=article

[10] A.Wawan & Dewi M.,2010.Teori dan pengukuran pengetahuan, sikap,dan perilaku:manusia. Yogyakarta: Nuha Medika.

[11] KBBI https://kbbi.web.id/umur

[12] Oviana, Atika.dkk. 2016. Penyuluhan Tentang Kb Terhadap Peningkatan Pengetahuan Pada Pasangan Usia Subur (PUS). Jurnal Kesehatan Perintis (Perintis's Health Journal) Volume 3 nomor 1 tahun 2016. https://jurnal.upertis.ac.id/index.php/JKP/article/view/351/180

[13] Budiman, Agus riyanto. 2014. Pengetahuan Dan Sikap Dalam Penelitian Kesehatan.Jakarta: Salemba Medika.

[14] Noviani, A., & Utami, U. (2023). Efektivitas Media Leaflet Terhadap Peningkatan Pengetahuan Dalam Pemilihan Kb Metode Kontrasepsi Jangka Panjang (Mkjp) Di Puskesmas Gajahan Surakarta. KOSALA : Jurnal Ilmu Kesehatan, 11(1), 45–51. https://doi.org/10.37831/kjik.v11i1.257

[15] Sujiatin, Ernawati, & A, W. D. (2020). Pengaruh Pendidikan Kesehatan tentang KB dengan Media Booklet terhadap Pengetahuan Ibu dalam Pemilihan Alat Kontrasepsi. Universitas Kusuma Husada Surakarta.

[16] Notoatmodjo, Soekidjo. 2012. Promosi Kesehatan dan Perilaku Kesehatan. PT.Rineka Cipta . Jakarta.