

Characteristics Of Long-Term Contraception Method (MKJP) Acceptors Post-Childbirth At RSUD Banyumas In 2022

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Abstract

The National Population and Family Planning Board (BKKBN) issued a Regulation in 2017 regarding Postpartum and Post-Abortion Family Planning Services. The use of contraceptive methods is an effort to reduce the health risks for mothers and children due to the 4TS: Too Young, Too Close, Too Frequent, and Too Old Pregnancies. Each contraceptive method has advantages and disadvantages, but the long-term contraceptive method: (MKJP) is the most effective. Objective: This study aimed to determine the characteristics of long-term contraceptive method acceptors postpartum at Banyumas Regional General Hospital in 2022. Method: This quantitative descriptive study employed a retrospective cohort design. The Study Sample was derived from secondary data, Specifically medical records of postpartum long-term contraceptive method acceptors in 2022, totaling 160 acceptors. Data were collected using a checklist and analyzed using univariate analysis in SPSS. Results and Discussion: Among the acceptors of long-term contraceptive methods postpartum at Banyumas Regional General Hospital in 2022, 61 individuals (38.1%) had no accompanying diseases. The least common accompanying disease was Twin Pregnancy, with two individuals (1.3%). Most had undergone Cesarean Section delivery (109 individuals, 68.1%), while the least common delivery type was vaginal delivery (51 individuals, 31.9%). The age group with the highest number of acceptors was 20-30 (69 individuals, 36.3%), while the least common age group was 40 (23 individuals, 14.4%). Parity 2 was the highest (58 individuals, 36.3%), while the least common number of living children was 1 (45 individuals, 28.1%). All acceptors were available with National Health Insurance (JKN) coverage. The most common contraceptive method used was intrauterine device (IUD) (131 individuals, 79.4%), followed by mini-laparotomy with local anesthesia (31 individuals, 19.4%). Conclusion: The characteristic of postpartum LACM acceptors at Banyumas Regional General Hospital Shows that most used IUDs as contraceptive methods. The majority has no accompanying diseases, underwent Cesarean Section delivery, were in the 20-30 age group, had parity 2, and were covered by National Health Insurance (JKN).

Keyword: Family Planning, Long-Acting Contraceptive Methods, Postpartum Women, Contraceptive Acceptors, Reproductive Health, Maternal Health

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Introduction

Family planning is one of the Indonesian government's strategic efforts to achieve balanced population growth and improve family quality. Thru the National Population and Family Planning Board (BKKBN), the government promotes the use of contraceptive methods to ensure that every pregnancy is planned, desired, and occurs at an appropriate interval. One of the priority programs is postpartum family planning (PPFP), which encourages women to initiate contraception immediately after childbirth to prevent unintended and closely spaced pregnancies (BKKBN,

2022; Ministry of Health of Indonesia, 2022). Postpartum family planning plays an important role in reducing maternal and neonatal morbidity and mortality. The World Health Organization (WHO) recommends postpartum contraception as an effective strategy to prevent high-risk pregnancies and improve maternal and child health outcomes. Appropriate birth spacing has been shown to reduce the risk of maternal complications, preterm birth, low birth weight, and neonatal mortality. Therefore, integrating family planning services into maternal health care is considered an essential component of reproductive health services (WHO, 2022).

Among the available contraceptive options, Long-Acting Contraceptive Methods (LACMs), including intrauterine devices (IUDs), contraceptive implants, and female sterilization (tubal ligation), are recognized as the most effective methods because of their high efficacy, long duration of protection, and minimal dependence on user compliance. Consequently, the Indonesian Ministry of Health and BKKBN have prioritized increasing the utilization of LACMs, particularly during the postpartum period (Ministry of Health of Indonesia, 2022). Despite these efforts, the utilization of postpartum LACMs remains relatively low. National data indicate that only 12.03% of reproductive-age couples used long-acting contraceptive methods in 2022, although Central Java reported a slightly higher coverage of 16.56%. In Banyumas Regency, active family planning participants using LACMs consisted of 41,857 IUD users, 36,498 implant users, and 10,637 female sterilization acceptors. However, the coverage of postpartum family planning had not yet reached the expected target, indicating that many women did not adopt long-acting contraception immediately after childbirth (Ririn et al., 2022; DPPKBP3A Banyumas, 2022).

Preliminary data obtained from Banyumas Regional Hospital further demonstrated this gap. During 2022, there were 2,573 deliveries, whereas only 592 women adopted postpartum long-acting contraceptive methods. This discrepancy suggests that postpartum contraceptive uptake remains suboptimal despite the availability of services. Understanding the characteristics of women who choose postpartum LACMs is essential to support evidence-based strategies for improving postpartum family planning programs. Previous studies have primarily focused on the effectiveness of postpartum family planning or factors associated with contraceptive use. However, limited evidence describes the demographic and reproductive characteristics of postpartum LACM acceptors in referral hospitals, particularly in Banyumas Regency. Therefore, this study aimed to describe the characteristics of postpartum long-acting contraceptive method acceptors at Banyumas Regional Hospital in 2022. The findings are expected to provide baseline information for health professionals and policymakers in developing targeted interventions to increase postpartum LACM utilization and strengthen family planning services.

Method

This study employed a descriptive quantitative design with a retrospective cohort approach. The study was conducted at Banyumas Regional Hospital, Central Java, Indonesia, using secondary data obtained from medical records of postpartum women who received Long-Acting Contraceptive Methods (LACMs) between January and December 2022. The study population consisted of 592 postpartum LACM acceptors registered during the study period. The minimum sample size was calculated using the single population proportion formula, resulting in 159 respondents, who were selected using purposive sampling. The inclusion criteria were postpartum women who used LACMs within 42 days (6 weeks) after delivery and had complete medical record data. Medical records with incomplete information were excluded from the study.

The variables observed included the type of long-acting contraceptive method, maternal age, parity, mode of delivery, comorbidities, and health insurance status. Data were collected using a structured checklist developed from the hospital medical record system. Prior to data collection, the instrument underwent expert validity assessment and reliability testing to ensure the consistency of data extraction. Data management involved editing, coding, data entry, cleaning, and tabulation before analysis. Descriptive (univariate) analysis was performed using IBM SPSS Statistics version 25 to summarize the frequency and percentage distribution of each variable. The findings were presented in tables and descriptive narratives. This study received ethical approval prior to data collection and adhered to the ethical principles of beneficence, justice, confidentiality, and anonymity throughout the research process.

Results and discussions

Table 1. Distribution of Long-Acting Contraceptive Methods Used by Postpartum Acceptors

Contraceptive Method	n	%
IUD	129	80.6
Female Sterilization (MOW)	31	19.4
Total	160	100.0

The results showed that the intrauterine device (IUD) was the most frequently used postpartum long-acting contraceptive, accounting for 80.6% of all acceptors, whereas 19.4% chose female sterilization (MOW). The predominance of IUD use indicates that postpartum women preferred reversible contraception while maintaining future fertility. Immediate postpartum IUD insertion is also considered safe, highly effective, and compatible with breastfeeding. These findings are consistent with Dewan et al. (2019), who reported that postpartum IUDs were more frequently selected than sterilization because many women had not yet completed their desired family size. However, the findings differ from Indriyani (2020), who found a higher proportion of MOW users in another referral hospital. Differences in counselling practices and reproductive preferences may explain these variations.

Table 2. Distribution of Comorbidities among Postpartum LACM Acceptors

Comorbidity	n	%
None	61	38.1
Hypertension	48	30.0
Previous Caesarean Section	28	17.5
Premature Rupture of Membranes	18	11.3
Post-term Pregnancy	3	1.9
Twin Pregnancy	2	1.3
Total	160	100.0

Most postpartum LACM acceptors had no pregnancy-related complications (38.1%), while hypertension was the most common comorbidity (30.0%). Women with obstetric complications benefit greatly from postpartum contraception because it reduces the risk of unintended pregnancy and short interpregnancy intervals. Powell et al. (2021) emphasized that

postpartum contraception is particularly important for women with chronic medical conditions. Nevertheless, unlike Moniz et al. (2017), this study found that most LACM users had no comorbidities, suggesting that postpartum family planning services were also well accepted among women with uncomplicated pregnancies.

Table 3. Distribution of Delivery Mode

Delivery Mode	n	%
Caesarean Section	109	68.1
Vaginal Delivery	51	31.9
Total	160	100.0

Caesarean section accounted for 68.1% of all deliveries among postpartum LACM acceptors. This finding may be explained by the opportunity to insert an IUD immediately during caesarean surgery, thereby increasing postpartum contraceptive uptake. Similar findings were reported by Damayanti (2021), who demonstrated that intra-caesarean IUD insertion is associated with higher acceptance rates and lower expulsion than insertion following vaginal delivery.

Table 4. Distribution of Maternal Age

Age Group (years)	n	%
<20	3	1.9
20–30	69	43.1
31–40	65	40.6
>40	23	14.4
Total	160	100.0

Most respondents were aged 20–30 years (43.1%), representing women in the healthy reproductive age group. Women of reproductive age generally have greater awareness of birth spacing and postpartum family planning. This result is in line with Sulastri et al. (2023), who reported that women aged 20–35 years were more likely to adopt postpartum contraception than other age groups.

Table 5. Distribution of Parity

Parity	n	%
One child	45	28.1
Two children	57	35.6
More than two children	58	36.3
Total	160	100.0

Women with more than two children (36.3%) represented the largest parity group. Higher parity is commonly associated with greater acceptance of long-acting contraception because women are more likely to have achieved their desired family size. This finding supports Subekti (2018), who reported that parity significantly influences postpartum contraceptive choices.

Table 6. Distribution of Health Insurance Coverage

Health Insurance	n	%
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National Health Insurance (BPJS)	160	100.0
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All respondents were covered by the Indonesian National Health Insurance (BPJS). Universal insurance coverage may facilitate access to postpartum long-acting contraceptive methods by reducing financial barriers. Similar findings were reported by Sulastri et al. (2023), indicating that BPJS plays an important role in improving access to family planning services.

Conclusion

This study aimed to describe the characteristics of postpartum Long-Acting Contraceptive Method (LACM) acceptors at Banyumas Regional Hospital in 2022. The findings revealed that the majority of postpartum women selected the intrauterine device (IUD) as their preferred long-acting contraceptive method, while a smaller proportion chose female sterilization (MOW). Most acceptors were women aged 20–30 years, had more than two living children, delivered by caesarean section, had no pregnancy-related comorbidities, and were covered by the National Health Insurance (BPJS). These findings indicate that postpartum long-acting contraceptive utilization is more common among women of healthy reproductive age with higher parity and adequate access to health services. The predominance of IUD use also suggests that postpartum family planning services at Banyumas Regional Hospital have successfully promoted reversible long-acting contraception as an effective method for preventing unintended pregnancies and improving birth spacing. Furthermore, universal health insurance coverage appears to facilitate access to postpartum contraceptive services by reducing financial barriers.

The results of this study contribute to the existing evidence on postpartum family planning in Indonesia and provide baseline information for health professionals and policymakers in developing strategies to increase the utilization of long-acting contraceptive methods. Strengthening contraceptive counseling during antenatal care, delivery, and the postpartum period is essential to ensure that women receive adequate information regarding the effectiveness, safety, and benefits of postpartum long-acting contraception. This study was limited by its descriptive retrospective design and the use of secondary medical record data from a single referral hospital, which may limit the generalizability of the findings. Future studies should employ analytical or prospective study designs with larger and more diverse populations to identify determinants of postpartum long-acting contraceptive utilization. Variables such as educational level, knowledge, attitudes, husband support, counseling quality, socioeconomic status, and accessibility of family planning services should be included to provide a more comprehensive understanding of factors influencing postpartum contraceptive choices. The findings of this study are expected to support the improvement of postpartum family planning programs and contribute to increasing the utilization of long-acting contraceptive methods as an important strategy for improving maternal and child health outcomes and achieving sustainable reproductive health goals.

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