

A Correlation Between Knowledge And Socio-Economics With The Selection Of Contraceptives In Coastal Areas In The Working Area Of Luas Health Center Of Kaur Regency

Yeka Hermalena ¹, Fikritri Marya Sari ², Darmawansyah ³

^{1,2,3} Program Studi Kesehatan Masyarakat, Fakultas Ilmu Kesehatan

Corresponding Author:

kesmasyunived@gmail.com

ARTICLE HISTORY

Received [16 December 2026]

Revised [18 June 2026]

Accepted [21 June 2026]

Keywords :

Contraceptives, Knowledge, Socioeconomic Status.

This is an open access

article under the [CC-BY-SA](#)

license



ABSTRACT

Intoduction: Family planning programs are direct efforts aimed at reducing birth rates through the use of contraceptives. The success of family planning programs in Indonesia is influenced by several factors, including socioeconomic status, culture, education, religion, and women's status. The purpose of this study was to determine the relationship between knowledge and socioeconomic status and contraceptive choice in the working area of Luas Health Center in Kaur Regency. **Method:** The method used was an analytical survey with a cross-sectional design. Primary data were collected by distributing questionnaires to 95 couples of childbearing age in Luas Health Center in Kaur Regency using a simple random sampling technique. **Result and Discussion:** Data analysis was performed using the Chi-Square test. Univariate analysis results showed that almost half (42.1%) of fertile couples had insufficient knowledge, more than half (55.8%) of fertile couples with incomes below Rp 2,670,039, and more than half (61.1%) of fertile couples used hormonal contraceptives. Bivariate analysis results showed a correlation between knowledge and contraceptive choice ($p=0.000$) and socioeconomic status ($p=0.029$). **Conclusion:** The researchers recommend that health centers provide education and support to the community to help them understand the benefits and impacts of hormonal and non-hormonal contraceptive use, enabling couples of childbearing age to use appropriate contraceptives.

INTRODUCTION

One of the population problems in Indonesia is population density. Based on Worldometers data, as of July 16, 2023, Indonesia's population reached 277,534,122, the fourth largest in the world. Indonesia's population ranks fourth after China, India, and the USA. The main factor affecting population growth is the birth rate. The high birth rate reflects the lack of family planning coverage and the fact that family planning goals have not been fully achieved. The availability and access to family planning information and services can prevent unwanted pregnancies. If women have access to safe and effective contraception, it is estimated that maternal mortality will decrease by up to 50%, including a reduction in reproductive health risks related to pregnancy, childbirth, and unsafe abortion (Marmi, 2019).

In the context of national development, society is a highly strategic issue. In recent years, Indonesia has taken various initiatives to curb population growth, namely by implementing the Family Planning (KB) program. The KB program allows individuals to limit the spacing between births or reduce birth rates through the use of hormonal and non-hormonal contraceptive methods. These methods can be permanent or temporary, although different types of contraception have varying levels of effectiveness that are almost equivalent (Sartika & Qomariah, n.d. 2020). It is very important for women of childbearing age to choose contraception according to their preferences. One of the most popular methods of contraception is the birth control injection, both the 1-month and 3-month types, because they are considered practical, safe, and affordable. Factors that influence the use of birth control injections include knowledge, education level, age, information media, availability of contraceptives, the role of health workers, and support from husbands (Sartika & Qomariah, n.d. 2020).

The success of family planning programs in Indonesia is influenced by several factors, including socioeconomic status, culture, education, religion, and the status of women. Family planning programs are direct efforts aimed at reducing birth rates through the use of contraceptives. The

success or failure of family planning programs will also determine the success or failure of efforts to achieve the welfare of the Indonesian people (Handayani, 2019).

Knowledge is an important domain in shaping a person's behavior. Knowledge can form certain beliefs so that a person behaves in accordance with their beliefs, including in determining contraception to be used. Therefore, it can be concluded that knowledge can be measured or observed through what is known about the object (health issues), and knowledge measurement can be conducted through interviews or questionnaires that ask about the content of the material to be measured from the research subjects or respondents (Notoatmodjo, 2018).

In addition to knowledge, socioeconomic factors also greatly influence the choice of contraceptive methods. Socioeconomic factors refer to a family's background in terms of family income, family expenditure, and wealth. Income influences a person's participation in health services. Families with good economic conditions will be willing to use contraceptives because they have the financial means to cover the costs of post-insertion monitoring and removal of the contraceptive device. Meanwhile, mothers with low economic status will reconsider even if the insertion is free of charge, because if it is not suitable or there are other problems, they will have to bear the costs themselves (Erfandi, 2019).

The population of Bengkulu Province in September 2020 was 2,010,670. Furthermore, based on data from the Central Statistics Agency (BPS), the population of Kaur Regency in 2020 was 126,500. Since Indonesia conducted its first Population Census in 1971, the population of Bengkulu Province has continued to increase. The results of the 2020 Census compared to the 2010 Census show an increase in population of 295,152 people, or an average of 24,596 people per year (BPS, 2021).

The National Population and Family Planning Agency (BKKBN) of Bengkulu Province stated that as of April 2024, there were 253,141 acceptors spread across 10 regencies and cities in Bengkulu Province using various types of contraceptives. Of the hundreds of thousands of active family planning participants, 32,988 participants used hormonal contraceptive pills, 151,858 accepted injections, and 39,835 used implants. Meanwhile, only 28,640 participants used non-hormonal contraceptives. Condom users numbered 11,043, MOP (male sterilization) had only 619 acceptors, MOW (female sterilization) numbered 7,224, and IUD (intrauterine device) had 9,574 participants. Hormonal family planning includes pills, injections, and implants. Non-hormonal family planning includes condoms and intrauterine devices (IUDs). Hormonal family planning is not recommended for long-term use. It is advisable to switch to non-hormonal methods such as female surgical contraception (MOW), also known as tubal ligation, male surgical contraception (MOP), also known as vasectomy, and IUDs, also known as intrauterine devices (BKKBN Prov Bengkulu, 2024).

In Kaur Regency, the population density is 54 people per square kilometer. Details of the population of Kaur Regency in 2020: Male: 65,093 people, Female: 61,407 people, with a total of 29,189 PUS. Contraceptive devices used include IUDs (601), MOWs (159), MOPs (82), condoms (186), implants (4,615), injections (14,430), and pills (2,757) (BPS, 2023).

The Luas District Health Center is one of the Technical Implementation Units (UPT) of the Community Health Center (Puskesmas) in Kaur District, Bengkulu Province. The Luas UPT-Puskesmas is located in Luas Subdistrict. There are 1,332 active family planning acceptors using IUDs (37), MOW (9), MOP (5), condoms (12), implants (288), injections (901), and pills (172). Based on the data, more family planning acceptors use hormonal contraceptives compared to non-hormonal contraceptives (Luas Community Health Center Profile, 2024).

Based on the results of a preliminary survey conducted by researchers on 10 couples of childbearing age (PUS) who were visited by researchers at respondents' homes in the working area of the Luas Community Health Center in Kaur Regency. It was found that 4 couples of childbearing age (PUS) did not use contraception, and these couples of childbearing age (PUS) did not know about the types of contraception, its benefits and effects. Furthermore, it was found that 3 couples of reproductive age (PUS) had not used contraception because they could not afford it.

RESEARCH METHODS

The research design in this study used a cross-sectional design. The study was conducted in June 2025. The location of this study was at the Luas Community Health Center in Kaur Regency. The population of this study was all couples of childbearing age in the working area of the Luas Community Health Center in Kaur Regency, totaling 1,825. The sample in this study was a portion of the couples of reproductive age in the working area of the Luas Community Health Center in Kaur Regency. The sampling technique used was simple random sampling. Therefore, the sample size in this study was 95 couples of reproductive age in the working area of the Luas Community Health

Center in Kaur Regency. The analysis used to determine the relationship between the dependent and independent variables was the Chi-square test (χ^2), with a confidence level of 95% and a significance value (p) of 0.05.

RESULTS

Univariate analysis was performed to determine the description of each research variable, both independent variables (knowledge, socioeconomic status) and dependent variables (contraceptive choice). The results of the univariate analysis are presented as follows:

Tabel 1. Frequency Distribution

Variable	Frequency (n)	Present (%)
Knowledge		
Less	40	42,1
Enough	37	38,9
Good	18	18,9
Socioeconomic		
Income <Rp. 2,670.039	53	55,8
Income ≥Rp. 2,670.039	42	44,2
Contraceptive Choice		
Hormonal	58	61,1
Non Hormonal	37	38,9

Sumber: Data Diolah, 2025

Based on Table 1, the distribution of knowledge shows that almost half of the couples of childbearing age (42.1%) have insufficient knowledge in the working area of the Luas Community Health Center in Kaur District. The socioeconomic distribution shows that more than half (55.8%) of couples of childbearing age have an income of less than Rp. 2,670,039 in the working area of the Luas Community Health Center in Kaur Regency. The distribution of contraceptive choice shows that more than half (61.1%) of couples of childbearing age use hormonal contraceptives in the working area of the Luas Community Health Center in Kaur Regency.

Bivariate analysis was conducted to determine the relationship between independent variables (knowledge and socioeconomic status) and dependent variables (contraceptive choice) in the working area of the Luas Community Health Center in Kaur Regency.

Tabel 2. A Correlation Between Knowledge and Contraceptive Choice in Coastal Area in The Working Area of Luas Health Center of Kaur Regency

Knowledge	Contraceptive Choice				Total		χ^2	P
	Hormonal		Non Hormonal					
	f	%	f	%	f	%		
Less	31	77,5	9	22,5	40	100	15,984	0,000
Enough	23	62,2	14	37,8	37	100		
Good	4	22,2	14	77,8	18	100		
Total	58	61.1	37	38.9	95	100		

Sumber: Data Diolah, 2025

Based on Table 2, it is known that out of 40 fertile couples with insufficient knowledge, 31 people used hormonal contraceptives and 9 people used non-hormonal contraceptives. Out of 37 fertile couples with sufficient knowledge, 23 people used hormonal contraceptives and 14 people used non-hormonal contraceptives. and of the 18 fertile couples with good knowledge, 4 used hormonal contraceptives and 14 used non-hormonal contraceptives in the working area of the Luas Community Health Center in Kaur District.

To determine the relationship between knowledge and contraceptive choice in the Luas District Health Center Working Area in Kaur Regency, a Chi-Square (χ^2) test was used. The Chi-Square test result was 15.984 with a value of 0.000. Because the p-value was <0.05, there was a relationship between knowledge and contraceptive choice in the Luas District Health Center Working Area in Kaur Regency.

Tabel 3. A Correlation Between Socioeconomic and Contrapetive Choice in Coastal Area in The Working Area of Luas Health Center of Kaur Regency

Socioeconomic	Contrapetive Choice				Total		χ^2	P
	Hormonal		Non Hormonal					
	f	%	f	%	f	%		
Income <Rp. 2,670.039	38	71,7	15	28,3	53	100	4,746	0,029
Income ≥Rp. 2,670.039	20	47,6	22	52,4	42	100		
Total	58	61,1	37	38,9	95	100		

Sumber: Data Diolah, 2025

Based on Table 3, it is known that out of 53 couples of childbearing age with an income <Rp. 2,670,039, 38 people used hormonal contraceptives and 15 people used non-hormonal contraceptives, and out of 42 couples of childbearing age with an income ≥Rp. 2,670,039, 20 people used hormonal contraceptives and 22 people used non-hormonal contraceptives in the working area of the Luas Community Health Center in Kaur Regency.

To determine the relationship between socioeconomic status and contraceptive choice in the Luas District Health Center Working Area in Kaur Regency, a Chi-Square (χ^2) test was used. The Chi-Square test result was 4.746 with a value of 0.029. Because the p-value was <0.05, there was a relationship between socioeconomic status and contraceptive choice in the Luas District Health Center Working Area in Kaur Regency.

DISCUSSION

A Correlation Between Knowledge and Contrapetive Choice in Coastal Area in The Working Area of Luas Health Center of Kaur Regency

The results of the bivariate analysis in this study show that out of 40 fertile couples with limited knowledge, there were still 9 people who used non-hormonal contraceptives. This is because even though they did not know about the effects of hormonal and non-hormonal contraceptives, some used condoms because they did not want the hassle of injections or birth control pills and were afraid of using devices such as implants. Furthermore, out of 18 couples of reproductive age with good knowledge, there were still 4 people who used hormonal contraceptives. This was because the respondents felt comfortable with the birth control pills, injections, and implants that they had been using.

Statistical test results using the Chi-Square test show that there is a significant relationship between knowledge and contraceptive choice in the Kaur District Health Center Working Area, meaning that the better the knowledge of couples of childbearing age, the greater the likelihood of using non-hormonal contraceptives, and conversely, the less knowledge couples of childbearing age have, the less likely they are to use non-hormonal contraceptives.

Knowledge is everything that a person knows and obtains from the five senses' contact with certain objects. Knowledge is basically the result of the processes of seeing, hearing, feeling, and thinking, which form the basis of human behavior and actions. Knowledge is the memory of material that has been studied, seen, or heard before. The better a mother's knowledge, the better she will be at choosing the most suitable contraceptive method that is easy to use and practical (Setiasih et al., 2018).

A Correlation Between Socioeconomic and Contrapetive Choice in Coastal Area in The Working Area of Luas Health Center of Kaur Regency

The results of the bivariate analysis in this study show that of the 53 couples of childbearing age with an income of <Rp. 2,670,039, there were still 15 people who used non-hormonal contraceptives. This is because even though the respondents did not have extra money, they knew about the positive effects of using non-hormonal contraceptives, and some used condoms because they were more practical and did not cost too much. Furthermore, out of 42 couples of reproductive age with an income of ≥Rp. 2,670,039, there were still 20 people who used hormonal contraceptives. This was because the respondents did not know for sure the advantages of using non-hormonal

contraceptives, and some felt uncomfortable using non-hormonal contraceptives such as condoms.

Statistical test results using the Chi-Square test show that there is a significant relationship between socioeconomic status and contraceptive choice in the working area of the Luas Community Health Center in Kaur Regency. This means that the higher the income of couples of childbearing age, the greater the likelihood that they will use non-hormonal contraceptives, and conversely, the lower the income of couples of childbearing age, the lower the likelihood that they will use non-hormonal contraceptives.

The social status and economic conditions of the population in Indonesia will influence the development and progress of family planning programs in Indonesia. The progress of family planning programs cannot be separated from the economic level of the community because it is closely related to the ability to purchase contraceptives. For example, families with sufficient income will be more able to participate in family planning programs than families who are less fortunate, because for less fortunate families, family planning is not a basic necessity. The success of family planning programs will improve a country's economy because with fewer family members, needs can be better met and welfare can be guaranteed (Handayani, 2019).

CONCLUSIONS AND RECOMMENDATIONS

Based on the results of the research and discussion described above, it can be concluded that there is a significant relationship between knowledge and contraceptive choice, and there is a relationship between socioeconomic status and contraceptive choice in the working area of the Luas Community Health Center in Kaur Regency.

Researchers hope that community health centers will provide education and guidance to the public so that they can understand the benefits and effects of using hormonal and non-hormonal contraceptives, enabling couples of childbearing age to use the right contraceptives.

REFERENCES

- Arikunto S. 2018. *Prosedur Penelitian Suatu Pendekatan Praktek*. Jakarta: Rineka Cipta
- Arum, D. N., & Sujiyatini. 2019. *Pelayanan KB Terkini*. Jogjakarta: Nuha Medika
- Azwar. S. 2019. *Metode Penelitian Cetakan V*. Yogyakarta: Pustaka Pelajar
- BKKBN. 2022. *Survei Indikator Kinerja Rencana Program Jangka Menengah Nasional*. Jakarta: Badan Kependudukan dan Keluarga Berencana Nasional
- BPS. 2021. *Hasil Sensus Penduduk Tahun 2020*. Bengkulu: Badan Pusat Statistik Provinsi Bengkulu
- Dinkes Provinsi Bengkulu. 2023. *Profil Provinsi Bengkulu*. Bengkulu: Dinas Kesehatan Provinsi Bengkulu
- Giddens. 2021. *Kesehatan Reproduksi*. Yogyakarta: Pustaka Pelajar
- Handayani, S. 2019. *Pelayanan Keluarga Berencana*. Yogyakarta: Pustaka Rihama
- Hartanto, H. 2018. *Keluarga Berencana Dan Kontrasepsi*. Jakarta: Sinar Harapan
- Kemendes RI. 2023. *Profil Kesehatan Indonesia*. Jakarta: Kementerian Kesehatan RI
- Marmi. 2019. *Buku Ajar 'Pelayanan KB'*. Yogyakarta: Pustaka Pelajar
- Notoatmodjo, S. 2018. *Kesehatan Masyarakat Ilmu dan Seni*. Jakarta: Rineka Cipta
- Notoatmodjo, S. 2018. *Metodologi Penelitian Kesehatan*. Jakarta: Rineka Cipta
- Pendit, B. 2019. *Ragam Metode Kontrasepsi*. Jakarta: EGC
- Proverawati, A., Islaely, A, D., & Aspuah, S. 2020. *Panduan Memilih Kontrasepsi*. Yogyakarta: Nuha Medika
- Setiasih. 2018 *Statistika Penelitian Pendidikan*. Bandung: Alfabeta
- Siswanto, H. 2020. *Pendidikan Kesehatan Anak Usia Dini*. Yogyakarta: Pustaka Rihama

- Suratun. 2019. *Pelayanan Keluarga Berencana dan Pelayanan Kontrasepsi*. Jakarta: Trans Info Media
- Yanti. 2019. *Buku Ajar Kesehatan Reproduksi*. Yogyakarta: Pustaka Rihama.
- Yuhedi, L. T., & Kurniawati, T. 2019. *Buku Ajar Kependudukan dan Pelayanan KB*. Jakarta: EGC
- Zainuddin, H. 2020. *Pengetahuan Sosial Ekonomi*. Jakarta: Bumi Aksara