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THE RELATIONSHIP BETWEEN AGE, KNOWLEDGE AND HUSBAND'S SUPPORT WITH THE USE OF 3-MONTH DMPA INJECTABLE CONTRACEPTIVES IN FERTILE AGE COUPLES IN THE TEMBILAHAN HULU COMMUNITY HEALTH CENTER AREA

Susi Ernawati[1], Juda Julia Kristiarini[2], Risnawati[3]

[1-3]**STIKES Guna Bangsa Yogyakarta**

email: susiernawati896@gmail.com

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ABSTRACT

Background: 3-month injectable contraception is a contraceptive device in the form of a liquid containing the hormone progesterone which is injected into a woman's body periodically. DMPA (Depo Medroxy Progesterone Acetat) or Depo Provera is given every three months at a dose of 150 milligrams injected IM. The purpose of this study: is to analyze the relationship between age and husband's knowledge and support for the use of injection contraception at the Tembilahan Hulu Community Health Center. Method: The research used was an analytical survey with a cross sectional approach. Research population of family planning acceptors at UPTD Tembilahan Hulu Community Health Center, Indragiri Regency, Riau Province. In June-August 2024. The sample size is 100 respondents. Univariate data analysis and bivariate analysis using the Chi Square test and Logistic Regression test. Results: The research results can be interpreted as finding that the calculated F value = 15.322 with a significance level of 0.000 < 0.05, which means there is a significant relationship between age and the husband's level of knowledge and support for the use of injectable contraception.

*** Author Correspondence: Susi Ernawati, susiernawati896@gmail.com, STIKES Guna Bangsa Yogyakarta, +6285236662963**

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1. INTRODUCTION

One way to address population issues is through family planning programs. This program aims to regulate the number of births, the spacing between pregnancies, and the ideal age at which children should be born to create quality families (Tanjung et al., 2022).

Contraception is used by the majority of married women in almost every region of the world. 64% of women of childbearing age worldwide used some form of contraception. Data from the World Health Organization (WHO) indicates that the number of injectable contraceptives used worldwide was 4,000,000, or approximately 45%. Injectable contraceptive use is 30% in the United States. Injectable contraceptives are the most popular contraceptive method in Indonesia, with 34.3% using them (Ismed & Anggraini, 2022).

Data from the National Family Planning Coordinating Board (BKKBN) shows that in the use of contraceptive methods, 57.12% use injectable contraceptives, 24.67% use pills, 10.46% use IUDs/IUDs/spirals, 4.86% undergo female sterilization, 2.78% use AKBK/implants/susuk, 2.19% use condoms, 0.78% use periodic/calendar abstinence, 0.47% use coitus withdrawal, and 0.59% use other types of contraception (kemenkes, 2021)

Population growth has a significant impact on a country's economic development and well-being. In response to this situation, the government has taken proactive measures by establishing a special agency tasked with controlling population growth in Indonesia, the National Family Planning Coordinating Board (BKKBN). (Kunang, 2020) Contraception is a method used to prevent fertilization, preventing pregnancy. This method can be temporary or permanent. Contraception can be implemented in various ways, including hormones, devices, and surgical procedures (Contesa, 2019)

The National Family Planning Program was initiated and launched by the government in 1974. The government's goal is to reduce the population and also to reduce the mortality rate of pregnant women and newborns. Family planning is a pregnancy planning that is desired to make the norm of small, happy and prosperous families. In essence, family planning is an effort to space births and terminate pregnancies, if the mother has given birth to many children. Indirectly, family planning can improve physical and condition health, family economic health and improve the welfare of mothers and children (APBK kemenkes RI, 2023)

According to data from the Ministry of Health, in 2021, 57.4% of couples of childbearing age (PUS) in Indonesia participated in the Family Planning (KB) Program, a decrease from the previous year's figure of 67.6%. Of these participants, the majority (59.9%) used injectable contraception. Meanwhile, around 15.7% chose modern contraception such as pills or capsules. Implants accounted for around 10% of users, while intrauterine devices (IUDs) accounted for 8%. A total of 4.2% of participants used the female surgical method (MOW), and another 1.8% used condoms. Additionally, around 0.2% chose the male surgical method (MOP), and 0.1% used the lactational amenorrhea method (LAM). (BKKBN, 2023)

The number of PUS according to the Riau Provincial Health Office in 2022 was 870,858, less than in 2021 (911,400). Active family planning participants in 2022 (52.20%), increased compared to 2021 (45.6%). The active family planning participants used the following

* **Author Correspondence: Susi Ernawati, susiernawati896@gmail.com, STIKES Guna Bangsa Yogyakarta, +6285236662963**

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contraceptives: In 2022 MKJP: IUD (40.23%), MOP (16.47), MOW (31.29%) and Implant (44.6%). NON MKJP: In 2022 Injections 19,836 (24.32%), Pills 6,530 (11,) and Condoms 3,939 (23.1%), (Riau Provincial Health Office, 2022). Tembilahan Hulu Community Health Center obtained data on the use of active family planning contraception, the most active was injections, with 4,128,115 participants (48.56%). (Rusmiati & Aini, 2020)

Age is a variable used as an absolute measure or physiological indicator of a person's use of health facilities and services. In other words, increasing age increases learning experiences, which are a consequence of experience. (Susilaningrum et al., 2021) The use of injectable contraception must also consider side effects. The choice of injectable contraception requires special attention, especially for women over 35, given the risks, such as heart attack, stroke, and changes in blood pressure (Lia Hartini, 2019). Husbandly support is a form of moral support provided by a husband to his wife. A husband is very important to an individual and has a significant influence in shaping the individual's attitudes towards various matters (Sammantha & Sulistiyaningsih, 2024).

Tembilahan Hulu Community Health Center is the largest community health center in Indragiri Regency, so its target community is also wider, especially women of childbearing age. Preliminary studies at Tembilahan Hulu Community Health Center obtained data on the use of active contraceptives, the most active contraceptives were injections, with 4,128,115 participants (48.56%), followed by the second most were pills, while the lowest contraceptive choices were MOW and MOP. The results of these data indicate that the most contraceptives used by acceptors are injectable contraceptives. Based on this phenomenon and considering the importance of the problem and its impact, the researcher wants to add something new, namely explaining new elements by exploring the relationship between knowledge, age, and preferences for 3-monthly DMPA injectable contraceptives, which can provide new knowledge in understanding what influences contraceptive choice. Therefore, the author is interested in conducting research on the relationship between age, knowledge and husband's support with the use of 3-month DMPA injection contraception at the Tembilahan Hulu Community Health Center in 2024. The purpose of this research is to analyze the relationship between age, knowledge and husband's support with the use of 3-month DMPA injection contraception in fertile age couples in the Tembilahan Hulu Community Health Center in 2024.

2. METHOD

This study used an analytical survey method with a cross-sectional approach, meaning that variable measurements were carried out only once. The study location was in the working area of the Tembilahan Hulu Community Health Center, Indragiri Hilir Regency, Riau Province, and was conducted from June to August 2024. The population in this study included all acceptors of the 3-month DMPA injection family planning who visited the Tembilahan Hulu Community Health Center since December 2023, with a total of 983 people. Through a purposive sampling technique, a sample of 100 respondents was obtained. This study was conducted after obtaining approval from the Health Research Ethics Commission of STIKES Guna Bangsa Yogyakarta with letter number 021/KEPK/VI/2024. The collected

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data were analyzed using univariate and bivariate tests, with the application of the Chi-Square test and logistic regression.

3. RESULTS AND DISCUSSION

Table 1. Distribution of Respondent Characteristics

	Frequency	%
Education		
Elementary School	2	32.0
Junior high school	42	42.0
Senior high school	47	47.0
College	9	9.0
	100	100
Work		
housewife	76	76.0
Private	15	15.0
Self-employed	9	9.0
	100	100

Table 1 shows that the majority of respondents had a high school education, 47 (47.0%). Meanwhile in terms of employment, the majority of respondents were housewives or unemployed, 76 (76%).

Table 2 shows that the age variable for most respondents was 20-35 years old, with 63 respondents (63.0%). The knowledge level variable with the highest level of knowledge was moderate, with 44 respondents (44%). The variable with the highest use of injectable contraception was the 3-month DMPA injectable, with 67 respondents (67%). The variable with the highest husband's support was husband support, with 66 respondents (66%).

Table 2Distribution of Research Variables

	Frequency	%
Age		
<20 years	21	21.0
20-35 years	63	63.0
>35 years	16	16.0
	100	100
Level of Knowledge		
Tall	25	25.0
Currently	44	44.0
Low	31	31.0
	100	100
Use of contraceptive injections		
DMPA injection contraception	67	67.0
Combination injection contraception	33	33.0
	100	100
Husband's support		
Support	68	
Does not support	32	68.0
	100	32.0

Table 3 distribution of chi square test analysis results on age towards the use of 3-month injectable contraception

Table 3 shows that the majority of respondents using the 3-month DMPA injectable contraceptive were aged 20–35 years, representing 50 respondents. The analysis yielded a significance value of 0.000. Since the p-value is <0.05, the alternative hypothesis (Ha) is accepted, indicating a significant relationship between age and DMPA injectable contraceptive use

* Author Correspondence: Susi Ernawati, susiernawati896@gmail.com, STIKES Guna Bangsa Yogyakarta, +6285236662963

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The Relationship Between Age and the Use of DMPA Injectable Contraceptives.

Age	Contraception		Total	Value	Sig
	DMPA 3	3-month combi			
<20 years	7	14	21		
20-35 years	50	13	63		
>35 years	10	6	16		
Total	67	33	100	15.26	.000

The results of the study showed that the majority of respondents aged 20–35 years used injectable contraception, with a total of 50 people. Based on the analysis using the Chi-Square test, a significance value of 0.000 was obtained. Because the p-value <0.05, the alternative hypothesis (Ha) was accepted, which means there is a significant relationship between the respondents' age and the use of injectable contraception.

The supporting journal for this research is the work of Lia Hartini (2019). The study showed that of the 37 respondents sampled, 24 (64.9%) were in the younger age group (<30 years), while 13 (35.1%) were in the older age category (≥30 years). Age is known to influence a person's decision in choosing a contraceptive method. In general, age can be a reference factor in determining the family planning phase, namely postponing pregnancy if the wife is <20 years old, spacing pregnancies at the age of 20–30 years, and ending the fertile period at the age of >30 years. The results of this study are similar to the results of research (Lia Hartini, 2019) which stated that the reproductive age group 20–35 years preferred injectable contraception because it is more practical to use, and the majority of respondents were breastfeeding mothers, so they felt more comfortable using 3-month injectable contraception compared to long-term contraceptive methods (Lia Hartini, 2019)

This study found that women aged 20-35 years were more likely to use the 3-month injectable contraceptive method because it is simpler to use, and most respondents were breastfeeding mothers, making it more comfortable to use compared to long-term contraceptive methods. The use of injectable contraceptives also requires consideration of side effects. Choosing this method requires extra care, especially for women over 35, due to risks such as heart attack, stroke, and changes in blood pressure. Disadvantages of injectable contraceptives include menstrual irregularities such as amenorrhea, menorrhagia, spotting, as well as the possibility of weight gain and allergic reactions. Age is the time span from birth to one's last birthday. Age serves as an absolute measure or physiological indicator in the use of health facilities and services. As age increases, more learning experiences are gained as a result of life experiences . This study aligns with (Tanjung et al., 2022), which states that individuals aged 26-30 years are expected to have reached a stage where they are able to face and resolve problems with emotional calm (Tanjung et al., 2022).

Researchers' opinions on the effectiveness and impact of this contraceptive may be influenced by the user's age. For younger women, injectable contraception may provide long-term benefits for family planning and reproductive health. Conversely, for older women approaching menopause, the long-term effects of injectable contraception use should be carefully considered, including its potential impact on bone density and overall health. Overall, the use of the 3-monthly

* **Author Correspondence: Susi Ernawati, susiernawati896@gmail.com, STIKES Guna Bangsa Yogyakarta, +6285236662963**

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injectable contraceptive in women of any age should be tailored to individual health conditions and consider the risks and benefits. Discussion with a healthcare provider can help determine whether injectable contraception is an appropriate choice based on the user's age and overall health.

The Relationship between Knowledge Level and the Use of 3-Monthly Injectable Contraceptives.

Table 4 Distribution of the results of the chi square test analysis on knowledge regarding the use of injectable contraception

Level of knowledge	Contraception				
	DMPA 3	3-month combi	Total	Value	Sig
Tall	7	18	25		
Currently	33	11	44		
Low	27	4	31		
Total	67	33	100	24.134	.000

Table 4 shows that the majority of respondents with a moderate level of knowledge (33 respondents) used the 3-month DMPA injectable contraceptive. The Chi-Square test yielded a significance value of 0.000. Since the p-value is <0.05, the alternative hypothesis (Ha) is accepted, indicating a significant relationship between knowledge level and the use of the 3-month DMPA injectable contraceptive.

The results showed that the majority of respondents using 3-monthly injectable contraceptives had a moderate level of knowledge, namely 33 people. Based on the analysis using the Chi-Square test, a significance value of 0.000 was obtained. Because the p-value was below 0.05, the alternative hypothesis (Ha) was accepted, indicating a significant relationship between knowledge level and injectable contraceptive use.

The results of this study are consistent with the findings of Harahap (2021). A chi-square statistical test obtained a p-value of 0.003 ($p < 0.05$), indicating a significant correlation between the knowledge level of fertile couples (PUS) and their choice of 3-month injectable contraceptives at the Koni Community Health Center in Jambi City. Although respondents had previously received information about this contraceptive method, their level of knowledge was still considered adequate, and their awareness to deepen their understanding was still low (Harahap, 2021) Knowledge itself is the result of a cognitive process after someone observes a particular object. This process occurs through stimulation of the five human senses, such as sight, hearing, smell, taste, and touch, with the eyes and ears as the primary pathways for receiving information. Knowledge plays a crucial role in shaping a person's attitudes and behavior (Saragih, 2019) .

The results of this study are similar to those of (Harahap, 2021) which found a correlation between knowledge of fertile couples (PUS) and the use of 3-month injectable contraception at the Koni Community Health Center in Jambi City. Respondents' knowledge of 3-month injectable contraception was categorized as sufficient because they lacked the awareness to seek further information about this method despite having been provided with information previously. (Susilaningrum et al., 2021)

The researchers concluded that a person's level of knowledge about the 3-monthly injectable contraceptive, DMPA (Depot Medroxyprogesterone Acetate), plays a crucial role in the use and effectiveness of this method. A high level of knowledge about the 3-monthly injectable contraceptive

* **Author Correspondence: Susi Ernawati, susiernawati896@gmail.com, STIKES Guna Bangsa Yogyakarta, +6285236662963**

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method (DMPA) helps individuals understand how it works, its benefits, and its side effects. This knowledge allows users to make more informed decisions about their contraceptive choices. Increasing knowledge through health education and accurate information can improve understanding of injectable contraceptive use.

Good education from medical professionals or community outreach can help alleviate concerns individuals may have about DMPA. Knowledge about the 3-monthly DMPA injectable significantly impacts decision-making, adherence, and side effect management. Adequate education and information can improve the efficacy of this contraceptive method and ensure that users receive the maximum benefit from its use.

The relationship between husband's support for the use of 3-monthly contraceptive injections.

Table 5 shows that the majority of respondents using the 3-month DMPA injectable contraceptive received support from their husbands, a total of 64 respondents. Data analysis using the Chi-Square test showed a significance value of 0.000. Since the p-value is <0.05, it can be concluded that there is a significant relationship between husband support and DMPA injectable contraceptive use.

Table 5. Distribution of the results of the chi-square test analysis on husbands' support for the use of injectable contraception

Husband's support	Contraception				
	DMPA 3	3-month combi	Total	Value	Sig
Support	64	4	68		
Does not support	4	28	32		
Total	68	32	100	66.61	.000

The results of the study showed that in terms of support for the use of injectable contraception, the majority of husbands, 64 respondents, supported the use of 3-monthly injectable contraception. The results of data analysis using the chi-square test obtained a significant value of 0.690. This value, because the p value > 0.05, can be concluded that Ha is accepted, namely there is a relationship between husband support and the use of injectable contraception.

The results of this study are similar to those of, which indicated that husband's support plays a crucial role in the choice of contraceptives, particularly the 3-month injectable contraceptive method. Husband's support is crucial for the use of the 3-month injectable method. In Indonesia, a husband's decision to allow or support contraceptive use often influences his wife's decision, resulting in few wives daring to continue using the method. Husband's support has a significant impact on decision-making and is often influenced by sociocultural factors. A husband's significant role can help by raising awareness that reproductive health issues are not solely the woman's responsibility. The husband's role includes facilitating and meeting his wife's needs when examining her reproductive health issues (Tanjung et al., 2022).

Researcher's opinion Husband's support plays a crucial role in the decision to use contraceptive methods, including the 3-monthly DMPA injection. Research shows that positive husband support can increase a wife's level of compliance in using this contraceptive method. There are several key reasons why husband's support significantly influences the use of the 3-monthly injection. Overall husband's support not only increases the wife's motivation and comfort in using the 3-monthly injection but also helps overcome various practical obstacles she may encounter. Consistent and positive

* Author Correspondence: Susi Ernawati, susiernawati896@gmail.com, STIKES Guna Bangsa Yogyakarta, +6285236662963

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support from a husband plays a crucial role in the success of contraceptive programs and family planning.

Table 6. Distribution of normality test of data on age and level of knowledge and husband's support.

Normality test	F	Kolmogorov-Smirnov		Shapiro-Wilk	
		Statistics	Sig.	Statistics	Sig.
Age	100	.323	.000	.768	.000
Knowledge	100	.222	.000	.808	.000
Husband's support	100	.433	.000	.587	.000

Table 6 displays the results of normality tests for the variables of age, knowledge level, and husband's support using the Kolmogorov-Smirnov and Shapiro-Wilk tests. All variables showed significance values below 0.05 (sig < 0.05), namely age (0.000), knowledge (0.000), and husband's support (0.000), in both the Kolmogorov-Smirnov and Shapiro-Wilk tests. This indicates that the data were not normally distributed. Therefore, data analysis was continued using a non-parametric correlation test, namely the Spearman Rank.

Relationship between Age, Level of Knowledge and Husband's Support for the Use of 3-Monthly Injectable Contraceptive.

Table 7.Distribution of the relationship between age and level of knowledge and husband's support for the use of 3-monthly contraceptive injections

Variables	N	Chi-square	df	Sig.
Age	100	71.192	3	.000
Knowledge	100	71.192	3	.000
Husband's support	100	71.192	3	.000
Injectable birth control				.

Table 7 shows that the variables age, knowledge, and husband's support for the use of the 3-month DMPA injectable contraceptive showed a significance value of 0.000, which is below the 0.05 threshold. This indicates a simultaneous significant relationship between these three variables and the dependent variable. Therefore, it can be concluded that age, knowledge level, and husband's support are significantly related to the use of the 3-month DMPA injectable contraceptive.

The results showed that the variables of age, knowledge, and husband's support had a significance value of 0.000, which is below the 0.05 threshold. This indicates that all three variables simultaneously have a significant relationship with the dependent variable, namely the use of injectable contraception. Therefore, it can be concluded that there is a meaningful relationship between age, knowledge level, and husband's support on the decision to use injectable contraception.

Age is the length of a person's life, calculated from birth to their last birthday. This factor is used as both an absolute measure and a physiological indicator of the use of healthcare services and facilities. In other words, the older a person is, the broader the learning experiences gained throughout their life journey (Nasution et al., 2023).

Knowledge is the result of understanding that arises after an individual observes a particular object. This process occurs through the involvement of the five human senses, such as sight, hearing, smell, taste, and touch. Most information is received through sight and hearing. Knowledge serves as a basis or guide in shaping a person's attitudes and behavior.(Okvitasari et al., 2024).

* Author Correspondence: Susi Ernawati, susiernawati896@gmail.com, STIKES Guna Bangsa Yogyakarta, +6285236662963

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The researchers' opinion is that increasing knowledge through health education and accurate information can improve attitudes and behaviors regarding the use of injectable contraception. Good education from medical personnel or community outreach can help reduce concerns individuals may have about injectable contraception. The level of knowledge about injectable contraception has a significant impact on the decision to use, compliance, and management of side effects. Adequate education and information can increase the success of this contraceptive method and ensure that users get the maximum benefit from its use. Husband's support also plays a crucial role in the decision to use contraceptive methods, including injectable contraception. In addition to the husband's support factor, local culture also supports the use of injectable contraception. Research shows that positive husband's support can increase the level of wife's compliance in using this contraceptive. There are several main reasons why husband's support has a significant influence on the use of injectable contraception. In addition, the 3-month contraceptive is also inexpensive, economical, and can be used long-term.

4. CONCLUSION

Based on the results of the study entitled "Research on the relationship between age, knowledge and husband's support for the use of DMPA injection contraception at the Tembilahan Hulu Community Health Center, Indragiri Hilir Regency in 2024," the author can conclude that There is a relationship between age and the use of injectable contraception methods at the Tembilahan Hulu Community Health Center in 2024 with the majority of respondents using 3-month injectable contraception being of reproductive age aged 20-35 years. There is a relationship between the level of knowledge and the use of injectable contraception methods at the Tembilahan Hulu Community Health Center in 2024, namely a moderate level of knowledge. There is a relationship between the level of knowledge and the use of injectable contraception methods at the Tembilahan Hulu Community Health Center in 2024, namely a moderate level of knowledge. There is a significant relationship between all variables, both age and level of knowledge and husband's support for the use of DMPA injectable contraception methods at the Tembilahan Hulu Community Health Center in 2024. It is recommended that in further research, researchers can use experimental research methods, conduct broader research with different variables, delve deeper into the problems and conduct wider research locations such as at the district level.

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*** Author Correspondence: Susi Ernawati, susiernawati896@gmail.com, STIKES Guna Bangsa Yogyakarta, +6285236662963**