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Original Research

Utilization of ALBPK (Decision-Making Aid Tools) in Selecting Postpartum Contraceptives For Mothers

Suyanti N Buluati*[1], Amalia[2]
1, RSTN Boallemo, Gorontalo-Indonesia
2, Puskesmas Ternate, Bone Bolango-Indonesia

* Corresponding author.
Corresponding Author
E-mail address:
suyantibuluati770@gmail.com

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Abstract
The Family Planning Decision Support Sheet (ALBPK) is a counseling tool designed to assist clients in choosing the most appropriate contraceptive method according to their needs and to help solve problems related to contraceptive use. The use of ALBPK can improve the effectiveness of counseling because it provides detailed and clear information about contraception. The purpose of this study was to analyze the use of ALBPK in contraceptive selection among postpartum women. This research used a qualitative approach with a cross-sectional design. The sample consisted of 21 postpartum women at RSTN Boalemo, selected using a total sampling technique. Bivariate analysis was conducted using the Fisher Exact test. Results: ALBPK was used in 16 respondents (76.1%). Among 17 women who chose contraception, 13 chose hormonal methods and 4 chose non-hormonal methods. The statistical result showed a p-value of 0.001, indicating a significant relationship between the use of ALBPK and the choice of postpartum contraceptive methods at RSTN Boalemo. There is a significant relationship between the use of decision aids (ALBPK) and the selection of contraceptive methods among postpartum women..

1. Introduction

The World Health Organization (WHO) recommends spacing pregnancies by at least 24 months from the last delivery (Apriliani, 2018). One of the key policies and development strategies in Indonesia, as outlined in Presidential Regulation of the Republic of Indonesia Number 18 of 2020 concerning the 2020–2024 National Medium-Term Development Plan (RPJMN), includes improving maternal and child health, family planning (FP), and reproductive health. This encompasses ensuring access to and quality of FP and reproductive health services in accordance with regional characteristics, supported by the optimization of the roles of the private and government sectors through advocacy, communication, information, and education (CIE) programs. These efforts are also reflected in the Population, Family Planning, and Family Development (KKBPK/Bangga Kencana) program, as well as in family planning counseling and reproductive health, aiming to improve the competence of family planning counselors (PKB) and family planning field officers (PLKB), frontline workers, and health personnel delivering FP services. Furthermore, it includes the improvement of health service facilities, referral networks, and community-based health efforts to enhance postpartum family planning (Ministry of Health, RI, 2021).

One of the strategic issues in population quantity control, as stated in the 2015–2019 RPJMN, is the still high rate of unmet need (the need for FP services that is not met). Unmet need refers to women of reproductive age, whose husbands are aged 15 to 49 years and are sexually active, but who do not wish to have more children or want to delay the next birth, yet are not using

contraception (Fatimah, 2017). In developing countries, the prevalence of unmet need is about 17%. According to WHO in 2017, the number of women with unmet need was 142 million, and the projected estimate for 2030 is 139 million. Globally, the rate of unmet need is projected to remain above 10% until 2030 (Rismawati, 2014).

Based on the Indonesia Health Profile 2016, out of 48,530,000 couples of reproductive age (PUS), the percentage of unmet need was 12.77%. According to the BKKBN performance report 2017, this figure increased to 17.5% (Nurchayani, 2020). In 2020, the unmet need rate decreased to 13.4%, but rose again to 18% in 2021, far from the expected target of 8.3%. A high unmet need can contribute to a higher maternal mortality rate (MMR) in Indonesia. Unmet need can lead to unwanted pregnancies, which pose two major risks:

First, if the pregnancy continues, it might occur too close to the previous one, increasing the risk of pregnancy, childbirth, and postpartum complications, contributing to maternal mortality.

Second, if the pregnancy is terminated (especially unsafely), it also poses a high risk of maternal death. Women of reproductive age who do not use contraception are more likely to get pregnant and experience complications related to pregnancy, childbirth, and postpartum (Nurchayani, 2020).

Efforts to improve postpartum and post-miscarriage family planning services are outlined in BKKBN Regulation No. 146/HK-10/B5/2009, which provides guidelines for postpartum and post-miscarriage family planning services for the well-being of mothers, infants, and children. To follow up on these technical regulations (NSPK), it is necessary to issue Implementation Guidelines (Juklak) for increasing access and quality of postpartum and post-miscarriage FP services to ensure effective program implementation. Every pregnancy should ideally be planned, and the provision of contraception has become a government focus in addressing concerns about future population growth (Apriliani, 2018).

Factors contributing to unmet need include the lack of effective family planning communication, information, and education (CIE) programs, which often fail to meet community needs, especially in terms of education on complications, side effects, and contraceptive failures (Nurchayani, 2020). This is supported by research conducted by Fransisca & Pebrina (2019), which found that CIE or counseling significantly affects the knowledge level of reproductive-age couples. This indicates that CIE has a crucial role in improving the knowledge of prospective FP acceptors so they can choose appropriate and safe contraceptive methods.

Family planning counseling is a process of information exchange and positive interaction between the client and the midwife or health worker to help the client identify contraceptive needs, select appropriate solutions, and make informed contraceptive decisions based on their current conditions (Nurchayani, 2020; Shinta et al., 2021). In providing FP services, visual aids are necessary to help explain contraceptive methods. The Decision-Making Aid Tool for Family Planning (ALPBK) is also a helpful tool in FP counseling to assist in choosing the most appropriate contraceptive method based on client needs, and serves as a problem-solving tool related to contraceptive use (Pertiwi, 2022).

The use of ALPBK is believed to enhance counseling effectiveness, as it contains clear information on types of contraception, how to use them, risks, benefits, side effects and how to manage them, effectiveness, daily life implications, sexual activity, switching possibilities, and flexibility (Ministry of Health RI, 2021).

2. Research Method

The research design used was an analytic survey with a cross-sectional approach. The population in this study consisted of all postpartum mothers in the working area of RSTN Boalemo, totaling 21 respondents. The sampling technique used was total sampling, involving 21 participants.

The independent variable in this study was the choice of contraceptive method among postpartum mothers, while the dependent variable was the use of long-acting and permanent contraceptive methods (LAPMs). Primary data were obtained directly from observations of respondents using a checklist form, while secondary data were taken from the delivery room registry at RSTN Boalemo.

The collected data were then analyzed using univariate analysis and bivariate analysis with the Fisher's Exact Test, as the Chi-square test requirements were not met based on the SPSS results of this study.

3. Results and Discussion

Talbel 1 Kalralkteristik Responden

Valrialbel	f	%
Usial		
Tidalk berisiko	20	95,2
Berisiko	1	4,8
Palritals		
1	8	38,1
2	10	47,6
3	2	9,5
4	1	4,8
Pemilihaln		
Tidalk memilih	4	19
Hormonall	13	62
Non hormonall	4	19
Totall	21	100

The results of the study on age characteristics showed that the majority were in the non-risk age group, totaling 20 people (95.2%). Regarding parity characteristics, the majority had two children, with 10 respondents (47.6%). In terms of contraceptive choice, most respondents chose hormonal methods, totaling 13 people (62%).

Talbel 2. Hubungaln Penggunalaln ALBPK dengaln Pemilihaln Kontralsepsi

Valrialbel	**Kontralsepsi**			
	Memilih		**Tidalk memilih**	
	f	**%**	**f**	**%**
Menggunalkaln	16	76,3	0	0
Tidalk menggunalkaln	1	4,7	4	19
p-vallue	0,001			

The study involved 21 respondents, and the results were obtained based on statistical analysis regarding the relationship between the use of decision-making aids and the selection of contraceptive methods by postpartum mothers.

Providing accurate information to acceptors can change a person's behavior in using the ALBPK (Contraceptive Decision-Making Aid), enabling the acceptor to better understand the contraceptive method they will use. This is because ALBPK for family planning (FP) acts as a media and communication tool that influences the counseling process, leading to changes in perception and behavior (Gobel, 2019). The decision-making aid serves as a tool to optimize counseling functions and assist clients in selecting the most effective contraceptive methods (Friscila et al., 2023; Suwardi et al., 2022).

ALBPK counseling is a family planning education medium aimed at empowering clients to choose methods suited to their needs and situations. Health workers can actively assist clients by providing appropriate information about contraceptive methods for couples and increasing family

participation in family planning services, thereby optimizing the use of appropriate methods (Aprilanti, 2018).

The participation of men/husbands in family planning is a shared responsibility and is related to sexual behavior that is healthy for themselves, their partners, and their families. The participation of both wife and husband as couples of reproductive age (PUS) is essential to the success of the family planning program (Sipalyung et al., 2022).

A mother's level of knowledge about contraceptive methods, obtained from accurate and unbiased information, influences her decision to choose and use hormonal or non-hormonal contraceptive methods. Providing accurate and appropriate information, along with empathetic counseling, allows individuals and couples to select a suitable method, ensuring proper usage. Users must have adequate knowledge of their chosen contraceptive method, including the potential side effects and complications (Friscila et al., 2022; Sipalyung et al., 2022).

Counseling also affects the mother's interest, encouraging her readiness to use contraception. It is considered an external factor that can influence an acceptor's decision when choosing their desired contraceptive method. This is shown by the increased interest of mothers in selecting contraceptive methods as a result of information provision, which improves their knowledge and strengthens their interest (Sarlagih et al., 2022).

Counseling is a critical aspect in the implementation of family planning and reproductive health. It means that health workers assist clients in choosing and deciding on the type of contraceptive method that suits them, and helps them feel more satisfied. Family planning counseling can help mothers navigate among various choices and alternatives to reproductive health problems and family planning. The information given to clients must be comprehensive, honest, and accurate, especially about the contraceptive method that the client plans to use (Sinalga, 2020).

The study by Aprilanti (2019) on the type of counseling (with and without ALBPK) in postpartum settings showed a significant relationship between ALBPK counseling and postpartum contraceptive choice. Age, number of children, and parity were proven to influence the selection of contraceptive types among postpartum mothers (Aprilanti & Herlinaldiyaningsih, 2019).

4. Conclusion

The use of ALBPK at RSTN Boalemo was carried out by 16 individuals (76.1%). Regarding contraceptive methods chosen by postpartum mothers at RSTN Boalemo, out of 17 individuals who selected a contraceptive method, 13 chose hormonal contraception and 4 chose non-hormonal contraception

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