The Effect of Age, Parity, Educational Level, And Delivery Method on The Use of Postpartum IUDs at RSUD Cilacap

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ABSTRACT

One of the available family planning (FP) services is postpartum family planning (PPFP). Among the recommended methods by the government for PPFP is the insertion of an intrauterine device (IUD). The use of IUDs may be influenced by factors such as parity, education level, and delivery method. This study aims to analyze the effect of age, parity, educational level, and delivery method on postpartum IUD usage. The research employed a correlational analytic design with a cross sectional approach. The study was conducted in April 2025 at Cilacap Regional Public Hospital (RSUD Cilacap). The sample consisted of 85 postpartum mothers who delivered at RSUD Cilacap between January and April 2025. Data analysis was performed using univariate and bivariate analyses, including the Spearman rank test and contingency coefficient. The results showed that educational level (p = 0.001) and delivery method (p = 0.025) significantly affected postpartum IUD usage.However, age (p = 0.863) and parity (p = 0.705) were not found to influence postpartum IUD usage significantly. These findings may serve as a reference to enhance the coverage of postpartum family planning, particularly the use of postpartum IUDs.

Keywords: Age, Parity, Educational Level, Delivery Method, IUD

1. INTRODUCTION

Population density in a country area is one of the phenomena that is often found. Population density is a problem that must be addressed immediately (Arianti, 2017). Indonesia's population growth rate in 2021-2022 increased by 1.13% (BPS, 2023). According to data obtained from the Central Java Province BPS (2023), in 2022 the population in Central Java province reached 37,032,410 people and the majority of the population occupies the Cilacap Regency area of 1,988,622 people. Therefore, an effort is needed to control the population explosion through the program that has been launched, namely Family Planning in the form of the use of contraceptives (Sagita, 2022).

The use of contraceptives based on data *from the World Health Organization* (WHO, 2023) shows that the use of IUD contraceptives in the world in 2022 ranks third most (15.2%) after injectable contraceptives (35.3%) and pills (30.5%). Based on data from the National Population and Family Planning Agency (BKKBN, 2024), it shows that the use of contraceptives in Indonesia in 2023 includes injectable birth control (50.29%), pills (15.29%), implants (12.79%), and IUDs (10%). Data from the Central Statistics Agency (BPS Central Java Province, 2024) shows the same coverage, namely the use of contraceptives in Central Java Province in 2023, namely injections (52.11%), implants (19.17%), pills (11.25%), and IUDs (10.35%). Likewise, IUD coverage in Cilacap Regency is 11.63%.

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Family planning service programs that can be carried out include Postpartum Family Planning (KBPP) using IUD contraception which aims to prevent pregnancy until the postpartum recovery period (postpartum painkillers) by using contraceptive devices or drugs. Selin is to prevent unwanted pregnancies, limit the number of children and help husband and wife couples to plan their next pregnancy better, prosperous, healthy and smooth (Ministry of Health of the Republic of Indonesia, 2021). Based on data from the KBPP of Central Java Province, the coverage of the use of KBPP was obtained as much as 61.74%, as many as 46.10% of which used postpartum MKJP, and 20.41% used postpartum IUDs. Meanwhile, the coverage of the use of KBPP in Cilacap Regency is 66.46%, which uses 67.64% postpartum MKJP, and 43.33% uses postpartum IUDs.

Based on a preliminary survey conducted by researchers at RSUD Cilacap, information was obtained on 108 postpartum mothers who used birth control IUDs at RSUD Cilacap in 2022, 236 in 2023 and 417 in the period from January to October 2024. The surge in the use of birth control IUDs is possible due to the characteristics and methods of delivery. A preliminary survey of 10 postpartum mothers who used birth control IUDs obtained results, namely 7 mothers aged 20-35 years, 8 mothers who already had children of more than 2 and 8 mothers with high school education.

One of the low use of IUD birth control is the age of the mother (Isneni & Fridayanti, 2022). In this case, the age difference in women is a consideration in making decisions to use contraceptives both long-term and temporarily (Trijayanti et al., 2022). In addition, parity is one of the factors that affect the choice of contraceptives. Primitive women often have the desire to use effective contraceptives but do not understand the information about their use. As a result, primitive women are more likely to experience contraceptive needs that are not met during the postpartum period (Inggar et al., 2024). Maternal characteristics that can affect the use of IUDs are the level of education (Wigunarti, 2022). A person who has a high level of education tends to easily accept various information that has been given (Aiman & Mastura, 2022). Sehingga dapat mempertimbangkan metode yang memiliki tingkat keefektivan yang tinggi yaitu kontrasepsi

IUD dibandingkan alat kontraspesi lainnya (Oktarina, 2022). Another factor that can affect the use of a postpartum IUD is the method of delivery. *Post-Sectio Caesarea* (SC) mothers tend to be more receptive to the use of postpartum IUDs than mothers with vaginal delivery. This is because post-SC mothers are more motivated to postpone their next delivery for at least 2 years so they tend to use IUDs (Damayanti et al., 2021).

Based on the background and preliminary studies, the author is interested in researching with the title "The Influence of Age, Parity, Education Level and Delivery Method with the Use of Postpartum IUDs in Maternal Mothers at RSUD Cilacap.

2. METHODS

This research has obtained a research ethics permit with the number KEPK/UMP/345/III/2025 by applying the ethical principles *of respect for human dignity, respect for privacy and confidentiality*, *respect for justice and inclusiveness*, and *balancing harms and benefits*. The research design used in this study is correlational analysis through a *cross sectional approach* which has been carried out in April 2025 at RSUD Cilacap. The population in this study is all maternity mothers at RSUD Cilacap for the period January to April 2025 with a total sample of 127 maternity data through sampling with *purposive sampling* techniques and determination of the number of samples based on the correlation research calculation formula (Mujiastuti, 2017). The inclusion criteria include maternity mothers with complete medical record data including age, parity, education level and delivery method at UPTD RSUD Cilacap and exclusion criteria include maternity mothers with incomplete medical record data at UPTD RSUD Cilacap.

The instrument used in this study is to use *a checklist* sheet based on RSUD Cilacap medical record data in April 2025 including age, parity, education level, IUD use and delivery methods. After the data was collected, data analysis was carried out, namely univariate data analysis and bivariate analysis. The univariate analysis aims to determine the distribution of data regarding respondent characteristics (age, parity, education level and childbirth method) and bivariate analysis which aims to find out or trace two variables that are considered to have influence or correlation

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(Notoatmodjo, 2018), namely using statistical tests for nominal data analysis using contingency coefficient tests, statistical tests for ordinal-nominal data in this study Using the *Spearman Rank test*.

3. RESULT AND DISCUSSION

3.1 Overview of Respondent Characteristics

The following is a table containing an overview of the characteristics of the respondents, including:

Tabel 1. Frequency Distribution of Respondent Characteristics

No	Characteristics	*f*	%
1	Age Ages <20 and >35 years old b. Age 20-35 years old	38 89	29,9 70,1
2	Parity a. Number of children >2 b. Number of children 1-2	45 82	35,4 64,6
3	Education level a. D3-S1 b. SMA c. SMP d. SD	7 61 34 25	5,5 48,0 26,8 19,7
4	Delivery method a. *Sectio Caesarea* b. *Pervaginam*	60 67	47,2 52,8
5	Use of IUD after childbirth a. Yes b. No	65 62	51,2 48,8

Table 1 shows that the majority of maternity age is in the age range of 20-35 years as many as 89 people (70.1%). Most maternity parity is mostly 1-2 children as many as 82 people (64.6%). The education level of the respondents in this study was 61 people (38%) from high school. The most methods of delivery were the vaginal method of 67 people (52.8%) and the use of postpartum IUDs ranked the most at 65 people (51.2%).

The results of the research illustrate that the age of maternity mothers at RSUD Cilacap in April 2025 is 89 people (70.1%) with the age category of 20-35 years. Age is an indicator of maturity in each decision-making that refers to each

experience (Triyatnowati & Puspitasari, 2023). Sab'ngatun et al. (2021) explained that mothers aged 20-30 years are the ideal or appropriate time to seek offspring by determining and choosing the concept of contraception with a high level of effectiveness. This is in line with the opinion of Triyatnowati and Puspitasari (2023) that getting older will cause a person to be more mature in thinking and behaving. As a person gets older, he will tend to be more mature in his opinion and in making a decision. Adult people tend to choose and weigh carefully so that the expected results when installing birth control have an effective function, namely preventing rapid pregnancy or limiting the number of child births.

The results of this study show that the parity of maternity mothers mostly has 1-2 children as many as 82 people (64.6%). Family planning acceptors in choosing the contraceptive to be used can be influenced by the number of living children they have. Masluroh and Permata (2023) added that the mother's intention in determining the number of children tends to behave in choosing long-term contraceptives. The number of live children that a woman has, will also provide experience and knowledge, so that women can make the right decision about the method or contraceptive device to be used (Aningsih & Irawan, 2019).

The results of the study showed that pregnant women were mostly educated in high school as many as 61 people (48%). Respondents with a high school education or D3-S1 education tend to have an effect on the use of contraceptives that will be used using various careful considerations. This is in accordance with the opinion of Fransisca et al. (2021) that low education in family planning acceptors in choosing non-long-term contraceptives aims only to delay pregnancy. In contrast to acceptors with higher education who tend to choose long-term contraception which aims not only to delay pregnancy but also to create a healthy, prosperous family both physically, mentally and financially.

Data on maternity mothers at RSUD Cilacap in April 2025 mostly used the vaginal delivery method as many as 67 people (52.8%) and half used *the Sectio Caesarea* method (47.2%). Mothers who give birth with SC will be given an understanding of the risks if the next pregnancy is < 2 years which can harm the mother and fetus so that they tend to choose

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long-term contraceptives. This is in line with the opinion of Damayanti et al. (2021) that the mother's desire after childbirth as well as the encouragement and support from the people around the mother greatly affect the use of long-term contraception to prevent pregnancy with close distances to increase in patients with a history of *Sectio Caesarea* delivery because of the risk of complications in subsequent pregnancies.

3.2 The effects of age on the use of postpartum IUDs

The following are the results of an analysis related to the influence of age on the use of IUDs after childbirth:

Tabel 2. The effects of age on the use of postpartum IUDs

Age	Use of Postpartum IUDs				sum		p-value	OR
	Yes		No					
	f	%	f	%	(N)	%		
<20 and > 35 years old	19	50	19	50	38	100	0.863	1.381
20-35 year	46	52	43	48	89	100		

Table 2 illustrates that of the 89 mothers aged 20-35 years, the most use a postpartum IUD (52%) and of the 38 mothers who give birth < 20 and >35, half use a postpartum IUD (50%). Based on statistical analysis using *the Spearman Rank* test, a p-value = *0.863 > α = 0.05 with* an oods ratio *value of 1,381* was obtained, meaning that there was no influence of age with the use of IUDs after childbirth in maternity mothers at RSUD Cilacap in April 2025.

Age is used as a reason in determining the contraceptive to be used. The criteria for choosing contraceptives according to age are that the wife's age range between 20 and 30 years is the best age range to give birth with two children and regulates the birth distance of two to four years. At that age, the contraceptive needed is a contraceptive that has high effectiveness and reversibility because the client still hopes to have another child, can be used for two to four years, which is in accordance

with the planned pregnancy distance and does not hinder breast milk production.

Age is not the only factor that affects the use of IUDs, but it can also be influenced by other factors such as husband support, health care worker support and others. This is in accordance with the opinion of Halimahtussadiah et al. (2021) who stated that the use of postpartum IUD birth control is influenced by several other factors, namely knowledge, attitudes, parental support, husband support, health worker support, family planning information, family planning services, economic factors, and parity.

However, this is different from the research of Hatta et al. (2024) which stated that there is a relationship between age and the use of IUD contraceptives in women of childbearing age in the Turikale Health Center Working Area of Maros Regency (pv = 0.000.

3.3 The Effects of parity on the use of postpartum IUDs

The following are the results of the analysis related to the effect of parity with the use of postpartum IUDs:

Tabel 3. The Effect of Parity with the Use of Postpartum IUDs

Parity	Use of Postpartum IUDs				sum		p-value	OR
	Yes		Yes					
	f	%	f	%	(N)	%		
Child >2	22	48,9	23	51,1	45	100	0.705	0.818
Child 1-2	43	52,4	39	47,6	82	100		
Sum	65	51,2	62	48,8	127	100		

Table 3 shows that of the 82 mothers with parity of 1-2 children, the most children used postpartum IUDs (52.4%) and of the 45 mothers with parity of less than 2 children, the most did not use postpartum IUDs (51.1%). Based on statistical analysis using *the Spearman Rank* test, the p-value = *0.705 > α = 0.05* oods ratio *value 0.818* was obtained, meaning that there was no parity effect with the use of IUDs after childbirth in maternity mothers at RSUD Cilacap in April 2025.

The mother will choose the appropriate and effective contraception based on her desire or goal. The goals of every mother in planning to have

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several children are very diverse and of course, mothers who have the desire to limit the number of children will try their best by utilizing contraceptives to prevent future pregnancies with long-term contraceptive methods (Masluroh and Permata, 2023).

This study is supported by research by Atikah et al. (2025) who stated that there was no relationship between parity and the use of postpartum IUDs at H. Moch Ansari Saleh Hospital Banjarmasin in 2023 (pv = 0.687). The results of this study are in line with the statement (Todingbua, 2020) that women with parity of one to two tend to be more receptive to post-copy constraints, but this is not meaningful for women with a parity of more than two. The number of children is always assumed with the use of contraceptives. The number of children is one of the factors that the married couple chooses to use contraception.

In addition, various other causes are also very influential, including anxiety or fear when using IUDs. In addition, there is a lack of exposure related to the effectiveness of IUD use by health workers and understanding from the community itself (Hatta et al., 2024).

3.4 The effects of Education on the use of postpartum IUDs

The following are the results of the analysis related to the influence of education with the use of postpartum IUDs:

Tabel 4. The effects of Education on the use of postpartum IUDs

Education	Use of Postpartum IUDs				Sum		p-value	OR
	Yes		No					
	f	%	f	%	(N)	%		
D3-S1	7	100	0	0,0	7	100		
SMA	36	59,0	25	41,0	61	100		
SMP	13	38,2	21	61,8	34	100	0.001	2.818
SD	9	36,0	16	64,0	25	100		
Sum	**65**	**51,2**	**62**	**48,8**	**127**	**100**		

Table 4 shows that of the 61 maternity mothers with a high school education, most used

postpartum IUDs (59%) and of the 7 mothers with D3-S1 education all used postpartum IUDs (100%). Based on statistical analysis using *the Spearman Rank* test, a p-value = *0.001 < α = 0.05 was* obtained, meaning that there was an influence of education with the use of postpartum IUDs in maternity mothers at RSUD Cilacap in April 2025 with an *oods ratio* value of 2,186. This indicates that education is estimated to have the opportunity to have an influence of 2,186 times on the use of postpartum IUDs.

The results of the study showed that of 61 mothers with high school education, most of them used postpartum IUDs (59%) and statistical analysis showed the *p-value* = 0.001 < α = 0.05 meant that there was an influence of education with the use of postpartum IUDs in maternity mothers at RSUD Cilacap in April 2025. The results of this study are strengthened by research conducted by Atikah et al. (2025) that there is a meaningful relationship between education and the use of postpartum IUDs with a value (pv = 0.011).

From these results, it can be seen that the success of the use of contraceptives can be influenced by various factors, of which education is one of the ones that has a great effect because it can affect through the process of receiving and reasoning good and effective information related to IUD contraception. Oktarina (2022) explained that the provision of information related to IUD contraception affects the mother's knowledge which is supported by the mother's educational status so that the education affects the choice of contraception. More educated individuals will have a broader and broader understanding of the information they obtain compared to less educated individuals (Agustina, Riski, & Sari, 2021).

3.5 The effect of delivery methods with the use of postpartum IUDs

The following are the results of an analysis related to the influence of the method of delivery with the use of postpartum IUDs which are contained in the table below:

Tabel 5. The effects of Delivery method on the use of postpartum IUDs

Age	Use of Postpartum IUDs				Sum		p-value	0R
	Yes		No					
	f	%	f	%	(N)	%		
Sectio Caesarea	37	61,7	23	38,3	60	100		
Pervaginam	28	41,8	39	58,2	67	100	0.025	2.328
Sum	65	51,2	62	48,8	127	100		

The table above illustrates that of the 67 mothers who gave birth with the vaginal delivery method, most did not use a postpartum IUD (58.2%) and of the 60 mothers who gave birth with the *sectio caesarean* delivery method, most of them used a postpartum IUD (61.7%). Based on statistical analysis using the contingency coefficient test, a *p-value* = 0.025 < α = 0.05 was obtained, meaning that there was an influence of the delivery method with the use of postpartum IUDs in maternity mothers at RSUD Cilacap in April 2025 with an oods ratio *value* of 2,328. This indicates that the delivery method is estimated to have a 2,328-fold effect on the use of postpartum IUDs.

The results of the study illustrate that of 67 mothers who gave birth with the vaginal delivery method, most did not use a postpartum IUD (58.2%) and the results of statistical analysis using the contingency coefficient test obtained a *p-value* = 0.025 < α = 0.05, meaning that there was an influence of the delivery method with the use of postpartum IUDs in maternity mothers at RSUD Cilacap in April 2025.

The results of this study are in line with the research conducted by Atikah et al. (2025) stating that women who give birth vaginally tend to use IUDs less after childbirth, this is due to various factors that cause maternity mothers to choose other contraceptives. Among them, mothers in labor are still shrouded in fear or worry about the insertion of an IUD because they think that this method can slow down the acquisition of the next offspring. Meanwhile, mothers who have given birth by *the sectio caesaria* method are more likely to be interested in choosing contraceptives with IUDs because the recovery process takes a long time so that the urge or desire to postpone pregnancy for more than 2 years is indeed more effective and can be overcome through the installation of an IUD.

CONCLUSION

Based on the results of the above research, it can be concluded that there is no influence of age and parity with the use of postpartum IUDs in maternity mothers at RSUD Cilacap in April 2025. There is an influence on the level of education and the influence of the method of delivery with the use of postpartum IUDs in maternity mothers at RSUD Cilacap in April 2025.

ADVISE

Based on the results of the research and the conclusions that have been obtained, suggestions were proposed, namely that the researcher only examined factors related to using data contained in the medical records of the maternity mother, so that he did not examine a sample of other factors that influenced the decision in the use of the postpartum IUD such as knowledge, attitudes, family support, husband support, health worker support, family planning information, Family Planning services and economic factors.

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