

The utilization of injectable contraceptives among family planning acceptors

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Abstract:

The use of injectable contraceptives remains the main choice among women of reproductive age (WRA) in various regions, including Jember Regency. Based on data from PMB Dian Setyorini in 2024, the number of injectable family planning (FP) acceptors has increased significantly compared to other contraceptive methods. This study aims to determine the factors influencing the high number of injectable contraceptive acceptors at PMB Dian Setyorini, Tembokrejo Village, Gumukmas District, Jember Regency. This research employed a descriptive quantitative method with a cross-sectional approach. The study population consisted of all active injectable contraceptive acceptors, totaling 35 respondents, selected using a total sampling technique. Data were analyzed descriptively using frequency and percentage distribution. The results showed that most respondents had good knowledge about injectable contraceptives (60.0%), a positive attitude toward their use (68.6%), received spousal support (74.3%), perceived the role of health workers as good (80.0%), and stated that access to services was easily reachable (82.9%). These factors collectively contributed to the high interest and continued use of injectable contraceptives in the study area. The conclusion of this study is that the level of knowledge, positive attitude, husband's support, the optimal role of midwives, and ease of access to services are the dominant factors influencing the high number of injectable contraceptive acceptors at PMB Dian Setyorini.

Keywords:

injectable contraception; family planning acceptors; women of reproductive age; midwifery care



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INTRODUCTION

Family planning (FP) is one of the government's strategic efforts to improve family welfare and reduce birth rates in order to achieve sustainable human development. The use of contraceptive methods in Indonesia has continued to increase, with injectable contraception becoming the most widely used method among women of reproductive age. This preference is attributed to its high effectiveness, relatively minimal side effects, and practical use, as the injection only needs to be administered once every three months. According to data from the National Population and Family

Planning Agency (2023), approximately 56% of family planning acceptors in Indonesia use injectable contraception, making it the most dominant contraceptive method compared to oral contraceptive pills, implants, or intrauterine devices (IUDs). This phenomenon reflects a strong preference for injectable contraception and highlights the importance of further examining the factors influencing its high utilization.

In East Java, particularly in Jember Regency, injectable contraception is also the primary choice among family planning participants. According to the Jember Regency Health Office Report (2023), approximately 60% of active family planning participants use injectable contraceptive methods. In the working area of PMB Dian Setyorini, the number of injectable contraceptive acceptors has continued to increase annually. In 2023, there were 145 active acceptors, increasing to 172 acceptors in 2024, whereas other contraceptive methods such as pills, implants, and IUDs did not show substantial increases. This condition indicates a strong community tendency to choose injectable contraception due to various influencing factors, including convenience, trust in healthcare providers, partner support, and social environmental influences.

Additionally, factors such as service accessibility at PMB, friendly healthcare services, and the positive reputation of midwives also contribute to the high number of injectable contraceptive acceptors in the area. Theoretically, this study is based on the Health Belief Model (HBM), which explains that an individual's health behavior, including contraceptive selection, is influenced by perceived susceptibility, perceived benefits, and perceived barriers (Rosenstock, 1974). Furthermore, Andersen's Behavioral Model of Health Services Use emphasizes that utilization of healthcare services, including contraceptive use, is influenced by predisposing factors (e.g., age and education), enabling factors (e.g., service accessibility and partner support), and need factors (e.g., parity and reproductive history) (Andersen, 1995). Another relevant theory is the Theory of Planned Behavior (TPB), which states that behavior is influenced by attitudes toward the behavior, subjective norms, and perceived behavioral control (Ajzen, 1991). These theoretical frameworks provide a conceptual basis for understanding the factors influencing women's decisions to choose injectable contraceptive methods.

Previous studies have supported this phenomenon. Research conducted by Sari and Dewi (2021) demonstrated that knowledge, attitudes, and husband support were significantly associated with the selection of injectable contraception at the Karanganyar Health Center. Similarly, Lestari (2022) found that ease of access, service availability, and sociocultural factors influenced the high utilization of injectable contraception among women of reproductive age. Comparable findings were reported by Rahman, Sitorus, and Yulianti (2020), who identified comfort, time efficiency, and easier periodic follow-up as the primary reasons women preferred injectable family planning methods over

long-term contraceptive methods such as implants or IUDs. These findings indicate that contraceptive decision-making is influenced not only by medical considerations but also by social, psychological, economic, and cultural factors that interact with one another.

Although numerous studies have investigated contraceptive use, there remains a research gap regarding the context of independent midwifery practices (PMB), particularly in rural settings such as Tembokrejo Village, Gumukmas District. Independent midwifery practices have unique service characteristics, driven by the close social relationships between midwives and community members. Consequently, contraceptive decision-making is often influenced by trust, personal relationships, and local cultural norms. Therefore, this study is important to identify the factors influencing the high number of injectable contraceptive acceptors at PMB Dian Setyorini.

METHODS

This study employed a quantitative descriptive design using a cross-sectional approach to identify the factors influencing the high number of injectable contraceptive acceptors at PMB Dian Setyorini. The study population consisted of all 35 active injectable contraceptive acceptors. Because the population was relatively small, a total sampling technique was used, in which the entire population served as the study sample.

The research instrument was a structured questionnaire developed based on relevant theories and previous studies. The questionnaire consisted of 33 items covering six aspects: respondent characteristics (6 items), knowledge (10 items), attitudes (8 items), husband support (5 items), the role of healthcare workers (3 items), and service accessibility (1 item). Knowledge items were presented in multiple-choice format, with correct answers scored as 1 and incorrect answers scored as 0. Statements related to attitudes, husband support, healthcare worker roles, and service accessibility were measured using a four-point Likert scale ranging from strongly agree to strongly disagree.

Prior to data collection, the questionnaire was tested on 30 respondents in a similar setting to assess validity and reliability. The validity test results showed that all questionnaire items had correlation values greater than 0.30 ($p < 0.05$), indicating that all items were valid. Furthermore, the reliability test yielded a Cronbach's alpha of ≥ 0.70 , indicating the instrument's reliability.

The inclusion criteria in this study were women of reproductive age (15–49 years) who were active users of injectable contraceptives, resided within the PMB service area, and were willing to participate as respondents. Exclusion criteria included pregnant women, respondents with health or cognitive impairments, and those unwilling to participate in the study.

Data collection was conducted through direct questionnaire administration assisted by the researchers. The collected data were analyzed descriptively using frequency distributions and percentages to describe respondent characteristics and the factors influencing the high utilization of injectable contraception. This study was conducted in accordance with research ethics principles, including informed consent and confidentiality of respondent data.

RESULTS

Table 1. Frequency Distribution of Respondent Characteristics

Characteristics	Category	Frequency (n)	Percentage (%)
Age (years)	20–25	8	22.9
	26–30	12	34.3
	31–35	10	28.6
	>35	5	14.2
Educational Level	Elementary/Junior High School	9	25.7
	Senior High School	18	51.4
	Higher Education	8	22.9
Occupation	Housewife	20	57.1
	Farmer/Laborer	8	22.9
	Self-employed	4	11.4
	Civil Servant/Private Employee	3	8.6
Number of Children	1 child	10	28.6
	2 children	15	42.9
	≥3 children	10	28.6

Table 2. Distribution of Factors Influencing the High Number of Injectable Contraceptive Acceptors

Variables	Categories	Frequency (n)	Percentage (%)
Knowledge Level	Good	21	60.0
	Moderate	10	28.6
	Poor	4	11.4
Attitude Toward Injectable Contraception	Positive	24	68.6
	Negative	11	31.4
Husband's Support	Supportive	26	74.3
	Not Supportive	9	25.7
Role of Health Workers	Good	28	80.0
	Moderate	6	17.1
	Poor	1	2.9
Access to Family Planning Services	Easily Accessible	29	82.9
	Moderately Accessible	5	14.3
	Difficult to Access	1	2.8

Based on Table 1, most respondents were aged 26–30 years, accounting for 12 respondents (34.3%). Most respondents had completed senior high school education, comprising 18 respondents

(51.4%), while the majority were housewives, accounting for 20 respondents (57.1%). In terms of parity, most respondents had two children, representing 15 respondents (42.9%). These findings indicate that most injectable contraceptive users were women of productive reproductive age with active family responsibilities. Injectable contraception tends to be preferred because it is considered practical, effective, and does not interfere with respondents' daily activities.

The findings in Table 2 indicate that most of the respondents had a good level of knowledge about injectable contraception, with 21 respondents (60.0%). Meanwhile, 10 respondents (28.6%) demonstrated a moderate level of knowledge, and 4 respondents (11.4%) had a low level of knowledge. This adequate level of knowledge may have been influenced by information provided by midwives during family planning services, health education activities, and respondents' previous experiences using injectable contraception. Good knowledge is likely to increase respondents' confidence in selecting and consistently using injectable contraceptive methods.

Most respondents had a positive attitude toward the use of injectable contraception, accounting for 24 respondents (68.6%). Conversely, 11 respondents (31.4%) demonstrated negative attitudes toward injectable contraceptive use. The positive attitude observed among respondents was reflected in their willingness to continue using injectable contraception because it was perceived as safe, effective, and convenient. Respondents with negative attitudes generally reported concerns regarding side effects, such as weight gain and menstrual irregularities. Nevertheless, they continued using injectable contraception because the perceived benefits were considered greater than the experienced side effects.

Most respondents reported receiving support from their husbands regarding the use of injectable contraception, accounting for 26 respondents (74.3%). Meanwhile, 9 respondents (25.7%) reported a lack of support from their husbands. The support provided by husbands included approval of contraceptive use, encouragement to attend regular family planning visits, and permission to use contraceptive methods. Husband support is considered an important factor influencing the continuation of contraceptive use because women who lack partner support may feel hesitant or less autonomous in making reproductive health decisions.

Most respondents perceived the role of healthcare workers, particularly midwives at PMB Dian Setyorini, as good, accounting for 28 respondents (80.0%). In contrast, 6 respondents (17.1%) rated the role of healthcare workers as adequate, while only 1 respondent (2.9%) perceived it as poor. Midwives were considered to provide clear and comprehensive information regarding injection schedules, potential side effects, and the benefits of injectable contraception. Effective communication between healthcare workers and clients contributed to increased trust and satisfaction with family planning services.

Most respondents (29, 82.9%) reported that access to family planning services was easy. Meanwhile, 5 respondents (14.3%) considered the services moderately accessible, and only 1 respondent (2.8%) reported difficulty accessing services. The accessibility of family planning services was attributed to the PMB's strategic location, its proximity to residential areas, and its flexible service hours. Ease of access was identified as one of the major contributing factors to the high utilization of injectable contraception in the study area.

Overall, the study findings indicate that the factors most strongly influencing the high number of injectable contraceptive acceptors at PMB Dian Setyorini included good knowledge (60.0%), positive attitudes toward injectable contraception (68.6%), husband support (74.3%), the positive role of healthcare workers (80.0%), and easy access to services (82.9%). These factors interact and collectively form behavioral patterns that encourage women of reproductive age to continue choosing and using injectable contraception sustainably.

DISCUSSION

The results of this study indicate that the high number of injectable contraceptive acceptors at PMB Dian Setyorini is influenced by several factors, namely knowledge, attitude, husband support, the role of health workers, and ease of access to services. These factors are interconnected and shape the decision of women of reproductive age (WRA) in choosing and maintaining the use of injectable contraception as a family planning method deemed most suitable for their needs. Based on the research results, most respondents (60%) have good knowledge of injectable contraception. Knowledge is one of the important factors that influence a person's behavior in determining contraceptive choices. According to Notoatmodjo (2018), good knowledge will create awareness and encourage individuals to behave rationally regarding their reproductive health. High knowledge about the benefits, mechanism, and side effects of injectable contraception makes respondents feel confident that the method is effective in preventing pregnancy and is practical to use without the need for daily supervision.

These results are consistent with the research by Lestari (2022) at Sukaraja Health Center, which showed that 65% of respondents with good knowledge preferred injectable contraception over other methods. In addition to knowledge, respondents' attitudes toward injectable contraception also play an important role. In this study, 68.6% of respondents showed a positive attitude toward the use of injectable contraception. This positive attitude is marked by the belief that injectable contraception is safe, easy, and does not interfere with daily activities. According to Green's theory, as presented

in Notoatmodjo (2018), attitude is a predisposition formed from experiences, knowledge, and social interactions that can influence a person's behavior.

The findings of this study are in line with Sari and Dewi's (2021) findings, which stated that women with a positive attitude toward injectable contraception are three times more likely to become active acceptors. Those who have a negative attitude. The next factor is husband support, where 74.3% of respondents stated that their husbands support the use of injectable contraception. Partner support has a significant influence on women's decisions to use contraception. According to the Health Belief Model (HBM) theory, a person's health behavior is influenced not only by individual perceptions of benefits and barriers, but also by social support from their immediate environment, including their partner (Glanz et al., 2015).

Husband support can include permission, motivation, and involvement in the family planning decision-making process. This study supports the findings of Sari et al. (2021), who found that wives with strong husband support are more likely to use long-term or injectable contraception. The role of healthcare workers, particularly midwives, is also a dominant factor in this study, with 80% of respondents rating it as good. Healthcare workers play a role in providing counseling, education, and follow-up after injections. In the context of community midwifery, midwives are the frontline of family planning services as they have direct contact with the community. According to Andersen's Behavioral Model of Health Service Use, the quality and role of healthcare workers are considered an "enabling" factor that facilitates individuals' access to and use of health services (Andersen, 1995).

Informative support provided by midwives, such as explaining the schedule for repeat injections, side effects, and the benefits of contraception, increases users' trust and satisfaction. This finding aligns with Wulandari's (2022) research in Lumajang Regency, which found that the quality of midwifery services is significantly related to satisfaction and the continuity of injectable family planning use. In addition, easy access to services is also an important factor. Most respondents (82.9%) stated that access to PMB Dian Setyorini is very easy to reach. A strategic location, flexible practice hours, and friendly service make women of reproductive age feel comfortable and motivated to regularly use injectable contraception.

This is in line with Andersen's theory (1995), which states that accessibility is one of the main determinants in the use of health services. If health facilities are easily accessible and have a good reputation, the level of visits and public satisfaction will increase. Overall, the results of this study indicate that the high number of injectable contraceptive acceptors at PMB Dian Setyorini is due to a combination of good knowledge, positive attitudes, strong spousal support, the optimal role of health workers, and easy service access. These five factors complement each other and form

positive health behaviors in the use of injectable contraception. This finding supports the Theory of Planned Behavior (Ajzen, 1991), which states that an individual's behavior is determined by intentions influenced by Attitudes, subjective norms (social support), and perceived behavioral control (ease of access and support from healthcare workers). Based on a comprehensive analysis, the most dominant factor or the one with the highest priority in influencing the high number of injectable contraceptive accepters is husband support, followed by knowledge and the role of midwives.

Husband support is crucial because it becomes the final determinant in the decision to use contraception, especially in communities with family decision-making patterns that are still patriarchal. Good knowledge strengthens the acceptor's rational understanding of the benefits and effects of injectable contraception, while the role of midwives reinforces trust and continued use. These three factors interact and form a supportive ecosystem that promotes the success of the injectable contraceptive program at the basic service level.

Therefore, it can be concluded that the increase in the number of injectable contraceptive accepters at PMB Dian Setyorini is influenced by a combination of internal and External factors, with the husband's support as a dominant factor, and the knowledge and role of healthcare workers as reinforcing factors that are interrelated. These findings highlight the importance of a holistic approach to family planning programs, which not only focuses on educating women of reproductive age but also involves their partners and strengthens healthcare workers' capacity to provide friendly, easily accessible services.

CONCLUSION

This study shows that the high number of injectable contraceptive accepters at PMB Dian Setyorini, Tembokrejo Village, Gumukmas District, Jember Regency, is influenced by several main factors, namely the level of knowledge, attitudes, husband's support, the role of health workers (midwives), and ease of access to services. Most respondents have good knowledge, a positive attitude toward using injectable contraceptives, strong support from their husbands, rate the role of midwives very highly, and feel that access to services is easily reachable. The analysis results indicate that the most dominant factor in increasing the number of injectable contraceptive accepters is the husband's support, followed by the acceptor's knowledge and the role of midwives. The combination of these factors creates an environment that supports the continued use of injectable contraception. Husband's support is a key factor because it plays a role in the family decision-making process, while knowledge and the role of midwives strengthen confidence and Compliance of

acceptors with the family planning program. Thus, it can be concluded that the success of increasing the acceptability of injectable contraceptives is determined not only by individual factors but also by social factors and health services that interact synergistically.

It is recommended that midwives further enhance education and counseling about injectable contraception, involving husbands in the outreach process to strengthen family support for the use of family planning. Health service facilities need to ensure easy access, improve the quality of services, and adopt a communicative and empathetic approach to patients. In addition, future research is expected to use an analytical design with a larger sample size and incorporate socio-cultural and economic variables to obtain more comprehensive results regarding the factors that influence the use of injectable contraception.

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