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Health Education About Contraception With Tiktok Media On The Level Of Knowledge Of Couples Of Childbearing Age In Choosing Contraception

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ABSTRACT

Purpose: The purpose of this study was to determine whether there is an effect of health education through Tiktok video media on the knowledge of couples of childbearing age in choosing contraceptives. **Methods:** This study uses descriptive research with a case study approach method, with a total of 30 respondents who meet the predetermined inclusion criteria. **Results:** The results showed that there was an increase in the knowledge of couples of childbearing age in the selection of contraceptives, after health education was carried out, namely from a sufficient level of knowledge as many as 15 respondents (50%) to a good level of knowledge as many as 17 respondents (56%). **Conclusions:** From the results obtained, it can be concluded that there is an effect of health education through Tiktok video media on the knowledge of couples of childbearing age in the use of contraceptives.

Keywords: Contraceptives, childbearing age couples, health education, knowledge level, Tiktok media.

Introduction

Population issues are a major problem for every country including Indonesia. With the vastness of Indonesia's islands, there must be an increasing population, so many people are not controlled by the number of births. The increase will have an impact on population density for the country of Indonesia. Contraceptives are needed to provide efforts to control the number of births. There are 2 methods in choosing contraceptives, namely using contraceptives in the long and short term. For long-term contraceptive methods there are IUDs, implants, and female / male surgical methods (Lucyshyn, 2021). While short-term contraceptive methods include birth control pills, injections, and condoms.

According to the results of family data collection in 2021, the prevalence of family planning participants in Indonesia was 57.4%. With the highest uptake of family planning in Indonesia, South Kalimantan (67.9%) because there is health education about contraception and free family planning services so that people are interested and brave enough to use contraception. While the lowest province is in Papua province (15.4%). And the overall prevalence in DKI Jakarta is 24.78% (BKKBN, 2020).

Health education is an effort or activity to create community behaviour that is conducive to health (Anderer, 2024). With health education, it is expected that there will be

an increase in community knowledge so that the we if are of the community will occur (Notoatmodjo, 2012); (Ima Sukmawati et al., 2022)

The results of Wardani and Siti's research (2020) entitled "The effect of health education with audio-visual media on long-term contraceptive method decision making" with 14 PUS respondents. In decision making from 14 respondents, there were 6 respondents who had made decisions by choosing the right contraceptive method. The conclusion is that after being given health education for 20 minutes, out of 14 respondents who decided as many as 6 respondents (42.9%) and who did not decide 8 respondents (57.1%).

Methods

Researchers use descriptive research with a case study approach method. Descriptive research is research conducted with the main purpose of providing a description or description of a state of the object (Sugiyono, 2017). Case study by examining the effect of the level of knowledge of couples of childbearing age in choosing contraceptives using Tiktok video media before and after being given health education.

From the English term to describe which means describing or describing something, such as circumstances, conditions, situations, events, activities, and others - etc. Therefore this study aims to determine the effect of the level of knowledge of couples of childbearing age in choosing contraceptives. This case study is research conducted by looking at a problem through a case. This method is used to see the effect of Tiktok video media on the level of knowledge of couples of childbearing age in choosing contraceptives using Tiktok video media.

The population in this study were couples of childbearing age aged 20 - 45 years, as many as 30 people. The sample in this study were couples of childbearing age who were selected according to the sampling technique and met the inclusion and exclusion criteria. The research subjects in this study were 30 respondents of childbearing age couples aged 20-45 years.

Results

Table 1. Characteristics of respondents by age

Age	Frequency (F)	Percentage (%)
20-30 years	14	47
31-45 years	16	53
Total	30	100

The results of the age distribution of respondents were \pm 40 years with the youngest age of respondents being 20 years and the oldest age being 45 years. The diagram above shows that the majority of respondents were aged >30 years, namely 16 people (53%) and <31 years as many as 14 people (47%).

Table 2. Characteristics of respondents based on education level

Education	Frequency (F)	Percentage (%)
Junior High School	3	10
Senior High School	24	80
Diploma	1	3
Undergraduate	2	7
Total	30	100

The results of the distribution of respondents have their last education is senior high school (SMA), namely 24 people (80%). While for junior high school education there were 3 people (10%), S1 amounted to 2 people (7%). Then followed by the least D3 graduates, namely 1 person (3%).

Table 3. Sources of information about family planning

Source of family planning information	Frequency (f)	Percentage (%)
Never received family planning information	10	33
Internet	12	40
Counselling from health workers	8	27
Total	30	100

The results of most information about family planning obtained by respondents came from the internet as many as 12 people (40%). Then those who have never received family planning information are 10 people (33%). And the least get information from health workers, namely 8 people (27%).

Table 4. Characteristics of respondents based on the use of family planning

Contraception	frequency (F)	Percentage (%)
IUD	7	23,3
Implant	5	16,6
Injectable	4	13,3
Pills	4	13,3
Condoms	4	13,3
Not wearing	6	20
Total	30	100

The results of the use of contraception were 25 people (83.3%), namely IUD 7 people (23.3%), then followed by implants as many as 5 people (16.6%), injections 4 people (13.3%), pills 4 people (13.3%), condoms 4 people (13.3). And those who did not use contraception were 6 people.

Table 5. PUS knowledge level about contraceptives

Knowledge Level	Pre-test		Post-test	
	(f)	(%)	(f)	(%)
Good (76-100)	11	36,6	17	56
Moderate (56-75)	15	50	8	27
Less (0-55)	4	13,3	5	17
Total	30	100%	30	100%

The results of the level of knowledge in 30 respondents before health education was carried out, namely with a level of knowledge less as many as 4 people (13.3%), a level of knowledge sufficient as many as 15 people (50%) and a good level as many as 11 people (36.6%). After health education was carried out, it increased with a level of knowledge less than 5 people (17%), a level of knowledge sufficient as many as 8 people (27%) and a level of good knowledge as many as 17 people (56%).

Discussion

Based on table 1. Based on the results of the study, 30 (100%) respondents of couples of childbearing age in the Petamburan Flat Rw.011 Petamburan Village, there were 17 respondents (56%) had a good level of knowledge. Of the 17 respondents, there were 10 respondents aged 31-45 years, and 7 respondents aged 20-30 years. Then for a moderate level of knowledge as many as 8 respondents (27%). 6 respondents aged 31-45 years and 2 respondents aged 20-30 years. And the level of knowledge is less as many as 5 people (17%). When viewed from age, all respondents with a lack of knowledge are 20-30 years old.

This is in accordance with the theory according to (Suwaryo & Podo, 2017), the older the respondent's age, the more developed his knowledge. The more age, the level of maturity of a person will be more mature in thinking and working. And this is in line with Loudoe's research entitled "Determinants of Knowledge about Contraception in Adolescent Mothers in Kupang" which shows a unidirectional relationship that the older the age, the better the knowledge about contraception (Loudoe, 2019).

Based on table 2. Of the 30 respondents who had a high school education level as many as 24 respondents (100%). 15 respondents (62.5%) had good knowledge, 5 respondents (20.8%) had sufficient knowledge, and 4 respondents (16.6%) had poor knowledge. Then who had a junior high school education level were 3 respondents (100%), 2 respondents (66.6%) had sufficient knowledge, and 1 respondent (33.3%) had poor knowledge. And those who have a tertiary education level are 3 respondents (100%). 2 respondents (66.6%) had good knowledge, and 1 respondent (33.3%) had sufficient knowledge.

According to (Hidayat et al, 2017), the level of education of the respondent can affect the respondent's ability to receive and understand the information provided. Education can make a person increase his knowledge and insight into many things that are at every certain level. Rohman & Gunawan (2022) Education is a step for someone to study to learn about some of the things they want to know. Likewise with the impact on several things he wants to know (Adiputri & Gutman, 2023). Likewise with the impact of education itself, where the lower or higher the education a person has, it will affect the absorption of information or material that has been delivered. This can be seen from the results of the statistical test calculation, there are 129 respondents, the sig value is $0.000 < 0.05$ and has a positive value. So it can be concluded that there is a significant relationship between education and respondents' knowledge about family planning.

Based on table 3. Based on the experience of 30 respondents who received information about family planning, there were 17 respondents (100%) who had a good level of knowledge. 6 respondents (35.2%) get information from the internet, 6 respondents (35.2%) get information from health worker counselling and who have never known as many as 5 respondents (29.4%). Then those with a moderate level of knowledge were 8 respondents (100%). 4 respondents (50%) get information from the internet, 2 respondents (25%) get information from health worker counselling, the rest have never known as many as 2 respondents (25%). And those who have a poor level of knowledge are 5 respondents (100%), 2 respondents (40%) get information from the internet and the rest have never known as many as 3 respondents (60%). According to (Elvy, 2022), a person will gain new information, knowledge, and experiences, and allow a person to be able to increase their thinking power, sharpen their views, and broaden their horizons by seeking information about something they want to know, especially knowledge about family planning (Opatunji & Sowunmi, 2024).

This is evidenced by research (Hardiningsih, 2017) with the title "The Effect of Counselling on the Level of Knowledge of Women of Fertile Age About Contraceptives in the Surakarta City Sangkrah Health Centre Working Area", based on the analysis of t test data obtained the results of the p value = $0.000 < \alpha = 0.05$ which means that counselling on contraceptives has an effect on the level of knowledge of women of childbearing age. 50% of

women of childbearing age had a moderate level of knowledge before being given counselling on contraceptives and after being given counselling, as many as 92.3% of women of childbearing age had a good level of knowledge.

Based on table 5. the results of research on 30 respondents show that the characteristics of the level of knowledge of couples of childbearing age before health education obtained the results of the level of knowledge "Less" as many as 4 people (13.3%), "Enough" as many as 15 people (50%), and "Good" as many as 11 people (36.3%) and which. So it can be seen that the level of knowledge of 30 respondents before health education is dominated by the category of "Sufficient" knowledge level and after health education has increased with a level of knowledge "Less" as many as 5 people (17%), a level of knowledge "Sufficient" as many as 8 people (27%) and a level of knowledge "Good" as many as 17 people (56%).

This is evidenced by research conducted by (Susanti & Haniva, 2021) with the title "The Effect of Health Education on Increasing the Use of Family Planning Programs in Women of Fertile Age (WUS) in the Working Area of the COT BA'U Health Centre in Sabang City". It can be seen from the birth control acceptor mothers 73 respondents (86.9%), that there is an effect of health education on increasing the use of contraception before and after education is given, the effect of using the family planning programme changes towards a positive direction.

Conclusions

The subjects of this study were couples of childbearing age in the Petamburan Flat Rw.011 Petamburan Village, Tanah Abang District, Central Jakarta. A total of 30 people aged 20 - 45 years, respondents followed the research process starting from pre-test to post-test and exclusion criteria who were not married, and were not present during the study.

Before health education was carried out, the results of the level of knowledge "Less" were 4 people (13.3%), "Enough" were 15 people (50%), and "Good" were 11 people (36.3%) and who. So it can be seen that the level of knowledge of 30 respondents before health education is dominated by the category of "Sufficient" knowledge level and after health education has increased with a level of knowledge "Less" as many as 5 people (17%), a level of knowledge "Sufficient" as many as 8 people (27%) and a level of knowledge "Good" as many as 17 people (56%).

From the results carried out in this study, it can be concluded that there is an increase in the level of knowledge of the Effect of Health Education on Contraception with Tiktok Media on the Selection of Contraceptives before and after health counseling.

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