

Factors relating to the low interest in intrauterine device contraceptive methods

Aza Fatimatuzzahra, Dini Kurniawati* , Ira Rahmawati 

ABSTRACT

Introduction: A contraceptive with a modern design, the device is implanted in the uterine cavity to prevent fertility and the egg from implanting in the uterus, called intrauterine devices (IUD). It's emphasizing maternal mortality and controlling the rate of population growth causing. This study aimed to determine the factors associated with the low interest in the IUD contraceptive method in Jambesari District, Bondowoso Regency.

Methods: This study used a descriptive quantitative approach with random sampling for cross-sectional analysis. Primary data were gathered through questionnaires and analyzed using univariate and bivariate methods supplemented by secondary data. The study focused on 6,677 mothers using family planning, with a 99-participant sample determined by the Slovin formula. The analysis involved the Chi-square test at a 95% confidence level based on categorical and ordinal data.

Results: There is a relationship between the level of knowledge of acceptors, education level, and attitude towards the low number of IUD users in Jambesari Bondowoso District ($p=0.00$).

Conclusion: Based on the research results that have been described, it can be concluded that in Jambesari District, there are 7 factors, 3 factors (knowledge, education, attitude) related to poor knowledge due to low education, resulting in acceptors having a bad attitude or agreeing to IUD contraception. Health workers should be more active in providing counselling and education.

Keywords: childbearing age; influenced factor; intrauterine devices (IUD)

INTRODUCTION

Indonesia has experienced a rapid increase in population. It rose from 119 million in 1971 to 272.2 million in 2021 (BPS, 2016). With an average annual growth rate of 1.38%, Indonesia has become the leading Southeast Asian nation in terms of population. Projections suggest that by 2030, Indonesia's population could reach as high as 296.4 million. This is particularly notable in regions like East Java, which is second in population size to West Java, with 40,665,696 residents. The district of Bondowoso alone is home to 772,297 individuals. The significant increase in births is a major contributor to this population growth. Often, it's due to an extended reproductive period. In response to this trend, the government has implemented a Family Planning program aimed at managing the growth rate of Indonesian citizens.

Family Planning (KB) is a crucial initiative designed to assist married couples in achieving specific objectives related to family size and spacing between pregnancies. KB methods include techniques and tools that prevent the union of egg

and sperm cells. These methods are categorized into two groups: Long-Acting Reversible Contraception (MKJP) and Non-Long-Acting Reversible Contraception (Non-MKJP) (Ardiansyah, 2020). Globally, the proportion of women aged 15 to 49 who utilize modern contraception methods varies significantly. It's 28% in Africa, 60% in Asia, 74% in the Americas, 68% in Europe, and 80% in the Western Pacific according to WHO. In Indonesia, contraceptive methods such as birth control injections and pills have gained popularity among women, with a utilization rate of 89%. Among men, condom use is more prevalent compared to other forms of contraception. It has an 8% adoption rate. Attitudes toward birth control pills and injection methods among men stand at 76% and 64%, respectively (IDHS, 2017).

According to data from the Central Bureau of Statistics (BPS) in East Java Province in 2019, the number of family planning acceptors, including partner age fertile (PUS), was 6,040,011 in 2018 (BPS, 2019). In Bondowoso Regency, the figures were 116,945 acceptors. This includes 6,528 using the IUD method, 1,939 using MOW, 1,076 using MOP, 555 using condoms, 12,531 using implants, 67,453 using injections, and 116,945 using pills (BPS, 2019). As per Sari (2019), the Intrauterine Device (IUD) is considered the most effective and durable contraceptive method. It offers efficiency and cost-effectiveness. IUD users benefit from not having to make frequent monetary contributions for contraception. Moreover, the IUD's success rate in preventing pregnancy is notably high (Ardiansyah, 2020). IUDs are long-acting contraceptives made from plastic-coated copper or a copper-silver alloy. This metal coil induces an anti-fertility response, providing protection against pregnancy for 2 to 10 years by preventing

OPEN ACCESS

*Correspondence: Dini Kurniawati (dini_k.psik@unej.ac.id)
Department of Maternity and Pediatric Nursing, Faculty of Nursing, Universitas Jember, Jember, Indonesia

© The Author(s) 2023
Volume 9 (2): 79-84
<http://dx.doi.org/10.20473/pnmj.v9i2.33079>

e-ISSN: 2355-1577 | p-ISSN: 2656-4629

Article History

Received: January 21, 2023 | Revised: February 21, 2023 | Accepted: March 01, 2023 | Published: August 31, 2023

the entry of sperm into the fallopian tubes (Putri, 2016).

Despite its advantages, low IUD adoption rates persist in certain areas. For instance, in Bondowoso District, Jambi Regency, only a minimal percentage of women use the IUD. This is due to concerns about potential health risks, including the misconception that it could cause uterine cancer or become lodged in the baby’s head during pregnancy. Some individuals also believe that using an IUD can affect marital intimacy negatively. Lewin’s Health Belief Model (HBM) from 1954 (Notoatmodjo, 2010) posits that low interest in IUDs is influenced by individuals’ perceptions of the associated risks and benefits. These perceptions are further shaped by factors such as age, education, knowledge, number of children (parity), and sources of information (Sari, 2019). Given the continued low adoption of IUDs in Subdistrict Jambi, Bondowoso District, despite their effectiveness and safety, this research seeks to investigate and understand the factors contributing to this phenomenon.

METHODS

Design

The research method uses descriptive quantitative using a cross-sectional approach. The sampling technique was random sampling. This study used primary data through the questionnaire answers and then analyzed univariate, bivariate, and secondary data from journals and research articles.

Sample and Setting

The population used in this study were all mothers who used family planning, with as many as 6,677 acceptors. Samples taken using the Slovin formula obtained a large sample of 99 respondents. Then, samples in each village will be carried out proportionally random sampling or randomly obtained 66 other family planning users and 33 IUD family planning users. At the time of data collection, there were criteria for the research subject, namely inclusion criteria and exclusion criteria; the inclusion criteria of this study were 1) Married couples using family planning, 2) Willing to be respondents, 3) other contraceptive users and IUD KB users. The exclusion criteria in this study are 1) Not EFA and not registered family planning users, 2) Not willing to be a respondent. This research was conducted in the District of Jambesari.

Variables

This study examines several independent variables: 1) age, 2) parity, 3) knowledge, 4) education, 5) husband’s support, 6) attitude, and 7) the Role of Health Officers. The dependent variable is the utilization of IUD contraception.

Instruments

The research instrument used a questionnaire regarding factors related to low interest in IUD users; there were as many as 43 question items. The instrument uses a 43- question questionnaire following the study’s title with an ordinal scale. The researcher cites a questionnaire from the research of Simbolon (2018) in Medan.

Procedure

The data collection process coincided with the COVID-19 pandemic. Village Cadres and Extension Teams assisted researchers in explaining to respondents who did not

understand the questionnaire questions. To reduce the crowd, the researchers formed 10 groups of 10 people and 9 people, several Extension Teams, and 2-3 village cadres. Before filling out the questionnaire, the researcher gave a consent form to get consent to become a respondent. Respondents and the team kept their distance when completing the questionnaire and always wore masks. Respondents will be given 5-10 minutes to fill out the questionnaire.

Data Analysis

Data analysis was carried out in two stages: univariate and bivariate. Univariate analysis using categorical data that has been obtained descriptively by using the number (n) and percentage (%): age, parity, knowledge, education, husband’s support, attitude, role of health workers, and use of IUD contraceptives. The bivariate analysis aims to examine the effect between the independent and dependent variables. The analysis used in this study is the Chi-square test at a confidence level of 95% ($\alpha = 0.05$) to determine the factors that influence the low interest in the IUD family planning method (Sugiyono, 2018). The data distribution is unconditional, with ordinal data on both research variables.

Ethical Considerations

The researcher sequentially obtained permits from the Faculty of Nursing, University of Jember, LP2M UNEJ, the National Unity and Political Agency of Bondowoso Regency, and the Head of the Subdistrict of Jambesari, Bondowoso. Necessary permits included a preliminary study permit (5245/UN25.1.14/SP/2021), an ethical review cover letter (6188/UN25.1.14/SP/2021), a research permit from the Faculty of Nursing (6324/UN25.1.14/LT/2021), and a research permit from LP2M University of Jember (4908/UN25.3.1/LT/2021).

RESULTS

Table 1 reveals that certain trends can be observed across different factors: Firstly, in terms of age, the majority of respondents (70.7%) fall within the reproductive age category. Secondly, based on education, a significant portion (86.9%) have limited education. Thirdly, concerning parity, the predominant group is primiparous, with 61.6% giving birth only once. Fourthly, regarding knowledge, a substantial number (62.6%) have inadequate knowledge. Fifthly, regarding attitude, a significant proportion (65.7%) display a less favorable attitude. Sixthly, regarding health worker involvement, a large majority (80.8%) do not perceive a role. Seventhly, concerning spousal support, an overwhelming number (93.3%) lack support from their husbands. Lastly, within the Jambesari sub-district, a considerable portion (66.7%) of respondents do not utilize IUD contraception.

According to Table 2, it can be observed that the largest occupational group among the 99 respondents is housewives, comprising 91 individuals (91.9%).

Table 2. Frequency Distribution Based on Respondents’ Occupations

Occupation	n	%
Housewife	91	8.51
Entrepreneur	8	13.83
Total	99	77.66

Table 3 analysis outcome regarding the connection between age and low IUD contraceptive use in Jambesari

Table 1. Frequency Distribution Based on Factors in Jambesari Bondowoso District in 2021

Factor	n	%
Age		
Too young	29	29.3
Reproductive	70	70.0
Education		
Low	86	86.9
High	13	13.1
Parity		
Primipara	61	61.6
Multipara	38	38.4
Knowledge		
Not Good	65	62.6
Good	34	37.4
Attitude		
Not Good	65	65.7
Good	34	34.3
Role of Health Officer		
Not	80	80.8
Yes	19	19.2
Husband Support		
Not	93	93.3
Yes	6	6.1

Bondowoso District is as follows: Out of the 99 respondents, 11 (10.7%) are deemed too young for IUD usage. In contrast, 48 (46.7%) in the reproductive age category opt not to use IUDs. The statistical examination utilizing the chi-square test yields a p-value of 0.640 ($p > 0.05$), signifying the absence of a correlation between age and the reduced utilization of IUD family planning in Jambesari Bondowoso District.

The information extracted from Table 3 reveals the analysis findings regarding the correlation between parity and the limited usage of IUD contraception in the Jambesari Bondowoso District. Among the 99 respondents, 41 (20.3%) fall into the category of primiparous IUD users, while 13 (13.7%) do not utilize the IUD, representing the multiparous type of family planning. The outcomes of the chi-square test display a p-value of 1.000 ($p > 0.05$), indicating the absence of a connection between parity and the constrained number of IUD family planning users in Jambesari Bondowoso District.

Based on the data presented in Table 3, the analysis concerning the association between the knowledge level and the limited usage of IUD contraception in Jambesari Bondowoso District reveals the following: Among the 99 respondents, 61 individuals (41.3%) who possess insufficient knowledge do not use the IUD. In contrast, 21.7% (1 respondent) with good knowledge utilize the IUD. As indicated by the results of the statistical assessment using the chi-square test, the p-value of 0.000 ($p < 0.05$) indicates a significant correlation between the level of knowledge among acceptors and the low utilization of IUD family planning in Jambesari Bondowoso District.

In Table 3, the analysis outcomes concerning the connection between educational attainment and the scarcity of IUD contraception users in Jambesari Bondowoso District are as follows: Among the 99 respondents, 63 individuals (57.3%) without higher education do not employ the IUD,

while 8.7% (3 respondents) with higher education also refrain from using the IUD. Based on the findings of the statistical examination via the chi-square test, the p-value of 0.01 ($p < 0.05$) signifies an existing relationship between the level of education and the limited utilization of IUD family planning among users in Jambesari Bondowoso District.

Based on the information presented in Table 3, the findings from the analysis concerning the correlation between husband support and the limited adoption of IUD contraception in Jambesari Bondowoso District are as follows: Among the 99 respondents, 63% (62 individuals) who do not use the IUD lack support from their husbands, and 2.0% (2 respondents) who use the IUD receive spousal support for the IUD. According to the statistical test results using the chi-square test, the p-value of 1.000 ($p > 0.05$) indicates the absence of a connection between the husband's support and the low count of IUD family planning users in Jambesari Bondowoso District.

According to the information found in Table 3 the analysis outcomes concerning the connection between attitudes and the reduced usage of IUD contraception in Jambesari Bondowoso District can be summarized as follows: Out of the 99 respondents, 43.3% (62 individuals) who do not use the IUD hold negative attitudes, whereas 21.7% (3 respondents) who use the IUD exhibit positive attitudes toward it. Based on the statistical tests conducted using the chi-square test, the p-value of 0.000 ($p < 0.05$) indicates a significant relationship between attitudes and the low count of IUD family planning users in Jambesari Bondowoso District.

In Table 3, the findings of the analysis concerning the association between the involvement of health workers and the limited adoption of IUD contraception in Jambesari Bondowoso District are as follows: Among the 99 respondents, 53.3% (58 individuals) who do not use the IUD indicate

Table 3. Relationship between factors and low IUD users

Factors	IUD KB Users				Total		p-value
	Use		Do not use		n	%	
	n	%	n	%			
Age							
Too Young	11	10.7	18	19.3	29	30.0	0.640
Reproductive	22	23.3	48	46.7	70	70.0	
Total	33	33.0	66	66.0	99	100	
Education							
Low	23	28.7	63	57.3	86	86.0	0.01
High	10	5.3	3	8.7	13	14.0	
Total	33	34.0	66	66.0	99	100.0	
Parity							
Primipara	20	20.3	41	40.7	61	60	1.000
Multipara	13	13.7	25	25.3	38	39	
Total	33	33.0	66	66.0	99	100	
Knowledge							
Not Good	1	21.7	61	41.3	62	63.0	0.000
Good	32	12.3	5	24.7	37	37.0	
Total	33	33.0	66	66.0	99	100	
Attitude							
Not Good	3	21.7	62	43.3	65	65.0	0.000
Good	30	11.3	4	23.7	34	35.0	
Total	33	33.0	66	67.0	99	100.0	
Role of Health Officer							
Not	24	26.7	58	53.3	80	80.0	0.180
Yes	9	73	10	12.7	19	20.0	
Total	33	34.0	66	66.0	99	100.0	
Husband Support							
Not	31	31.0	62	63.0	3	94.0	1.000
Yes	2	2.0	4	4.0	6	6.0	
Total	33	33.0	66	67.0	9	100.0	

no engagement of health workers. In comparison, 7.3% (9 respondents) who use the IUD have received such support. As indicated by the results of the statistical tests employing the chi-square test, the p-value of 0.180 ($p > 0.05$) suggests the absence of a relationship between the role of health workers and the scarcity of IUD contraceptive users in the Jambesari Bondowoso District.

DISCUSSION

This study focuses on analyzing the employment characteristics of the respondents. The majority, accounting for 91.9%, are primarily housewives, while self-employed individuals make up only 8.1%. This data highlights that most participants are engaged in informal work centered around homemaking. This arrangement allows them greater flexibility for home-based activities, unburdened by strict working hours, as noted by Akbarani (2017). As presented by Akbarani, it indicates that women with physically demanding professions might avoid IUD contraception due to concerns about work interference. Since work affects both income and socioeconomic status, having a satisfactory socioeconomic status tends to facilitate

meeting contraceptive needs.

This study's results indicate no correlation between age and IUD utilization (chi-square test: p-value = 0.640), aligning with Sinaga (2021), who emphasize societal concerns. Mothers often choose safer contraceptive methods due to taboo-related hesitations. Salanti (2018) reinforces this, suggesting that mature individuals make informed choices. However, Ardiansyah (2020) proposes an age-IUD link within the under-30 productive age range, diverging from this study. This study does not find an association between age and low IUD family planning users. Age does not influence decision-making or maturity in selecting a family planning method; individuals choose what suits them best. Similarly, the study reveals no association between parity and the limited usage of IUD family planning (chi-square test: p-value = 1.000). This aligns with Ratnawati (2019), indicating that multiparous mothers continue with their existing family planning methods, while primiparous mothers prefer alternatives due to safety and suitability considerations.

This study's findings corroborate Salanti (2018), which suggests no connection between parity and choosing IUD contraception. Salanti's perspective implies that mothers shy

away from IUDs due to discomfort and apprehension during insertion. However, this study contrasts with the findings of Kadir in 2020, indicating that parity influences the interest of mothers in using IUD contraception. Kadir's research suggests that mothers with 1 or 2 children prefer IUDs as they view 2 children as sufficient and wish to space out pregnancies. The researchers of this study assert that parity does not impact mothers' inclination toward IUD contraception. Instead, they believe mothers, especially multiparous ones, base their contraceptive choices on personal experiences and prioritize appropriateness and safety.

This study demonstrates a significant link between knowledge and low IUD utilization ($p = 0.000$) through the chi-square test. Palupi's research in 2018 supports this, highlighting knowledge's pivotal role in influencing a mother's preference for IUD contraception. Accurate information about contraception, including benefits, drawbacks, and side effects, shapes IUD acceptance. This observation aligns with Palupi (2018), indicating knowledge's impact on a mother's interest in IUDs. Informed perspectives influence decisions, with participants grasping IUD pros and cons. However, the study contrasts with Dayanti (2018), which doesn't strongly associate knowledge level with family planning among PUS participants, likely due to various factors affecting knowledge. The researcher assumes comprehensive knowledge aids informed choices, extending to contraception decisions.

The study's findings reveal a significant association ($p = 0.01$, $p < 0.05$) between education and reduced interest in IUD usage. These results are consistent with Jurisman (2016), asserting a notable connection between educational level and selecting IUD contraception. Education serves as a factor influencing individuals' openness to new concepts, including contraception adoption. Higher education promotes broader perspectives, independence, and rational decision-making. Fatmawati et al. (2022) bolsters these results, demonstrating a substantial link between acceptor education and IUD utilization. Data analysis indicates that respondents with basic education exhibit limited knowledge about IUD family planning.

In contrast, Dayanti (2018) found no significant relationship between education level and contraceptive method usage at EFA, suggesting that this link depends on study characteristics and respondent numbers. The researcher presumes a noteworthy correlation between education level and IUD family planning users. Higher education facilitates access to IUD-related information.

The chi-square test yielded a p-value of 1.000 ($p > 0.05$) for the relationship between the husband's support and low IUD family planning users, indicating no significant connection. This outcome aligns with Ratnawati (2019), which found no link between the husband's support and low IUD usage. This lack of correlation could be attributed to husbands providing approval and encouragement for contraception but wives hesitating due to irrelevant information. Similarly, they identified no association, possibly due to husbands considering family planning primarily a woman's responsibility while focusing on their work commitments. In contrast, Kadir (2020) demonstrated that a husband's support affects a mother's interest in IUD contraception. According to their perspective, a wife's choice of contraceptive methods, such as the IUD, may depend on the husband's approval, resulting in the wife's contentment. Nonetheless, the researcher's assumption suggests that women base their contraceptive choices on personal knowledge and experience, regardless of their husband's support. The absence of the husband's consent

would not sway a mother's preference for the IUD since the husband's consideration of the chosen contraception method is not a significant factor.

The study's analysis through the chi-square test resulted in a p-value of 0.000 ($p < 0.05$), indicating a connection between attitudes and the limited utilization of IUD contraceptives. Dayanti's research in 2018 further supports this finding, highlighting a positive correlation between attitudes and IUD use, suggesting that favorable attitudes encourage higher adoption rates of the IUD method. However, Simbolon (2018) contrasts this, indicating no link between mothers' attitudes and IUD use due to misconceptions and stigma associated with IUDs. The researcher's hypothesis asserts that attitudes significantly influence IUD usage, with a positive demeanor being influenced by thorough knowledge of IUD contraception.

Similarly, the chi-square test yielded a p-value of 0.180 ($p > 0.05$), signifying no significant relationship between health worker roles and the lack of IUD family planning users. Ratnawati (2019) supports this, suggesting no correlation between information provision and low IUD usage. Sari (2019) indicates no connection between media information and maternal interest in choosing the IUD method. Various factors contribute to these findings, including personal experiences and external influences on attitudes. However, Kadir (2020) contradicts this, stating that information influences maternal interest in IUD use. Contrastive usage frequency is likely to increase if ample information is received from diverse sources. The researcher's assumption posits that health worker roles do not heavily impact IUD choice, as individuals often prioritize the opinions of their closest connections, such as family, over health worker explanations. This suggests that health worker guidance has minimal influence on the respondent's desire to adopt the IUD method, especially if family planning participants adhere to their family's recommendations despite receiving accurate information from health workers.

CONCLUSION

The outlined research outcomes lead to the conclusion that within the Jambesari District, 7 factors play a role. Among these, 3 factors (knowledge, education, attitude) are linked to inadequate awareness due to limited education, resulting in unfavorable attitudes or acceptance of IUD contraception. On the other hand, 4 factors—age, parity, husband's support, and health worker involvement—do not correlate with IUD usage.

Declaration of Interest

All authors declare that they have no conflicts of interest.

Acknowledgment

We sincerely express our appreciation to Universitas dr. Soebandi for providing financial support so that this research can be carried out properly. We would also like to thank all cadres of POSYANDU for their contribution to this study.

Funding

None.

Author Contribution

A.F, & D.K conceived of the conceptualization, such as Ideas; formulation or evolution of overarching research goals and aims.

AF & IR conceived and planned the development or design of methodology; creation of models, implementation of the computer code and supporting algorithms; testing of existing code components.

A.F conceived of the validation and application of statistical, mathematical, computational, or other formal techniques to analyze or synthesize study data.

D.K & I.R Conducting a research and investigation process, specifically performing the experiments, or data/evidence collection.

A.F, I.R & D.K preparation, creation and/or presentation of the published work, specifically writing the initial draft (including substantive translation).

I.R & D.K contributed to the writing - review & editing of the manuscript.

D.K & I.R Oversight and leadership responsibility for the research activity planning and execution, including mentorship external to the core teams.

Data Availability

The datasets generated during and/or analyzed during the current study are available from the corresponding author on reasonable request.

REFERENCES

- Akbarani, F. (2017). An Overview Of The Factors That Influence The Low Coverage Of IUD Contraception In The Village Of Kebonagung, Pakisaji District. *Journal Stikes Kenedes*, 2.
- Ardiansyah, N. (2020). Analysis Of Factors Influencing The Selection Of MKJP On New Acceptors. *Prma Wiyata Helath*.
- BBKBN. (2018). Active Family Planning Participant by Contraception Method Bondowoso District.
- BPS. (2016). Human Development Index. *Badan Pusat Statistics*.
- BPS. (2019). Bondowoso Regency In Figures. *Badan Pusat Statistics*.
- BPS. (2019). East Java Province In Figures. *Badan Pusat Statistics*.
- Dayanti, J. K. (2018). Factors Associated With The Use Of Contraceptive Methods In Jellyfish-aged Couples In Rowosari. *Diponegoro Medical Journal*, 7(2), 1094-1062.
- Fatmawati, I. (2022). Characteristics Of Acceptors With The Use Of IUD Contraceptive. *Jambura Journal of Helath Sciences and Research*.
- IDHS. (2017). *Asolescent Reproductive Helath*. BKKN 2018.
- Jurisman, A. (2016). The Relationship Between Maternal Characteristics And The Choice Of Contraception At The Desert Health Center. *Andalas Health Journal*.
- Kadir, S. (2020). Factors That Influence Mothers Interest In Using KB IUD At The Binjai Estate Helath Center. *Indonesian Scientific Journal Of Midwifery*.
- Notoatmodjo. (2010). *Fundamental Of Clinical Research Methodlogy*.
- Palupi, R. D. (2018). Factors Related To The Selection Of IUD Family Planning In The Perspective Of Human Rights At The Godean Helath Center In Yogyakarta.
- Putri, O. &. (2016). Effectiviness Of Intra Uterine Devices (IUD) as a Contraceptive device. *Medical Journal of Lampung Univercity*, 5(4).
- Rahayu. (2017). Factors Causing The Low Use Of Long-Term Contraceptives Methods.
- Ratnawati. (2019). Factors Associated With The Lack Of Use IUD Contraceptive In Tinggimoncong District, Gowa Regency.
- Salanti, P. (2018). Factors Related To Equipment Selection IUD Contraception In Mothers at RSIA Resti Mulya, East Jakarta 2018 Period.
- Sari. (2019). Factors Associated With Mother's Interest In The Selection Of IUD Contraceptive Devices. *Journal Of Public Helath*.
- Simbolon. (2018). Factors Affecting Family Planning Acceptors In Using An Intrauterine Contraceptive Device (IUD) At Tegal Sari III Health Center Medan, North Sumatra In 2017.
- Sinaga. (2021). Factors Related To The Use Of Tools IUD Contraception In KB Acceptors Perbaungan Melati Helath Center Serdang Bedagai. *Journal Akrab Juara*, 48-62.