

## Empowering Women Through Contraceptive Education Makes Responsible Family Decisions A Reality

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### ABSTRACT

*Empowering women through contraceptive education is an effort to provide knowledge, skills and access to various contraceptive methods to women to provide control to women regarding decisions regarding their reproductive health. The aim of community service is to increase the knowledge of women of childbearing age regarding appropriate contraceptive knowledge. with health conditions in Taraweang village in the form of counseling by providing material about types of contraceptives, disadvantages and advantages and side effects, the activity method is by distributing leaflets to participants then conducting counseling and evaluating using a pre-post test questionnaire. The results of activities regarding contraception were an increase in the knowledge of women of childbearing age. Where the knowledge of women of childbearing age before good knowledge education was 22%, and after good knowledge counseling it was 81%. Providing contraceptive knowledge to women of childbearing age has a positive social and health impact, giving them greater control over their bodies and reproductive lives.*

**Keywords:** Contraceptive; Counseling; Postpartum; Women

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### 1. Introduction

During the postpartum period, which starts 1 hour after birth and can last up to 6 weeks (42 days), mothers experience physical and psychological exhaustion, leading to feelings of stress or depression (Sudarto, Zakiyya, & Handrika, 2022). Mood disorders are a common issue during this period and can be classified into three types: baby blues, postpartum depression, and postpartum psychosis. Baby blues, affecting approximately 80% of mothers, is a milder disorder that typically occurs from the second day to two weeks after childbirth and usually resolves on its own. Symptoms of baby blues include worry, lack of self-confidence, unexplained crying, sensitivity, irritability, and restlessness (Lindayani & Marhaeni, 2020).

The postpartum period is accompanied by changes in the reproductive organs and can also result in psychological changes in mothers after childbirth. This transition to motherhood is often viewed as a positive experience in a woman's life, but it entails a period of physical, psychological, and social adaptation that can be challenging for women in this condition. Postnatal depression, a common mental disorder, is estimated to affect 13-19% of women within the first year after giving birth (Mayangsari et al., 2022). According to data from WHO (2017), it is globally estimated that 5% of adults suffer from depression, with a higher prevalence in the Southeast Asia and West Pacific regions. In Indonesia, the prevalence of depression is 3.7%, lower than that of India, which has the highest prevalence rate at 4.5%. Within the Southeast Asia region, the prevalence of depression is 27%. Among

women with a history of depression before pregnancy, approximately 20% experience major depression during pregnancy or after giving birth, while 56% of women with a history of anxiety before pregnancy experience anxiety during this period. Additionally, among women with depression and anxiety before pregnancy, 29% report recurring episodes of major depression, and as many as 63% experience anxiety during pregnancy and after childbirth (Hidayati et al., 2022).

Postpartum psychological problems can significantly impact a mother's ability to care for her baby, and the severity of these problems can detrimentally affect the quality of care provided. Anxiety symptoms often manifest during pregnancy, increasing the risk of postpartum depression and other health conditions that can be harmful to both the mother and her child. The consequences of postpartum depression and anxiety are varied. Postpartum depression can have negative effects on children's cognitive and emotional development, as well as their social behavior (Hidayati et al., 2022). It can also impact the outcomes of maternal activities (Lailiyana & Susilawati, 2020).

Based on monitoring and evaluation findings, it has been observed that the implementation of the Edinburgh Postnatal Depression Scale (EPDS) by midwives for the early detection of postpartum maternal psychological problems has increased from 66.7% to 88.9%. Therefore, it is recommended that midwives intensify their efforts to identify postpartum depression early in every mother by utilizing EPDS both during home visits and when clients seek healthcare services (Khatimah, Akhfar, & Khaera, 2021).

There are several approaches to preventing postpartum depression. One such effort is through health education and disease prevention measures. Health education aims to maximize the potential for good health within the community. On the other hand, preventive actions are taken to minimize the recurrence of illness in individuals who are at risk. Health education and disease prevention initiatives often incur lower costs compared to the treatment required when individuals are already afflicted with the illness.

## 2. Method

This Community Service activity is carried out in several stages. The first stage of women's empowerment activities through contraceptive education can involve several strategic steps. The following are several stages that can be the basis for implementing activities:

- a. **Needs Mapping and Target Identification:** 1) Conduct a needs analysis in the target community. Identify issues of level of knowledge about contraception; 2) Determine the target group, such as women of childbearing age
- b. **Development of Specific Goals and Targets:** 1) Determine the general objectives of the women's empowerment program through contraceptive education. 2) Set specific, measurable goals to evaluate the success of the program.
- c. **Composition of the Implementation Team:** 1) Form an implementation team consisting of individuals who have contraceptive skills and knowledge ; 2) Make sure the team has good representation from the target community.
- d. **Initial Data Collection:** 1) Collect initial data to understand the level of knowledge; 2) Identify myths or stereotypes that may influence contraceptive use.
- e. **Development of Extension Materials and Methods:** 1) Create educational materials that suit the literacy level and needs of the community; 2) Choose outreach methods that are interactive and appropriate to local culture, such as drama, role-playing, or live demonstrations.

- f. **Choosing the Right Location and Time:** 1) Determine the location used for Taraweang village; 2) Choose a time that is convenient for participants, avoiding clashes with other community activities. This activity will be held on Thursday, 06 April 2023.
- g. **Collaborative Approach:** 1) Establish partnerships with local organizations, health centers, and community leaders to support implementation of activities; 2) Involve community groups in the planning and implementation process.
- h. **Evaluation Planning:** 1) Determine success indicators and appropriate evaluation methods to measure the activities carried out; 2) Establish a regular evaluation schedule to track progress and adjust future activities as necessary



Figure 1. Extension Activities

### 3. Results

This community service activity was held on Thursday, April 6 2023, at Batu-Batu Hamlet, Taraweang Village. Preparations began with the preparation of the activity location, seating arrangements for activity participants, arrangement of loudspeakers, and preparation of activity materials. Partners played a very active role in providing the facilities, and infrastructure to carry out this activity. Before carrying out the activity, the implementing team distributed pretest questions. This community service activity is an effort to increase the knowledge of women of childbearing age regarding contraceptive knowledge that is appropriate to their health conditions in Taraweang village in the form of counseling by providing material about types of contraceptives, their advantages and disadvantages and side effects as well as holding discussions regarding several cases that are often experienced by women, childbearing age. Several respondents were very enthusiastic by asking about their experiences while using contraceptives.

Table 1. Distribution of women of childbearing age in contraceptive education activities in Taraweang village

No	Parents' Age	Frequency (f)	Percentage (%)
1	20 - 30	16	38
2	31 - 40	19	45
3	41 - 50	7	17
<b>Total</b>		<b>42</b>	<b>100</b>

**Table 2. Distribution of types of contraception used by women of childbearing age in Taraweang village**

No	Contraceptive Type	Frequency (f)	Percentage (%)
1	Pil	16	38
2	IUD	6	14
3	Suntik	20	48
4	Tubektomi/Vasektomi	-	-
<b>Total</b>		<b>42</b>	<b>100</b>

**Table 3. Distribution of knowledge Before contraceptive education in Taraweang village**

No	Knowledge	Frequency (f)	Percentage (%)
1	Good	9	22
2	Enough	19	45
3	Not enough	14	33
<b>Total</b>		<b>42</b>	<b>100</b>

**Table 4. Knowledge Distribution After contraceptive education in Taraweang Village**

No	Knowledge	Frequency (f)	Percentage (%)
1	Good	34	81
2	Enough	6	14
3	Not enough	2	5
<b>Total</b>		<b>42</b>	<b>100</b>

#### 4. Discussion

Family Planning (KB) is Formation of healthy and prosperous families by maintaining birth spacing. This means making plans for family members with restrictions that can be implemented by using contraception or contraceptives such as condoms, spirals, IUDs, and so on. The number of children in a family that is considered ideal is two. (Pragita, 2021)

The large rate of population growth has resulted in many negative impacts on the population, such as suffering from lack of food and nutrition so that health levels worsen, education is low, and many people are unemployed (Agustina et al., 2021). One of the government's efforts to control the rate of population growth and reduce maternal mortality rate is through the implementation of the family planning program for couples of childbearing age (PUS). The family planning program plays a role in reducing the risk of maternal death by preventing pregnancy, delaying gestational age and limiting pregnancy, targeting women of childbearing age. Family planning programs provide opportunities to space births or reduce the number of births with the use of hormonal or non-hormonal contraceptive methods. (Kusumawardani et al., 2023)

Reducing the Risk of Unwanted Pregnancy: providing contraceptive knowledge can help reduce the risk of pregnancy. Contraceptive knowledge can help reduce the risk of unwanted pregnancy and unsafe abortion. Women who understand ways to prevent pregnancy can take effective preventive measures and improve reproductive health. Knowledge of contraception can also contribute to improving reproductive health. By having a good understanding of how to protect themselves from sexually transmitted diseases (STDs) and managing their reproductive health, women can take better care of their health and improve their quality of life. Women can make informed decisions and are supported by good

contraceptive knowledge. tend to have better control over their lives. This can have a positive impact on overall quality of life. Providing contraceptive knowledge to women of childbearing age has positive social and health impacts, giving them greater control over their bodies and reproductive lives. It is important to provide this information in a clear, accurate and supportive manner, so that women can make informed decisions for their needs and life goals.

Providing contraceptive knowledge to women of childbearing age is expected to increase their awareness of the various contraceptive methods available. This is important so that they can make choices that suit individual needs and preferences, knowledge about types of contraception. Women who gain contraceptive knowledge can understand the various types of contraception available, from pills, injections, IUDs, to natural contraceptive methods. This knowledge allows them to choose methods that suit their lifestyle, health, and family desires. Increased family control. With adequate knowledge, women of childbearing age can more effectively control their family plans. This gives them the freedom to determine the number of children desired, birth spacing, and overall pregnancy planning.

From the implementation of this activity, it is hoped that health professionals such as doctors or nurses will be involved in providing contraceptive information. Support collaboration between health professionals and women to achieve a better understanding of needs and available options. Include comprehensive sexual education in contraceptive information, including aspects such as healthy relationships, communication, and sexual satisfaction. Ensure women have easy and affordable access to a variety of contraceptive methods. Make use of digital media, such as websites, mobile apps, or social media platforms. , to disseminate contraceptive information in an attractive and accessible way. Taking these aspects into account, providing contraceptive knowledge can be more effective and relevant to the needs and desires of women of childbearing age.

## 5. Conclusion

Family **planning** plays a crucial role in promoting healthy and prosperous families by ensuring birth spacing and offering individuals the means to make informed choices about their reproductive health. The rapidly increasing population growth has led to several negative impacts, including food and nutrition scarcity, declining health levels, low education rates, and high unemployment. To address these challenges and reduce maternal mortality rates, the government has implemented family planning programs for couples of childbearing age. These programs aim to reduce the risk of maternal death by preventing pregnancies, delaying gestational age, and limiting the number of pregnancies.

Providing contraceptive knowledge is vital in reducing the risk of unwanted pregnancies and unsafe **abortions**. Women who have a clear understanding of contraception methods can make informed decisions to protect their reproductive health, prevent sexually transmitted diseases, and improve their overall quality of life. By increasing awareness about various contraceptive methods, women can choose the options that best suit their needs, lifestyle, and family desires.

To ensure the effective dissemination of contraceptive knowledge, it is essential to involve health professionals such as doctors and nurses who can provide accurate and supportive information. Collaborative efforts between health professionals and women should be encouraged to better understand individual needs and options available. Additionally, comprehensive sexual education should be integrated into contraceptive information, covering aspects such as healthy relationships, communication, and sexual satisfaction. Accessibility to a variety of contraceptive methods should be facilitated, and leveraging digital media platforms can help disseminate information in an appealing and

accessible manner. By considering these factors, providing contraceptive knowledge becomes more relevant and effective in meeting the needs and desires of women of childbearing age.

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