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## Overview Of The Use Of Modern Contraceptives Among Fertile Age Couples In Ngrandu Village

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### Abstract

*The continuous and uncontrolled population growth has a significant impact on demographic aspects and various sectors of life, including the health sector. Family Planning (KB) is one of the government's programs to reduce the birth rate through the use of contraceptives. This study was conducted to obtain an overview of modern contraceptive use among couples of childbearing age (PUS) in Ngrandu Village, reviewed from several demographic characteristics such as age, education level, and type of work. This study used a quantitative descriptive approach with secondary data obtained from the 2024 Self-Awareness Survey conducted by the Ngrandu Health Center. The research sample consisted of women aged 15–49 years who were married. Data analysis was conducted descriptively, and the data were presented in the form of frequency distribution tables and percentages. This study revealed that based on demographic characteristics such as age, education level, and employment status, the participation rate of couples of childbearing age in Ngrandu Village was still relatively low (34.94%). Based on demographic characteristics such as age, education level, and employment status, short-term contraception methods (non-MKJP) were the most widely used contraception methods (55%). Couples of reproductive age who frequently use short-term contraceptive methods (Non-MKJP) are in the 35-39 age group (13.79%) and the 40-44 age group (13.79%), have a high school education or equivalent (27.59%), and are unemployed/housewives (37.93%). Overall, the distribution of contraceptive use among couples of childbearing age in Ngrandu Village shows certain trends in these demographic characteristics. Therefore, it is necessary to develop and optimize reproductive health education and promotion activities, especially those related to contraceptive use among couples of childbearing age.*

**Keywords:** Contraceptive, Couples Of reproductive Age, MKJP, Non-MKJP.

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## INTRODUCTION

The world's continued population growth could pose serious challenges for human life in the future. According to the World Population Prospects report, the global population will reach approximately 8 billion by 2022 (Yunita et al., 2025). This number is projected to increase due to births and deaths. The continuing rise in population growth is a significant issue that requires special attention from various countries around the world. Increasing population growth has the potential to lead to new problems that impact the standard of living and well-being of a country's population (Maolana and Zaenuri, 2022) n..

Continuous and uncontrolled population growth is a critical issue frequently faced by developing countries, including Indonesia. Indonesia ranks fourth in the world in terms of population. According to the 2020 population census, Indonesia's population was 270.20 million. This figure represents an increase of 32.56 million compared to the population in 2010. (Central Statistics Agency, 2021) In 2020, the population of East Java, one of Indonesia's provinces, reached 40.67 million people. From 2010 to 2020, the population growth rate in East Java Province reached 0.79 percent per year. This figure is an increase compared to the population growth rate of 0.76 percent in the 2000-2010 period (Central Statistics Agency of East Java Province, 2021).

Continuous and uncontrolled population growth also impacts demographics and various sectors of life, including health. One cause of uncontrolled population growth is the high fertility rate. The rising birth rate is due to low public awareness of reproductive health and the use of contraception to reduce birth rates. Uncontrolled population growth will also result in increased maternal and infant mortality (Jihan et al., 2025).

In Indonesia, the government has attempted various ways to address the increasing population growth rate, one of which is by implementing the Family Planning (KB) program. Family Planning

(KB) is a practice that helps individuals or married couples achieve certain objectives, such as avoiding unwanted births, regulating the spacing or interval between pregnancies, controlling the timing of pregnancies within a husband and wife relationship, and determining the number of children in the family. (National Population and Family Planning Agency, 2020) One of the services in the Family Planning (KB) program is the installation and use of contraceptives, both hormonal and non-hormonal. This can be temporary or permanent, although each type of contraceptive has varying levels of success and effectiveness (Gustikawati in Yanti et al., 2023).

Strengthening the family planning program is a crucial strategy for achieving the Sustainable Development Goals (SDGs), particularly target 3.7, which guarantees universal access to sexual and reproductive health services. The level of achievement of family planning program services can be determined based on the number or coverage of family planning participants who are currently or have used contraceptives, the location of family planning services, and the type of contraceptive used by family planning acceptors (Ministry of Health in Yanti et al., 2023). Couples of childbearing age between the ages of 15 and 49 are encouraged to use contraception. This not only aims to control the birth rate, but also improves the family's quality of life and provides space for each family member to develop optimally (Riyanti et al., 2025).

According to the Regulation of the Population and Family Planning Agency of the Republic of Indonesia Number 18 of 2020 concerning Postpartum Family Planning Services, based on the duration of contraceptive methods are divided into two types, namely long-term contraceptive methods (MKJP) and short-term contraceptive methods (Non-MKJP). Long-term contraceptive methods (MKJP) include MOP, MOW, IUD, and AKBK or implants, while short-term contraceptive methods (Non-MKJP) include injections, pills, condoms, and the lactational amenorrhea method. Then based on composition, contraceptive methods are also divided into two, namely hormonal and non-hormonal contraceptive methods. Hormonal contraceptive methods include pills, injections, and implants, while non-hormonal contraceptive methods include tubectomy, vasectomy, IUD/IUD, condoms, and the lactational amenorrhea method.

According to data from the Central Statistics Agency (BPS), in 2023, 55.49 percent of married women in Indonesia aged 15-49 years used contraception. This figure represents an increase compared to the 2022 percentage of 55.36 percent. Based on the 2023 Indonesian Health Profile, the most widely used contraceptive method by fertile couples in Indonesia is short-term contraception (Non-MKJP), with injections at 35.3 percent, followed by pills at 13.2 percent. The use of long-term contraceptive methods (MKJP) such as IUDs, MOWs, and MOPs remains relatively low, at less than 10 percent each (Ministry of Health of the Republic of Indonesia, 2023)

East Java is one of 38 provinces in Indonesia that is strongly committed to implementing the Family Planning (FP) program. According to the 2023 Indonesian Health Profile, East Java ranks second in the country with the highest prevalence of fertile-age couples participating in family planning, at 67.5 percent (Ministry of Health of the Republic of Indonesia, 2023) According to the 2023 East Java Provincial Health Profile, 73.4 percent of fertile couples were registered as active modern family planning participants. The majority of fertile couples in East Java Province used short-term contraceptive methods (non-MKJP), with injections at 57.7 percent, followed by pills at 13.2 percent. The use of long-term contraceptive methods (MKJP) such as IUDs, MOWs, and MOPs remained relatively low, with each percentage being less than 10 percent (East Java Provincial Health Office, 2023)

Ponorogo Regency, as part of East Java Province, also supports the implementation of the Family Planning (KB) program at the regional level. Based on the 2023 East Java Provincial Health Profile, 69.1 percent of fertile couples in Ponorogo Regency were registered as active family planning participants using modern contraceptive methods. The majority of fertile couples in Ponorogo Regency used short-term contraceptive methods (Non-MKJP) with injections (43.9 percent), followed by the use of long-term contraceptive methods (MKJP) with IUDs (26.8 percent). The percentage of

use of long-term contraceptive methods (MKJP) with MOW and MOP types remained relatively low at 6.9 percent and 0.4 percent, respectively (East Java Provincial Health Office, 2023).

Based on the 2023 Ponorogo Regency Health Profile, the percentage of fertile-age couples as active family planning participants using modern contraceptive methods at the Ngrandu Community Health Center was 72.7 percent. This achievement figure has exceeded the achievement figure for the number of fertile-age couples actively participating in modern contraceptive methods in Ponorogo Regency in 2023. The majority of fertile-age couples in the Ngrandu Community Health Center's work area use short-term contraceptive methods (Non-MKJP) with injections at 40.5 percent, followed by the use of long-term contraceptive methods (MKJP), namely IUDs at 36.1 percent. The percentage of use of long-term contraceptive methods (MKJP) with MOW and MOP types is still relatively low at 5.2 percent and 0.1 percent, respectively (Ponorogo Regency Health Office, 2023) One of the villages covered by the Ngrandu Community Health Center is Ngrandu Village, which consists of five hamlets: Soko, Krajan, Ngeluk, Bulur, and Wates.

Most research related to family planning programs and the use of modern contraceptives in Indonesia tends to emphasize the analysis of determinants influencing the choice of contraceptive method. Descriptive research on contraceptive use based on characteristics such as age, education level, and occupation is still limited, especially in rural areas. This information is necessary to obtain a realistic picture of contraceptive use among fertile-age couples in a region. To date, no studies have been found describing contraceptive use among fertile-age couples in Ngrandu Village, Ponorogo Regency, East Java Province, based on demographic characteristics such as age, education level, and occupation. Therefore, the purpose of this study is to provide a picture of contraceptive use among fertile-age couples in Ngrandu Village based on demographic characteristics such as age, education level, and occupation.

## RESEARCH METHODS

This quantitative research with a descriptive approach was conducted to provide an overview of the use of modern contraceptives among fertile couples in Ngrandu Village, Ponorogo, East Java. The study location is within the Ngrandu Community Health Center (Puskesmas). This study uses secondary data obtained from the Self-Awareness Survey regarding Clean and Healthy Lifestyles conducted by the Ngrandu Community Health Center in 2024. The survey was conducted with a family observation unit, namely one family member was selected as a respondent to provide information about clean and healthy lifestyles for all family members. Data collection was conducted in January 2025.

The population in this study were women who lived and resided in Ngrandu Village and were recorded in the Self-Awareness Survey data related to Clean and Healthy Lifestyles conducted by the Ngrandu Community Health Center in 2024. Based on this population, a screening process was carried out to obtain a research sample, namely women aged 15-49 years who were married as a representation of couples of childbearing age. The variables analyzed in this study were the active status of contraceptive use, the type of modern contraceptive used, and demographic characteristics such as age, education level, type of employment, and place of residence. Data analysis and processing techniques were carried out descriptively quantitatively using Microsoft Excel software. Then, the data were presented in the form of frequency distribution tables and percentages. The research conducted has also obtained ethical permission from the Health Research Ethics Committee of the Faculty of Public Health, Airlangga University.

## RESULTS AND DISCUSSION

### Frequency Distribution of Active Status of Modern Contraceptive Use Based on Demographic Characteristics

**Table 1. Active Status of Modern Contraceptive Use Based on Age, Education Level, and Occupation**

Characteristics	Active Status of Modern Contraceptive Use			
	Using Contraceptives		Not Using Contraceptives	
	n	%	n	%
<b>Age Group (years)</b>				
15 - 19	0	0.00	0	0.00
20 - 24	1	1.20	1	1.20
25 - 29	4	4.82	4	4.82
30 - 34	3	3.61	7	8.43
35 - 39	7	8.43	8	9.64
40 - 44	9	10.84	13	15.66
45 - 49	5	6.02	21	25.30
<b>Total</b>	<b>29</b>	<b>34.94</b>	<b>54</b>	<b>65.06</b>
<b>Level of education</b>				
Did not graduate from elementary school/equivalent	0	0.00	1	1.20
Graduated from elementary school/equivalent	1	1.20	4	4.82
Graduated from junior high school/equivalent	7	8.43	25	30.12
Graduated from high school/equivalent	18	21.69	21	25.30
Graduated from D1/D2/D3/S1	3	3.61	3	3.61
<b>Total</b>	<b>29</b>	<b>34.94</b>	<b>54</b>	<b>65.06</b>
<b>Employment Status</b>				
Not working/Housewife	21	25.30	19	22.89
Work	8	9.64	35	42.17
<b>Total</b>	<b>29</b>	<b>34.94</b>	<b>54</b>	<b>65.06</b>

Based on Table 1, this study shows that of 83 married women aged 15-49 years who were recorded in the Self-Awareness Survey regarding Clean and Healthy Living Behavior Patterns conducted by the Ngrandu Community Health Center in 2024, 29 people (34.94%) used modern contraceptives and 54 people (65.06%) did not use contraceptives. The highest frequency of modern contraceptive users was in the 40-44 years age range (10.84%), with a high school/equivalent education (21.69%), and unemployed or housewives (25.30%). The highest frequency of non-users of contraceptives was in the 45-49 years age group (25.30%), with a junior high school/equivalent education (30.12%), and employed (42.16%).

### Frequency Distribution of Use of Modern Contraceptive Methods Based on Demographic Characteristics

**Table 2. Use of Modern Contraceptive Methods by Age**

Age Group (years)	Long-Term Contraceptive Methods (MKJP)										Short-Term Contraceptive Methods (Non-MKJP)									
	IUD		AKBK/Implant				MOP MOW				Total		Inject		Pill		Condom		Total	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
15 - 19	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
20 - 24	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1	3.45	0	0.00	0	0.00	1	3.45
25 - 29	3	10.34	0	0.00	0	0.00	0	0.00	3	10.34	1	3.45	0	0.00	0	0.00	1	3.45	1	3.45
30 - 34	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	3	10.34	0	0.00	0	0.00	3	10.34	3	10.34
35 - 39	2	6.90	0	0.00	0	0.00	1	3.45	3	10.35	3	10.34	0	0.00	1	3.45	4	13.79	4	13.79
40 - 44	3	10.34	1	3.45	0	0.00	1	3.45	5	17.24	1	3.45	0	0.00	3	10.34	4	13.79	4	13.79
45 - 49	2	6.90	0	0.00	0	0.00	0	0.00	2	6.90	0	0.00	1	3.45	2	6.90	3	10.35	3	10.35

The use of modern contraceptives is divided into two methods: long-term and short-term. Based on Table 2, this study shows that the highest frequency of MCH users is in the 40-44 year age range (17.24%), followed by the 35-39 year age range (10.35%) and 25-29 year age range (10.34%). IUDs are the most commonly used type of MCH, with a percentage of 34.48%. The highest frequency of modern non-MCH users is in the 35-39 year age range (13.79%) and 40-44 year age range (13.79%). Injectables are the most commonly used type of non-MCH, with a percentage of 31.03%.

**Table 3. Use of Modern Contraceptive Methods Based on Education Level**

Level of education	Long-Term Contraceptive Methods (MKJP)										Short-Term Contraceptive Methods (Non-MKJP)									
	IUD		AKBK/Implant				MOP MOW				Total		Inject		Pill		Condom		Total	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Did not graduate from elementary school/Islamic elementary school	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Graduated from elementary school/equivalent	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1	3.45	0	0.00	1	3.45	1	3.45
Graduated from junior high school/equivalent	1	3.45	1	3.45	0	0.00	1	3.45	3	10.35	0	0.00	0	0.00	4	13.79	4	13.79	4	13.79
Graduated from high school/equivalent	9	31.03	0	0.00	0	0.00	1	3.45	10	34.48	6	20.69	0	0.00	2	6.90	8	27.59	8	27.59
Graduated from D1/D3/D3/S1	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	3	10.34	0	0.00	0	0.00	3	10.34	3	10.34

Based on Table 3, this study shows that the educational level with the highest frequency of MKJP users is high school/equivalent (34.48%), followed by junior high school/equivalent (10.35%). IUDs are the most commonly used type of MKJP, with a percentage of 34.48%. The highest frequency of non-MKJP users is also at the high school/equivalent level (27.59%), followed by junior high school/equivalent (13.79%). Injections are the most commonly used type of non-MKJP, with a percentage of 31.03%.

**Table 4. Use of Modern Contraceptive Methods Based on Employment Status**

Employment Status	Long-Term Contraceptive Methods (MKJP)										Short-Term Contraceptive Methods (Non-MKJP)							
	IUD		AKBK/Implant		MOP		MOW		Total		Inject		Pill		Condom		Total	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Not working/housewife	9	31.03	0	0.00	0	0.00	1	3.45	10	34.48	6	20.69	0	0.00	5	17.24	11	37.93
Work	1	3.45	1	3.45	0	0.00	1	3.45	3	10.35	3	10.35	1	3.45	1	3.45	5	17.25

Based on Table 4, this study found that the highest frequency of MKJP users were unemployed or housewives (34.48%). IUDs were the most commonly used type of MKJP, with a percentage of 34.48%. The highest frequency of non-MKJP users was also unemployed or housewives (37.93%). Injections were the most commonly used type of non-MKJP, with a percentage of 31.03%.

**DISCUSSION**

**Active Status of Modern Contraceptive Use by Age Group**

The use of contraceptives by couples of childbearing age is one of the services in the family planning program, which aims to control population growth in Indonesia. Furthermore, it can suppress the birth rate and reduce the risk of unwanted pregnancies, thereby improving family welfare in Indonesia. The government, from the central to regional levels, remains strongly committed to supporting the implementation of the family planning program, including through the use of contraceptives, especially among couples of childbearing age. Despite this widespread implementation, the level of contraceptive use among couples of childbearing age, particularly in rural areas, remains low.

Research has shown that 54 fertile couples in Ngrandu Village do not use contraception, while 29 use modern contraception. This indicates that the level of participation or involvement of fertile couples in Ngrandu Village in the Family Planning program through the use of contraception is still relatively low. Based on Green and Kreuter's theory, the use of contraception in a person can be influenced by various factors such as age, education level, knowledge, number of living children, availability of contraception, support from health workers, agreement between husband and wife, and side effects caused by the use of contraception (Green in Ulfah et al., 2024).

Besides influencing a person's behavior regarding contraceptive use, age is also a factor that determines a person's ability to reproduce. A mature age at the start of marriage and pregnancy has a positive impact on a person's level of readiness and maturity in facing issues or problems, including the decision to use contraceptives (Manuaba in Hasanah, Hakim and Annisa, 2023). Research has shown that the 40-44 age group is the highest user of contraceptives. This finding aligns with research findings Zaen (2022) which states that the 35-44 age group has the highest rate of contraceptive use. Fertile couples over 35 prefer to avoid pregnancy for various reasons, such as health conditions, medical advice, and so on. Firmansyah et al. (2020) also supports the research findings by showing that in East Nusa Tenggara and East Java, women of childbearing age in the 40-44 year age range are 1.562 and 1.678 times more likely to use contraception, respectively, compared to women of childbearing age aged 45-49 years.

The 45-49 age group represents the highest percentage of non-users of contraceptives. This study's findings align with those of Rohmah et al. (2021), who found that women of childbearing age aged 45-49 in rural Indonesia were 0.199 times more likely to use contraceptives than women of childbearing age aged 15-19. This suggests that women of childbearing age in rural areas aged 45-49 are less likely to use contraceptives than those aged 15-19.

**Active Status of Modern Contraceptive Use Based on Education Level**

Education plays a role in shaping how a person acts and finds the causes and solutions to problems in their daily lives. A person with a higher level of education tends to act more rationally. Furthermore, a person with a higher level of education also tends to be more receptive to new

information and ideas, including those related to family planning and contraceptive use, which aim to improve family well-being (Saragih in Henni Purnasari et al., 2023).

Research that has been conducted shows the discovery that the highest number of contraceptive users is at the high school/equivalent education level, while non-contraceptive users are ... non-contraceptive users are at the junior high school/equivalent level. This finding is in line with the research results Firmansyah et al. (2020) which states that in East Nusa Tenggara and East Java, women of childbearing age with an education higher than junior high school or equivalent are 1.530 and 0.745 times more likely to use contraceptives, respectively, compared to women of childbearing age with no education. Higher levels of education also make it easier for someone to manage the information they receive. This can also influence an increase in knowledge within a person so that they can also make the right decisions, including regarding the use of contraceptives. Conversely, lower levels of knowledge can limit a person's ability and development of attitudes in accepting new information and values (Hasanah, Hakim and Annisa, 2023)

### **Active Status of Modern Contraceptive Use Based on Employment Status**

A person who works will need a lot of time to complete tasks they consider important. This results in someone busy with work having little time or opportunity to obtain information, especially regarding the use of contraceptives, resulting in less knowledge about it (Hasanah, Hakim and Annisa, 2023). Research has shown that the highest employment status of contraceptive users is unemployed or housewives, while the highest employment status of non-contraceptive users is employed. This finding aligns with the results of other studies. Pertiwi et al. (2024) which states that contraceptive users are predominantly unemployed mothers. In this regard, housewives generally have the free time to seek information in their communities and surrounding areas regarding contraceptive use, which can influence their decision to use contraceptives.

### **Use of Modern Contraceptive Methods by Age Group**

Based on the duration of use, contraceptive methods are divided into two types: long-term contraceptive methods (MKJP) and short-term contraceptive methods (Non-MKJP). Choosing the right contraceptive method is crucial for couples of childbearing age, as it not only benefits reproductive health but also plays a crucial role in achieving family well-being. In practice, couples of childbearing age must choose the right contraceptive method to their individual needs and physical conditions to ensure safe and effective use (Permatasari and Winanjaya, 2022).

Research has shown that fertile couples in Ngrandu Village use both long-term and short-term contraceptive methods (Non-MKJP). The 40-44 age group is the highest user group for long-term contraceptive methods. The IUD is the most commonly used type of long-term contraceptive method. This finding aligns with research by Putri and Ronoatmodjo (2023), which states that women aged 35-49 are 1.6 times more likely to use long-term contraceptive methods than women aged 15-34. Older women tend not to want to have more children, which can also influence their behavior regarding choosing a more effective contraceptive method to prevent pregnancy. Older women also tend to have a higher risk of complications during pregnancy and childbirth, such as hypertension, obesity, preeclampsia, miscarriage, low birth weight (LBW), and even infant and maternal mortality. Therefore, the use of long-term contraceptive methods to prevent pregnancy in older age is crucial for fertile couples (Putri and Ronoatmodjo, 2023).

The highest number of non-MKJP users is also in the 35-39 and 40-44 age ranges, with the most common types of MKJP used being injectables and condoms. According to the research, Mekonnen and Tegegne (2022), The most preferred contraceptive method among middle-aged women in Ethiopia, aged 35-39, is the short-acting injectable method. This is because injectables are a safe contraceptive option for premenopausal women, especially those who cannot use estrogen. Furthermore, short-acting injectables are often recommended by health professionals because they are suitable and safe for use up to the age of 55 (Mekonnen and Tegegne, 2022).

### **Use of Modern Contraceptive Methods Based on Education Level**

Research conducted on educational characteristics shows that the highest number of MKJP and non-MKJP users are women of childbearing age with a high school education or equivalent. According to the study, Ganoli et al. (2025), the highest number of MKJP users are at the secondary education level, namely SMA/SMK (40.4%), while the research Atik et al. (2023), also showed that the majority of fertile couples using non-MKJP had a high school education (55.5%). This indicates a balance in education levels between MKJP and non-MKJP users. A person's most recent educational background cannot be used as a benchmark for choosing a contraceptive method. Mayangsari, Susilaningrum, and Pipitcahyani (2022) revealed that the education level of active family planning acceptors was not associated with the use of MKJP (p-value 0.945). This is in contrast to the research Hartati and Tripertiwi (2025), which revealed that the level of education was significantly related to the use of MKJP, with a sig-p value of 0.005 ( $< 0.05$ ).

According to Notoatmodjo, education is one of the main factors that can influence a person's health behavior, including decisions regarding contraceptive use. A person with a higher level of formal education will have greater access to and understanding of information, including information related to reproductive health, thus enabling them to use contraceptive methods that are more appropriate and effective (Notoatmodjo in Hartati and Tripertiwi, 2025). However, a person's level of knowledge does not depend entirely on their level of formal education. This is because the ever-evolving era makes it easier for people to access information from anywhere. Even if someone has a low level of formal education, increased knowledge can also be obtained through counseling activities related to the use of contraceptive methods conducted by health workers (Dewi Kavita in Mayangsari, Susilaningrum, and Pipitcahyani, 2022).

### **Use of Modern Contraceptive Methods Based on Employment Status**

Research conducted on employment status characteristics shows that the highest number of MKJP and non-MKJP users are unemployed or housewives. This finding aligns with the results of other studies. Pertiwi et al. (2024) which revealed that the majority of mothers who do not work choose to use MKJP (44.4%) and Non-MKJP (55.6%). This is also reinforced by research Mayangsari, Susilaningrum, and Pipitcahyani (2022) which stated that the employment status of active family planning acceptors was not related to the use of MKJP in the Pandean Village area ( $p = 0.739$ ). However, this is inversely proportional to the research Jasa, Listiana and Risneni (2021) which states that there is a relationship between the choice of using MKJP and the mother's occupation (p-value 0.003).

The highest number of MKJP and non-MKJP users are fertile couples who are unemployed or housewives. This is because housewives tend to have free time to participate in health education activities and thus have a wealth of information, especially regarding contraceptive use. Housewives also tend to exchange information with those around them, which influences their decision-making regarding choosing a contraceptive method that suits their needs. Furthermore, the Family Planning Safari program organized by the National Population and Family Planning Board (BKKBN) with free MKJP installation services can attract housewives to use MKJP (Mayangsari, Susilaningrum, and Pipitcahyani, 2022).

## **CONCLUSION**

Research has shown that the participation rate of fertile couples in Ngrandu Village is still relatively low. The frequency distribution of active contraceptive use and the type of contraceptive method used was reviewed based on several demographic characteristics, such as age, education level, and employment status. The highest frequency of contraceptive users was in the 40-44 year age group, with a high school education or equivalent, and unemployed or housewives. The highest frequency of non-contraceptive users was in the 45-49 year age group, with a junior high school education or equivalent, and employed.

The use of short-term contraceptive methods (Non-MKJP) among fertile couples in Ngrandu Village is more dominant than long-term contraceptive methods (MKJP). The highest frequency of MKJP users is in the 40-44 year age range, with a high school education/equivalent, and unemployed or housewives. The highest number of Non-MKJP users are in the 35-39 year age range and 40-44 year age range, with a high school education/equivalent, and unemployed or housewives. When reviewed based on the characteristics of age, education level, and employment status, the most commonly used type of MKJP is the IUD, while the most commonly used type of Non-MKJP is the injectable. Overall, the distribution of contraceptive use by fertile couples in Ngrandu Village shows certain trends in several demographic characteristics such as age, education level, and employment status. This can be taken into consideration by policymakers in developing family planning programs in rural areas.

The Ngrandu government and community health center are advised to develop and optimize reproductive health education and promotion activities, particularly those related to the use of contraceptive methods. These activities can be focused on couples of childbearing age who are not yet registered as family planning participants or contraceptive users. Furthermore, the village government is also expected to support the optimal implementation of the Family Planning (FP) program by providing access to information and services, especially for women of childbearing age. For further research, it is recommended to conduct a descriptive study of contraceptive use, taking into account other characteristics such as level of knowledge, number of children, and family support.

## REFERENCES

- Atik, S., Palupi, J., Prijatni, I., & Wahidiah, AZ (2023). Factors Influencing the Choice of Non-MKJP Contraceptives in PUS. *Journal of Health Sciences*, 4(2), 123–132. <https://www.arteri.sinergis.org/arteri/article/view/267/126>
- Central Statistics Agency. (2021). Results of the 2020 Population Census. Central Statistics Agency. <https://demakkab.bps.go.id/news/2021/01/21/67/hasil-sensus-penduduk-2020.html>
- Central Statistics Agency. (2023). Percentage of Married Women Aged 15-49 Who Are Currently Using/Using Contraceptives (Percent). <https://www.bps.go.id/id/statistics-table/2/MjE4IzI=/percentage-of-women-aged-15-49-years-and-married-who-are-using-contraceptives.html>
- Central Statistics Agency of East Java Province. (2021). Results of the 2020 Population Census of East Java. Population of East Java Results of the 2020 Population Census (SP2020), 1–21. <https://jatim.bps.go.id/pressrelease/2021/01/21/1224/jumlah-penduduk-jawa-timur-hasil-sensus-penduduk-2020-sp2020-sebesar-40-67-juta-orang.html>
- East Java Provincial Health Office. (2023). East Java Provincial Health Profile 2023.
- Firmansyah, DC, Nadillah, F., Pratama, FRA, & Ningsih, NLPYS (2020). Comparative Analysis and Socio-Demographic Determinants of Contraceptive Use among Women of Childbearing Age (WUS) in East Nusa Tenggara and East Java Provinces. *Journal of Statistics and Its Applications*, 4(1), 35–47. <https://doi.org/10.21009/jsa.04104>
- Ganoli, W., Widya, W., Herawati, N., & DIII Midwifery Study Bandung Midwifery Academy, P. (2025). Overview of Knowledge of Fertile Age Couples About Long-Term Contraceptive Methods (MKJP) in PMB R Bogor City in 2024. *Midwifery Innovation Journal*, 1(1), 58–69. <https://journal.univummibogor.ac.id/index.php/MIJ>
- Hartati, D., & Tripertiwi, S. (2025). Factors Influencing the Selection of Long-Term Contraceptive Methods (MKJP) in KB Acceptors at the Babulu Community Health Center (UPTD). *Innovative: Journal of Social Science Research*, 5(2), 3556–3571.
- Hasanah, U., Hakim, AN, & Annisa, M. (2023). Determinants of Contraceptive Choice in Childbearing Couples as an Effort to Suppress Baby Boomers During the Covid-19 Pandemic

- in Waru Parung Village, Bogor. *Edu Dharma Journal: Journal of Research and Community Service*, 7(1), 56. <https://doi.org/10.52031/edj.v7i1.525>
- Henni Purnasari, Ardayani, T., & Triana, H. (2023). Factors Influencing Family Planning Acceptors in the Use of IUD Contraceptives in Babakan Ciparay Village. *Journal of Vocational Nursing (JVK)*, 6(1), 88–99. <https://doi.org/10.33369/jvk.v6i1.27300>
- Jasa, NE, Listiana, A., & Risneni, R. (2021). Parity, Occupation, and Education Are Associated with the Choice of MKJP Contraceptives in KB Acceptors. *Malahayati Midwifery Journal*, 7(4), 744–750. <https://doi.org/10.33024/jkm.v7i4.5243>
- Jihan, S., Fistabella, A., Info, A., & History, A. (2025). Collaborative Governance in the Family Planning (KB) Program in Controlling Population Growth Rate in Jagir Village, Surabaya City. 8(April), 3753–3760.
- Ministry of Health of the Republic of Indonesia. (2023). Indonesian Health Profile 2023.
- Maolana, LAC, & Zaenuri, M. (2022). Implementation of the Family Planning Village Program in Reducing Population Growth in NTB Based on Governor Regulation Number 6 of 2019. *JISIP UNJA (Journal of Social and Political Sciences, University of Jambi)*, 6(1), 51–63. <https://doi.org/10.22437/jisipunja.v6i1.17330>
- Mayangsari, DK, Susilaningrum, R., & Pipitcahyani, TI (2022). The Relationship between Age, Knowledge, Education, Occupation, and Culture of Active Family Planning Acceptors and Long-Term Contraceptive Use. *Echo of Indonesian Midwives*, 11(3), 84–90. <https://doi.org/10.36568/gebindo.v11i3.86>
- Mekonnen, B.D., & Tegegne, B.M. (2022). Modern contraceptives use and associated factors among perimenopausal women in Ethiopia. *Pan African Medical Journal One Health*, 7. <https://doi.org/10.11604/pamj-oh.2022.7.25.32564>
- National Population and Family Planning Agency. (2020). National Population and Family Planning Agency Regulation Number 18 of 2020 Concerning Postpartum Family Planning Services. National Population and Family Planning Agency.
- Permatasari, DI, & Winanjaya, R. (2022). Analysis of Decision Support Systems in the Selection of Contraceptive Devices in Fertile Age Couples Using the MOORA Method. *Fatimah: Application of Technology and Computer Systems*, 1(1), 21–28.
- Pertiwi, Y., Ardiani, Y., Julianingsih, I., & Adila, WP (2024). The Relationship Between Age, Education, and Occupation with the Choice of Long-Term Contraceptive Methods (LCMs). *Health Care: Jurnal Kesehatan*, 13(2), 287–294. <https://doi.org/10.36763/healthcare.v13i2.512>
- Ponorogo Regency Health Office. (2023). Ponorogo Regency Health Profile 2023. 1–233.
- Putri, NA, & Ronoatmodjo, S. (2023). Factors Associated with the Use of Long-Term Contraceptive Methods (LCMs) in Women Aged 15-49 Years in Rural Areas in Indonesia (2017 SDKI Data Analysis). *Journal of Public Health*, 11(5). <https://doi.org/10.14710/jkm.v11i5.38572>
- Riyanti, FA, Ali, MS, Sukandini, I., & Rohamah, S. (2025). LITERATURE REVIEW: PREVENTIVE EFFORTS RELATED TO FAMILY PLANNING AND CONTRACEPTION. 9(1), 30–36.
- Yanti, EM, Wirastri, D. & Supiani. (2023). Education on the Importance of Family Planning (FP) in Improving Knowledge and Selection of Contraceptives in Women of Childbearing Age (WUS) in Anjani Timur Hamlet, Anjani Village, Suralaga District, East Lombok Regency. *Indonesian Journal of Community Dedication (IJCD)*, 5(1), 7–12.
- Yunita, A., Liya Ni'matul Maula, Dily Ekasari, & Ahmad Wasis Setyadi. (2025). Health Education About Types of Contraceptives for Women of Childbearing Age. *Jurnal Abdimas Pamenang*, 3(1), 71–77. <https://doi.org/10.53599/jap.v3i1.303>
- Zaen, NA (2022). The Relationship Between Age, Education Level, and Residential Area Towards Contraceptive Use in Married Women in Indonesia. *Journal of Biometrics and Population*, 11(1), 1–10. <https://doi.org/10.20473/jbk.v11i1.2022.1-10>