

The Influence of Contextual Factors on Long-Term Contraceptive Use in East Java

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Abstract : The access to reproduction health services, including with safe and effective contraception were human rights regardless of social stratum and residence. In addition to individual factors, family and contextual factors were also believed to be the cause in the use of contraceptive methods. This study aimed to assess the determinants of long-term contraceptive methods (LTCM) by considering all the factors at either the individual level or contextual level. Thereby, this study could provide basic information for program development of prevalence enhancement of MKJP in East Java. The research, which used cross-sectional design, utilized Riskesdas 2013 data, particularly in East Java Province for further analysis about multilevel modeling of MKJP application. The sample of this study consisted of 20.601 married women who were not in pregnant that were drawn by using probability sampling following the sampling technique of Riskesdas 2013. Variables in this study were including the independent variables at the individual level that consisted of education, age, occupation, access to family planning services (KB), economic status and residence. As independent variables in district level were the Human Development Index (HDI, henceforth as IPM) in each districts of East Java Province, the ratio of field officers, the ratio of midwives, the ratio of community health centers and the ratio of doctors. As for the dependent variable was the use of Long-Term Contraceptive Method (LTCM or MKJP). The data were analyzed by using chi-square test and Pearson product moment correlation. The multivariable analysis was using multilevel logistic regression with 95% of Confidence Interval (CI) at the significance level of $p < 0.05$ and 80% of strength test. The results showed a low CPR LTCM was concentrated in districts in Madura Island and the north coast. The women which were 25 to 35 or more than 35 years old, at least high school education, working, and middle-class social status were more likely to use LTCM or MKJP. The IPM and low PLKB ratio had implications for poor CPR LTCM / MKJP.

Keywords : multilevel, long-term contraceptive methods, east java, contextual factor

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