Satisfaction Of Fp Accepters With Fp Services At Rice Basah Puskesmas, Pangkalan Susu Subdistrict In 2021

Siti Nurmawan Sinaga

STIKes Mitra Husada, Medan, Indonesia

ARTICLE INFO

Keywords: Satisfaction, Family Planning Acceptors, Family Planning Services

ABSTRACT

Satisfaction is a level of patient feeling that arises as a result of the performance of health services that he gets after the patient compares with what he expects, especially family planning services. Family planning services aim to create quality families through planning the number of families in a planned manner. This study aims to identify the satisfaction of family planning acceptors with family planning services in the area of the Beras Basah Health Center, Langkat Regency which is assessed from five aspects of the quality of health services, namely reality, reliability, responsiveness, assurance and counseling. This study uses a descriptive design with a sample of 73 people, sampling through accidental sampling technique. The study was conducted from February to April 2010. Data was collected using a questionnaire as a research instrument to measure the satisfaction of family planning acceptors with family planning services in the area of the Beras Basah Health Center, Langkat Regency. In this study, the data were analyzed descriptively and presented in the form of frequency and percentage distribution tables. The results showed that of the 73 respondents, there were 47% of acceptors who had a high level of satisfaction, 52% of acceptors who had a moderate level of satisfaction and 1% of acceptors who had a low level of satisfaction with family planning services in the area of the Beras Basah Health Center, Langkat Regency, especially in the aspect of responsiveness and counseling. The implications of this research in terms of the implementation of family planning services carried out by midwives need to be improved again in order to achieve a sense of satisfaction for the acceptors with the services provided.

E-mail: sitinurmawan18@gmail.com

Copyright © 2020 Science Midwifery.

1. Introduction

The family planning program in Indonesia before and after the implementation of the International Conference on Population and Development (ICPD) in Cairo in 1994 experienced real changes. In the 70’s to early 90’s, family planning services placed great emphasis on the demographic aspect, namely controlling the birth rate. One of the main aspects of the family planning program was the quality of the services provided. Improving the quality of service will increase the number of satisfied family planning participants and will increase the prevalence and reduce the birth rate (BKKBN, 2005).

According to the WHO report (2016) satisfaction with contraceptive use has increased in many parts of the world, especially in Asia and Latin America and is lowest in Sub-Saharan Africa. Globally, satisfaction with modern contraceptive users has increased insignificantly from 54% in 1999 to 57.4% in 2016. Regionally, the proportion of couples of childbearing age 15-49 years reporting dissatisfaction with the use of modern contraceptive methods has increased for at least the last 6 years. In Africa from 23.6% to 27.6%, in Asia it has increased from 60.9% to 61.6%, while in Latin America and the Caribbean it has increased slightly from 66.7% to 67.0%. The unmet need for contraception is still too high. Inequality is driven by population growth. (WHO, 2016)
According to the North Sumatra BKKBN, new participants in 2008 reached 108,014 participants or 66.11%. From the achievement of 108,014 new KB participants, namely IUD reached 10,773 participants or 5.98%, MOP reached 351 participants or 0.19%, MOW reached 4,560 participants or 2.53%, condoms reached 13,545 participants or 7.52%, implants reached 120,109 participants or 6.73%, injections reached 72,090 participants or 40.05% and pills reached 66,586 participants or 36.99%.

According to the BKKBN, the reality on the ground shows a tendency for family planning services to decline, so that acceptors are less satisfied with the services provided. Based on the 2002 BKKBN survey, less than 10% of the available facilities did not meet quality standards in providing services to family planning participants and potential family planning participants, which could potentially endanger clients and result in low family planning participants (BKKBN, 2005). Access to quality family planning services is an effort to achieve reproductive health services. Specifically, this includes the right of everyone to obtain information and access to various methods of contraception that are safe, effective and affordable (Saifudin, 2004).

Family planning services aim to create quality families through planning the number of families in a planned manner in an effort to create small families. Family planning has a role in reducing the risk of maternal death through preventing pregnancy, delaying pregnancy, spacing pregnancies or limiting pregnancies if the child is considered sufficient. Thus family planning services are the most basic and primary preventive health service efforts (Asri, et al. 2008). According to Imbalo (2006), satisfaction is a level of patient feelings that arise as a result of the performance of the health services they receive after the patient compares them with what they expect. There are several factors that can be considered by customers in assessing a service, namely timeliness, reliability, technical capabilities, expectations, quality and commensurate price.

The acceptor will feel satisfied or dissatisfied with the services provided depending on how the approach is taken by the health worker, because through this approach the officer assists the client in choosing and deciding which type of contraception to use and according to his wishes, makes the client feel more satisfied, increases relationship and trust that already exists between officers and clients, assisting clients in using contraceptives longer and increasing the success of family planning (Saroha, 2009).

The results of an initial survey conducted by researchers in December 2019 in Pangkalan Susu District, found that out of 8 family planning acceptors 5 people stated they were dissatisfied with family planning services because the midwives did not understand family planning counseling so that many acceptors did not understand about the contraception they were using. For this reason, researchers are interested in conducting research with the title Family Planning Acceptor Satisfaction with Family Planning Services at the Beras Basah Health Center, Pangkalan Susu District, 2021.

2. Method

This type of research uses observational analytic research methods. Analytical research is research that aims to find relationships between variables. Observational is observing or measuring and recording the events being studied in an observation sheet that contains the variables to be studied. The research time approach is cross-sectional, namely collecting data at one time, meaning that each research object is only observed once and measurements are made of a character or subject variable at the time of the study. (Notoatmojo, 2017).

| Characteristics | Frequency | Percentage |
|-----------------|-----------|------------|
| Age             |           |            |
| 18-22 years     | 7         | 9%         |
| 23-27 years     | 11        | 15%        |
| 28-32 years     | 21        | 29%        |
| 33-37 years     | 19        | 26%        |
| 38-42 years     | 10        | 14%        |
| 43-47 years     | 5         | 7%         |
Table 2.
Distribution of Frequency and Percentage of Satisfaction with Family Planning Acceptors
Family planning services in the Beras Basah Community Health Center, Langkat Regency

| No | Statement                                                                 | Answer | SP | %  | P | %  | TP | %  | STP | %  |
|----|---------------------------------------------------------------------------|--------|----|----|---|----|----|----|-----|----|
|    | Reality                                                                    |        |    |    |   |    |    |    |     |    |
| 1  | Room used for convenient family planning services.                        |        |    |    |   |    |    |    |     |    |
|    |                                                                          |        | 4  | 5.50| 5 | 6.85| 2  | 2.73| 0   | 0  |
| 2  | Contraceptive materials and tools in the clinic are very good complete     |        |    |    |   |    |    |    |     |    |
|    |                                                                          |        | 3  | 4.1 | 7 | 9.58| 4  | 5.50| 0   | 0  |
| 3  | The medicine or contraceptive device that will be given to you is still in its condition sealed. |        |    |    |   |    |    |    |     |    |
|    |                                                                          |        | 7  | 9.58| 8 | 11  | 2  | 2.73| 0   | 0  |
| 4  | All tools that will be used by internal midwives clean and in a closed container. |        |    |    |   |    |    |    |     |    |
|    |                                                                          |        | 9  | 12.32| 9 | 12.32| 5 | 6.85| 0   | 0  |
| 5  | Before doing action, midwife always wash hands and put on gloves.         |        |    |    |   |    |    |    |     |    |
|    |                                                                          |        | 4  | 5.50| 3 | 4.1 | 1  | 1.36| 0   | 0  |
|    | Average totals                                                             |        |    |    |   |    |    |    |     |    |
|    |                                                                          |        | 27 | 37 | 32 | 43.8 | 14 | 19.2| 0   | 0  |
|    | reliability                                                                |        |    |    |   |    |    |    |     |    |
| 6  | Once you get to the clinic you are directly served by a midwife.           |        |    |    |   |    |    |    |     |    |
|    |                                                                          |        | 5  | 6.85| 10 | 13.69| 2  | 2.73| 1   | 1.4|
| 7  | Midwives quickly provide appropriate family planning services with your needs. |        |    |    |   |    |    |    |     |    |
|    |                                                                          |        | 3  | 4.1 | 7 | 9.58| 1  | 1.36| 0   | 0  |
|   |   |   |   |   |   |
|---|---|---|---|---|---|
| **8** | Midwives skilled in family planning services provided to you. | 7 | 9.58 | 8 | 11 |
| **9** | Family planning services provided by midwives are very good satisfying. | 6 | 8.21 | 5 | 6.85 |
| **10** | KB services in given by the midwife is applied properly | 4 | 5.50 | 4 | 5.50 |
| **Average totals** |   | 25 | 34.2 | 34 | 46.6 |
| **C** | responsiveness |   |   |   |   |
| **11** | Midwives respond with complaints that arise in you. | 6 | 8.21 | 9 | 12.32 |
| **12** | Midwives solve your problems and complaints regarding contraception what you use. | 2 | 2.73 | 3 | 4.1 |
| **13** | Midwives immediately give advice and advice on your complaints regarding the contraception you are using. | 4 | 5.50 | 5 | 6.85 |
| **14** | Midwives are able to answer all your questions regarding contraceptive problems and complaints you use. | 5 | 6.85 | 8 | 11 |
| **15** | The midwife immediately informs you of the process of family planning services that will be provided according to the type of contraception which you choose. | 5 | 6.85 | 2 | 2.73 |
| **Average totals** |   | 22 | 30.1 | 27 | 37 |
| **D** | Guarantee |   |   |   |   |
| **16** | Confidentiality and privacy you are very well cared for by midwives. | 5 | 6.85 | 9 | 12.32 |
| **17** | KB services given by the midwife according to your needs. | 5 | 6.85 | 8 | 11 |
| **18** | You believe in family planning services given by the midwife. | 3 | 4.1 | 9 | 12.32 |
| **19** | KB services provided by midwives at affordable prices. | 7 | 9.58 | 5 | 6.85 |
| **20** | Family planning services by midwives guarantee a sense of security and convenience for you. | 3 | 4.1 | 6 | 8.21 |
| **Average totals** |   | 23 | 53.7 | 50.7 | 13 |
| **E** | Counseling |   |   |   |   |
| **21** | Midwives are friendly and polite when communicating with you and always listen to your complaints carefully. | 5 | 6.85 | 8 | 11 |
| **22** | The explanation given by the midwife is according to your needs and easy to understand. | 4 | 5.50 | 5 | 6.85 |
| **23** | The midwife explains the various methods of contraception at the time you want to use them and changing contraceptive methods. | 8 | 11 | 4 | 5.50 |
| **24** | Midwives explain to you the advantages and disadvantages of all | 2 | 2.73 | 3 | 4.1 |

---

Midwives skilled in family planning services provided to you.

Family planning services provided by midwives are very good satisfying.

KB services in given by the midwife is applied properly.

Average totals

**C** responsiveness

Midwives respond with complaints that arise in you.

Midwives solve your problems and complaints regarding contraception what you use.

Midwives immediately give advice and advice on your complaints regarding the contraception you are using.

Midwives are able to answer all your questions regarding contraceptive problems and complaints you use.

The midwife immediately informs you of the process of family planning services that will be provided according to the type of contraception which you choose.

Confidentiality and privacy you are very well cared for by midwives.

KB services given by the midwife according to your needs.

You believe in family planning services given by the midwife.

KB services provided by midwives at affordable prices.

Family planning services by midwives guarantee a sense of security and convenience for you.

Midwives are friendly and polite when communicating with you and always listen to your complaints carefully.

The explanation given by the midwife is according to your needs and easy to understand.

The midwife explains the various methods of contraception at the time you want to use them and changing contraceptive methods.

Midwives explain to you the advantages and disadvantages of all.
Satisfaction of family planning acceptors in family planning services in the Beras Basah Community Health Center in Langkat Regency as seen from the results of the respondents' answers to the family planning service questionnaire which consisted of 5 aspects namely Reality, Reliability, Responsiveness, Assurance, and Counseling.

Based on the reality aspect, the results showed that 43.8% of acceptors were satisfied with the conditions stating that the room was comfortable, the tools were complete, the drugs or contraceptives were still sealed, all the tools were clean, the midwife washed her hands and wore gloves. Based on the reliability aspect, the results showed that 46.6% of acceptors were satisfied with the conditions which stated that midwives served immediately, midwives quickly provided services as needed, midwives were skilled, services provided by midwives were satisfactory and services provided by midwives were well implemented. Based on the responsiveness aspect, the results showed that 37% of acceptors were satisfied with the condition which stated that midwives were responsive to complaints that arose, midwives resolved problems, midwives gave suggestions and advice, midwives are able to answer all questions and midwives immediately tell the services to be provided. Based on the guarantee aspect, the results showed that 50.7% of acceptors were satisfied with the conditions which stated that confidentiality and privacy were highly guarded by midwives, services provided were as needed, acceptors believed in the services provided, affordable prices, midwives guaranteed a sense of security and comfort. Based on the counseling aspect, the results showed that 39.7% of acceptors were satisfied with the conditions stating that midwives were friendly and polite when communicating and listening to complaints well, explanations were delivered as needed and easy to understand, midwives explained various contraceptive methods they wanted to use and replace contraceptive method, the midwife explained the side effects and how to use it.

Table 3.
Distribution of Frequency and Percentage of Satisfaction with Family Planning Acceptors
Family planning services in the Beras Basah Community Health Center, Langkat Regency

| Characteristics            | Frequency | Percentage |
|----------------------------|-----------|------------|
| High satisfaction rate     | 34        | 47%        |
| Medium satisfaction level  | 38        | 52%        |
| Low satisfaction rate      | 1         | 1%         |
| Amount                     | 73        | 100%       |

The results of respondents' answers on family planning services were then divided into 3 categories, namely the categories of high satisfaction levels, moderate satisfaction levels and low satisfaction level. The data obtained shows that acceptors (47%) have a high level of satisfaction, (52%) acceptors have a moderate level of satisfaction and (1%) acceptors have a low level of satisfaction with family planning services in the Beras Basah Community Health Center, Langkat Regency.

3. Result and Discussions

The results showed that the majority of family planning acceptors' satisfaction level in family planning services was moderate (52%). This is in accordance with a study conducted by Harianto (2005), whose results stated that the level of patient satisfaction with family planning services at Budhi Asih Jakarta Hospital was at a moderate level (70%). There is also research conducted by Anjar (2008) on the quality of family planning services on patient satisfaction at the Depok Health Center in Sleman, the results of which show that the average level of satisfaction is in the moderate
category. However, it is different from research conducted by Tatok (2001) on the quality of family planning services by village midwives with the satisfaction level of independent family planning acceptors in the Cangkringan sub-district, Sleman regency, whose research results stated that the satisfaction level of acceptors was high. Even so, the level of satisfaction for each individual is different and varied. According to Oliver (in Supranto, 2001) defines satisfaction as the level of one’s feelings after comparing the perceived performance or results with expectations, the level of satisfaction is a function of the difference between perceived performance and expectations. If the performance is below expectations, the customer will be very disappointed and if the performance is in line with expectations, the customer will be very satisfied. Based on the reality aspect, the results showed that 43.8% of acceptors were satisfied with the conditions which stated that the room was comfortable, the tools were complete, the drugs or contraceptives were still sealed, all the tools were clean, the midwife washed her hands and wore gloves and there was no acceptor who stated very dissatisfied. This is in accordance with Harianto’s opinion (2005) which states that physical facilities and amenities that can be directly felt by customers in services such as adequacy of seats in the waiting room, the comfort of the waiting room and the physical appearance of the serving staff include guaranteeing service quality. Then the reliability aspect, the results showed that 46.6% of acceptors were satisfied with the conditions which stated that midwives served immediately, midwives quickly provided services as needed, skilled midwives, services provided by midwives were satisfactory and services provided by midwives were well implemented, but 1.4% of acceptors stated that they were very dissatisfied.

Furthermore, in the responsiveness aspect, the results showed that 37% of acceptors were satisfied with the conditions which stated that midwives were responsive to complaints that arose, midwives resolved problems, midwives gave suggestions and advice, midwives were able to answer all questions and midwives immediately informed the services to be provided and not there were acceptors who expressed very dissatisfaction. This is consistent with the results of Gatushanti’s research (2003) showing that respondents expressed satisfaction (25.93%), in his opinion that the speed of health workers when patients needed them, providing information to patients clearly and easily understood, the ability of health workers to resolve complaints or Patient problems are directly related to the quality of services provided and as expected.

Further to the guarantee aspect, the results showed that 50.7% of acceptors were satisfied with the conditions which stated that confidentiality and privacy were highly guarded by midwives, services provided were as needed, acceptors believed in the services provided, affordable prices, midwives guaranteed a sense of security and comfort and none of the acceptors stated that they were very dissatisfied. Gatushanti (2003) in his research on the level of patient satisfaction with the quality of services at the Surakarta Islamic Hospital shows that the perception of functional quality consisting of friendly attitude, caring, honesty, security guarantees, trust and a sense of comfort given to clients has an influence on client satisfaction. for the services provided.

Likewise in the counseling aspect, the results showed that 36.7% of acceptors were satisfied with the condition stating that midwives were friendly and polite when communicating and listening to complaints well, explanations were given as needed and easy to understand, midwives explained the various contraceptive methods they wanted to use and changing the contraceptive method, the midwife explained the side effects and how to use it. However, 1.4% of acceptors stated that they were very dissatisfied with the counseling aspect. This is in line with Nurul’s research (2002) which showed that one of the factors that reduced the use of family planning in the community was program factors related to IEC, which included counselling, sources of information, clarity on IEC and contraceptive services. In his research on the relationship of communication, information.

4. Conclusion

This study shows that the satisfaction of family planning acceptors in family planning services in the region Beras Basah Health Center in Langkat Regency, the majority of acceptor satisfaction levels are in the moderate category. When viewed from the 5 aspects of family planning services, 43.8% of acceptors are satisfied with the statements in the reality aspect, 46.6% of acceptors are satisfied with the reliability aspect, 37% of acceptors are satisfied with the responsiveness aspect,
50.7% of acceptors are satisfied with the guarantee aspect, and 39.7% of acceptors are satisfied with the counseling aspect.

However, from these five aspects, there are still aspects that need to be improved in terms of reliability, namely midwives must immediately serve, quickly provide services as needed, must be more skilled, services provided are more satisfying and services provided by midwives are implemented properly as well as in the counseling aspect. Namely midwives should be more friendly and polite when communicating and listen to complaints well, explanations should be according to needs and easy to understand, midwives should explain the various contraceptive methods they want to use and replace contraceptive methods, as well as explain side effects and how to use them.

References

Anjar, (2005). Quality of Family Planning Services on Patient Satisfaction at the Depok Health Center in Sleman. Retrieved 20 September 2009 from http://digilib.its.ac.id/detil.php?id=6481&q=Kualitas-Pelayanan-KB-TerhadapSatisfaction-Patient-Puskesmas-Depok-in-Sleman

Arikunto. (2006). Research Procedures: A Practice Approach Revised Edition, Jakarta: Pineka Cipta Asri, Mufdillah. (2008). Midwifery Concept Plus Midwife Material Delima, Yogyakarta: BKKBN Scholar Press Partners. (2002). Practical Handbook of Family Planning Services, Jakarta

Baziad, Ali. (2002). Hormonal Contraception, Jakarta: Sarwono Prawirohardjo Library Development Foundation

Brockopp, D. (1999). Basics of Nursing Research, Jakarta: EGC

Diah. (2007). Level of Patient Satisfaction with Family Planning Services at the Family Planning Polyclinic at the Hospital Wonoasari Mountain South. Retrieved April 4, 2009 from http://elibrary.mb.ipb.ac.id/gdl.php?mod=browse&op=read&id=mbispb-2312421421421412-diah-603

Erna. (2008). Midwifery Service Management, Jakarta: EGC

Everett, Suzanne. (2007). Pocket Book of Contraception and Sexual Reproductive Health, Jakarta: EGC

Gatushanti. (2003). Patient Satisfaction Level on Service Quality at Surakarta Islamic Hospital. Retrieved 27 March 2009 from http://fatur.staff.ugm.ac.en/file/JURNAL%20Population,%2009(2),%201998.pdf

Gebbie, Alisa. (2005). Family Planning and Reproductive Health, Jakarta: EGC

Hartanto, (2005). Level of Patient Satisfaction with Family Planning Services at Budhi Asih Hospital

Hidayat, AAA (2007). Nursing Research and Scientific Writing Techniques, Jakarta: Salemba Medika

Imbalo S. (2006). Quality Assurance of Health Services: Basics of Understanding and Application, Jakarta: EGC

Saifuddin, AB. (2003). Practical Handbook for Contraceptive Services, Jakarta: Sarwono Prawirohardjo Sugito Library Development Foundation, Hadi, 2005, Measuring Customer Satisfaction. Retrieved 8 April 2008 from http://hadisugito.fadla.or.id/2005/12/11/meukur-kepuasan-customer/Jakarta.Retrieved 20 September 2009 from http://id.wordpress.com/tag/level-patient-satisfaction-to-family-servicesplanning-hospital-budhi-asih-jakarta/doc

Sudjana. (1992). Research Statistics, Bandung; Tarsito Supranto, J. (2001). Measuring the Level of Customer Satisfaction to Increase Market Share, Jakarta: Rineka Cipta

Tattoo. (2001). Quality of Family Planning Services by Village Midwives with Satisfaction Levels of Independent Family Planning Acceptors in Cangkringan District, Sleman Regency. Retrieved July 15, 2008 from http://kripstikes.wordpress.com/2009/05/04/ikmii42/

Varney, Helen. (2006). Textbook of Midwifery Care, Jakarta: EGC.