

Tingkat dan Determinan Sosiodemografik Unmet need Keluarga Berencana di Indonesia: Analisis Data Survei Demografi Kesehatan Indonesia Tahun 2017 = Level and Determinant of Sociodemographic Unmet Need for Family Planning: Data Analysis of Indonesias Demographic Health A Survey in 2017

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Abstrak

A**bstract**

Unmet need KB merupakan kondisi perempuan aktif seksual yang ingin menunda atau membatasi kehamilan tetapi tidak menggunakan kontrasepsi. Penelitian ini mengkaji determinan sosiodemografik **unmet need** di Indonesia. Pengukuran **unmet need** menggunakan data SDKI 2017 dengan cara non-kalender yang mendasarkan pada status penggunaan kontrasepsi saat survei (11,7%), sedangkan cara kalender mendasarkan status penggunaan kontrasepsi dalam kurun waktu 69 bulan jelang survei (14,7%). Perbedaan sekitar 3% ini menyangkut tambahan hampir 1,6 juta perempuan berisiko kehamilan tidak diinginkan. Indonesia dengan konteks angka putus pakai kontrasepsi relatif tinggi, pengukuran **unmet need** KB cara kalender lebih sesuai dibanding cara non-kalender. Penguatan konseling oleh tenaga kesehatan, penataan pola pelayanan KB yang lebih sesuai diperkotaan, pemerataan pelayanan KB di seluruh wilayah Indonesia dan menjangkau masyarakat miskin diharapkan dapat menurunkan **unmet need** KB.

A**bstract**

Unmet need for family planning is a condition of sexually active women who want to delay or limit pregnancy but do not use contraception. This study examines the **unmet need** for sociodemographic determinants in Indonesia. **Unmet need** measurement uses IDHS 2017 by the non-calendar method which is based on the contraceptive use status during the survey (11.7%), while the calendar method is based on the status of contraceptive use within 69 months prior to the survey (14.7%). This difference of around 3% concerns the addition of nearly 1.6 million women at risk of unwanted pregnancy. In Indonesia with relatively high contraceptive discontinuation rate, the **unmet need** for family planning in the calendar method is more appropriate than the non-calendar method. Strengthening counseling by health workers, structuring patern family planning services that are more appropriate in urban areas, equitable distribution of family planning services throughout Indonesia, and reaching the poor are expected to reduce **unmet need** for family planning.