

Original Research Report

Factors Influencing Acceptance of Family Planning Acceptors at the Magdalena Pane Clinic

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Abstract: Family Planning is an action that helps married couples to prevent unwanted pregnancies, accept the births they want, regulate the interval between pregnancies, and determine the number of children in the family. This study aims to identify the factors for the exclusion of couples of childbearing age as family planning acceptors at the Magdalena Pane Clinic in 2021. This study used a descriptive design using a cross sectional approach. The sample is 71 respondents. The research was conducted from May 2021 to September 2021. The instruments in this study were demographic data, questions from knowledge factors, family income factors and religious factors. The results showed that the majority of respondents aged 31-35 years were 26 respondents (54.2%). The results of the study based on work as housewives, namely 31 respondents (64.6%), family income in the medium classification 33 respondents (68.8%), knowledge was in sufficient classification, namely 28 respondents (58.3%), the majority religion was Islam as many as 40 respondents (83.3 %). From the results of the study, it can be concluded that each factor still influences the participation of couples of childbearing age to become family planning acceptors.

Keywords: Childbearing Age, Family Planning Acceptors, Opt-Out Factors.



1. Introduction

Indonesia's condition in terms of population, the quality is still very concerning, namely the large population of around 215 million people. The situation and condition of the population in Indonesia is a phenomenon that really requires careful attention and handling. Efforts that need to be made by the government in dealing with population problems are to promote (and rebuild) the National Family Planning program in Indonesia [1]. According to the World Health Organization (WHO) family planning is an action that helps married couples to prevent unwanted pregnancies, get the desired birth, regulate the interval between pregnancies, determine the number of children in the family [2] [3].

Although the family planning program has been declared quite successful in Indonesia, in its implementation there are still perceived obstacles, including many couples of childbearing age who have not become family planning participants. There are several factors that cause the reasons why women of childbearing age do not use contraception. These factors can be seen in terms of family planning services, availability of contraceptives, and delivery of counseling.

From the results of the study, it is known that many women do not use contraception, partly because they want children. The reasons that are quite prominent from couples who refuse to use contraception are the presence of side effects and health problems 10%, the reasons for religious problems 0.5 percent and related reasons due to socio-economic conditions, namely the high cost of 0.8 percent [4].

In connection with the above, Hartanto [2] stated that all levels of development are invited to participate in handling the family planning program as well as possible. And invites all couples of childbearing age to become family planning acceptors. Based on the background above, the authors are interested in taking the title of factors that influence the exclusion of couples of childbearing age to become family planning acceptors at the Magdalena Pane Clinic in 2021.

2. Literature Review

The family planning program has the vision of NKKBS and has been transformed into a quality family in 2015. So that the family planning program can be assessed for quality family planning services by following the focus on strategies so that services are easy to obtain and participants are accepted by couples of childbearing age so that couples of childbearing age are interested in becoming acceptors KB [5] [6].

Based on the results of BKKBN data in 2019 in North Sumatra, the number of couples of childbearing age was 2,120,692 participants, couples who became active family planning participants in August 2019 were 1,424,630, namely 1,529 participants for IUD family planning, 171 participants for the male operation method. There were 4,360 participants for condoms and 10,273 pills for pills. Couples of childbearing age who did not become KB participants were 716,739 participants, namely 73,863 couples of childbearing age who were pregnant, there were 10,299 couples of childbearing age who wanted to have children immediately (IAS), there were 52,606 couples of childbearing age who did not want to have more children (TIAL), there are 13,688 couples of childbearing age who want to delay having children 15,712 [7].

3. Methodology

The research design used in this research is descriptive by using a cross sectional approach which aims to determine the factors of exclusion of couples of childbearing age as family planning acceptors. This study was measured only once at the same time. The population in this study were all 48 PUS subjects who did not participate in the family planning program at the Magdalena Pane Clinic. The sample is 48 respondents using total sampling. Sampling starts from May 2021 to September 2021 with criteria for wives who do not participate in family planning, PUS wives who come to Magdalena Pane Clinic.

3. Finding and Discussion

Table 1 shows the distribution of respondents based on characteristics of factors of involvement of couples. Based on Table 1, from the 48 respondents who did not participate as family planning acceptors, the majority aged 31-35 years were 26 people (54.2%), the majority were Muslim, namely 40 people (83.3%), the majority of high school education were 26 respondents (54.2%), and the majority work as housewives as many as 31 people (64.6%)

Table 1. Distribution of Respondents Based on Characteristics of Factors of Involvement of Couples of Childbearing Age to become Family Planning Acceptors at Magdalena Pane Clinic in 2021

No	Category	Frequency	Percentage (%)
1	Age		
	20 -25 Years	6	12.5
	26-30 Years	16	33.3
	31 -35 Years	26	54.2
2	Religion		
	Muslim	40	83.3
	Christian	8	16.7
3	Education		
	Elementary	4	8.3
	Middle School	13	27.1
	High School	26	54.2
	Undergraduate	5	10.4
4	Job		
	Housewives	31	64.4
	Government Worker	7	14.6
	Entrprenuer	10	20.8
	Total	48	100%

Table 2 shows distribution of respondents based on knowledge questions factors of spouse opt-out fertile age becomes family planning acceptor at Magdalena Pane Clinic in 2021. Based on Table 2, the distribution of the answers of respondents who answered correctly the majority on the question of understanding family planning and family planning questions is an effort to achieve a prosperous family, namely 46 people (95.8%). And the majority of respondents who answered the majority incorrectly on the question of contraceptives can cause cancer as many as 31 people (64.4%)

Table 2. Distribution of Respondents Based on Knowledge Questions Factors of Spouse Opt-out Fertile Age Becomes Family Planning Acceptors at Magdalena Pane Clinic in 2021

No	Question	Choice of Answer			
		Correct		Uncorrect	
		f	%	f	%
1	Understanding of the Definition of family planning	46	95.8	2	4.2
2	Goals of Family Planning	44	91.7	4	8.3
3	Side effects of contraception	31	64.6	17	35.4
4	The age of the couple of childbearing age	27	56.3	21	43.8
5	Contraception as an effort to prevent pregnancy	38	79.2	10	20.8
6	Contraceptives can lead to cancer	17	35.4	31	64.6
7	Breastfeeding is a method of contraception	26	54.2	22	45.8
8	Contraception can make mothers fat	40	83.3	8	16.7
9	Target family planning program	37	77.1	11	22.9
10	Using Contraception is an effort to achieve a prosperous family	46	95.8	2	4.2
	Total	48	100	48	48

Table 3 shows distribution of respondents based on knowledge of factors involving couples of childbearing age to become family planning acceptors at the Magdalena Pane Clinic in 2021.

Table 3. Distribution of Respondents Based on Knowledge of Factors Involving Couples of Childbearing Age to Become Family Planning Acceptors at the Magdalena Pane Clinic in 2021

No	Variable	f	%
1	Good	14	29.2
2	Moderate	28	58.3
3	Low	6	12.5
Total		48	100%

Based on Table 3, it can be concluded that the majority of PUS respondents who did not become family planning acceptors in the classification of sufficient knowledge were 28 respondents (58.3%) and the minority of EFA respondents who did not become family planning acceptors in the less classification were 6 respondents (12.5%). The existence of knowledge makes a person triggered to behave in accordance with the knowledge he has [8] [9].

From the results, it was shown that although the respondents had sufficient knowledge, they did not want to participate as family planning acceptors [10] [11]. Respondents who have sufficient knowledge should be willing to participate as family planning acceptors. The reason respondents did not become family planning acceptors was because of their income (financial) factor, there were also husband factors and religious factors.

Table 4. Distribution of Family Income Factors of Involvement of Couples of Childbearing Age to Become Family Planning Acceptors at the Magdalena Pane Clinic in 2021

No	Question	Choice of Answer			
		Correct		Uncorrect	
		f	%	f	%
1	Contraception is expensive	24	50.0	24	50.0
2	Contraception is only for people that have high paying salaries	32	66.7	16	33.3
3	Contraception is for middle to high class economy families	21	43.8	5	6.3
4	Contraception leads to positive advantages	47	97.9	1	2.1
5	Contraception gives high effect upon family economy	31	64.6	17	35.4
Total		48	100%	48	100%

Based on Table 4, the distribution of respondents' answers about family income who answered correctly was number 4 regarding contraceptives that had a good effect (97.9) and number 2 regarding steady contraception only for someone whose job had a large income (66.7). And the majority of respondents who answered no were question number 3 regarding contraceptives only for the upper middle class economy (6.3) and number 1 regarding contraceptives being expensive (50.0).

Table 5 shows distribution of respondents based on family income factors of inequality of couples of childbearing age being family planning acceptors at Magdalena Pane Clinic in 2020. Based on table 5, it can be concluded that the majority of PUS respondents who did not become family planning acceptors based on family income were 33 people (68.8%). According to Nursalam [12], Handayani [13] states that income is closely related to family needs. A high income will have a positive impact on the family because with a good income the needs of clothing, food, housing and transportation as well as health can be fulfilled [14] [15].

Table 5. Distribution of Respondents Based on Family Income Factors of Inequality of Couples of Childbearing Age Being Family Planning Acceptors at the Magdalena Pane Clinic in 2021

No	Variable	F	%
1	High	2	4.2
2	Moderate	33	68.8
3	Low	13	27.1
Total		48	100%

Based on Table 6, it can be concluded that the majority of PUS respondents who did not become family planning acceptors based on religion, namely from 48 respondents there were 40 (83.3%), and Christian minorities, namely 8 (16.7%).

Table 6. Distribution of Respondents Based on Religion Exclusion of Couples of Childbearing Age to be Family Planning Acceptors at the Magdalena Pane Clinic in 2021

No	Question	Choice of Answer			
		Correct		Uncorrect	
		f	%	f	%
1	All religion allows usage of contraception	44	91.7	4	8.3
2	Contraception is not allowed to be used on the basis of religion	6	12.5	4	87.5
3	Religion in Indonesia generally supports the Family Planning program	46	95.8	2	4.2
Total		48	100%	4	100%
			%	8	8

Based on the results of this study, it was shown that although the respondents had sufficient knowledge, they did not want to participate as family planning acceptors. Respondents who have sufficient knowledge should be willing to participate as family planning acceptors. The reason the respondents did not become family planning acceptors was because of their income (financial) factors, there were also husband factors and religious factors.

Based on the results of the study, based on family income, the majority were in the medium category, namely 33 people (68.8%) and the minority was in the high category, namely 2 respondents (4.2). According to Bradly (2014) [9] states that income is closely related to family needs, a high income will have a positive impact on the family because with a good income the needs of clothing, food, housing and transportation as well as health can be fulfilled.

Based on the results of the study, the majority of PUS respondents who did not become family planning acceptors were based on religion, namely out of 48 respondents there were 40 (83.3%), and a Christian minority, namely 8 (16.7%). In this regard, Samekto stated that religions in Indonesia generally support family planning. Every religion in Indonesia supports the family planning program. Hinduism has the view that every birth must bring benefits. For this reason, births must be arranged at a distance with family planning. Buddhism, views every human being as basically good, and Buddhism does not forbid its followers to take family planning for the welfare of the family. Christianity also does not forbid its followers to have family planning. Likewise, Islam allows family planning. This study is not in accordance with research which states that religious factors are one of the causes of respondents not using contraceptives because there is still religion that prohibits their followers from becoming family planning acceptors, or using several contraceptives. s were found between the results of the study and the theory stated above.

5. Conclusion

Based on the level of knowledge of respondents who did not participate as family planning acceptors, it is known that from 48 respondents more respondents who have sufficient knowledge, namely 28 respondents amounted to (58.3%). And less knowledgeable, namely 6 respondents amounted to (12.5%). Based on family income, the majority of respondents in the middle income classification are 33 (68.8%). Respondents in terms of family income in the low classification are 13 (27.1%) respondents. Based on the level of religion, the majority of respondents who become family planning acceptors are Muslim, as many as 40 respondents (83.3%). and Christian minority as many as 8 people (16.7%).

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