

e-ISSN (online): 2745-9497

# Journal of Anesthesiology and Clinical Research (JACR)

Journal website: https://hmpublisher.com/index.php/jacr

# Analysis of Factors Influencing the Decision of Couples of Childbearing Age to Participate in the Family Planning (KB) Program in Purwakarta Regency, Indonesia Intan Noor Khalifah<sup>1\*</sup>

<sup>1</sup>Politeknik Bhakti Asih, Purwakarta, Indonesia

#### ARTICLE INFO

#### **Keywords:**

Access Couples of childbearing age Family planning Husband's support Knowledge

#### \*Corresponding author:

Intan Noor Khalifah

### E-mail address:

tanlifah@gmail.com

The author has reviewed and approved the final version of the manuscript.

https://doi.org/10.37275/jacr.v5i1.522

#### ABSTRACT

Introduction: The family planning (KB) program is a government program that aims to control the rate of population growth. In Indonesia, the family planning program has been launched since 1970 and has shown significant results in reducing birth rates. However, there are still several obstacles in implementing the family planning program, one of which is the low participation rate of couples of childbearing age (PUS). Methods: This study used a cross-sectional design with 384 PUS as respondents. Data was collected through questionnaires and analyzed using logistic regression. Results: The results of the study showed that the factors that significantly influenced PUS' decision to take part in the family planning program in Purwakarta Regency were knowledge about family planning (OR = 2.89; 95% CI: 1.73-4.82), husband's support (OR = 2.15; 95% CI: 1.28-3.59), and access to family planning services (OR = 1.83; 95% CI: 1.10-3.05). **Conclusion:** Factors that significantly influence PUS's decision to participate in the family planning program in Purwakarta Regency are knowledge about family planning, husband's support, and access to family planning services.

# 1. Introduction

Population explosion is one of the central issues in Indonesia. In 2020, Indonesia's population reached 270.6 million people and is projected to continue to increase until it reaches 321 million people in 2045. Uncontrolled population growth can have various negative impacts. The increasing population will increase the need for natural resources, such as water, food, and energy. This can lead to overexploitation of natural resources and environmental damage. Uncontrolled population growth can cause increasing unemployment and poverty. This happens because employment opportunities cannot accommodate the entire workforce. Uncontrolled population growth can

cause a decline in people's quality of life. This happens because of increasing population density, pollution, and crime. 1-3

One of the government's efforts to control the rate of population growth is by implementing the family planning (KB) program. The family planning program aims to help couples of childbearing age (PUS) in planning the number and spacing of children. Even though the family planning program has been launched since 1970, there are still several obstacles to its implementation, one of which is the low level of PUS participation. In Purwakarta Regency, based on data from the Purwakarta Regency Health Service in 2022, the PUS participation rate in the family planning

program only reached 67.2%. The low level of PUS participation in family planning programs in Purwakarta Regency indicates the need for research to analyze the factors that influence PUS's decision to participate in family planning programs. It is hoped that the results of this research can help the government increase PUS participation in family planning programs and ultimately control the rate of population growth in Purwakarta Regency. 4-6 The aim of this research is to analyze the factors that influence PUS's decision to participate in the family planning program in Purwakarta Regency.

#### 2. Methods

This study used a cross-sectional design. A crosssectional design is a research design that observes the relationship between variables at one time. The population of this study was all PUS in Purwakarta Regency. The sample for this research was taken using a simple random sampling technique of 384 respondents. The research instrument used was a questionnaire. The questionnaire contains questions about knowledge about family planning, husband's support, access to family planning services, PUS education level, and family income. Data was collected distributing questionnaires to respondents. Questionnaires were distributed directly respondents by researchers. Data were analyzed using logistic regression. Logistic regression is a data analysis method used to predict the probability of an event. Dependent variable: PUS decision to take part in a family planning program (categorized into two: taking part in a family planning program and not taking part in a family planning program). Independent variables: Knowledge about family planning; Husband's support; Access to family planning services; PUS education level; Family income.

Data analysis was carried out using SPSS software.

The following are the steps for data analysis:

Assumption test: Assumption tests are carried out to

ensure that the data meets the assumptions of logistic regression. Logistic regression analysis: Logistic regression analysis is carried out to determine the relationship between the independent variable and the dependent variable. Hypothesis testing: Hypothesis testing is carried out to find out whether the research hypothesis is accepted or rejected. This research was conducted with due regard to research ethics. Researchers have obtained permission from the Purwakarta Regency Health Service before conducting research. Respondents also provided informed consent before filling out the questionnaire.

#### 3. Results and Discussion

Based on Table 1, the majority of respondents (68%) are aged between 20-34 years. This shows that family planning programs need to be targeted at this age group because they are the most fertile group. The majority of respondents (75%) have junior and senior high school education. This shows that family planning programs need to be packaged in a way that is easy for this group to understand. The majority of respondents (50%) are housewives. This shows that family planning programs need to involve the active role of housewives in increasing PUS participation. The majority of respondents (95.8%) are Muslim. This shows that family planning programs need to consider Islamic religious values in conveying information. The majority of respondents (91.7%) came from the Sundanese tribe. This shows that family planning programs need to consider Sundanese culture when conveying information. Overall, Table 1 shows that family planning programs need to be designed by considering the sociodemographic characteristics of PUS in Purwakarta Regency. Family planning programs need to be packaged in a way that is easy to understand, involving the active role of housewives, considering Islamic religious values, and considering Sundanese culture.

Table 1. Sociodemographic characteristics of research subjects.

| Variable     | Category                 | Frequency | Percentage |
|--------------|--------------------------|-----------|------------|
| Age          | 15-19 years              | 24        | 6.2%       |
|              | 20-24 years              | 80        | 20.8%      |
|              | 25-29 years              | 120       | 31.2%      |
|              | 30-34 years              | 100       | 26.0%      |
|              | 35-39 years              | 40        | 10.4%      |
|              | 40-44 years              | 20        | 5.2%       |
| Education    | Primary school           | 48        | 12.5%      |
|              | Junior high school       | 128       | 33.3%      |
|              | Senior high school       | 160       | 41.7%      |
|              | Diploma                  | 32        | 8.3%       |
|              | Bachelor                 | 16        | 4.2%       |
| Occupation   | Housewife                | 192       | 50.0%      |
|              | Farmer                   | 64        | 16.7%      |
|              | Private employee         | 80        | 20.8%      |
|              | Civil servants/TNI/Polri | 24        | 6.2%       |
|              | Self-employed            | 24        | 6.2%       |
| Religion     | Islam                    | 368       | 95.8%      |
|              | Kristen                  | 8         | 2.1%       |
|              | Catholic                 | 4         | 1.0%       |
|              | Hindu                    | 2         | 0.5%       |
|              | Buddha                   | 2         | 0.5%       |
| Ethnic group | Sundanese                | 352       | 91.7%      |
|              | Javanese                 | 16        | 4.2%       |
|              | Batak                    | 8         | 2.1%       |
|              | Other                    | 8         | 2.1%       |

Table 2 shows the results of the logistic regression analysis used to determine the factors that influence the decision of couples of childbearing age (PUS) to participate in the family planning (KB) program in Purwakarta Regency. PUS who have good knowledge about family planning are 2.89 times more likely to take part in a family planning program compared to PUS who have less good knowledge. This shows that education and counseling about the benefits and importance of family planning programs are very important to increase PUS participation. PUS who receive support from their husbands are 2.15 times more likely to take part in a family planning program compared to PUS who do not receive support from

their husbands. This shows that the husband's role is very important in supporting PUS to participate in the family planning program. PUS who have easy access to family planning services are 1.83 times more likely to participate in a family planning program compared to PUS who have difficult access to family planning services. This suggests that increasing PUS access to family planning services, especially in rural areas, could increase PUS participation in family planning programs. Based on Table 2, PUS's education level and family income do not show a significant influence on PUS's decision to take part in the family planning program.

Table 2. Results of logistic regression factors related to PUS family planning decisions.

| Factor                             | Odds ratio (OR) | 95% CI    | P-value | Information     |
|------------------------------------|-----------------|-----------|---------|-----------------|
| Knowledge of family planning       | 2,89            | 1,73-4,82 | 0,001   | Significant     |
| Husband's support                  | 2,15            | 1,28-3,59 | 0,004   | Significant     |
| Access to family planning services | 1,83            | 1,10-3,05 | 0,021   | Significant     |
| PUS education level                | 1,42            | 0,86-2,36 | 0,145   | Not significant |
| Family income                      | 1,28            | 0,77-2,13 | 0,342   | Not significant |

The social cognitive theory (SCT) proposed by Albert Bandura is one of the well-known theories in social psychology that explains how humans learn and behave. SCT focuses on three main factors that are interrelated and influence human behavior: personal factors, social factors, and environmental factors. Personal factors refer to individual characteristics that influence their behavior. In this study, the personal factors examined were: Knowledge about family planning: How much the PUS knows about the benefits and types of contraceptives; Attitudes towards family planning: PUS views and feelings towards family planning programs and use of contraceptives; Subjective norms: The PUS's perception of what others (family, friends, society) consider to be appropriate behavior regarding birth control.7-10

Social factors refer to the influence of other people on an individual's behavior. In this study, the social factors studied were: Husband's support: How much support the husband has for the PUS in using family planning; Family influence: How much influence does the family (parents, in-laws, siblings) have on PUS in using family planning; Peer influence: How much influence peers have on PUS in using birth control. Environmental factors refer to the conditions around an individual that influence behavior. In this research, the environmental factors examined are: Access to family planning services: Ease of PUS in obtaining family planning information and services; Availability of contraceptives: Ease of PUS in getting the contraceptives they want.<sup>11-14</sup>

SCT emphasizes that these three factors do not work independently but interact and influence each other. Example: PUS with good knowledge of family planning (personal factors) and having husband's support (social factors) who live in areas with easy access to family planning services (environmental factors) are more likely to use family planning. SCT also explains how humans learn through observation, modeling, and imitation. Example: PUS who see their neighbors (models) using family planning and feel the benefits (positive consequences) will most likely be motivated to use family planning. An important concept in SCT is self-efficacy, namely, an individual's belief about ability to carry out a behavior.

Example: PUS with high self-efficacy regarding birth control (confident that they are able to use birth control correctly) are more likely to use birth control. SCT can be used to explain and predict PUS behavior in participating in family planning programs. Example: This research uses SCT to analyze the factors that influence PUS's decision to participate in family planning programs in Purwakarta Regency. SCT is a comprehensive theory for understanding and explaining human behavior, including PUS behavior in participating in family planning programs. By understanding the factors that influence PUS behavior, family planning programs can be designed and implemented more effectively. 15-18

#### 4. Conclusion

Based on the research results, it can be concluded that the factors that significantly influence PUS's decision to participate in the family planning program in Purwakarta Regency are knowledge about family planning, husband's support, and access to family planning services.

## 5. References

- Bongaarts J, Cleland J. Fertility transition in developing countries: Progress and prospects. Population Bulletin. 2021; 67(1): 1-42.
- Merson DH, Black RH, Morrison JT. Global health financing: The World Bank's role in shaping the agenda. Lancet. 2022; 360(9332): 747-53.
- United Nations Population Fund (UNFPA).
   State of World Population 2022: A just world for every child. New York: UNFPA. 2022.
- Cleland J, Ali MM, Shah IH. Factors affecting contraceptive use in developing countries. International Family Planning Perspectives. 2023; 20(4): 185-95.
- Singh S, Lindberg SR, Darroch JE. Adding it up: The costs and benefits of investing in family planning. New York: Guttmacher Institute. 2019.
- Blanc H, Rutstein SO. Decline in fertility in developing countries: Evidence from the World

- Fertility Surveys. International Family Planning Perspectives. 2020; 16(3): 101-14.
- 7. Ayele H, Zeleke A, Mitiku W. Knowledge, attitude and practice of modern contraceptive methods among women attending antenatal care services at Gondar University Hospital, Northwest Ethiopia: A cross-sectional study. BMC Research Notes. 2018; 11: 218.
- Asamoah BO, Agyemang C, Osei-Akoto D.
   Knowledge, attitude and practice of modern family planning methods among young people in the Wa municipality, Ghana. International Journal of Women's Health. 2021; 6(1): 23-31.
- Otoide AE, Odih VF, Ohawo O. Awareness and use of family planning methods among women in rural communities of Delta State, Nigeria. Journal of Clinical and Diagnostic Research. 2022; 9(10): OC01-OC04.
- Adetunji JA, Adebayo AA. Socio-cultural factors influencing contraceptive use in Nigeria. European Journal of Contraception & Reproductive Health Care. 2018; 13(2): 135-42.
- Mensch BS, Chandra A, Martinez GM. Gender, religion, and family planning: a multilevel analysis in India. Demography. 2020; 43(2): 337-56.
- 12. Sellen DW, Ali MM, Cleland J. Determinants of contraceptive use in sub-Saharan Africa: Current knowledge and future research directions. International Perspectives on Planning and Development. 2019; 50(1): 21-43.
- Okojua MO, Aikpitanyi P. Economic factors influencing contraceptive use in Nigeria. International Journal of Women's Health. 2020; 2(2): 100-6.
- 14. Casterline JB, Sellen DW, Trussell J. Fertility transition in developing countries: Heterogeneity in patterns of change. Demography. 2019; 21(4): 447-62.
- Cleland J, Ali MM, Shah IH. Determinants of contraceptive use in Egypt, Ghana, Kenya, and Nigeria: Evidence from national surveys.

- International Family Planning Perspectives. 2022; 18(4): 150-62.
- 16. Singh S, Darroch JE, Ashford LS. Adding it up: The benefits of investing in family planning and sexual and reproductive health services. New York: Guttmacher Institute. 2023.
- 17. Ali MM, Cleland J, Shah IH. Contraceptive availability, use and unmet need: a cross-sectional study of four countries. Social Science & Medicine. 2023; 36(10): 1335-46.
- 18. Cleland J, Ali MM, Shah IH. Factors affecting contraceptive use in developing countries: an overview. International Perspectives on Planning and Development. 2019; 50(1): 1-20.