



Increasing the uptake of long-acting and permanent methods of family planning: A qualitative study with village midwives in East Java and Nusa Tenggara Barat Provinces, Indonesia

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ABSTRACT

Objective: this analysis aims to explore midwives' insights into the provision of long-acting and permanent methods of contraception (LAPMs) in the selected areas of East Java and Nusa Tenggara Barat (NTB) Provinces, Indonesia.

Design: a qualitative study using in-depth interviews was conducted with 12 village midwives from 12 villages, to explore their perceptions and experiences in delivering family planning services.

Setting: the study was carried out in May–June 2013, as part of the baseline assessment in the Improving Contraceptive Method Mix (ICMM) study. We interviewed 12 village midwives working in 12 villages in six study districts: Tuban, Kediri, and Lumajang Districts in East Java Province; and Lombok Barat, Lombok Timur, and Sumbawa Districts in NTB Province.

Measurement: an interview guideline was used in all interviews. It covered several topics, such as community perceptions of LAPMs, availability of contraception and related equipment, availability of human resources, and midwives' efforts to improve LAPM coverage. All interviews were recorded and transcribed. Content and thematic analyses were carried out by grouping and coding the information based on the identified themes and topics.

Findings: according to village midwives interviewed in this study, community-level acceptance of LAPMs has increased over time; however, some still prefer using short-acting methods for a long period. The reasons include lack of awareness about the benefits and side effects of LAPMs, fear of surgical procedures, rumored consequences (for example, that LAPMs would limit women's ability to perform hard physical labor), and religious beliefs. There were several challenges reported by village midwives in delivering LAPM services, such as confusion about midwives' eligibility to provide LAPM services, lack of Contraceptive Technology Update (CTU) and counseling trainings, and shortage of supporting equipment (such as exam tables and IUD and implant insertion kits). There were several strategies implemented by village midwives to improve LAPM use, including strengthening the counseling services, accompanying clients to higher health facilities to obtain LAPM services, and providing services for groups of clients. All village midwives emphasized the importance of strengthening collaboration among stakeholders to increase the uptake of LAPM services.

Key conclusions: as midwives are the main family planning providers in Indonesia, efforts to address their challenges is essential. Enabling a supportive policy environment, strengthening promotional activities, increasing the number of training programs designed for village midwives—in addition to enhancing inter-sectoral collaboration—are some recommendations to improve LAPM uptake in study areas.

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Introduction

Indonesia was once recognized as having one of the most successful family planning programs in the world (Cammack and Heaton, 2001). However, the contraceptive prevalence rate in Indonesia has remained relatively stagnant in the last decade, with an increase of only 1.5%, leading to a stable fertility rate of approximately 2.6 (Statistics Indonesia et al., 2013). The maternal mortality ratio also remained high, at 190 deaths per 100,000 live births, considered amongst the highest in Asia (Statistics Indonesia, National Family Planning Coordinating Board et al., 2013). Furthermore, it was reported that the use of long-acting and permanent methods of contraception (LAPMs)—including implants, intrauterine devices (IUDs), and female/male sterilization—also has been decreasing over the last two decades (Statistics Indonesia, National Family Planning Coordinating Board et al., 2013).

Studies have shown that, compared to short-acting methods such as pills and injectables, LAPMs are more effective in preventing pregnancy, more cost-effective over time, and more convenient (Trussell et al., 1995; World Health Organization et al., 2011). However, LAPMs have been widely underutilized, including amongst those who intend to stop childbearing (Statistics Indonesia, National Family Planning Coordinating Board et al., 2013). This is due to several factors, including inconsistent supply of LAPMs, perceived barriers (both cost and medical), and shortage of trained providers (USAID and Family Health International, 2008; World Health Organization, 2012). These conditions require urgent attention to ensure that women in Indonesia have options and access to the most suitable contraceptives, particularly LAPMs. This will benefit not only the contraceptive users, but also their communities as well as Indonesia as a whole, by reducing unintended and high-risk pregnancies, preventing maternal deaths and increasing child survival and well-being.

In Indonesia, village midwives play an essential role in providing various maternal and child health services, including family planning. Throughout the country, midwives are the main family planning service providers (Statistics Indonesia et al., 2013). According to the Minister of Health Decree Number 1464 in 2010, midwives in Indonesia are eligible to provide counseling services and some contraceptives, i.e. pills, condom, injectables, IUD, and implants (Ministry of Health Republic of Indonesia, 2010). Although sterilization is not amongst family planning services whom midwives are eligible to provide, midwives play a vital role in providing counseling on sterilization and referring potential users to doctors or health facilities who could deliver the services (Ministry of Health Republic of Indonesia, 2010). Therefore, programs need to address the challenges faced by village midwives in order to increase uptake of LAPMs at the community level.

In 2013, the Center for Health Research Universitas Indonesia (CHR-UI) in collaboration with the Johns Hopkins Center for Communication Programs (CCP), the Indonesian Ministry of Health, and the National Population and Family Planning Board (BKKBN) conducted operations research, as part of the Improving Contraceptive Method Mix (ICMM) Project, in selected districts of East Java and Nusa Tenggara Barat (NTB) Provinces, Indonesia. In East Java Province, among currently married women of reproductive age (15–49 years), only 4% used IUDs, 2% used implants, and 3% underwent female sterilization (Statistics Indonesia et al., 2013). Similarly, in NTB Province, only 3%, 4% and 1% of currently married women of reproductive age used IUDs, implants, and female sterilization, respectively (Statistics Indonesia et al., 2013).

As part of the ICMM baseline assessment, a qualitative study was carried out to explore family planning knowledge, attitudes, and practices of relevant stakeholders. Village midwives were among the key informants interviewed at the village level. Using data derived from this qualitative study, this analysis aims to answer pragmatic questions on what village midwives' insights are regarding LAPM service provision, with an emphasis on challenges and strategies to improve LAPM uptake at the community level.

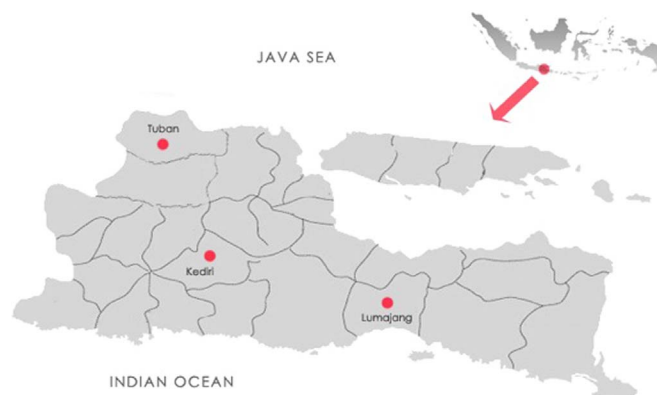


Fig. 1. Map of East Java Province.

Methods

Study design

Data used in this analysis were derived from a qualitative study conducted with village midwives in May–June 2013 in six districts: Tuban, Kediri, and Lumajang Districts in East Java Province; and Lombok Barat, Lombok Timur, and Sumbawa Districts in NTB Province (Figs. 1 and 2).

General characteristics of East Java and NTB Provinces

East Java Province is located in the eastern part of Java Island, and consists of 29 districts and nine cities (Fig. 1) (Statistics of Jawa Timur, 2015). It is the second most populous province in the country, with a population of around 37.5 million (Statistics Indonesia, 2010). Javanese language is predominantly used in the province, apart from *Bahasa Indonesia* as the national language.

Nusa Tenggara Barat (NTB) Province consists of two main islands, Lombok and Sumbawa, with a total of eight districts and two cities (Statistics of Nusa Tenggara Barat, 2015). Lombok Barat and Lombok Timur districts are located on Lombok Island; whereas Sumbawa District is on Sumbawa Island (Fig. 2). The local language, *Sasak*, is used widely in Lombok Island; whereas *Sumbawa* language is used on Sumbawa Island. The total population in NTB Province is approximately 4.5 million (Statistics Indonesia, 2010).

Study sites and informants

In each district, a purposive sampling method was employed to select sub-districts, villages, and informants from each administrative level (province, district, sub-district and village) (Fig. 3). Two sub-districts were selected per district to represent areas with low and high



Fig. 2. Map of NTB Province.

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