Factors Related to Unmet Need for Fertile Age Couples in Simpang Empat Village, Pekanbaru City in 2017

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Abstract- Unmet need is the proportion of women of childbearing age who are married or living together (sexually active) who do not want to have more children or who want to space their pregnancies, but do not use contraceptives. The impact of unmet need for family planning is the occurrence of unwanted pregnancies and the pregnancy is too close. The purpose of this study was to determine the factors associated with unmet need in Simpang Empat Kelurahan Pekanbaru City in 2017. This type of research is quantitative analytic with a cross sectional design. The population was 507 households with a sample of 81 people. This research was conducted in Simpang Empat Village, Pekanbaru City, conducted in September-December 2017. Data analysis used chi-square. The results of this study are that there is a relationship between age (p value = 0.000), number of children, level of education, knowledge, attitudes, partner support and social media with unmet need. Meanwhile, there was no relationship between the role of health workers and unmet need (p value = 0.930). The suggestion is for PUS to be able to increase knowledge about the right variety of contraceptive methods according to their needs. Correct information and knowledge can eliminate wrong perceptions and attitudes towards contraceptives. It is recommended that fertile age couples use social media wisely without swallowing the circulating information.

Keywords : Unmet Need, Fertile Age Couples

1.   Introduction

Unmet need is the proportion of women of childbearing age who are married or living together (sexually active) who do not want to have more children or who want to space their pregnancies, but do not use contraceptives. Family planning with the CPR (Contraceptive Prevalence Rate) indicator and unmet need for family planning services are included in the SDGs target contained in SDGs 3, namely a healthy and prosperous life in the context of sustainable development(Ministry of Health of the Republic of Indonesia, 2017)

According to the 2015 World Population Data Sheet, Indonesia is the fourth country in the world with the largest population, namely 255 million. Among ASEAN countries, Indonesia with the largest area is the country with the largest population, far above the other 9 member countries. With a Total Fertility Rate (TFR) of 2.6, Indonesia is still above the average TFR of ASEAN countries, which is 2.4.(Ministry of Health of the Republic of Indonesia, 2013).

According to the Republic of Indonesia Health Profile in 2015 and 2016, there were 13.46% new family planning participants in 2015 and 13.73% in 2016. While the number and percentage of PUS who were not FP participants (unmet need) in 2015 was 12.70% and experienced an increase in 2016 to 12.77%. Where the largest unmet need was in Papua Province (31.09%), followed by East Nusa Tenggara (20.16%) and West Sumatra Province (18.54%). Meanwhile, the lowest number of unmet need was in Central Kalimantan (5.4%), followed by North Maluku (7.9%) and DI Yogyakarta (8.01%), West Kalimantan (8.1%) with an average Indonesia's unmet need, namely 8.5(Ministry of Health of the Republic of Indonesia, 2017)

Riau Province is one of the provinces with high unmet need. Based on gender, in Riau Province there were 3.3 million men and 3.1 million women in 2016. In Riau Province there were 1.1 million PUS (fertile age couples). Of these, there were 196,702 (17.86%) who were not KB participants (unmet need). This amount is far above the national standard of 10%. The reason for unmet need in Riau Province is because they want children to be postponed (8.61%) and do not want more children (9.25%)(Ministry of Health of the Republic of Indonesia, 2017). According to the Riau Provincial Health Office, the percentage of active family planning participants changes every year. In 2013, active family planning participants reached 87%, but decreased in 2014 to 71% and 68% in 2015. The highest percentage of active family planning was Siak District (93.8%), followed by Kuantan Singingi District (87.6 %), Rokan Hulu Regency (82.4%). The districts with the lowest percentage were Rokan Hilir Regency 45.9%, Indragiri Hilir Regency 53.5% and Pekanbaru City (47.8%)

Of the 20 Puskesmas in Pekanbaru City, the number of family planning participants in Pekanbaru City Puskesmas was only 16,271 (62.1%), while those in Rumbai Puskesmas were 17,345 (66.2%) and Puskesmas Tenayan Raya was 17,659 (67.4%). Meanwhile, the lowest number of unmet need was in Puskesmas Payung Sekaki, amounting to 7,441 (28.4%).

Simpang Empat Village is located in the Work Area of the Pekanbaru City Health Center. Puskesmas Pekanbaru Kota or better known as Puskesmas Wisata was built in 2014 and officially started operating in 2016. Based on the initial survey conducted by the author in Simpang Empat Kelurahan, Pekanbaru City, the number of unmet needs is still high compared to those using family planning. Based on the results of interviews with 30 fertile aged couples (PUS) who did not use family planning, it was found that 21 people (70%) were less than 20 years old. Of the 30 couples, 60% of them have a low level of education (SD, SMP) and no partner support (80%) to use family planning.

2.   Method

This type of research is quantitative analytic with cross sectional design. This research was conducted in Simpang Empat District, Pekanbaru City, conducted in September-December 2017. The population in this study were all fertile age couples (PUS) in Simpang Empat Village, Pekanbaru City. totaled 507 heads of households with a sample of 81 heads of households. Sampling in this study using the technique "Cluster Random Sampling.

3.   Result

3.1.   Univariate Analysis

Table 5

Frequency Distribution of Respondents in Simpang Empat Village Pekanbaru City in 2017

No.	Variable	F	Percentage (%)
1.	**Age**		
	No Risk (20 - 35 years)	66	81.5
	At risk (<20 and> 35 years)	15	18.5
Total		**81**	**100**
2.	**Number of children**		
	No Risk (≤2)	26	32.1
	At risk (> 2)	55	67.9
	Total	**81**	**100**
3.	**Education**		
	High	47	58
	Low	34	42
Total		**81**	**100**
4.	**Knowledge**		
	High	38	46.9
	Low	43	53.1
Total		**81**	**100**
5.	**Attitude**		
	Positive	39	48.1
	Negative	42	51.9
Total		**81**	**100**
6.	**Partner Support**		
	Support	36	44.4
	Does not support	45	55.6
Total		**81**	**100**
7.	**Social media**		
	No Risk	55	67.9
	It's risky	26	32.1
Total		**81**	**100**
8.	**Role of Health Workers**		
	Have a role	33	40.7
	No Role	48	59.3
	Total	**81**	**100**
9.	**Unmet Need**		
	Using contraception	29	35.8
	Not Using Contraception	52	64.2
Total		**81**	**100**

3.2. Bivariate Analysis

Table 6

Relationship Between Age and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017

Age	Contraceptive Use				Total		Pvalue	ORP (95% CI)
	Do not use		Use					
	n	%	n	%	N	%		
No Risk	44	66.7	22	33.3	66	100		1,750
It's risky	8	53.3	7	46.7	15	100	0,000	(0.562-5,451)
Total	52	64.2	29	35.8	81	100		

Table 7

Relationship Between Number of Children and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017

Number of children	Contraceptive Use				Total		Pvalue	ORP (95% CI)
	Do not use		Use					
	n	%	n	%	N	%		
No Risk	13	50	13	50	26	100		3,410
It's risky	39	70.9	16	29.1	55	100	0.003	(2,156-11,076)
Total	**52**	**64.2**	**29**	**35.8**	**81**	**100**		

Table 8

Relationship Between Education Level and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017

Level of education	Contraceptive Use				Total		Pvalue	ORP (95% CI)
	Do not use		Use					
	n	%	n	%	N	%		
High	18	38.3	29	61.7	47	100		2,611
Low	34	100	0	0	34	100	0,000	(1,816-3,753)
Total	52	64.2	29	35.8	81	100		
High	21	55.3	17	44.7	38	100		2,091
Low	31	72.1	12	27.9	43	100	0.009	(0.830-5,266)
Total	52	64.2	29	35.8	81	100		

Table 10

The Relationship Between Attitudes and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017

Attitude	Contraceptive Use				Total		P value	ORP (95% CI)
	Do not use		Use					
	n	%	n	%	N	%		
Positive	25	64.1	14	35.9	39	100		1,808
Negative	27	64.3	15	35.7	42	100	0,000	(0.406-2,502)
Total	52	64.2	29	35.8	81	100		

Table 11

Relationship Between Spouse Support and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017

Partner Support	Contraceptive Use				Total		Pvalue	ORP (95% CI)
	Do not use		Use					
	N	%	n	%	N	%		
Support	22	61.1	14	38.9	36	100		1,273
Does not support	30	66.7	15	33.3	45	100	0.006	(0.511-3,171)
Total	52	64.2	29	35.8	81	100		

Table 12

Relationship between Social Media and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017

Social media	Contraceptive Use				Total		Pvalue	ORP (95% CI)
	Do not use		Use					
	N	%	n	%	N	%		
No Risk	35	63.6	20	36.4	55	100		5,926
It's risky	17	65.4	9	34.6	26	100	0,000	(2,349-12,461)
Total	52	64.2	29	35.8	81	100		

Table 13
The Relationship Between the Role of Health Officers and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017

Role of Health Workers	Contraceptive Use				Total		Pvalue	ORP (95% CI)
	Do not use		Use					
	N	%	n	%	N	%		
Have a role	21	63.6	12	36.4	33	100		1,042 (0.414-2,624)
No Role	31	64.6	17	35.4	48	100	0.930	
Total	52	64.2	29	35.8	81	100		

3.3. Discussion

a. Relationship Between Age and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017

The results of the chi square statistical test, obtained p value = 0.000, meaning that the p value is small than 0.05, so there is a significant relationship between age and unmet need in Simpang Empat Village, Pekanbaru City. The value of the Prevalence Odds Ratio (POR) = 1,750 with a value of 95% Confidence Interval (CI) = 0.562-5.451 means that respondents with a risk age are 1.7 times more likely to not use contraception than respondents with no risk age.

Age is one of the factors that is thought to influence a person's behavior in acting or doing something. Age affects the formation of abilities, because the abilities that are owned can be obtained through daily experiences outside of educational factors(Notoatmodjo, 2010). According to(Meilani, 2010) age is one of the social aspects that influence behavior.

b. Relationship Between Number of Children and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017

The results of the chi square statistical test, obtained p value = 0.003, meaning that the p value is small than 0.05, so there is a significant relationship between the number of children and unmet need in Simpang Empat Village, Pekanbaru City. The value of Prevalence Odds Ratio (POR) = 3,410 with a value of 95% Confidence Interval (CI) = 2,156-11,076 means that respondents with a number of children at risk (> 2) are 3.4 times more likely to not use contraception than respondents with no risk of children (≤2).

Parity is the number of pregnancies that end in the birth of the baby or the baby has reached a point of survival. This point is reached at 20 weeks of gestation or the fetus weighs 500 grams. An increase in a woman's parity is achieved only if the pregnancy produces a viable fetus(Varney, Helen. Kriebs, Jan M. Gegor, 2007).

c. Relationship Between Education Level and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017

The results of the chi square statistical test, obtained p value = 0.000, meaning that the p value is small than 0.05, so there is a significant relationship between education and unmet need in Simpang Empat Village, Pekanbaru City. The value of Prevalence Odds Ratio (POR) = 2,611 with a value of 95% Confidence Interval (CI) = 1,816-3,753 means that respondents with a low level of education are 2.6 times more likely to not use contraception than respondents with a high level of education.

The higher the level of mother's education, the lower the percentage of unmet need. Education can affect conditions of unmet need because highly educated people will have broader knowledge about contraceptives and their use, as well as about health problems, including reproductive health, so that they can better understand certain FP methods and their effects on health. thus, they can determine the tools or methods they want to use in family planning, thus avoiding the possibility of unmet need.

d. The Relationship Between Knowledge and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017

The results of the chi square statistical test, obtained p value = 0.009, meaning that the p value is small than 0.05, so there is a significant relationship between knowledge and unmet need in Simpang Empat Village, Pekanbaru City. The value of the Prevalence Odds Ratio (POR) = 2.091 with a value of 95% Confidence Interval (CI) = 0.830-5.266 means that respondents with low knowledge are twice as likely to not use contraception than respondents with high knowledge.

It is important for mothers and partners to know about the type of contraception, where to get contraceptive services, how to use it and the side effects of each type of contraception. Lack of knowledge about contraception is one of the important reasons why contraceptive needs are not met. Knowledge that can influence mothers, for example, knowledge about the types of family planning, knowledge about the advantages and disadvantages of each type of contraception.

e.   **The Relationship Between Attitudes and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017**

The results of the chi square statistical test, obtained p value = 0,000 means that the p value is small than 0.05, so there is a significant relationship between attitudes and unmet need in Simpang Empat Village, Pekanbaru City. The value of Prevalence Odds Ratio (POR) = 1.808 with a value of 95% Confidence Interval (CI) = 0.406-2.502 means that respondents with negative attitudes are 1.8 times more likely to not use contraception than respondents with attitudes positive.

Attitude is a person's closed response to a certain stimulus or object, which already involves the opinion and emotional factors concerned. Attitude is also a readiness or willingness to act and is not an implementation of certain motives (Notoatmodjo, 2010). According to Alport in Notoatmodjo (2010), it is explained that attitude has three main components, namely beliefs or beliefs, ideas, and concepts about an object, emotional life or evaluation of an object and a tendency to act (tend to behave). These components together form a complete attitude (total attitude). Determination of this complete attitude knowledge, thoughts, beliefs and emotions play an important role.

f.   **Relationship Between Spouse Support and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017**

The results of the chi square statistical test, obtained p value = 0.006, meaning that the p value is small than 0.05, so there is a significant relationship between partner support and unmet need in Simpang Empat Village, Pekanbaru City. The value of the Prevalence Odds Ratio (POR) = 1.273 with a value of 95% Confidence Interval (CI) = 0.511-3.171 means that respondents without partner support are 1.2 times more likely to not use contraception than respondents with partner support.

Husband's support is an encouragement to the mother morally and materially, where the husband's support influences the mother to become family planning acceptors. According to(Dewi, 2013)Meanwhile, the husband's support includes attention, where the attention given really helps mothers to become family planning acceptors and attention so that compliance with family planning injections can run smoothly. In addition, support can also include information, where the husband who is always supportive will provide information about family planning injections both getting information from TV and magazines and newspapers. Financial support, the husband will provide funds or money for the cost of family planning injections, as well as transport costs, and emotional support, where the husband reminds or gives advice to the mother for routine family planning injections.

g.   **The Relationship Between Social Media Use and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017**

The results of the chi square statistical test, obtained p value = 0.000, meaning that the p value is small than 0.05, so there is a significant relationship between social media and unmet need in Simpang Empat Village, Pekanbaru City. The Prevalence Odds Ratio (POR) = 5.926 with a 95% Confidence Interval (CI) = 2.349-12.461 means that respondents who are at risk with social media are 5.9 times less likely to use contraception than respondents who are not at risk with social media.

The presence of social media can also be used to spread information about family planning programs. Research conducted by Sariyati (2015) shows that the role of social media has an effect on unmet need, with a p value of 0.008. According to him, communication on social media is the first step in a rational decision-making process regarding the number of children and the use of contraception.

Generally, exposure to family planning information can be obtained through social media. Respondents who are not exposed to family planning information may experience higher unmet need than those who get information about family planning. In this day and age, the media to get information is very wide open. Mothers who are active on social media can get good information about contraceptive use, so that they can change their behavior to tend to use contraceptives.

h.   **The Relationship Between the Role of Health Officers and Unmet Need in Simpang Empat Village, Pekanbaru City in 2017**

The results of the chi square statistical test, obtained p value = 0.930, meaning that the p value is greater than 0.05, so there is no significant relationship between the role of health workers and unmet need in Simpang Empat Village, Pekanbaru City. The value of the Prevalence Odds Ratio (POR) = 1.042 with a value of 95% Confidence Interval (CI) = 0.414-2.624 means that respondents without the role of health workers are 1.042 times less likely to use contraception than respondents with the role of health workers.

The role of health workers, especially as educators, is needed to provide understanding and increase public knowledge, one of which is about family planning. Health care providers as an important interpersonal resource that can influence, increase or decrease a person's desire to behave well /

4. Conclusion

Based on the results of research that has been carried out in Simpang Empat Village, Pekanbaru City in 2017, it can be concluded that:

1) There is a relationship between age and unmet need for fertile age couples in Simpang Empat Village, Pekanbaru City in 2017. With p value = 0,000, POR = 1,750, and CI = 0.562-5,451
2) There is a relationship between the number of children with unmet need in fertile age couples in Simpang Empat Village, Pekanbaru City in 2017. With p value = 0.003, POR = 3,410, and CI = 2.156-11.076.
3) There is a relationship between education level and unmet need for fertile age couples in Simpang Empat Village, Pekanbaru City in 2017. With p value = 0,000, POR = 2,611, and CI = 1,816-3,753.
4) There is a relationship between knowledge and unmet need in fertile age couples in Simpang Empat Village, Pekanbaru City in 2017. With p value = 0.009, POR = 2.091, and CI = 0.830-5.266.
5) There is a relationship between attitudes and unmet need in fertile age couples in Simpang Empat Village, Pekanbaru City in 2017. With p value = 0,000, POR = 1.808, and CI = 0.406-2,502. There is a relationship between partner support and unmet need for fertile aged couples in Simpang Empat Village, Pekanbaru City in 2017. With p value = 0.006, POR = 1.273, and CI = 0.511-3.171.
6) There is a relationship between social media and unmet need for fertile aged couples in Simpang Empat Village, Pekanbaru City in 2017. With p value = 0.000, POR = 5,926, and CI = 2,349-12,461
7) There is no relationship between the role of health workers and unmet need for couples of childbearing age in Simpang Empat Village, Pekanbaru City in 2017. With p value = 0.930, POR = 1.042, and CI = 0.414-2.624.

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