



SOCIO-ECONOMIC RELATIONS AND PATRIARCHAL CULTURE WITH THE INCIDENT OF UNMET NEED

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ABSTRACT

Unmet need is a condition when women of childbearing age have a need to use contraception but it is not met. This condition can occur in women who do not want to have any more children or want to space out pregnancies, but do not use contraception. This study aims to analyze the relationship between socio-economic and patriarchal culture and the incidence of unmet need for family planning. Method: Uses a cross-sectional design with quantitative methods. The population consists of fertile couples (PUS) at the Siti Khadijah Clinic, with a sample of 60 respondents taken using a purposive sampling technique. Data were collected using a Standard questionnaire and analyzed using the chi-square test. Results: The analysis shows that Respondents with a low economic level are more vulnerable to experiencing unmet need, as shown by the significant value between socioeconomic ($p=0.001$) and patriarchal culture ($p=0.000$) with the incidence of unmet need. Conclusions: Socio-economic and patriarchal culture play a significant role in the incidence of unmet need for family planning. Cultural-based interventions and economic empowerment programs are needed to increase access and participation of fertile couples in family planning service programs as well as assistance and guidance to prospective family planning participants.

Keywords: fertile age couples; patriarchal culture; socio-economic; unmet need

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INTRODUCTION

Unmet need for family planning refers to the percentage of women of reproductive age (15-49 years) who want to delay or terminate pregnancy but do not use any contraceptive method. According to WHO data in 2021, of the 1.9 billion women of reproductive age worldwide, 1.1 billion have a need for family planning. Of that number, 874 million use modern contraception, while 164 million have an unmet need for contraception (WHO, 2021). The Family Planning (KB) Program is a government program that aims to increase community awareness and participation through birth control, maturing the age of marriage, fostering family health and improving the welfare of small, happy and prosperous families. This is done to create a balance between population growth and available resources (BKKBN, 2021). The percentage of unmet need or unmet family planning needs based on the results of the BKKBN's main performance indicators (IKU) in 2023, the unmet need figure in Indonesia is still high at 11.5% while the target should be 8% (Sumiati et al., 2019).

Family Planning (KB) in West Java Province is an integral part of efforts to control the population and improve family welfare. This program is implemented by the West Java Province Women's Empowerment, Child Protection and Family Planning Service (DP3AKB) which is responsible for government affairs in the fields of women's empowerment, child protection and family planning (DUKCAPIL Jawa Barat, 2020). Based on data from the 2022 Indonesian Demographic and Health Survey (SDKI), in West Java the unmet need for family

planning still shows a significant gap, especially in rural areas and areas with limited access to health facilities (BKKBN, 2020)

Family Planning (KB) in Karawang Regency is defined as an effort to control population growth through a program implemented by the Population and Family Planning Control Service (DPKB). DPKB is tasked with assisting the regent in carrying out government affairs in the field of population control and family planning (Karawang Regent Regulation number 65 of 2021). The latest data on unmet KB needs in Karawang Regency shows a downward trend in recent years. According to the "General Overview of Karawang Regency" report, the presentation of unmet KB needs is as follows in 2021: 14.38%, target for 2022: 10.22%, and Realization 2022: 9.27%. (Perbup Kabupaten Karawang, 2021)Based on the research results obtained at the Siti Khadijah Clinic in the last 1 year, it shows that there has been an incident of unmet need for KB reaching 30% based on the results of interviews with 10 PUS stating that they do not want to use KB anymore because it interferes with menstruation and makes the body fat, and 6 out of 10 mothers said that their husbands did not allow it. Based on the above, the author feels it is important to conduct a study entitled "Socio-Economic Relationship and Patriarchal Culture with the Incident of Unmeet Need at the Siti Khadijah Clinic" which aims to analyze the relationship between socio-economic and patriarchal culture and the incidence of unmet need for family planning.

METHOD

This study uses a quantitative approach with a cross-sectional design. This study was conducted at the Siti Khadijah Clinic, Karawang in December-January 2024-2025. The dependent variable in this study is the incidence of family planning. While the independent variables are socio-economic relationships and patriarchal culture. The research instrument used was a Standard questionnaire from previous research. The population in this study was all married couples (PUS) at the Siti Khadijah Clinic, totaling 160 respondents. In this study, the researcher took samples using purposive sampling techniques and obtained a sample of 60 people based on the inclusion and exclusion criteria. Data collection was done by taking medical records. The data processing technique was carried out in several stages including editing, coding, entry, and tabulation. Then the data was analyzed univariate and bivariate using Chi-Square analysis.

RESULT

Table 1.
Respondent characteristics (n=60)

Respondent characteristics	f	%
Unmet Need Incident		
Yes	35	58,3
No	25	41,7
High		
Tall	11	18,3
Currently	31	51,7
Low	18	30,0
Patriarchal Culture		
Yes	31	51,7
No	29	48,3

The table 1. shows the characteristics of 60 respondents related to unmet need, a certain level, and patriarchal culture. The majority of respondents (58.3%) experienced unmet need. In the certain level category, the majority (51.7%) were at the "Currently" level. Meanwhile,

patriarchal culture was recognized by 51.7% of respondents, with an almost equal distribution.

Table 2.
The Relationship between Social Status and Unmet Need Incidents

Socio-Economic (Income)	Unmet Need Incident						P-value	OR CI (95%)
	Yes		No		Total			
	f	%	f	%	f	%		
Tall	3	8,3	8	10,0	11	18,3	0,001	4,137 (1,985-12,264)
Currently	12	16,2	19	35,5	31	51,7		
Low	10	17,5	8	12,5	18	30,0		

and the Incident of Unmeet Need, the results obtained in all regions with the most respondents, namely with medium socioeconomic status in the lower reaches, experienced unmeet incidents, and in high economic status, respondents did not experience unmeet need incidents. The results of the Chi-Square test obtained a p-value of 0.001 <0.05, which means that there is a significant relationship between Socioeconomic Status and the Incident of Unmeet Need in the Siti Khadijah Karawang Clinic Work Area in 2024. The OR value is 4.137 so that it can be stated that Fertile Age Couples (PUS) with high economic status do not support a 4.137 times risk of experiencing unmeet need compared to Fertile Age Couples (PUS) with a moderate economic level.

Table 3.
The Relationship between Patriarchal Culture and Unmet Need Incidents

Patriarchal Culture	Unmet Need Incident						P-value	OR CI (95%)
	Yes		No		Total			
	f	%	f	%	f	%		
Yes	19	35,5	12	16,2	31	51,7	0,000	4,669 (3,423-15,598)
No	6	8,3	23	40,0	29	48,3		

Based on the results of the study in table 3 on the Relationship between Patriarchal Culture and the Incident of Unmeet Need, the results obtained in all regions with the most respondents with unmeet need incidents were couples with a patriarchal culture of 19 respondents (35.5%) and couples with non-patriarchal culture had a small number of unmeet need incidents, namely 6 respondents (8.3%). The results of the Chi-Square test obtained a p-value of 0.000 <0.05, which means that there is a significant relationship between Patriarchal Culture and the Incident of Unmeet Need in the Siti Khadijah Karawang Clinic Work Area in 2024. The OR value is 4.669 so that it can be stated that Fertile Age Couples (PUS) with high economic status do not support a 4.669 times risk of experiencing unmeet need incidents compared to Fertile Age Couples (PUS) with a moderate economic level.

DISCUSSION

Based on the results of the study, it is known that the elderly couple, namely respondents with regard to the occurrence of premature menopause, said that there were 35 respondents with regard to the results (58.3%). Notoatmodjo, (2020) stated that changes in a person's behavior, including in overcoming premature menopause, can be done through coercion and education (Notoatmodjo, 2020). Social, cultural, and psychological factors are also the causes of women not using contraception. Based on the results of the study, it is known that for the Family Income variable, the highest value is found in the middle income group, namely 31 respondents (51.7%), Socioeconomic status is considered important in determining a person's quality of life including access to health services, education, and employment opportunities (WHO, 2021).Based on the results of the study, the results of the study on the occurrence of

Patriarchal Culture in married couples in the Siti Khadijah Karawang Clinic Work Area were 31 respondents (51.7%). A patriarchal culture is a system that places men as the main holders of power, so that men are considered more beautiful in various aspects of life (Kellett et al., 2014; Refikal, 2024). A patriarchal culture is a system that places men as the main holders of power, so that men are considered more beautiful in various aspects of life (Suliman, 2019). And the p-value of $0.001 < 0.05$ indicates that there is a significant relationship between economic status and the incidence of neonatal mortality at the Siti Khadijah Karawang Clinic in 2024. The or value is 4.137, so it can be stated that elderly couples (PUIs) with high economic status do not have a 4.137 times risk of experiencing neonatal mortality compared to elderly couples (PUIs) with a medium economic level. A socio-economic life is a person's position or identity in a community group that is determined by the type of economic activity, education, and income (Das & Das, 2020; Shibalkov et al., 2021).

Social identity theory posits that individuals derive part of their self-concept from their group memberships, which can be significantly affected by socio-economic status (Falahi et al., 2020). For instance, Gönül and Wängqvist (2021) highlight how emerging adults' vocational identity development is closely linked to their access to socio-economic resources, suggesting that economic conditions directly impact identity formation (Gonul & Wängqvist, 2022). Furthermore, the perception of economic inequality can exacerbate feelings of social exclusion and identity threat, leading individuals to seek solidarity within their socio-economic groups (Manunta et al., 2022; Sánchez-Rodríguez et al., 2019). Based on the results of the study, the areas with the most respondents with the most cases of unmet need were couples with patriarchal cultures with 19 respondents (35.5%) and couples with non-patriarchal cultures had the fewest cases of unmet need, namely 6 respondents (8.3%). The results of the Chi-Square test obtained a p-value of $0.000 < 0.05$, which means that there is a significant relationship between Patriarchal Culture and the Incidence of Unmet Need in the Work Area of the Siti Khadijah Karawang Clinic in 2024. The OR value is 4.669, so it can be stated that married couples (PUS) with high economic status are not at risk of 4.669 times experiencing unmet need compared to married couples (PUS) with a medium economic level. According to Rahmadyanti (2024), patriarchy is a social structure that provides complete dominance over men so that women's roles are more limited (Rahmadyanti & Yamin, 2024).

CONCLUSION

Based on the results of the study, it can be concluded that more than half of the respondents at the Siti Khadijah Clinic in 2024 experienced unmet need. In terms of socioeconomic status, most of the respondents were in the middle-income group, while the rest were divided between high- and low-income groups. The incidence of unmet need is more common in groups that adhere to a strong patriarchal culture. In addition, there is a significant relationship between socioeconomic status and the incidence of unmet need, as well as between patriarchal culture and the incidence of unmet need.

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