

Lack of sources of information on the low participation of men using family planning: A Scoping review

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ABSTRACT

Family planning (henceforth; KB) is an attempt to control the number and spacing of children born. At present there are still many low participation of men in using family planning, where people always think that family planning only followed by women and men only as decision maker. The husband's participation in family planning in Indonesia itself is still very low at around 1,3%. The factors that influence the use of contraception in men are vary, as for the factors that influence the use of contraceptive methods, namely the behavior of seeking contraceptive information. And men's lack of access to information and services is a barrier to using contraceptive methods. Based on the background mentioned, it is important to conduct a study related to the lack information sources on male participation as family planning acceptors. The purpose of this scoping review is to find out the causes of the lack of information sources on the low interest of men to become family planning acceptors. The method used in the preparation of this scoping review used Arksey and O'Malley guideline the results obtained that the factors causing the low participation of men becoming a family planning acceptor is a factor. Sources of information (mass media, health promotion program) few men hear about contraception from health works and the lack of information about contraceptive services is a barrier for men to become family planning acceptors.

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INTRODUCTION

Family planning (KB) is an attempt to control the number and spacing of children born (Suwandi et al., 2019). Currently there are still many low participation of men in using family planning, where in society always assume that family planning is only as decision makers. Women have a higher prevalence than men to use contraception, only one in 12. The influencing factors are poor service accessibility, the patriarchal nature of society, and the lack of involvement of men in family planning. Men's involvement not only helps women in using contraception but also accepts and is involved in the effective and sustainable use of contraception (Ijadunola et al., 2010). Husband

participation in family planning in Indonesia itself is still very low at around 1,3% (Ayuningrum & Sudarmiat, 2017). Low use of contraception and unmet need for contraception is still a major problem (Thummalachetty et al., 2017).

Men's lack of access to information and services is a barrier to using contraceptive methods. The reasons for this lack of use of family planning include fear of complications, lack of understanding of contraceptive methods (Adelekan et al., 2014). The determinants of male contraceptive use vary. Some researchers argue that residence may affect the availability of male contraceptives and their services because most health care providers tend to live in urban areas. And exposing the spouse to information about family planning issues through newspapers/magazines (Irawaty & Pratomo, 2019).

RESEARCH METHOD

This review uses a grouping review methodology using guidelines such as Arksey and O'Malley. The steps involved in this scoping review consist of (1) identifying research questions (2) identifying relevant studies (3) selecting studies (4) mapping data (5) compile, summarize and report the results.

1. Step 1 Identify scoping review questions

To formulate scoping review questions using the PEOs (Population, Exposure, Outcomes) framework this helps to identify the discrete and searchable aspects of a situation where the population has certain conditions and desired outcomes related to the intervention

2. Step 2 Identify relevant studies

Identification of articles used as material for scoping the review is relevant to the inclusion and exclusion criteria. The literature search strategy uses 2 databases, namely Ebsco, PubMed and gray literature Google Scholar. To find relevant articles, the first step is to enter keywords that match the theme (((("Lack of sources of information on the low participation") AND men) AND "family planning") OR contraception and in searches with more than two syllables are given double quotation marks (".....") to specify the literature search, then determine the period of literature search which in this study is limited to journals published in the last 10 years starting from 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021 to 2022 and the selected journals are Research articles, free full text or open access.

3. Step 3 Selection of articles

In the search, 200 articles were identified that were searched from 2 databases, after filtering for relevance, 70 articles were found that were relevant to the title. Re-screening was carried out based on abstracts and full text, research methods, 5 articles were obtained to be taken and reviewed independently based on inclusion and exclusion criteria.

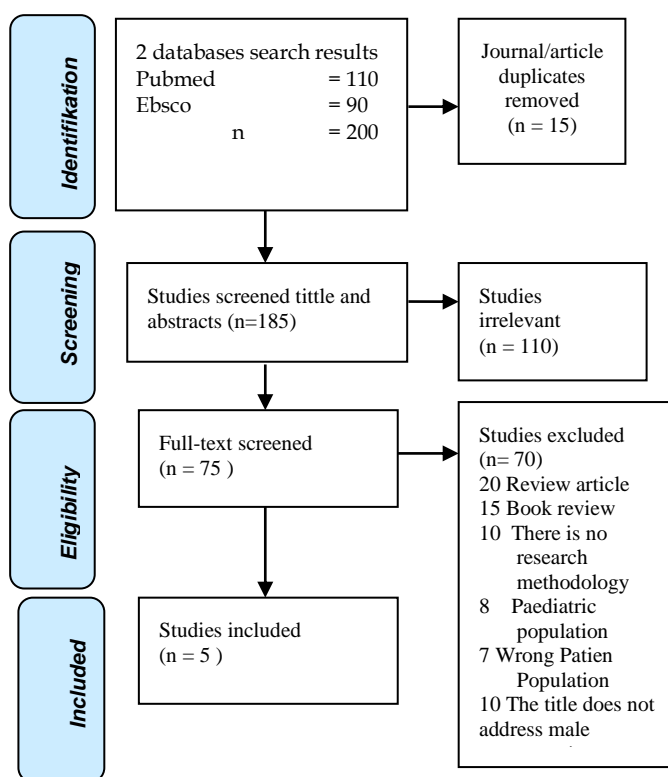


Figure 1. Prisma Flow

4. Charting Data

The researcher sorted, elaborated the selection result in the form of table. Table was grouped to be the author’s name, publication year, countries, research design, number of samples and result as explained in Table 1.

5. Arranging, Summarizing, and Reporting The Results

In this step, the writher arranged, summarized, and reported the results. First, descriptive numerical analysis was provided which covered total articles, publication year, and study type. Second, the strength and weakness of identified literatures through thematic analysis from the study and inserted in the report. The final phase of this step was reviewing the finding implication and its relation to the research.

Table 1. Charting Data

| No | Author/year/country/grade | aim | Study Design / methods/sample | Results |
|----|--------------------------------|---|--|--|
| 1 | Babalola et al., 2015, Nigeria | The purpose of this research to determine factors that affect readiness Nigerian urban man to adopt contraceptive method. | Cross- sectional with survey data, 2.358 respondents | Higher education is linked to ideation score improvement around 6,7 points (P<0.001 compared to no education). |
| 2 | Dougherty et al., 2018, Uganda | The purpose of this research to measure knowledge of men about family planning in rural | Cross- sectional, with survey data, 178 Men. | Ninety eight percent with 73% men reported that they obtained information through radio and only 43% from |

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|---|-------------------------------------|---|--|--|
| | | Uganda for understand which way better for involving men in decision-making contraception. | | medical staff. The most general method known by men is men's condom (72%). |
| 3 | Koffi et al., 2018, Lomé, Togo | The purpose of this research to get outlook about how to get involved man in planning future family program in Lomé, Togo. | Qualitative with Focus Group Discussion (FGD), 72 men age 18-54 years old through 6 groups of focus group. | Men have specific point of view about family planning based on their knowledge and understanding. |
| 4 | Stewart et al., 2017, Australia | The purpose of this research to investigate contraceptive experience, knowledge, attitudes and beliefs from the male sample active heterosexual sexually through online dating site. | Cross-sectional with survey data, 2438 Men. | Condom (35%), vasectomy (22%) are the most used in general. Fewer older men used condom compared to young men (P<0,0001). |
| 5 | Thummalachetty et al., 2017, Uganda | The purpose of this research to fill deep gap knowledge and from where Men in Uganda get knowledge about contraception, and their perception of contraceptive method different. Increase understanding man interactions with information family planning. | Qualitative with Deep Interview, 41 Men. | Men reported the knowledge about contraception based on spouse experience about the side effect, from knowledge, health service provider, mass media promotion, and spouse knowledge from their friends. |

RESULTS AND DISCUSSIONS

Lack of sources of information about the low participation of men in using family planning and collect data on the factors that influence men's low interest in using family planning.

1. Sources of information (Mass media, Promotion of health workers)

Relatively few men have heard about contraception from health workers, and most men report hearing about family planning from the media (radio, television, print ads, etc.) (Dougherty et al., 2018a). 21 percent of men seek information about contraception from the media and from medical providers (Karra & Stark, 2016).

Men's knowledge of contraception is obtained from health care providers, mass media promotions, or peers (Thummalachetty et al., 2017). Men's lack of access to information and services is a barrier to using family planning methods, misinformation such as family planning knowledge is different (Berhane et al., 2015). Almost all men (162/178, 91%) said they knew about at least one method of family planning. Most commonly known method was the male condom (105/160, 66%), injectable hormonal contraceptive (87/160, 54%) and birth control pills (83/160, 52%) (Dougherty et al., 2018b).

2. Factors that cause low family planning (KB) participation include:

- 2.1 Condition social, cultural, community and environment families who still consider participation men haven't or it's not important to do.
- 2.2 Knowledge and awareness of man and family in low family planning (KB).
- 2.3 Limitations acceptability and accessibility (affordability) male contraceptive services.
- 2.4 There is assumptions, habits and perceptions and wrong thinking that still tends deliver not quite enough Answer family planning (KB) fully to woman (Kusuma Wibawa, 2019).

CONCLUSION

Lack of sources of information about the low participation of men in using family planning occurs in developing countries. Several factors are said to be an obstacle to the continuity of family planning in men, including the lack of sources of information such as the mass media, Promkes from health workers so that relatively few men have ever heard about contraception from health workers and social, cultural, community and environment families who still consider participation men haven't or it's not important to do Knowledge and awareness of man and family in low KB, Limitations Acceptance and accessibility of contraceptive services for men..

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