

Family Planning in Unintended Pregnant Younger Age

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ABSTRACT

Background: Early marriage increasing year by year. This happen too in our country that early marriage was 25,71 % in 2017. If we compared by province number, early marriage in Daerah Istimewa Yogyakarta was in 11,07%. Early marriage become a big problem to our health because it could make booming population, jobless, less welfare and school drop out. A young age who did not have a planning about family yet, they lead on their life by low knowledge. Almost of young age early marriage had school drop out there fore they had low education and knowledge. They could not describe their family planning about how many their child they want to have, their occupation, their finance, and health.

Objectives: This research was aimed to identificate family planning related to number of child, occupational, financial and others in early marriage

Methods: This research used qualitative studi which the design was the phenomenology. Indepth interview was taken to 14 informants in Jetis Subdistric of Bantul.

Results: Result of the research showed that early marriage and pregnancy was in unstable emotional and psychological condition therefor they have no family planning. They have school drop out so they have low education and knowledge that could impact to their low occupational. Economic factor could make them in difficulties because they need more cost of living.

Conclusions: early marriage young age have no family planning in their life such as number of child, financial, occupation and health.

Keywords: *Early Marriage, Number of Child, Financial, Occupation*

INTRODUCTION

Early marriage in Indonesia increase year by year. Annual report from Badan Pusat Statistik (BPS) in 2017 nationally was 25,71% for early marriage. The number was twice compared to early

marriage in Daerah Istimewa Yogyakarta (11,07%)(1). It was clearly that early marriage would be a big problem for us like health, population and welfare.

The caused of early marriage in Indonesia was complex, such as culture, pregnancy, economic, or education(2). Early marriage had bad impact for adolescent health. Almost of the early marriage because of pregnancy was unintended pregnancy. Unintended pregnancy made adolescent psychological condition depressed, scared, ashamed and almost of them tried to get abortion(3). Unintended pregnancy in adolescent also made them school drop out and jobless. They were in low education therefor could not reach good job(4). This research aimed to investigate family planning in unintended pregnancy in younger age in Bantul District.

MATERIALS AND METHODS

This research was taken by a qualitative study which the design was the phenomenology. This study conducted in July 2015 to Januari 2016 in the public health care of Jetis Subdistrict of Bantul. This research recruited seven informants adolescent mothers (16-19 years old) who have unintended and intended pregnancy. Indepth interview was used to collect the information and guided by open ended questions.

Information also collected from key informants such as their mother, husband and midwives in Public Health Service in their area for triangulation. During the interviews, information was recorded by voice recorder and wrote in the field notes. For finding the informant adolescent who marry at the early age, researcher collected data from KUA (Kantor Urusan Agama) which has marital registered and from Public Health Service (Puskesmas) in the subdistrict.

This research was permitted by Ethical Clearance Comitte Faculty of Medicine Universitas Gadjah Mada Yogyakarta with serial number KE/FK/1008/EC/2015 dated 13rd August 2015.

RESULTS

The main informants in this research were seven adolescent mother whose their baby under 6 months old. The informants's age was under 21 years old (range 16-19 years old). Five informants had unintended pregnancy. All the informants become adolescent mothers. Three of seven informants have school dropped out when they were in senior high school. Level of education of the informants were senior high school (three informants) and junior high school (four informants). The informant marital status was five married and two divorced. Information from informants was described by the theme and confirmed by informant's statement quotations and writted by R1 for informant 1; HR for husband of informan, MR for mother of informan.

Theme 1 : Financial and Occupation

The informant could not have a good job caused of low education. Their husband did not have permanent work. There for their parent also provide to their needs such as meal and their need during pregnancy such as their quotation :

“I lived together with my parent, eating together with them. I never asked my husband for money, and I never taken from him” (R7, 21 years)

All the informant lived together with their parents, so their needs be financed by their parent. One informant who had unintended pregnancy said that her husband did not have permanent work. Her parent gived them money monthly.

“...he (husband) was a driver here, he was given money from my mom. Mom also gived me money. He never given me a money for buy our needs (milk for their baby).”

“Mom given money for me buying a milk. My ex husband was not enough money...” (R2, 17 years)

Another informant said that her husband got low income from his work, there for they should divided their income during pregnancy especially for antenatal care (ANC) routinely.

“...His income 15.000 per day. . . I saved 7 thousand, for buying a drug and medical check up. . . and other I saved for buying soap and shampoo.” (R5, 20 years)

This statement also be clarified by their husband. One of informant’s husband also felt that they could not get high income. They should fulfill their needs such as nutrition uring pregnancy, Ante Natal Care (ANC).

“Ya..(work) for all our daily needs, going obsgyn, midwives, buying milk, yaa all of our needs.” (HR1, 22 years)

“Ya I work as labour as Machines technician. Sometimes my parent also gived som money.” (HR6, 21 years)

Some of parents hoped that their children could have some course as alternate for their school drop out. Their parent wanted their child having a skill so they could earn some money.

“I asked her to have a course like a tailor for her future. I hoped she could have a job despite when their child (grandchild) was a toodler. Hopefully she have a better future.” (PR5, 47 years)

Theme 2 : Health

Informants described that they had low knowledge about health. Some of them did not know what they should do during pregnancy. One informant mentioned that she did not come ANC because of cost and low information about health.

“No (no ANC), I have no money for ANC, , and we could not reach health facilities (I lived in Mother in law’s home). I have health assurance (jamkesmas), but Midwives said it could be used there despite no Family Card (KK). So I had to pay... My condition was no money at that time so I could not ANC.” (R5, 20 years)

Some of adolescent’s mother also said that her child never think about her pregnancy. For drinking folate acid and iron, they always reminded by her husband or mother.

“It clearly, , if she wanted her pregnancy to be health, she should drink multivitamin. I never looked she drinking completely or not. I just kept positive thinking she used to.”

(MR5, 47 years)

Being adolescent mother and having low education, they did not know about reproductive health. Informant also mentioned that they were worry about their pregnancy. One informant worried because she rarely checked her pregnancy up to midwives and drank folate acid and iron.

“if I did not check up and drink multivitamin, my baby would get sick.” (R4, 19 years)

One informant also said that she did not know having second pregnancy. She also tried to abort her baby because they was not ready to have.

“I ever had second pregnancy, for a few weeks.. .then I tried to drink one box of drug for menstruation, and Jamu. I did not know that my husband also bought expired instant noodle. . . Pretend not to know if it was expired. . .Then I was bleeding and getting abortion. .” (R6, 17 years)

This statement also was clarified from the husband that they did not knot if they would have second baby.

“I bought this (expired noodle) my self sist, there was a traditional shop right here, but I did not know if it was expired. She (wife) did not say anything, then she got stomachace, then I brought her to doctor. . .When we just arrived, this (fetus) misscarriage, then doctor decided to curette my wife.”

DISCUSSION

Early marriage and pregnancy was susceptible to problems. Unstable emotional and psychological condition caused mother did not accept her pregnancy absolutely, therefore it was effect to her fetus(5). Early married adolescent needed emotional support as motivation for maintaining her pregnancy(6). They could get this support from her family such as husband and parents, or environment such as health worker, their friends, or neighbourhood (7).

Unintended pregnancy made adolescent school drop out and social exclusion. Having no facility and social exclusion was the main reason pregnant adolescent didn’t continue her study that would

increase school dropout. Starting school dropout also could make adolescent pregnant or married early(8). The study in Imogiri Subdistrict of Bantul found that 77.7% early married adolescent caused of pregnancy and made dropouts from their school(2).

School was the agent of change. Knowledge of reproductive health in adolescent could be given while they were schooling. This aimed to prevent poor behavior. Health education to adolescent focused to their behavior involving adolescent naughtiness, sexual education, and nutrition(9).

Lack of education made adolescent couple having low labour position, therefore they could not fulfill their needs such as antenatal cost, delivery cost, and everything during their pregnancy(10). Economic dependence in adolescent mother also caused them did not attend antenatal care(11).

Unstable emotional also caused of unreadiness of pregnancy. This made adolescent having poor behavior during their pregnancy such as poor eating like softdrink, instan noodle, high fat consumption even restricting their food. It also made them did not attend antenatal care(12). Attempts to get abortion was also caused by role of their parent(13). Unstable emotional also influenced to their pregnancy (5).

Frequent of attending antenatal care influenced by internal and external factor. Internal factor could be described such as age, education level, and attitude. While external factor involved economic, culture, geographic, and information. The mature age determined their mindset, included of attending antenatal care. Their attitude was a reaction to the information they received(14).

CONCLUSIONS

Early marriage young age have no family planning in their life such as number of child, financial, occupation and health. Adolescent who marry at early age had environmental constraint, and lack of knowledge. Almost of adolescent married because of unintended pregnancy.

RECOMMENDATION

The government should complete the facility of public health care, give health counseling in the school, and give equal accesing in education whom having pregnancy in their school aged. The subdistrict government and public health care should give reproductive counseling, the effect of early

marriage on the maternal and perinatal health, therefore adolescent had readiness as mental and physical being a mother.

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