Perception and Determinants of Vasectomy Acceptance among Couples of Childbearing Age in Mojokerto, East Java

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Abstract: Background: Indonesia is a country with the fourth largest population in the world. Its population growth rate is 1.49% per year. The percentage of acceptors of the family planning program among women of childbearing age is 60%. However, the percentage of male participants in using contraceptive, especially vasectomy, is low. Lack of knowledge and information on vasectomy may have caused fear, anxiety, and false perception. This study aimed to investigate the perception and determinants of vasectomy acceptance among couples of childbearing age in Mojokerto, East Java. Subjects and Method: This was a qualitative study using study cases approach. A sample of 10 informants was selected for this study consisting of couples of childbearing age who were vasectomy acceptors and community members. Data were collected by in-dept interview and analyzed by Colaizzi method. Results: Reasons for vasectomy acceptance included social responsibility, pity feeling for wife, and concern on future child welfare. There were no notable changes in physical appearance among the vasectomy acceptors. Sexual potency after vasectomy surgery did not weaken. However, social perceptions on vasectomy varied. Most community members believed that having children was an important issue and yet having prosperous family was equally important. Conclusion: Vasectomy acceptors do not experience changes in physical appearance. Sexual potency and sexual life are not affected by vasectomy. The main reason for vasectomy is responsibility for future family welfare.

Key words: Vasectomy, acceptance, perception, determinant, couple of childbearing.

1. Background

Indonesia is the fourth most populous country in the world, the population growth rate is 1.49 percent per year [1]. The significant population increases in Indonesia have larger long-term development implications. Many of the large populations have low-quality skills, which is another important issue for the country’s development. Indonesia deals with the following issues: high growth rates, high birth rates, lack of knowledge and low awareness of childbearing age, low awareness of reproductive rights, young marriage age, lack of male participation in a family planning programs, lack of maximum access and quality of services a family planning programs, and lack of participation of local institutions in implementing a family planning programs [2]. Indonesia is one of the countries that pioneered the 1994 International Conference on Population and Development (ICPD) in Cairo. This is in line with the new paradigm of the family planning programs, from fertility control programs to reproductive health approaches that focus more on reproductive rights, women’s empowerment, and gender equality. It means in implementing a family planning programs and reproductive health, many efforts have been made by the government to consider the rights of women and men equally. The government, however, has not achieved the desired goal regarding to fertility
problems. While women’s participation has increased significantly, ranging from 59 to 60.3 percent of the total participants; male participation is quite low. Male participation was only 1.3 percent, consisting of condom users (0.9 percent) and vasectomy users (0.4 percent) [3].

There are many factors that contribute to the low participation of men in a family planning programs. Some key factors are overlooked in the family planning programs given to men, and fewer KB (family planning) methods can be chosen by men. In addition, there are also several other factors, such as lack of knowledge, negative attitudes and behavior, client needs, environmental factors, social and cultural norms, religion, family/spouses, information limitations and access to male contraception, and fewer types of male contraception [3].

Generally, couples of childbearing age believe that family planning programs initiatives are a negative conception and are women’s affairs. In addition, men are also often affected by fear and anxiety about the side effects of vasectomy surgical methods; that is what make them hesitate to undergo a vasectomy. This may be because they have less data or information about the effects of vasectomy on their physical, psychological, and social lives. Lack of information about the effects of vasectomy is also caused by a lack of research done to identify the effects of vasectomy, especially the physical, psychological, and social conditions of men. From this phenomenon, this qualitative research aims to explore the childbearing age couples after undergoing a vasectomy and community perspective on vasectomy in the Mojokerto, East Java. This study uses a case study approach, since it suits to explore the social processes that occur in human interaction [4]. The use of this data collection approach helps researchers reduce the misunderstanding of participants’ information [5].

2. Objectives of Research

The aim of this study is to investigate the perception and determinants of vasectomy acceptance among couples of childbearing age in Mojokerto, East Java.

3. Research Methods

The design of this research uses qualitative method with case study approach. The sample was chosen by selecting the couples of childbearing age where men aged 35-50 years old who undergo vasectomy and women have not menopause yet in Mojokerto. Samples were selected using theoretical sampling technique. The data collection instruments used include field reports, audio recordings, video recordings, and field notes. Data were analyzed by Colaizzi method [4].

4. Research Result

The results of this study show that from 10 informants (5 couples of childbearing age) who participated in this study, five of them are high school graduates, three are college graduates and the other two are elementary school graduates. Two pairs of participants come from high class family, two pairs come from middle economic family, and a pair comes from low socio-economic family. One participant undergoes a vasectomy less than one year, one for two years and three others for more than five years. Two participants are village officials as the head of the village, one participant is a member of farmer association, one participant is a subdistrict officer, and one participant is a doctor who used to be the head of Puskesmas (Community Health Center) Jetis, Mojokerto. Three participants live in rural areas and two participants live in the suburbs.

4.1 Reasons for Vasectomy

The participant discloses the three reasons of their vasectomy: their social responsibility, feeling sorry for their wives, and concern for the well-being of their
children in the future. It means their participation in vasectomy is motivated by their social role in society, as community leaders, they have an obligation to be role models, peer support groups with jobs that offer information, assurance and social inclusion [6]. The second reason is a sense of sympathy for the wife’s condition since the wife feels uncomfortable using various methods of contraception and the wife fails in the contraceptive program. Fifty percent of vasectomy clients state that they are dissatisfied with previous birth control methods, mainly because of the side effects their wives have [7]. The final reason why people take contraception is their anxiety about the well-being of the children in the future, since they have insufficient income. Therefore, vasectomy becomes the right choice for the birth control method.

In the past, people in East Java believed that the more children they had, the more income they earned. That is why a lot of families have many children and large family structures. Society has now begun to change this belief because of the transition to a more global economy and market share. They realize that when a family has many children, parents have more responsibility for their children. Another belief is whether they can eat or not, the important thing is the still stick together. This shows the importance of togetherness in family and society. A vasectomy man believes that having many children is a good thing and that welfare should be the ultimate goal. However, having many children would make it difficult to have a stable economic condition. That is why some people realize that it is better to limit the number of children. Since it does not allow the wife to use contraception, the husband can use a vasectomy. It pictures that the choice to undergo a vasectomy is one manifestation of the husband’s affection. In the family, the relation is described as soulmate, which means life is for husband and wife. Therefore, they must face all the consequences of their shared responsibilities [8].

4.2 Male Psychological Changes after Vasectomy

4.2.1 Comfort in Sex
All participants felt more comfortable having sex after vasectomy surgery. They feel more relaxed, comfortable, safe, fun, free, and calm. They feel free and safe since there is no risk of pregnancy. It gives them the comfort to enjoy more sex without any risk. What all participants know is that after vasectomy there will be no pregnancy anymore. According to De Knijff nonmotile sperm was found in 33% of patients 12 weeks after vasectomy, with an average time for azoospermia is 6.36 months [9]. Azoospermia is required for sterility. Men with low number of nonmotile sperm (<1×10⁶), after vasectomy have a very low risk of causing pregnancy [11]. Jamieson et al. recommend three months after vasectomy or after 20 ejaculations to avoid sexual intercourse or use temporary contraception until azoospermia is documented. Couples should be counseled that they are not sterile immediately after the procedure and until the absence of sperm is documented on microscopic examination of the cement [11].

4.2.2 Believe in Sexual Relations
Most participants feel confident in their sexual abilities. One participant expressed doubt since his sexual ability is decreasing.

4.2.3 Self Perspectives
Most participants did not experience changes in their own viewpoint. They believe that there is no change in itself after a vasectomy. One of the participants felt the change, since his sexual ability was different from his in the past. Complaints reported by participants are not actually the complication of vasectomy. Such complaints are coming from depression or self-change such as impotent feelings. This supports Nigam et al.’s findings that the psychosomatic disorders, depresesi, impotent feelings can occur in people suffering from complications [12].
4.2.4 Is Vasectomy the Right Decision?

Most participants claim that vasectomy is the right decision for them since there is no negative effect they experience after their vasectomy. Men tend to choose vasectomy as a method of permanent KB when they decide not to have more children. They know that vasectomy is a simpler procedure than female sterilization. Participants explained that their understanding of surgery for female sterilization is more complicated and may cause more uncomfortable side effects than vasectomy [10]. In general, men who are vasectomous want to take responsibility since it is unlikely that their wives use the contraception methods or wives fail to use other contraception methods. They believe in vasectomy as an expression of love for their wives and families.

These results support Jutner Cristensen and Maples [13] that patients who have undergone a vasectomy for a year have a complain. Most studies related to the consequences of vasectomy for psychosocial well-being reported an extremely high level of user satisfaction for men vasectomy and their partners (e.g., from 90% to 100%). They are happy with their decision to vasectomy [14]. Some other participants regretted having vasectomized because of their decreased sexual ability and easy to get a physical illness. This couple’s interview shows that the decision to do a vasectomy was because they had to do it [15].

4.2.5 Social Response

The social response to men with vasectomy also varies. Someone believes that children can make their lives more comfortable. Therefore, children have an important role in building peace of mind. Some are also very proud to have many children since they expect the children to make their future welfare. One’s life expectancy includes harmony, comfort, and peaceful togetherness with everyone [8].

5. Conclusion

After vasectomy, couples of childbearing age do not feel any change in physical conditions that endanger health. Most participants also want to do a vasectomy to show their affection to their wives. Another reason is for the welfare of their children and families in the future. They also believe that, the vasectomy helps to improve the quality of their marital relationships. The public response to vasectomy varies in general. People see that having children is important, but family welfare is very important as well.

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