Development of Public Communication Model in Increasing Participation of Men in Family Planning Program by Vasectomy

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Abstract: This research has a purpose to identify communication forms of public sector in Family Planning program using vasectomy and finding the appropriate communication model in increasing active participation of men in such program. It used a qualitative approach under case study method with structured interview technique made against acceptors of Family Planning with vasectomy, non-acceptor community, public figures and Regional Government employees in charge in Family Planning program. The analysis stage is started from literature review to take inventory and identify communication forms of public sector and finding the appropriate communication model in increasing active participation of men in such program. Under the research result, the public communication models which are developed in men’s participation under vasectomy sector were marketing, consultation and engagement. Those three models showed strong relevances with existing participation forms of men covering information, consultation and partnership. Those three communication models can be used as a strategy basis to be more able to increase men’s participation under vasectomy method.

Key words: Communication Models • Men’s Participation • Family Planning • Vasectomy

INTRODUCTION

Based on the result of population census in 2010, total Indonesia’s population achieved 237,641,326 lives and constitutes a country with the world’s fourth largest population. However, such increasing total population from year to year cannot be able to be balanced with the existing human resources quality. One of the development programs which is persistently carried out by the government in the population sector is a Family Planning program. This program is thought the appropriate one to minimize the problem related to the population growth oriented to the establishment of healthy and prosperous families by restricting births.

A criterium of the development succes is indicated by the public participation of program acceptors [1]. Likewise with Family Planning program which needs the support from the child-bearing couples. The support of such kind of men and women couples should be able to be optimized. Currently, 95% or more of active participants of Family Planning program has been derived from women groups, while men do not yet achieve 5%. One of the success keys in the performance of the development program is indicated by the existence of public participation that can be achieved by establishing a good communication [2]. Communication related to the program of Family Planning must be done appropriately and correctly and not emerging wrong understanding, mainly for men. Since in its essence, the Family Planning program is an effort to improve the awareness and participation of public through the development of marital age, birth arrangement, family resistance development and the improvement of family prosperity to realize a happy and prosperous small family [3].

Men’s participation in the Family Planning program in Indonesia is currently categorized a low category. It is observed from men’s active participation in the Family Planning program up to 2014 which is still under 4%, with the total number of condom contraceptive of 2.8% and vasectomy of 1% [4]. Such still low participation level of men in this Family Planning indicated that the comprehension on the responsibility for total family number planning is mostly located on the women’s role.

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As one of the main elements in the family, the participation of men or husbands should not be ignored. Therefore, it is required a concept that can abridge a gap between the men’s important role and its comprehension on the Family Planning program. Other than condom, vasectomy or men’s surgery methods are men’s forms of participation to join the family planning program. Besides that, the existence of women groups having problems in having contraceptives made that the option of contraceptives for men as a better alternative [5]. A concept that is able to explain and provide the alternative on such gap is the participation. The participation in public sector is a framework that can describe a broader communication reality [6].

This research has a purpose to identify communication forms of public sector in Family Planning program by using vasectomy and finding an appropriate public communication model in increasing men’s active participation in such program.

Vasectomy is a safe, simple and effective kind of contraceptives for men. The vasectomy that is currently used is a method with minimum pain, no scratch, no stitch and no blood loss. The entire procedure can be completed within 20 minutes and the user can leave the clinic after an hour. He can also continue with his hard works or other routine works two days after the surgery [5].

Vasectomy is an easier, safer and more effective contraceptive if compared to women’s sterilization or women’s surgery method [7]. However, the existing reality which becomes trend not only in Indonesia is that the participation level of men is relatively smaller than women’s participation level.

Mahat et al. [8] explained that the misunderstanding based on the adhered culture has a big role for the denial by men to choose vasectomy as a. Contraceptive Furthermore, the belief that the men’s surgery method can cause castration, fear on surgery procedure and the failure of vasectomy also constitutes a trigger of unwillingness to choose men’s surgery method as a contraceptive option [9].

Such wrong comprehension needs to be seriously observed. Since basically there are two ducts with two different liquids within men’s genital organ. Sperm is produced in testis and cement liquid is produced by other glands (Seminal vesicle and prostate glands). A duct which brings sperm from testis is different from a duct which brings cement liquid. The sperm can be mixed with cement liquid during ejaculation. Upon men’s surgery method procedure, there is only a duct with sperm that is blocked. Another duct with cement liquid is not affected in any other ways. Therefore, after having vasectomy, ejaculation of cement liquid happens normally and men will experience the same sexual pleasure. The only difference is that the men’s cement liquid does not bring sperm that can result in fertilization and pregnancy. It also explains that the erection and the hardness of the men’s penis are not affected by the men’s surgery method [5].

Some of the world’s researches of vasectomy for men have been reported. The relevant research results such as accurate information provided to people about vasectomy, explicitly they said that the use of vasectomy does not cause the sexuality degradation and if the service quality is good, the vasectomy request will significantly increase thus giving contribution to the increase of men’s participation within Family Planning program [5]. In addition to that, there is a research that discloses that the awareness can increase the men’s interest in vasectomy. However, there are many demands to reduce groundless fear from majority men related to the safety, benefit of vasectomy and issues with regard to the sexual desire and capability and fear of surgery. It requires a communication approach that can change the target behavior [7]. In order that the family planning program for men can run maximally, the role presence of women or wives is very needed because this program needs a high commitment of the husband and wife couple, such as other family planning programs [10]. Negative social culture values concerned with men’s participation in Family Planning such as shyness factor against surrounding social circles if the men participating in Family Planning, the opinion that considers the value of sons is higher than daughters and the opinion that Family Planning is women matters [11].

Communication is a social process where the individuals use certain symbols to develop and integrate meanings within their social circles. Communication in public sector can be viewed from three dominant models and seven models of communication variances. Those three dominant models cover deficit, dialogue and participation. Meanwhile seven models of communication variances in public sector cover defence, marketing, context, consultation, engagement, deliberation and critique [6].

Seven variances of public communication cover: (1) Defence is a communication model that is built in public sector such as hostility or contradictory concept. This model also can be acknowledged in communication focused in other ways. (2) Marketing, this communication model is on purpose to persuade public with certain ways
such as promotion and pleasant presentation. (3) Context. This type of communication model takes into account of public variety and ways to understand experiences and perceptions of the target group in establishing appropriate information receipt for them. It for instance can be strengthened with public social and cultural approaches. (4) Consultation. This kind of communication oriented to the finding of public perception with various ways, on the intention to redefine message or negotiation about program implementation. (5) Engagement. This kind of communication emphasizes on how public expresses their concern, ask questions and becoming actively involved in the program. (6) Deliberation. This kind of communication is a form of public participation which is good and directed to the creation of broader comprehension on the dialog and democracy process. It can be viewed from such high public contribution in decision-making process. (7) Critique, is a communication model in which the meaning finding is carried out through intellectual references under science and culture multi-discipline that can offer broader insight. This ‘critique’ term is used as an analogy in the processing of public experience and interpretation [6].

Rohman [12] who developed Armstein concept, made three levels of public participation scheme into three groups with eight participation levels. Three participation levels consist of citizen power, tokenism and non-participation while eight participation levels comprise (1) Citizen control means people controls public policies starting from drafting, implementation through its implementation. (2) Delegated power means the government gives the power to people to self-manage some of their needs in a development program. (3) Partnership means the partnership between the government and the people in development programs. (4) Placation means involving citizens as members of the committee in program despite of the right to decide is still in the hand of the government. (5) Consultation means the existence of two-ways communication such as attitude survey, citizen meeting and public hearing. (6) Information means there is only one-way communication from government to people, such as announcement, pamphlet, poster, annual report. (7) Therapy is intended not to encourage people to participate but to educate people. (8) Manipulation means people are directed in order not to be forced to do something, but in fact they are directed to participate. Participation is a concept of legitimacy as one good governance principles [13], in the other side, a civic culture continuum ends with participation too [14].

This research has two purposes. First, to identify communication forms of public sector in Family Planning program using vasectomy and second, finding the appropriate communication model in increasing active participation of men in such program.

MATERIALS AND METHODS

This research uses qualitative approach with case study method. This kind of case study research is intended to intensively attempt to investigate a case or small group of cases and their contexts [15]. In this matter, the case study research is focused on the characteristics details in making inventory and identification on communication forms of public sector which are applied and understood by the users of vasectomy method and the surrounding situation as well. The case study research enables the researcher to be able to coonect someone’s or group of active participant’s action in micro level with communication process of public sector that is carried out by service provider in macro level in bigger scale. The field research is carried out by observing and taking note on someone’s or group of active participants attitude and behavior of Family Planning using vasectomy naturally and in certain period of time.

The structured interview is made against Family Planning acceptors with vasectomy, non-acceptor community, public figures and Regional Government employees in charge in Family Planning program. The communication process involved all interest groups as the informant to provide description directed to the comprehension on how people interpret their actions in their social contexts [16]. The analysis which was done in the research has been described in main themes arising from literature review, namely taking inventory and identification of communication forms of public sector in Family Planning program using vasectomy and finding the appropriate communication form of public sector in increasing male’s active participation in Family Planning using vasectomy.

This method provides the opportunity to evaluate the public communication carried out by the government and results in the comprehension and the approach which reflect the perspectives of those directly involved. This approach adopted the Gower concept which opines that as a self-evaluation, support by practice comprehension in public relations study will be very helpful [17]. Thus, in this research, the practice and the theory may be able to reciprocally provide information.
RESULTS AND DISCUSSION

Participation is someone’s or a group of people’s mental and emotional involvement within a group situation that encourages the person or those people concerned upon his/his/their own willingness or desire according to self-help capacity to take part in the effort of achieving collective objective in his/her/their accountability. There are several ways that encouraging the willingness in involving himself/herself/themselves, which may be caused of interest or due to solidarity, with the same purpose and even the desire to conduct collective step despite different purpose. It means that whatever factor that encourages the participation it eventually must bring the agreement on the purpose to achieve and will be collectively carried out. In this process it happens argument, negotiation, compromise to be then arrived into the agreement.

Total active participants of Family Planning Program of 2015 in Administrative Municipality of West Jakarta achieved the figures of 273,769 active participants which are child-bearing couples in attending Family Planning Program. Of such figures, 3,541 people have been active participants of Family Planning with vasectomy distributed in eight Sub-Districts covering Cengkareng, Grogol Petamburan, Taman Sari, Tambora, Kebon Jeruk, Kalideres, Palmerah and Kembangan.

The interview and observation carried out in several village units in two sub-districts namely Kalideres and Cengkareng Sub-Districts and were recommended by Regional Government under some considerations. Those considerations comprising the convenience to obtain information from available resources and constitutes a sub-district with total acceptors with the largest total Family Planning development basis. Furthermore, the availability of Children Friendly Integrated Public Space (Ruang Publik Terpadu Ramah Anak/RPTRA) which can be used to facilitate the dissemination activity of Family Planning program and the support from the Family Planning counselors derived from Village Units and Sub-Districts or people are very meaningful in providing the needed information.

Based on the interview result against informant, the public communication model applied against the users of vasectomy contraceptives covering marketing, consultation and engagement. The marketing is carried out through promotion and dissemination of vasectomy program, Consultation with the prospective acceptor is carried out individually and the Engagement which involves prospective acceptor actively in vasectomy programs that are carried out. Forms of participation found comprise information, consultation and partnership. Information was in form of poster and banner about program on Family Planning program, consultation helps in giving the opportunity to the prospective acceptor to discuss in a special meeting and to build partnership by involving citizens to become counselor assistants in the Village Unit level.

Identification on Public Communication Models in Family Planning Program Using Vasectomy: The most popular communication form carried out in Family Planning program in general and vasectomy in specific is categorized into marketing category. This communication model attempts to take people to join the vasectomy program by promoting the excellence of the contraceptive use using presentation or drawings about the excellence of vasectomy program in specific. Some excellences that are frequently exposed are that its application is only once forever, not hormonal in nature (Not containing certain hormone) and minimum side effect. The communication model with marketing is generally carried out through vasectomy dissemination program for prospective acceptor in groups. This dissemination is intended to provide general explanation to all participants to obtain the knowledge on the contraceptives from the aspect of benefit, convenience and side effects that might be incurred.

The second communication model is Consultation. This communication model is the continuity of the marketing model with orientation on the finding of perception and the giving of opportunity for the prospective acceptors to discuss about unclear information about Family Planning program with vasectomy. The consultation can be carried out by the counselors of Family Planning individually to the prospective acceptors with vasectomy despite its necessity on the process to make themselves being confident to choose such contraceptive. In this consultation process, the roles of their couples or wives having significant contribution in decision-making to choose this vasectomy contraceptive. Besides that, the capacity of counselor to give confidence to the prospective acceptors is very important so that the existing doubt can be solved.

Engagement is the third communication model carried out in Family Planning with vasectomy. In this model, the communication focus is more emphasized on the involvement of the prospective acceptor or the relevant acceptors related to vasectomy program to be actively...
involved in dissemination program of Family Planning program and the dissemination program. The counselors derived from people are generally active while in the same time they are also vasectomy users. Besides having a mission to share their experiences, the existence of vasectomy acceptors that give testimonies is very important to give confidence to the prospective acceptors.

The Appropriate Public Communication Model in Increasing Men’s Active Participation in Family Planning Program Using Vasectomy: The first form of participation that is found covers information which is a type of participation that does not yet provide the opportunity to the prospective acceptor to respond the information given and being only one-way communication in nature. Such information is an initial input for the prospective vasectomy acceptor to find out generally and to stimulate the prospective user to further find out related to unclear information by asking the existing counselor. Though the information that is provided still cannot be able to assure the prospective acceptor to choose vasectomy, however, information through banner or poster can capture prospective users to attend and join dissemination held by the counselor. The communication model applied in this form of participation is marketing.

Consultation is a further form of participation from the stage of information. In this stage, there has been viewed a response from a prospective user to more delve the information related to vasectomy correctly. There are two models of consultation are applied. Firstly, the prospective acceptor directly asks during special meeting held by the counselor. Secondly, the prospective acceptor directly visits the prospective user which already had intention to become vasectomy acceptor but still needs to be given the confidence. The role of the counselor in giving the confidence to the prospective acceptor is very important to change the existing perception. The communication models in this consultation stage are marketing and consultation.

The third communication model is engagement. This model is applied upon participation form of partnership, by involving people that have been acceptors or counselor assistants or are willing to give testimonies to prospective acceptors. The office of village unit very expects that such kind of public involvement to become counselor assistants due to limitation of total existing counselors in each village unit office and for the smoother communication between public members that have been known to each other. In other hand, testimony is very needed as the success evidence in using such vasectomy method. This kind of evidencing method is expected to be able to give the confidence to prospective vasectomy users if the method is safe.

CONCLUSIONS

Public communication models which are developed in men’s participation using vasectomy are marketing, consultation and engagement. Those three models have strong relevance with existing participation forms of men. Three forms of participation that can be observed covering information, consultation and partnership. Public communication model through marketing is applied in participation form of vasectomy user acceptor men through information and consultation. Communication model with consultation is applied in form of consultation participation, while communication model with engagement is applied in form of partnership participation.

Those three communication models should be able to be used as a strategy basis to be more able to increase men’s participation to join Family Planning program under vasectomy method. It can be carried out by carrying out more dissemination with existing model approach by increasing its operation intensity.

REFERENCES


