

Unmet Need for Family Plannig During Covid 19

by Noor Syafaatin Udhma

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UNMET NEED FOR FAMILY PLANNING DURING COVID 19Noor Syafaatin Udhma¹, Sri Ratna Dwiningsih²^{1,2} Fakultas Kedokteran Prodi Kebidanan Universitas Airlangga
*Correspondence email: noor.syafaatin.udhma-2020@fk.unair.ac.id**ABSTRAK UNMET NEED KB DI MASA PANDEMI COVID 19**

Latar Belakang: Penurunan angka unmet need KB merupakan salah satu sasaran strategis pemerintah dalam mewujudkan pertumbuhan penduduk yang seimbang. Capaian penurunan angka unmet need KB di tahun 2020 sebesar 64,2%, capaian tersebut mengalami penurunan dari tahun 2019 yaitu sebesar 81,9%. Unmet need KB dapat disebabkan oleh beberapa faktor, Akses fasilitas kesehatan merupakan salah satu faktor penyebab unmet need KB.

Tujuan: Penelitian ini bertujuan untuk menggambarkan dampak akses fasilitas kesehatan di masa pandemi covid terhadap unmet need KB.

Metode: Sebuah studi literature review dilakukan dengan memanfaatkan database Google Scholar, NCBI, dan Elsevier untuk menelusuri jurnal nasional dan internasional yang meneliti hubungan antara akses fasilitas kesehatan dan unmet need KB.

Hasil: Hasil penelitian dari telaah artikel didapatkan bahwa hambatan akses fasilitas kesehatan di masa pandemi covid 19 dapat datang dari berbagai dimensi yaitu availability, approachability, acceptability, dan affordability.

Kesimpulan : Dampak pandemi Covid menyebabkan mayoritas fasilitas kesehatan perifer ditutup dan beberapa pelayanan kesehatan esensial rutin terganggu.

Saran : fasilitas kesehatan dapat mengimplementasikan pedoman pelayanan KB disaat Pandemi.

Kata Kunci: Akses fasilitas kesehatan, Covid 19, Kontrasepsi, Unmet need KB.

ABSTRACT

Background: Reducing the number of unmet need for family planning is one of the government's strategic targets in realizing balanced growth. The achievement of decreasing the number of unmet need for family planning in 2020 was 64.2%, this achievement decreased from 2019 which was 81.9%. Unmet need for family planning can be caused by several factors. Access to health facilities is one of the factors causing unmet need for family planning.

Aim: This study aims to describe the impact on access to health facilities during the COVID-19 pandemic. Unmet need for family planning.

Method: A literature review was conducted using the Google Scholar, NCBI, and Elsevier databases to search for national and international journals that examined the relationship between access to health facilities and unmet needs for family planning.

Results: The results of the study of the article found that the barriers to access to health facilities during the COVID-19 pandemic could come from various dimensions, namely availability, approachability, acceptability, and affordability.

Conclusion: The impact of the Covid pandemic caused most of the peripheral health facilities to be closed and some essential health services disrupted.

Suggestion: It is recommended for health facilities to implement family planning service guidelines during a pandemic.

Keywords : Access to Health Care, Contraception, Covid 19 Unmet need for family planning.

INTRODUCTION

Human resource development is one of the national visions listed in the 2005-2025 Long Term

Development (Bappenas, 2005). One of the long-term directions of this vision is controlling the number and rate of population growth through improving

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reproductive health services, including adolescent reproductive health and family planning that are quality, effective, equitable, and affordable (Bappenas, 2005). In order to achieve balanced population growth, BKKBN has five strategic targets that must be achieved, one of which is to reduce the unmet need for family planning (BKKBN, 2019).

Percentage of the unmet need for family planning in Indonesia in 2017 reached 17.50%, in 2018 it was 12.40% and in 2019 it was 12.10% (BKKBN, 2018). Although it continues to decline, this figure still does not meet the government's target. The government's target in 2019 is 9.91% and in 2020 it is 8.60%, based on the government's target of achieving a reduction in the number of unmet need for family planning in 2019 by 81.9% and the achievement in 2020 is 64.2% (BKKBN, 2019). This achievement is the smallest when compared to the other four strategic targets. Based on BKKBN data, the total fertility rate (TFR) decreased by 93.06%, the modern contraceptive prevalence increased by 89.7%, and the number of active family planning participants using long-term contraceptive methods (MKJP) increased by 105 %, and a decrease in the rate of discontinuation of contraceptive use by 117.9% of the government's target. The number of active family planning participants in East Java province in 2019 was 64.8%, this figure still does not meet the target of the National Medium Term Development Plan (RPJMN) in 2019 which is 66% (Kemenkes RI, 2019).

Unmet need for family planning can be caused by several factors, both from community factors, socio-demography, facilities and infrastructure as well as government factors. Access to health facilities is one of the factors causing the unmet need for family planning (Mulenga et al., 2020). COVID-19 pandemic is affecting health systems around the world (Okereke et al., 2021). Since it was first recognized, Covid 19 was officially declared a global pandemic by WHO on March 11, 2020 (Diaz 2021). One of the impacts of the COVID-19 pandemic is the limitation of movement so that it affects the provision of health services in all conditions, including contraceptive services (WHO, 2020).

One of the impacts of the COVID-19 pandemic is the limitation of movement so that it

affects the provision of health services in all conditions, including contraceptive services (Singh et al., 2021). According to Ferreira(2020) the outbreak of infection has the potential to damage the family planning program, previously in the Ebola epidemic in West Africa there was a decrease in the distribution of contraceptives by 65%. This is in line with research Dasgupta (2020) who explained that the COVID-19 pandemic affected the distribution and availability of contraceptive commodities, the COVID-19 pandemic also caused several health facilities to limit their services (Salama et al., 2020), and many mothers do not visit health facilities because they are afraid of being exposed to covid 19 infection. These things can cause the needs of mothers and their partners for family planning to be unfulfilled or what is known as an unmet need (Rismawati, 2012). The serious impact of unmet need can result in an increase in the number of unwanted pregnancies and related complications, thereby increasing maternal mortality (Singh et al., 2021).

RESEARCH METHODOLOGY

This research is a literature review research by utilizing English-language national and international journals through searches in five databases including Biomed Central (BMC), Elsevier, Google Scholar, NCBI, and Science Direct. The inclusion criteria used in this study are journals that examine the relationship between access to health facilities during the COVID-19 pandemic with the incidence of unmet need for family planning in couples of childbearing age and have a publication year in the last 10 years, while the exclusion criteria used are journals that the text is incomplete, inaccessible and irrelevant to the topic. The keywords used in the search are 1) Unmet need for family planning, 2) Access to health care facilities, 3) Access during covid 19, 4) Unmet need for family planning, 5) Access to health facilities.

RESEARCH RESULTS

Details of the literature in the form of titles, authors' names, research methods and research conclusions can be seen in Table 1.

17	References	Authors	Method	Results
	A call for increased access to contraception and safe abortion care during	Manisha Kumar (2020)	Qualitative descriptive	Restrictions on movement and clinic closures during the COVID-19 pandemic have an impact on access to contraceptive services.

the COVID-19 pandemic.			24
The impact of the COVID-19 crisis on meeting needs for family planning.	Aisha Dasgupta (2020)	Qualitative descriptive	The impact of the COVID-19 pandemic led to a decline in the use of modern contraceptives worldwide in 2020.
The impact of COVID-19 on contraception and abortion care policy and practice.	Deborah J Bateson (2020)	Qualitative descriptive	The COVID-19 pandemic has led to a decrease in the number of reproductive health services and a decrease in access to contraceptive services.
13 Contraception and reproductive planning during the COVID-19 pandemic.	Edson Santos Ferreira-Filho (2020)	Qualitative descriptive	Restrictions on movement cause barriers to access to contraceptive supplies.
What It Would Take to Ensure Continued Access to Contraception During COVID-19.	Michelle Weinberger (2020)	Qualitative descriptive	It is estimated that there is an increase in the unmet need for family planning as many as 48.6 million women.
Early Effects of the COVID-19 Pandemic on Family Planning Utilisation and Termination of Pregnancy Services in Gauteng, South Africa.	Tsholofelo Adelekan (2020)	Qualitative descriptive	Movement restrictions and Lockdowns during the pandemic led to a decrease in the number of visits to contraceptive services
COVID 19 era: a beginning of upsurge in unwanted pregnancies, unmet need for contraception and other women related issues	Naina Kumar, (2020)	Qualitative descriptive	Movement restrictions and lockdowns during the COVID-19 pandemic have hampered the distribution of contraceptive supplies.

DISCUSSION

Access to health services is an important aspect of the health system. Etymologically, access is defined as a way of approaching, reaching or entering a place, as a right or opportunity to reach, use or visit a place (Levesque, 2013). Access to health services is an important aspect of the health system. Etymologically, access is defined as a way of approaching, reaching or entering a place, as a right or opportunity to reach, use or visit a place (Ahmed et al., 2020). The COVID-19 pandemic poses several challenges to healthcare facilities (Ness et al., 2021) both in terms of availability, approachability, and in terms of acceptability.

At the beginning of the COVID-19 pandemic, the majority of peripheral health facilities were closed and some routine essential health services were also disrupted due to the unavailability of personal

protective equipment for health workers. (Singh et al., 2021) where this is an obstacle to access to health facilities in terms of availability. Challenges also come in terms of acceptability caused by fear, stigma, and misinformation about covid 19 that is spreading in the community (Bateson et al., 2020). The increasing number of treatments during the covid 19 pandemic causes barriers to access to health services in other conditions that are not related to covid 19 (Smolić, 2021) which is an obstacle to access to health services in terms of approachability. Several studies have confirmed that the epidemic causes disruption and barriers to the provision of various types of health services (Angelico et al., 2020).

According to WHO, there are 3 types of service disruptions that can occur during the COVID-19 pandemic, namely not disrupted, partially

disrupted, and completely disrupted. Not disrupted, if there is a change in the number of patients who can access health services as usual, less than 5%. Partially disrupted, if there is a change in the number of patients who can access health services as usual by 5% to 50%. Completely disrupted, if there is a change in the number of patients who can access services as usual more than 50%

The factors that cause these disturbances come from demand and supply factors. From the demand factor, 76% of countries reported a decrease in the number of outpatients, in addition to other factors that could cause these disturbances were the lockdown during the COVID-19 pandemic which made it difficult for people to access health facilities and also due to the lockdown which also caused financial difficulties for the community (WHO, 2020). Financial difficulties for the community are one of the obstacles to accessing health services in terms of affordability (United Nations, 2020). On the supply side, most of the factors that are often reported are the result of the transfer of health workers to provide assistance for the treatment of COVID-19 patients, the unavailability of health care facilities or health services during the COVID-19 pandemic (World Health Organization, 2020) which is an obstacle to access to health services in terms of approachability, as well as a shortage of supply of medical devices and medicines which causes obstacles to access to health services in terms of availability (European Patients Forum, 2016). The COVID-19 pandemic has resulted in obstacles to the distribution of contraceptive supplies (Puri and Stone, 2020).

In the long term, the obstruction of access to health facilities can lead to serious potential health problems (Palmer et al., 2020). This has been proven in previous epidemics, namely the Ebola epidemic in West Africa which resulted in 3,600 maternal and infant deaths due to decreased maternal and newborn services, as well as people's fear of accessing health services during the epidemic. decrease in contraceptive use and family planning visits (Bietsch, 2020). Based on data on maternal and child health profiles in 2020, in 2020 there was a decrease in the rate of contraceptive use among couples of childbearing age (PUS) 15-49 years, which was 54.34% from 54.55% in 2019 and 57.10% in 2018 (Noviani, 2020).

CONCLUSIONS

Based on the review of the article above, the impact of the COVID-19 pandemic on access to health facilities that can cause unmet need for family planning can come from various dimensions, in terms of availability, the COVID-19 pandemic has caused

the majority of peripheral health facilities to be closed and some routine essential health services have also been disrupted. by fear, stigma, and misinformation about covid 19 that is spreading in the community, in terms of approachability the challenges are due to the increase in the number of treatments during the covid 19 pandemic causing barriers to access to health services in other conditions that are not related to covid 19, in terms of affordability challenges caused by financial difficulties for the community to access health services. In the long term, the obstruction of access to health facilities can lead to potential serious health problems.

SUGGESTION

It is recommended for health facilities to implement family planning service guidelines during a pandemic.

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