

Implementation of Family Planning program during the COVID-19 Pandemic: Scoping Review

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ABSTRACT

Background:The family planning program in Indonesia has been started since 1957, but it was merely part of health issues. With the increasing population of Indonesian people, the high maternal mortality rate, and the need for reproductive health, family planning programs are then used as a way to suppress population growth and improve maternal and child health. According to the National Population and Family Planning Board (BKKBN), the primary problem in actualizing the target of family planning programs is the low participation of couples of childbearing age (EFA). Another problem currently emerging is the increasing number of family planning dropouts as a direct impact of the COVID-19 pandemic. **Purpose:** This study aimed to scrutinize the implementation of family planning programs during the COVID-19 pandemic. **Methods:** The method in this research was scoping review. The literature search in this study used 3 health journal databases, namely PubMed, ScienceDirect, ProQuest, and 1 search engine: Google Scholar. Articles were selected using inclusion criteria, which were Articles published in national and international journals from 2019 to 2021. The total search results were 274 articles, and 9 articles were found that met the inclusion criteria in the author's review. The instruments used to assess the quality of articles was The Joanna Briggs Institute (JBI) Critical Appraisal Tools. **Results:**The impact of family planning services in the COVID-19 pandemic era is a decrease in family planning participants in March 2020 when compared to February 2020 throughout Indonesia. Factors that affect family planning program services during the COVID-19 pandemic include : knowledge, Husband's support, Support from health professionals. **Conclusions:**The conclusion from the nine articles is that several countries have experienced changes in the system of maternal and child health services and family planning services. Many countries encountered a decrease in family planning participants and the presence of unwanted pregnancies.

Keywords:

Implementation, Family Planning Program, Pandemic Period

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1. INTRODUCTION

Family Planning (KB) was first established as a government program on June 29, 1970, along with the establishment of the National Family Planning Coordinating Board. The family planning program in Indonesia has been started since 1957, but it was merely part of health issues and not yet population issues [8]. With the increasing population of Indonesian people, the high maternal mortality rate, and the need for reproductive health, family planning programs are then used as a way to suppress population growth and improve maternal and child health [16]. According to the National Population and Family Planning Board (BKKBN), the primary problem in actualizing the target of family planning programs is the low participation of couples of childbearing age (EFA), especially husbands' participation in the implementation of the family planning program [14]. Prior research further confirmed that the husband's participation remains insufficient in providing support to his wife in the use of contraception, whereas his motivating and leading role is indispensable to arrange the number of children and maintain maternal and child health as an early effort to prevent maternal death [20].

Another problem currently emerging is the increasing number of family planning dropouts as a direct impact of the COVID-19 pandemic [1]. The determination of the COVID-19 Public Health Emergency on March 31, 2020, has brought about a change in the mechanism of health services provided to the community [6]. One of the changes in basic health services affected by COVID-19 is the provision of contraceptive services and family planning (WHO, 2020). Global data reveals that COVID-19 has an impact on reducing the use of long-term and short-term contraceptives by 10 percent [9]. It is estimated that as many as 48,558,000 women do not have their modern contraceptive needs met and the possibility of 15,401,000 unwanted pregnancies occurs (Castle, 2020). Meanwhile, the circumstances in Indonesia, according to the BKKBN's routine statistical report in April 2020, showed a significant decrease for the mixed method compared to the previous month (March 2020) which was 51,297 new family planning participants or around 12.25 percent. This decline is further feared to have an impact on not achieving the 2020-2024 BKKBN Strategic Plan target, namely the prevalence of the use of modern mixed method contraception (mCPR) in 2020 of 61.78 percent. The latest data from the BKKBN informs that there has been a drastic decline in the number of family planning programs during the COVID-19 pandemic. In March 2020 36 million active family planning participants were registered, while in April 2020 the number of recipients of family planning services comprised only 26 million people [12]

The declining access to family planning services during the COVID-19 pandemic also increases the risk of an unplanned pregnancy [10]. During the COVID-19 pandemic, the public is asked to continue to access the family planning program to the nearest services by applying physical distancing and maintaining cleanliness while in health facilities [25]. For the well-ordered and successful implementation of the Population and Family Planning program, cooperation from various parties is imperative, from the highest level of government (central government) to the lowest level (local government), even to the level of the family itself, including women (wife) to encourage her husband to participate in supporting the family planning program [4]. The family planning program applies to both women and men with the aim of creating a happy and prosperous small family as stated by the government. Men's participation in family planning cannot be deferred any longer because their contribution in controlling population growth rates and handling reproductive health is of importance, including reducing maternal mortality rates and infant mortality rates [5]. According to research conducted by [3], EFA feels that the use of mobile technology provides benefits for them in obtaining knowledge and information about contraception and family planning. Cadres, community leaders and midwives also felt the positive benefits of the program implemented to empower communities in their area during the COVID-19 pandemic. However, the instability of the internet network in some areas was one of the challenges during implementation.

2. METHOD

The research method employed in this study was *scoping review*. The databases used were PubMed, Science Direct and ProQuest. The Gray Literature was accessed via Google Scholar. The Science Direct and ProQuest databases were accessed through the National Library of the Republic of Indonesia (PNRI). The search strategy and specific keywords used in the search process made use of "or" and "and". Besides, Boolean strategies will also be employed in the literature search. The articles obtained were 274 articles, 215 duplicate articles were identified after re-selection process, and 59 remaining articles were obtained after the screening of relevant titles and abstracts. Furthermore, articles with full text were assessed for eligibility, resulting in 23 articles. Therefore, the final result of the article selection for scoping review consisted of 9 articles. The process of selecting articles by researchers employed PRISMA Flowchart as follows:

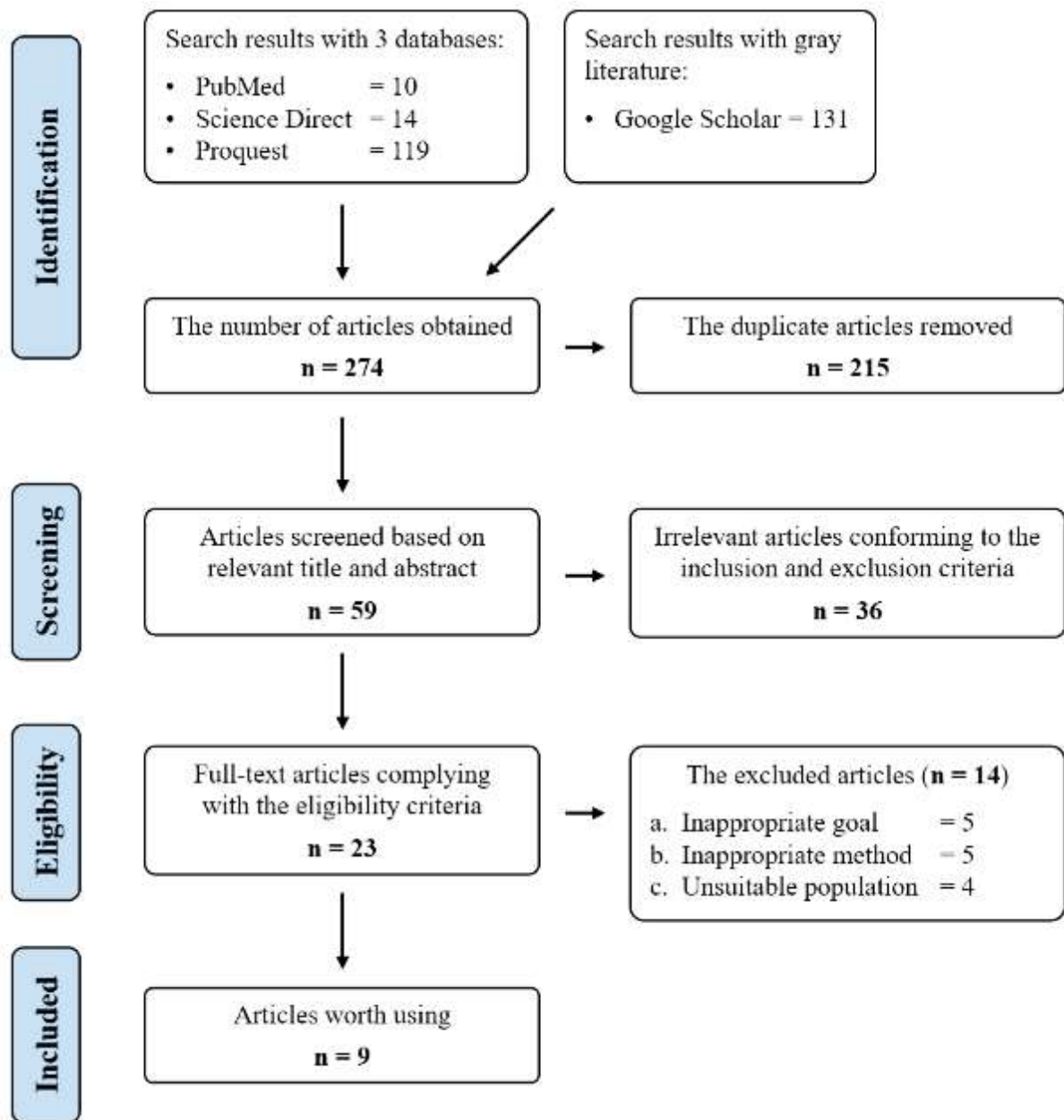


Figure 1. PRISMA Flowchart

The articles obtained through a selection process with PRISMA Flowchart are described in the following Data Charting table.

Table 1. Data Charting

No	Title/Author/ Years/Grade	Country	Aim	Type of Research	Data Collection	Participants/ Sample Size	Result	Score
A1	Roy N, Amin M.B, Maliha MJ, Sarker B, Aktarujjaman M, Hossain E, et al. (2021) Prevalence and factors associated with family planning during COVID-19 pandemic in Bangladesh: A cross-sectional study	Bangladesh	This study aims to examine socio-economic, demographic, and other critical factors related to the use of family planning in the study area during the COVID-19 pandemic.	Cross-sectional questionnaire survey and descriptive statistics	Purposive sampling method was employed to collect primary data online in the form of a questionnaire	Primary data were collected from housewives in the age group 15–49 years during the period from October 18, 2020 to December 10, 2020. Three female expert and three male expert interviewers collected data by conducting a face-to-face survey.	Use of family planning among women is declining in Bangladesh amid the COVID-19 pandemic. Based on the local context, a pragmatic approach to family planning programs is needed to increase the level of family planning use in disadvantaged places.	B
A2	Lauren B. Zapata, et al (2021), COVID-19 and family planning service delivery: Findings from a survey of U.S. physicians	United States of America	To compare changes in clinical services related to family planning and healthcare delivery strategies before and during the COVID-19 pandemic and assess service delivery issues in US physicians whose practice provides family planning services just	Cross-sectional analysis	Respondents were sampled from SERMO's Global Medical Panel which composed of medical professionals	1503 doctors by filling out a survey	Discontinuation of major family planning services during the COVID-19 pandemic can limit access to contraception, which can hinder autonomy reproduction and contribute to unwanted pregnancies. Applying health care delivery strategies that reduce the need for direct visit	B

No	Title/Author/ Years/Grade	Country	Aim	Type of Research	Data Collection	Participants/ Sample Size	Result	Score
			before the pandemic.				can reduce interruptions in treatment.	
A3	Jessica Leight, et all (2021), Short-term effects of the COVID-19 state of emergency on contraceptive access and utilization in Mozambique	Mozambique	To analyze administrative data on contraceptive health service utilization by women referred through public health promoters in two urban and suburban areas of large cities in Mozambique.	Analyzed using logistic regression, interrupted time series analysis, and hazard analysis	The data used was collected by PSI, but only the unidentified data did not include any identifying information related to participants that was accessed by the research team.	This analysis focused on women beneficiaries of the IFPP program who live in urban areas and suburbs in the provinces of Sofala and Nampula	Implementation of an emergency is associated with a short-term decline in service provision and utilization, followed by a relatively rapid rebound. The conclusion in this context is that the accessibility of reproductive health services is not reduced dramatically during the first phase of the pandemic emergency	A
A4	Iñaki Lete, et al (2021), Impact of the Lockdown Due to COVID-19 Pandemic in the Use of Combined Hormonal Oral Contraception in Spain – Results of a National Survey: Encovid	Spain	To know the contraceptive behavior of Spanish women who use combined oral contraceptives (COC) during the lockdown due to COVID-19	Cross-sectional descriptive study	Surveys were conducted through social networks using online platforms	Spanish women who use combined oral contraceptives (COCs)	Spanish women taking COCs, despite staying at home and a decrease in the frequency of sexual intercourse, did not abandon their use during the analyzed time period. The intensity of staying at home did not affect the contraceptive habits of the participating women.	B

No	Title/Author/ Years/Grade	Country	Aim	Type of Research	Data Collection	Participants/ Sample Size	Result	Score
A5	Urip Tri Wijayanti, dkk (2021), Dampak Pandemi COVID-19 terhadap Pelayanan KB	Indonesia	The purpose of this study was to analyze the differences in family planning services before and after the COVID-19 pandemic era	Quantitative descriptive approach	The research was based on secondary data from the routine statistical reports of the BKKBN Representatives of Central Java Province in 2020 and 2021.	Research respondents were all couples of childbearing age (EFA) in Central Java in 2019 and 2020	The first study concludes that the impact of the COVID-19 pandemic era on family planning services in Central Java was a decline in family planning services. The number of active family planning participants decreased and increased during the COVID-19 pandemic era.	A
A6	Prastuti Soewondo, dkk (2020), Bagaimana Layanan Keluarga Berencana Respons Terhadap Pandemi Covid-19 Di Indonesia: Studi Kasus Di 8 Kabupaten/Kota	Indonesia	To identify how family planning services respond to the challenges of the COVID-19 Pandemic in Indonesia, by taking cases in 8 selected districts/cities	Qualitative approach	Literature review and discussion guided group, referring to the theory of the Systemic Rapid Assessment (SYSRA) toolkit	Selected informants were representatives of the Ministry of Health who were responsible for the budgeting process and implementation of family planning programs, representatives of the Health Office, as well as health workers in 16 Puskesmas and 16 Midwife Independent Practices (PMB) in 8 districts/cities in 4 selected provinces	There are services implementation adjustments provided by Puskesmas and PMB in the form of hours and number of visits limitation, scheduling mechanisms implementation, service limitation, and partner engagement for the distribution of short-term contraceptives to family planning acceptors.	B
A7	Astri Yunifitri dkk (2021), Perubahan Pelayanan Keluarga Berencana Pada Masa Pandemi Covid-19	Indonesia	To know Family Planning service changes in the time of Covid-19 pandemic	Qualitative approach (library research)	Literature study research methods	The data were collected based on the research results of prior researchers and looked back to be the current research materials	Recommendations have been agreed for family planning and reproductive health services in disaster situations for the community regarding Family	B

No	Title/Author/ Years/Grade	Country	Aim	Type of Research	Data Collection	Participants/ Sample Size	Result	Score
A8	Witono dkk (2020), Kepesertaan Keluarga Berencana Pada Masa Awal Pandemi Covid-19 Di Daerah Istimewa Yogyakarta	Indonesia	To find out the development of family planning participation in DIY, especially those related to family planning with the dynamics of the use of contraceptive methods at the beginning of the Covid- 19 pandemic	Quantitative Approach	Secondary data	Data sourced from the results of the Monthly Field Control Report of Family Planning Participation and Contraceptive Service Reports at BKKBN DIY in January-April 2020	Planning Services in the Covid-19 Pandemic Situation. In the early days of the Covid-19 pandemic, DIY experienced a decrease in the number of active family planning participants from March to April 2020, especially in non-MKJP contraception.	A
A9	Dian Aprilia Nurma (2021), Analisis Faktor Penyebab Penggunaan Kontrasepsi Selama Masa Pandemi Covid-19 Pada Pasangan Usia Subur Di Kecamatan Tebing Tinggi Kabupaten Tanjung Jabung Barat	Indonesia	This study aims to determine the factors that cause participation in contraceptive use during the COVID- 19 pandemic	Cross sectional design with univariate analysis and bivariate analysis	Couples of Childbearing Age (EFA) in Tebing Tinggi District	Selected based on simple random sampling method	The results of this study indicate that there is no relationship between the variables of age, education and occupation on the use of family planning at EFA and there is a relationship between knowledge, husband's support and support from health workers with contraceptive use at EFA.	B

This Critical Appraisal uses The Joanna Briggs Institute (JBI) Critical Appraisal Tools. In assessing the quality of this article, the author uses grades A, B, and C to distinguish the categories of articles as Good (Grade A), Fairly Good (Grade B), Less Good (Grade C). Based on the 9 articles that have been selected and in accordance with good quality, then data extraction is carried out to classify several points or parts of the article such as research objectives, research design, number of samples and the results or findings of the research.

3. RESULTS AND DISCUSSION

Results

The articles selected with good quality are further proceeded with data extraction to classify several points or parts of the article such as research objectives, research design, number of samples and the results or findings of the research.

a. Study Type

The selected articles using quantitative method with a cross sectional research design consist of 6 articles, and 3 articles adopt qualitative research method.

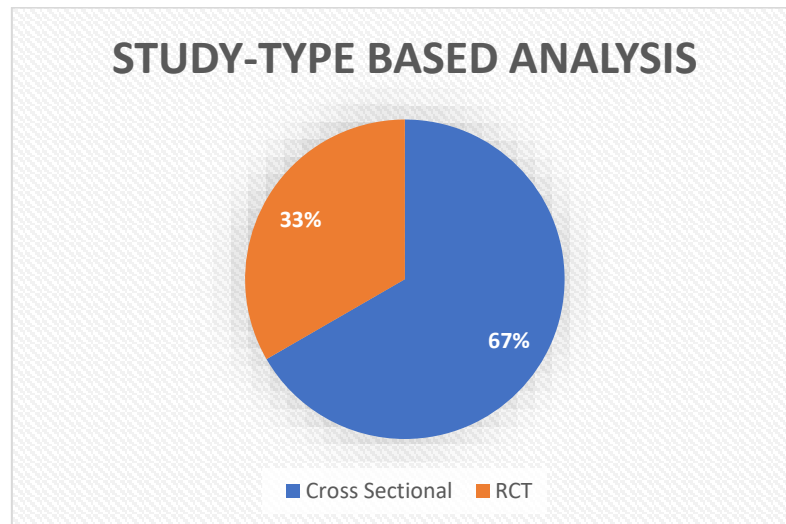


Figure 2. Study-type Based Analysis

b. Country

The articles obtained are the result of research from several countries of various continents, namely from the Asian continent, the African continent, the American continent and the European continent. 6 articles are originated from the Asian continent, namely 5 articles from Indonesia and 1 article from Bangladesh, 1 article from Mozambique in the African continent, 1 article from the United States in the American continent, and 1 article from Spain in the European continent.

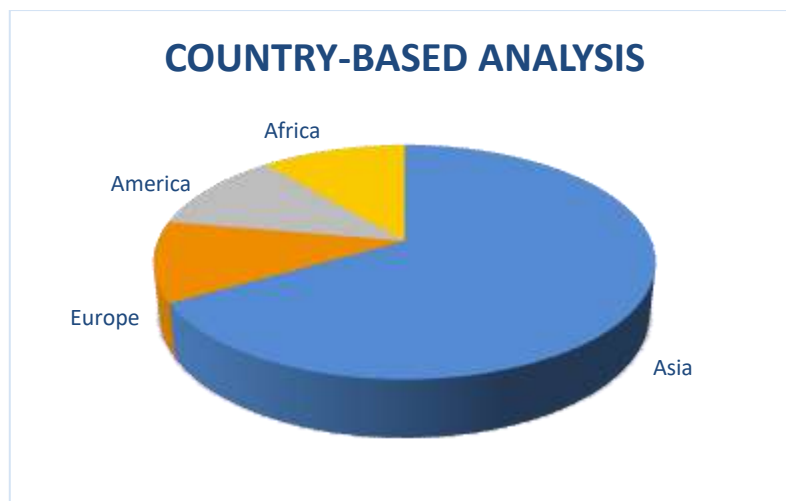


Figure 3. Country Based Analysis

c. Grade

Each research method has a different Critical Appraisal grade. The selected articles have good quality, namely 3 articles with grade A, 6 articles with grade B, and no grade C articles.

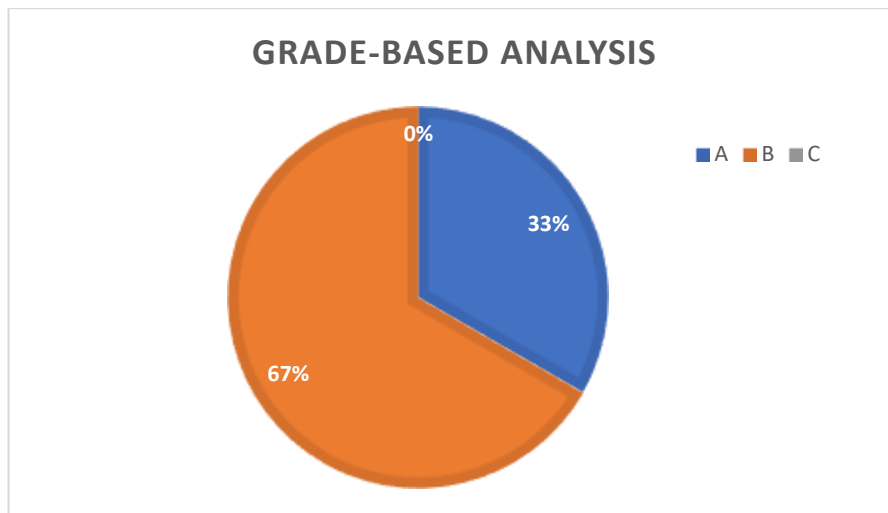


Figure 4. Grade-based Analysis

Discussion

The impact of Family Planning Program services during the COVID-19 pandemic

During the current pandemic, it has several impacts, especially for the Family Planning (KB) program, namely: 1) a decrease in family planning participants due to limited access to services and changing patterns, 2) a decrease in activity of activity groups (BKB, BKR, BKL, PIK-R and UPPKS), and 3) a decrease in operational mechanisms in the field, including the Family Planning Village which will ultimately affect family planning services and participation [13].

The impact of family planning services in the COVID-19 pandemic era is a decrease in family planning participants in March 2020 when compared to February 2020 throughout Indonesia. The use of IUDs in February 2020 was 36,155 acceptors and decreased to 23,383 acceptors, the use of implants from 81,062 acceptors to 51,536 acceptors, injection from 524,989 acceptors to 341,109 acceptors, pills from 251,619 acceptors to 146,767 acceptors, condoms from 31,502 acceptors to 19,583 acceptors, MOP from 2,283 acceptors to 1,196 acceptors, and MOW from 13,571 acceptors to 8,093 acceptors. In April, there was a 10% decrease in active participants or acceptors compared to the previous month, where only around 26 million active family planning participants were registered, while in March it was 36 million acceptors. The decline between provinces is an average of 10%-15% from the previous acceptors. From this data, around 10 million couples did not use contraception during the pandemic which resulted in 7 million unwanted pregnancies. Of the total number, around 25% are couples of childbearing age (EFA) aged 20-35 years or about 2.5 million EFA [19].

In the context of sexual intercourse, each individual responds to emotional disturbances differently, so a pandemic could result in a decrease or increase in sexual desire and activity. If a partner views sexual intercourse as a pleasurable recreational activity, a way to distract from boredom, an aid to increase relaxation, a way to make the husband and wife bond closer and help release negative thoughts, then sexual activity will increase. However, it is feared that the increase in sexual relations will have an impact on increasing the birth rate and the occurrence of unwanted pregnancies. On the other hand, if the pandemic situation causes conflicts in the household and stress due to loss of privacy, then sexual activity will decrease [7].

Factors influencing family planning program services during the COVID-19 pandemic

With knowledge, individuals will understand and apply it or respond in accordance with the wishes so that interest or willingness arises. Related to this, knowledge can influence an individual in joining the family planning program, so the higher the family planning visits that he or she makes. The knowledge and insight a person has regarding the importance and benefits of family planning will make him understand and apply it [9].

Husband's support for his wife to be able to use contraception is critical. Husband and wife have responsibilities in using contraception, so the contraception chosen reflects their desires and needs. Husband and wife support is essential in the use of contraception because family planning is not merely men's and women's matter. A husband's support can be interpreted as an attitude and action towards the contraceptive tools and methods used by his wife. Husband's suggestions regarding contraceptive methods and tools also include things needed by the wife in determining the use of contraception [24].

Support from health professionals is a factor that can influence individual compliance behavior. This support is useful for individuals in healthy behavior. Health workers can also influence individual behavior by providing positive reward support for those disposed to participate in health programs [9].

Barriers to Family Planning Program services during the COVID-19 pandemic

The Large-Scale Social Restriction (PSBB) policy to prevent the transmission of COVID-19 has caused a very large impact in all aspects of life, one of which is in terms of family planning services. The existence of the PSBB can cause changes in the behavior of couples of childbearing age, such as a decrease in the number of visits to health facilities, all activities are carried out at home, both work activities, studying, and others, all of which will have a significant impact on the behavior of the couples of childbearing age. Another obstacle that occurs in family planning services is that limited access to services and a shortage of contraceptives arises as a result of the interrupted supply of tools, especially in developing countries [23]

The COVID-19 pandemic has resulted in limited health services, especially reproductive health, such as the use of contraception. The COVID-19 pandemic directly affects the use of reproductive health services such as the implementation of restrictions on community activities, isolation for those confirmed positive for COVID-19, and the implementation of social distancing in public places. Access to contraception in the COVID-19 pandemic era was limited due to a programmatic shift to COVID-19 prevention and control. In addition, COVID-19 prevention and control strategies indirectly increase the risk of sexual violence. This serves as one of the factors causing the increase in the number of unwanted pregnancies. Family planning is one component of maternal health services that needs attention in these difficult times [2].

Efforts in Family Planning Program services during the COVID-19 pandemic

A pragmatic approach to family planning programs is needed to increase the level of family planning use in disadvantaged areas. The role of village officials or community leaders, either individually or together with agencies related to the BKKBN, is to establish health ranks, women empowerment, as well as Communication, Information, and Education (KIE) on health and family planning programs. Village officials or community leaders also play a prominent role in bringing closer access to health services such as Posyandu activities, village pharmacies, village midwives, as well as encouraging the improvement of independent family planning services through the procurement of contraceptives with the help of non-governmental organizations or capital from the relevant agencies [15]

Motivating women with unmet needs to adopt permanent family planning methods by explaining to them the benefits associated with using these methods.

Recommendations for family planning and reproductive health services in disaster situations for the community related to family planning services in the COVID-19 pandemic situation. The Indonesian government has designated a non-natural disaster that spreads COVID-19 as a National Disaster. In dealing with the COVID-19 outbreak, a Large-Scale Social Restriction (PSBB) policy was implemented to prevent the transmission of COVID-19. This condition has an impact on the continuity of public health services, including family planning and reproductive health services. Government policies to implement social distancing, physical distancing, work from home as an effort to prevent the transmission of COVID-19 have made it difficult for family planning acceptors to access family planning services [13].

4. CONCLUSION

The conclusion from this scoping review was that several countries experienced changes in the health care system, especially maternal and child health and contraceptive or family planning services. Several gaps were found in the 9 articles, namely in the objectives, methods and participants. The aim of the research is to focus more on how the process of family planning services for the COVID-19 pandemic is being carried out. The research method employed a cross-sectional design, and the participants were diverse, including family planning participants' mothers, health workers and also couples of childbearing age. Many countries have experienced the impact of the COVID-19 pandemic on family planning services, namely a decrease in family planning participants and an occurrence of unwanted pregnancies.

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