

## REASONS WHY THE HUSBAND CHOSE VASECTOMY IN FAMILY PLANNING PARTICIPATION IN BENGKULU CITY

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### ABSTRACT

Indonesia's high rapid population growth requires birth control through the Family Planning (KB) program, but contraceptive use is still mostly borne by women, while male participation, such as vasectomy, remains low due to social stigma and negative perceptions about masculinity. Therefore, the phenomenon of husbands choosing vasectomy in Bengkulu City is interesting to examine from a sociological perspective. This study aims to analyze the reasons why husbands in Bengkulu City choose vasectomy in participating in the family planning program. The study used a qualitative phenomenological approach with purposive sampling of seven informants who had undergone vasectomy, collecting data through in-depth interviews, observations, and documentation, which were then analyzed descriptively using Blau's social exchange theory. The results showed that husbands chose vasectomy due to sense of responsibility toward their wives, having enough children, economic considerations, and the desire to share family planning roles, supported by adequate knowledge, partner support, and health worker information, although they still faced obstacles such as negative public perceptions and assumptions that vasectomy reduces masculinity. The implications based on the results of this study confirm that the decision to undergo a vasectomy is influenced by social, economic, and cultural factors, not solely medical considerations.

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### INTRODUCTION

Indonesia's continuous population growth is one of the demographic problems that requires serious attention from the government. Based on data from the Central Statistics Agency (2025), Indonesia's population has reached approximately 284 million, making it the fourth most populous country in the world. Rapid population growth has an impact on various sectors of life, such as food, education, employment, and health. To address this problem, the Indonesian government has implemented the Family Planning (KB) Program which aims to reduce the birth rate and improve the welfare and quality of family life. However, the implementation of the family planning program in

Indonesia still faces serious challenges, especially related to the low participation of men, which has implications for gender inequality in birth control responsibilities. Vasectomy is one of the effective family planning (KB) methods with a success rate of 99% (BKKBN, 2019).

Men's participation in family planning programs is still very limited compared to women's participation (Muhatih, 2012; Rochimah et al., 2023). The majority of contraceptive users in Indonesia are women who use hormonal methods such as pills, injections, or implants, as well as long-term methods such as IUDs. Meanwhile, the number of men who use Male Sterilization (MOP) or vasectomy is still very small (Sihombing et al., 2021). Based on data from the Bengkulu City Women's Empowerment, Child Protection, Population Control and Family Planning (DP3AP2KB) Office (Data DP3AP2KB Bengkulu City, Personal Communication, March 24, 2025), the number of men undergoing vasectomy only reached 272 during the 2022-2024 period, much lower than the number of women who used contraception. This fact shows that the responsibility for birth control is still dominated by women, even though in principle the family planning program emphasizes the importance of equality between husbands and wives in family planning. as for data on men undergoing vasectomy in 2022-2024.

**Table 1.** Number of male vasectomy family planning participants in Bengkulu City in 2022-2024

NO	KECAMATAN	VASEKTOMI			JUMLAH
		2022	2023	2024	
1	Selebar	16	13	17	46
2	Gading Cempaka	17	7	3	27
3	Teluk Segara	6	5	3	14
4	Muara Bangkahulu	10	7	3	20
5	Kampung Melayu	11	12	9	32
6	Ratu Agung	9	8	4	21
7	Ratu Samban	1	0	0	1
8	Sungai Serut	3	2	2	7
9	Singgaran Pati	37	33	34	104
<b>Jumlah Total</b>		<b>110</b>	<b>87</b>	<b>75</b>	<b>272</b>

Source : Family Planning & K3 Sector DP3AP2KB Bengkulu City 2022-2024

Based on this data, there are 272 men who have vasectomy from 2022-2024. Despite showing participation, this figure is still relatively low compared to the overall potential of male family planning participants. The decline in the number of acceptors from 110 people in 2022 to 75 people in 2024 also indicates that interest in vasectomy has not stabilized and is likely to decline. Overall, to increase husbands in family planning programs through vasectomy in Bengkulu City, there needs to be a strengthening of information, as well as support from wives. With the right strategy, it is hoped that men's participation in using this contraceptive method can increase significantly.

Vasectomy is a permanent contraceptive method for men with an effectiveness rate of 99% in preventing pregnancy (Rahayu, 2020). This procedure is considered safe, inexpensive, and has no effect on sexual function. However, the low interest of men to undergo a vasectomy is inseparable from various social and cultural factors around him (Amanati et al., 2021). Many men resist vasectomy due to the misconception that the procedure can reduce virility or go against religious teachings (Masruroh et al., 2024). Research by Teriviantina and Simanjuntak (2021) shows that ethical and theological perceptions of vasectomy still vary in society, while Kahfilani et al. (2024) and Saputri et al. (2024), emphasize that partner support and family communication are determining factors that can increase the acceptance of this contraceptive method.

Previous studies have provided a solid conceptual basis regarding men's perceptions and knowledge of vasectomy, but most research still focuses on individual knowledge and attitudes. For example, Rahmawati (2017) found that men's knowledge levels had a significant relationship with positive perceptions of vasectomy, while Rahayu

(2020) highlighted the low participation of men due to a lack of information and understanding. A study by Masrurroh et al. (2024), Wibawa & Baehaki (2019), and Yanti et al. (2023), proves that education and socialization can increase men's awareness of the importance of sharing responsibilities in family planning, and a study by Kahfilani et al. (2024), reviewing the impact of vasectomy on household harmony. However, this study has not thoroughly explored the social, economic, and cultural reasons behind men's decision to undergo a vasectomy, especially in a local context such as Bengkulu City.

This research is new because it highlights the decision to undergo vasectomy from a sociological perspective, such as gender norms and the division of roles in the family, the influence of the social and cultural environment, the role of family planning program structures and interactions with field workers, and power relations in the household, rather than solely from a medical perspective. This study seeks to understand vasectomy as a form of rational social action, in which men's decision to undergo vasectomy is seen as the result of logical considerations about the social benefits and risks they face. Within the framework of Peter Blau's 1964 theory of social exchange by Ritzer and Goodman (2004), human actions are based on rational calculations of rewards and costs. In this context, men who decide to undergo a vasectomy judge that the social benefits, such as household harmony, the health of their partners, and the economic stability of the family, outweigh the social risks, such as stigma or negative judgments from society.

Based on the description above, the main problem in this study is the low participation of men in the use of vasectomy contraceptives in Bengkulu City, as well as various social, economic, and cultural factors that influence this decision. The hypothesis of this study is that men's decisions to undergo a vasectomy are driven by rational considerations regarding family well-being, partner health, and social and emotional support from partners and the environment. Thus, this study aims to analyze in depth the social, economic, and cultural factors that encourage husbands to choose vasectomy as a contraceptive method; explain the form of support from the partner in making this decision; and to explain the social significance of men's participation in family planning programs as a form of shared responsibility and shifting gender roles in the modern family, such as husband-wife relationships, more flexible gender roles, openness in communication and decision-making, rational values in decision-making, shifting male roles as active reproductive partners, and information and educational exposure.

## METHOD

This study uses a qualitative approach with a phenomenological method, which aims to deeply understand the reasons, experiences, and social meanings behind the husband's decision to undergo a vasectomy in participating in the Family Planning (KB) program in Bengkulu City. The qualitative approach was chosen because it allows researchers to comprehensively explore social realities through the perspective of participants and the social context in which the phenomenon occurs (Creswell, 2018; Sari, 2019). The study does not focus on statistical testing of theories, but rather on understanding the meaning and motivations behind individual decisions in their cultural and social contexts.

The research was carried out in Bengkulu City. The research activities took place from May to November 2025. The data collection was carried out intensively from April to September 2025. The location of the study was determined in Bengkulu City, considering that this area has a relatively small number of vasectomy participants compared to female family planning participants, but has shown an increasing trend in the last three years (DP3AP2KB, Data DP3AP2KB Bengkulu City, Personal Communication, March 24, 2025). The research subjects were determined using purposive sampling, which is the selection of informants based on certain criteria that are relevant to the research objectives (Sugiyono, 2019). The criteria for informants include men who have undergone a vasectomy for at least one year, are domiciled in Bengkulu City, and are willing to provide information publicly about their experience as male family planning recipients. There were seven informants in the study, which were considered sufficient to represent the diversity of experiences and social views associated with the phenomenon studied. For the purpose of triangulating sources, this study also involved two Family Planning Field Officers (PLKB) and one health worker as supporting informants to provide institutional perspectives related to socialization and vasectomy services.

The main function of the instrument is to bridge the need for research information with appropriate data collection techniques. Understanding the research instrument helps researchers determine the type of data to be collected (Mifta, 2025). In addition, semi-structured interview guidelines are used to keep the interview process focused yet flexible according to the informant's responses. The interview questions covered several key themes, namely the background to the decision to undergo a vasectomy, the roles and support of the partner, the society's view of vasectomy, and its impact on family life and gender roles (AR et al., 2025).

The data collection technique was carried out through three main methods, namely in-depth interviews, field observations, and documentation. In-depth interviews are conducted directly with key informants to obtain primary data about their personal experiences and the social reasons behind their decisions. Observations were made to understand the social interactions and household life dynamics of informants, as well as to see the extent to which the decision to undergo a vasectomy affected their social role in society. In addition, documentation was obtained from official archives of government agencies such as the Bengkulu City DP3AP2KB and various literature sources relevant to this research.

Data analysis was carried out using the interactive analysis model of Miles and Huberman (1992), which consisted of three main stages: data reduction, data presentation, and conclusion-delineation/verification. The data reduction stage involves sorting, grouping, and simplifying interview data according to the research theme. The data presentation stage is carried out in the form of a descriptive narrative that makes it easier for readers to understand the pattern of research findings. Meanwhile, the stage of conclusion making is carried out continuously during the research process, with reference to the social exchange theory of Blau (1964) by Ritzer and Goodman (2004), to interpret the social actions of informants based on their rationality and social interaction.

To maintain the validity of the data, this study uses the triangulation technique of sources and methods, namely by comparing the results of interviews between informants and matching them with documentation data and field observation results. In addition, member examinations are carried out by confirming the researchers' interpretations with informants to ensure consistency between the data obtained and their actual experience (Lincoln & Guba, 1985). With this procedure, research is expected to produce valid, credible, and scientifically accountable data.

Data are presented narratively and analytically to highlight the relationship between research results and previous theories and findings. The data obtained was compiled in such a way as to answer research questions about the reasons why husbands choose vasectomy and the social, economic, and cultural factors that influence the decision (Maharani et al., 2023). Thus, this research not only provides empirical understanding but also enriches the study of the sociology of families and populations in Indonesia.

## RESULT AND DISCUSSION

### 1. Informant Profile

This study involved seven male informants who actively received vasectomy in Bengkulu City. The informants were aged 45–61 years old and came from a variety of occupations, such as farmers, day laborers, school guards, and the informal sector. All the informants were married and had 2–5 children. The duration of vasectomy varied between 2008 and 2025, suggesting that there were long-term and new participants in this male family planning program. The majority of informants are adults (>35 years old) and already have a sufficient number of children. This condition reinforces the tendency of vasectomy to be chosen when the reproductive phase is considered to be over and the family begins to focus on economic stability and household welfare.

Table 1: Table of informant profiles.

No.	Informants	Gender/age	Jobs	Duration of Vasectomy	Number Children
1.	MN	Male / 60 years old	Farmer	2018 - Present	2
2.	EO	Male / 45 years old	Miscellaneous	2025 - Present	2

3.	AR	Male / 49 years old	Day Laborers	2008 - Present	3
4.	AI	Male / 55 years old	School Guardian	2008 - Present	2
5.	MM	Male / 61 years old	Private Sector	2003 - Present	5
6.	DJ	Male/ 58 years old	Entrepreneur	2017 - Present	2
7.	HK	Male / 57 years old	Day laborers	2015 - Present	2

Source: Researcher Data Analysis, 2025.

## 2. Reasons to Become a Family Planning Participant

Several factors encourage husbands to start participating in family planning programs, including:

### a. Empathy and Compassion for Their Wives

One of the most prominent reasons is empathy and concern for the condition of the wife. Many wives have used different types of contraception, from pills, injections, to intrauterine devices (IUDs), over the years. Long-term use of these contraceptives often causes side effects, such as hormonal changes, weight gain, dark spots, or other physical discomfort. MN said: *"I became a family planning participant because I felt sorry for women who often bore the burden of birth control methods such as injections, IUDs, pills, and others. I also feel sorry for women who have used family planning methods but still have to do housework on top of that."* MM said: *"Initially, my wife used contraceptive injections, but over time, the injections were not suitable for her health and caused side effects such as headaches, loss of appetite and feeling cold. Then he switched to birth control pills, but there was another problem because he often forgot to take them, especially since my wife needed to be reminded first. Sometimes she even ends up having her fifth child because she forgot to take the pills, heheh."* Then the DJ said: *"So, my wife has been using IUDs for years, even though it causes discomfort for both of us. Also, my wife can't take medications/pills because she has a history of breast cancer. So, I feel sorry for my wife who can't use other contraceptives, so it's better for me to use contraception."* Seeing this experience, the husbands felt sympathetic and motivated to take on the role of family planning. The decision to participate, for example through a vasectomy, emerged as a form of solidarity and responsibility in maintaining the health and comfort of his wife. Thus, a man's participation in family planning is not only a practical act but also a tangible expression of concern and empathy for his partner. Personal awareness of the importance of family planning.

### b. Exposure to Information from Friends, Health Workers, or the Media

Access to information plays a major role in influencing the husband's decision. An informant learns about vasectomy from a friend who has undergone the procedure and sees a television program that shares positive experiences and perceived benefits. In addition, education from the National Population and Family Planning Agency (BKKBN), Family Planning Field Officers (PLKB), and media programs featuring the true stories of vasectomy participants also strengthen the husband's understanding and courage in making decisions. AI said: *"There was information shared on television about the experience of family planning, and at that time I also had an acquaintance from PLKB who told me about male family planning. This information not only increases knowledge, but also helps reduce fears, misunderstandings, and stigma associated with vasectomy procedures. Husbands become more confident and convinced that the decision to participate in family planning is the right move for the good of the family."*

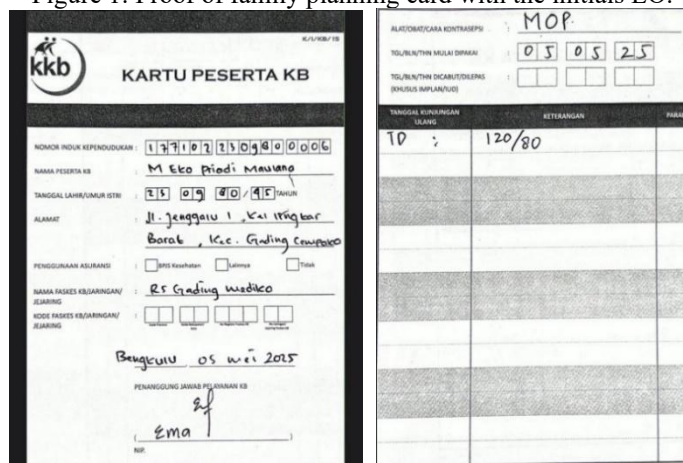
### c. Personal Initiative

Husbands who take personal initiative understand that the success of family planning depends not only on their wives, but also on their own active roles. The EO said: *"I decided to use contraception based on my family's limited economic conditions. Having a lot of children is not good for meeting basic needs, education, and health."* Furthermore, HK said: *"Yes, I use contraceptives based on various interrelated considerations, especially my wife's health, comfort, and our limited economic condition."* Then AR said: *"I took the initiative to use contraception out of concern and a sense of responsibility to my family, seeing my wife continue to use contraception."* This awareness arises from personal reflection on the family's economic condition, capacity to educate and finance children, and the health of the couple. For example, a husband may realize that his wife has been using hormonal contraceptives for a long time and is experiencing certain side effects. He may also feel sorry for his wife who has to use contraception.

This awareness encourages husbands to take proactive steps, such as undergoing a vasectomy, to ease the physical burden on his wife.

In addition to emotional factors, personal awareness is also an important motivator. Husbands who understand their family's economic situation and feel that they already have enough children are more likely to seek permanent and effective methods of contraception. This awareness comes from the understanding that careful family planning can maintain family welfare, manage expenses, and ensure that children's quality of life is maintained. Vasectomy as a permanent contraceptive method with more than 99% effectiveness is considered the right solution for husbands who want to ensure that their family remains prosperous and well-planned.

Figure 1: Proof of family planning card with the initials EO.



Source: Family Planning Counseling Center, Gading Cempaka District, 2025.

### 3. Reasons to Choose a Vasectomy

The main factors that directly encourage the husband to choose a vasectomy include:

#### a. Support from Wife

MN said: "Choosing a vasectomy was fully supported by my wife. By chance, my wife works as a midwife, so I know a little bit about female and male contraception." He added, "Furthermore, for me, a vasectomy is not a sign of weakness, but rather the responsibility of a caring and just husband who is brave enough to take a role in maintaining harmony in the household and the health of his wife." From MN's story, one of the determining factors is the full support of the partner. Many wives have been using hormonal contraceptives, such as pills, injections, or IUDs, for years and have experienced certain physical side effects and discomfort. The wife's support for the husband's decision to undergo a vasectomy arose because this procedure was considered to reduce their physical burden. With the support of his partner, the husband feels more confident in making decisions, because the process is carried out jointly and based on household agreements, thus creating a sense of mutual care and mutual responsibility.

#### b. Free from Side Effects and Does Not Interfere with Sexual Function

Many informants stated that after undergoing a vasectomy, they did not experience any health problems or decreased sexual function. MM said: "Since our third child, we wanted to manage the pregnancy, but the various contraceptives my wife used were not suitable and caused health problems. She also often forgot to take the pill, resulting in an unplanned pregnancy and five children." After that, "After getting an explanation from the health workers, I understood that vasectomy is safe, has no side effects, and does not affect sexual function." MM then emphasized: "I chose a vasectomy because my wife's health is affected by hormonal birth control, we already have enough children, and this decision is fully supported by my wife as a joint solution." After undergoing a vasectomy, his wife's health improved, their home life became more peaceful, and there were no more worries about pregnancy.

This refutes the common misconception that vasectomy can reduce virility or masculinity. This fact is one of the strong reasons for men to choose this method, because in addition to being safe, the vasectomy procedure does not interfere with sexual activity and family life remains harmonious. The absence of side effects makes vasectomy a practical and convenient option. DJ then said: *"The main reason I chose a vasectomy is because my wife has been experiencing discomfort using IUDs for a long time, even feeling pain during sex. My wife is also unable to use hormonal contraceptives due to a history of breast cancer, so contraceptive options are very limited."* After undergoing a vasectomy, *"The procedure was small, there were almost no side effects, and the sexual life was actually more comfortable. Vasectomy does not reduce masculinity, but it provides a sense of security and peace in the household."* From MM and DJ's stories, the researchers concluded that they underwent a vasectomy at a very appropriate age, suggesting that the decision to undergo a vasectomy was made during a relatively mature phase of the family's life cycle, characterized by having enough children and considering the health and comfort of the couple. These findings suggest that vasectomy was chosen rationally and reflectively, not as an impulsive decision, but as a long-term fertility control strategy that fits the needs of the family. The absence of health problems or decreased sexual function after vasectomy further strengthens the informant's belief that this method is safe and does not contradict the construct of masculinity. Thus, vasectomy can be understood as a form of male reproductive responsibility taken at the right time, while reflecting a shift in gender roles towards a more equal division of responsibilities within the family.

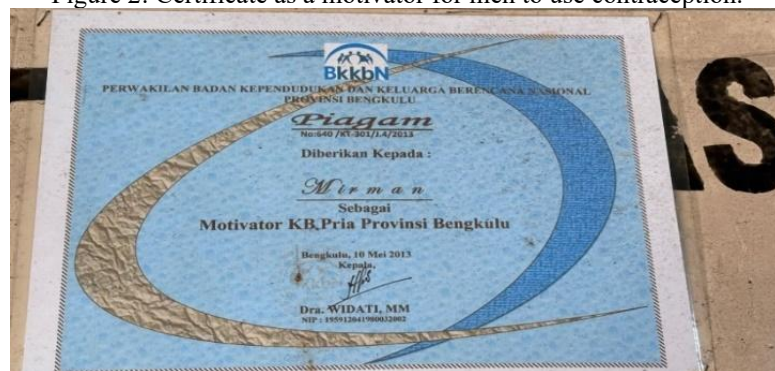
c. Family Economic Considerations

Economic considerations are also an important motivation. Having many children is often considered an additional burden of living expenses, including education, health, and daily necessities. Vasectomy is seen as a realistic step to control the number of children so that the quality of family life is maintained. With more controlled spending, parents can focus more on caring for and meeting their children's needs, thereby creating overall family well-being. The EO said: *"My decision to have a vasectomy was purely my own initiative. The family's economic situation makes me feel the need to control the number of children so that the family's welfare can be maintained."* After that, *"Vasectomy is a one-time procedure, there is no follow-up fee, and I even received financial support from the National Population and Family Planning Agency (BKKBN). It's more economical than other family planning methods, especially for families with limited economic means."* EO confirmed: *"I chose vasectomy also because of empathy for my wife, who is experiencing side effects from family planning. It's time for husbands to be responsible, not just wives."* So, *"Vasectomy is a one-time procedure with no ongoing costs, and even receives financial support from BKKBN of IDR 350,000. But I didn't have a vasectomy because of the money."* Then AR said: *"I decided to have a vasectomy due to my family's limited economic situation. I realized that having more children would be a burden, so I chose to use contraception to look after my family's well-being."* Furthermore, *"I have used various contraceptives, but I often experience side effects. Seeing this situation, my husband felt sorry for me and wanted to take over the responsibilities of family planning."* In addition, HK said: *"I know that a vasectomy is an effective step for me; Indeed, I had a vasectomy due to economic limitations."* The informant's statement indicates that the decision to choose a vasectomy was based on economic rationality, empathy for the couple's health, and an adequate understanding of the safety of the procedure. This decision reflects men's awareness of reproductive responsibilities and efforts to challenge cultural constructs that position contraception solely as a woman's responsibility. Vasectomy in this context is interpreted as an efficient family planning strategy as well as a symbol of the husband's concern and commitment to family welfare.

d. Knowledge and exposure to information about vasectomy

AI said: *"I've known about vasectomy since around 2000, but only decided to do it in 2008 after seeing a television program showing a person's positive experience after a vasectomy."* But *"With two children, which is enough, and economic considerations, vasectomy becomes a rational choice. After the procedure, health remains good, marital relationships are normal, and the wife is actually healthier because she no longer uses hormonal contraceptives."* From the AI story, the researchers note that education from health workers and family counselors plans to make informants no longer afraid of vasectomy and understand its effectiveness as a permanent contraception. In addition, television programs that discuss vasectomy procedures and their safety are motivations for husbands.

Figure 2: Certificate as a motivator for men to use contraception.



Source: Observation and Interview, 2025.

Based on the findings of this study, it is evident that a man's decision to undergo a vasectomy is not only a medical issue but also a complex social decision involving values, norms, and gender dynamics in the household. This is in line with Peter Blau's 1964 theory of social exchange by Gitzer and Goodman (2004), who explained that human actions are based on a rational calculation between reward and cost (Sufyanto, 2024; Zaifullah, 2021). Husbands choose vasectomy because they consider the social, emotional, and economic benefits obtained, such as family harmony, marital health, and economic stability, to outweigh social risks, such as social stigma.

Empathy for the wife is the most dominant finding in the decision to undergo a vasectomy. These findings reinforce the results of the study (AR et al., 2025) The informant stated that their wives experienced physical side effects and discomfort after years of using injectable birth control, pills, and IUDs. Consideration of the family's limited economic condition is a strong reason to undergo a vasectomy. With the number of children considered sufficient, they can focus on improving family welfare. These findings are in line with the research of Anitasari and Sarmin (2021), which showed that men from lower-middle-class economic backgrounds are more likely to choose permanent contraceptive methods to maintain household economic stability. Accurate knowledge and information also play a major role in shaping decisions. The AI informant claimed to be interested in undergoing a vasectomy after seeing a television program about the benefits of this method. This shows that the media has an important role in changing public perception. These results are in line with the research of Rahayu (2020) and Masrurroh et al. (2024), which proves that increased public information and education can improve men's views on vasectomy.

Partner support proves to be a deciding factor. In all cases, the decision to undergo a vasectomy is made through discussions with the partner (Saifullah & Budiarti, 2023). These findings are in line with modern gender role theory, where the division of responsibilities in the family is no longer centered on women alone. However, there are still obstacles in the form of social stigma that considers family planning as a women's affair. This perception needs to be changed through social campaigns and community-based approaches (Anggi, 2025). Stigma and perceptions of masculinity some informants admitted that they were initially hesitant due to the public's view that vasectomy is a form of "weakening" masculinity. However, after undergoing the procedure, they realized that the vasectomy did not affect sexual function. These findings reinforce the argument of Teriviantina and Simanjuntak (2021) that a correct theological and ethical understanding can help eliminate the negative stigma inherent in men's permanent contraceptive methods.

In general, the results of this study show that there is a shift in gender values and family relationship patterns in Bengkulu City, where men begin to play an active role in family planning. This demonstrates important social progress in the effort to create small, high-quality families as mandated by the national Family Planning program.

Thus, the decision to undergo a vasectomy in this study can be understood as the result of an interaction between economic rationality, emotional empathy, partner support, and information exposure. The decision is not solely a medical action, but a social action that reflects the changing pattern of gender relations in the family.

## CONCLUSION

This study concluded that the decision of husbands in Bengkulu City to choose a vasectomy in the Family Planning (KB) program was influenced by social, economic, and cultural factors. The main factors that drive the decision are awareness and responsibility for the wife's health, the number of children that have been considered sufficient, the family's economic condition, and the wife's support through communication and joint decision-making. These findings show that male participation in family planning is the result of rational considerations oriented towards family welfare. From the perspective of social exchange theory, the decision to undergo a vasectomy reflects a man's attempt to weigh the social, emotional, and economic benefits that outweigh the risks of social stigma. Practically, the results of this study confirm the importance of strengthening education and socialization of family planning involving couples, as well as strategies to reduce stigma against male contraceptives to increase male participation and encourage a more equal division of responsibilities in the family.

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