

# The Influence of Type of Job, Income, Education and Religiosity to Vasectomy Acceptors' Quality Of Life

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## Abstract

**Introduction:** in East Java in 2013, the percentage of vasectomy users was 0.12% .

**Purpose:** to investigate the influence of employment, income, education, and religiosity to vasectomy acceptors' quality of life.

**Method:** This research employed quantitative with past ex facto approached involved 30 population numbers. Purposive sampling technique and total sampling with rule of thumb were used. The instrument used a questionnaire with likert scale and WHOQOL questioner.

**Results:** There is significant influence of education and religiosity and no influence of work and income to the quality of life of vasectomy acceptors

**Keywords:** employment, income, education, quality of life, religiosity, vasectomy acceptors

## INTRODUCTION

In Indonesia, the prevalence of family planning acceptors had increased of 7.71% in August 2015. The increase was dominated by the usage of non-long-term methods of contraception, which reach up to 80.53% while 19 % acceptors used long-term methods. Long-term methods mostly used by women, 93% of women used IUD, 9.45% used implants, 1.60% used tubectomy while vasectomy users were 0.14% (BKKBN, 2015)

Based on data from the BKKBN East Java province, in 2013 family planning acceptors were as many as 4327 users; 48.09% of users were injection acceptors, 13% were IUD users, 15.65% were using contraceptive pill, 9.75% of acceptors received tubectomy, 4.25% of male were using condom, Implant users were 2.94%, and vasectomy users were as many as 0.12% (BKKBN JATIM, 2013).

The low number of man's participation in using contraceptive method had been influenced by several factors, such as knowledge, perceptions about the effectiveness, social cultural factor, education level, belief, risks of contraception, family support/wife, limited access to family planning services for men and the myth of side effects of vasectomy, i.e.: vasectomy's acceptors will experience sexual dysfunction,

prostate disorders, confidence problem. These myths were believed can decrease the quality of life (Suherni, 2006; Azwar, 2006, Everret; 2007)

Quality of life is believed as the perception of the individual to live well towards their living condition (Kreitleir & Ben (2004) in Nofitri, 2009; Cohen & Lazarus in Larasati, 2012). Quality of life has four domains; physical area, psychological area, social and environmental area (WHO, 2012). The physical area consist of activity, rest, fatigue, consumption of medicines, pain and discomfort (Tarwoto and Wartonah, 2010; Sekarwiri, 2008). Psychological area include appearance, negative and positive feelings, thinking, memory and concentration, while social area involving encompasses of individuals, support, sexual activity, and an environment area consists of income, freedom from discomfort, recreation, self-actualization (Sekarwiri, 2008).

At this time, the government effort to improve participation of man in family planning through vasectomy method has not considered on a regular inspection of the quality of life. In fact, the results of examination of the quality of life of vasectomy acceptors can be used as basic information to promote vasectomy methods amongst male acceptors. Therefore, the researcher interested to know the influence of employment, education level, income level and religiosity towards the quality of life on vasectomy acceptors in Sawunggaling and Wonokromo Village in Surabaya, Indonesia.

## **RESEARCH METHODS**

This research employed a quantitative approach using an ex-post facto design. The research was conducted in December 2015 to March 2016. Independent variables in this study are education level, income level, employment, religiosity and dependent variable is quality of life. The population in this research was 30 acceptors. The sampling method is purposive sampling and total sampling with rule of thumb. The inclusion criteria of sample are males who had a vasectomy procedure and the vasectomy had been done within more than three months when the research was done. The instrument used was a questionnaire with likert scale while quality of life questionnaire was measured using the adaptation of the WHOQOL BREFF (2012) which had been validated. Statistical tests of this research is multiple regression linier (Dahlan,2014; Murti, 2013).

## RESULT AND DISCUSSION

### a. Result

#### 1. Normality test with Kolmogorov- Smirnov

Based on the results of a test of normality by using the Kolmogorov Smirnov obtained  $p = 0.77$  it is mean that data is normaldistributed with  $p$  value  $0.05 >$

#### 2. Frequency distribution

Table 1 Frequency distribution

Variabel	n	frequency	%
Quality of life	30		
Low		-	
Moderete		30	100
High			
Education			
Elementary school		15	50
Junior High School	High	15	50
Job			
Traders		14	46
Pedicap		16	54
Income			
1 million/month		22	73.7
>1 million /mounth		8	27.3
Religiosity			
Low		0	0
Moderete		30	100
High		0	0

Table 1 explains that most of the subject is on the moderate quality of life and the level of education in elementary school was 50% , respondents who had graduated from junior high school was 50%. 54% of them work as a pedicap driver and 73.7% of them have monthly income as many one million rupiahs. All of the respondents have moderate level of religiosity.

### 3. Univariate analysis

Table 2 The result of univariate analysis

Variabel	Mean	SD	N
Quality of life	76.9	0.84	30
Education	1.5	0.50	
Employment	1.46	0.50	
Income	1.26	0.44	
Religiosity	74.8	0.84	

Table 2 describes that the respondents have medium level of quality of life with (mean= 47.8).

### 4. Bivariate analysis

Table 3 Bivariate analysis

Variable	Quality of life Correlation Coefficient	p
Job	0.54	0.87
Education	0.57	0.003
Income	0.48	0.66
Religiosity	0.03	0.001

Table 3 illustrates that there is a positive significant influence the level of education and religiosity to vasectomy acceptors' quality of life. It means that the higher level of education and religiosity of the subject can improve the quality of life of vasectomy acceptors. However, the types of job and income level have no influence to vasectomy acceptors' quality of life.

### 5. Multivariate analysis

Table 4 Result of multiple regression linier

Variable	Coefficient Regression	p < 0.05
constanta	46,9	
Education	-0.68	0.01
Job	0.07	0.70
Income	0.12	0.70
Religiosity	0.04	0.01
Adjusted R <sup>2</sup> =		
0.428		
42.8%		
p < 0.05		

Table 4 describes that there is significant influence of the level of education and religiosity on quality of life of vasectomy's acceptors. However there is no influence of type of job and income level to participants' quality of life. The value of  $R^2 = 0.428$

(rounded into 43) which means that independent variables may affect dependent variable of 43% while 57% were influenced by the other factors.

## **b. Discussion**

The results of the research found that there were significant influence on education level and religiosity to the quality of life vasectomy's acceptors. Higher education level is in line with the increase of consciousness level. This opinion has been supported by Noghani, Asghapur and Safa (2007). They had concluded that educational level affect the quality of life because of it raised the awareness level. Similar statements with this result was confirmed by Mons, Marquetry, Buds and Dee Gees (2006).

Religiosity is considered as faith, believe and worship of obedience towards the religion. It may cause the internalisation process of the religion in a person (Diester in Risnawita and Ghufron, 2011). Religiosity has five area; belief, religious practice, experience, practice, and knowledge (Glok and Stark in Repstad and Furshet, 2006). Religiosity affect individual quality of life because it is believed to be able to fix the physical and psychological wellbeing. If the individual has a good physical and psychological wellbeing, it will balance the physical, mental health, and good social welfare. (Brim in Hamburger, 2009). Type of job and monthly income level have no effect on vasectomy's acceptors quality of life because it may depend on respondent's awareness.

## **CONCLUSION**

The level of education and religiosity influence the quality of life of vasectomy acceptors as many as 43%, however the types of jobs and incomes do not affect on the quality of life amongst vasectomy acceptors..

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