

Impact of Rural Industrialization Against the Reproductive Health of Women Workers in the Industrial Sector in Sukabumi

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Abstract: Changes in the economic system from agriculture into manufacturing helped provide employment, especially female workers. Women workers has been imaged as an ideal worker skilled, diligent, conscientious and obedient and work for less. Industrialization enabling various changes and cumulative impacts. One is the impact on Maternal and Child Health (MCH) and reproductive health (reproductive health). In Sukabumi, the number of mothers dying in 2012 as many as 76 people with the highest percentage caused by eclampsia, bleeding and infection. The number of babies dying as much as 491 people with the highest percentage of low birth weight due. In mid 2013, the maternal mortality reached 31 people. The number of cases of HIV Aids in Sukabumi in 2011 amounted to 14 people in 2012 amounted to 22 people and in 2013 had reached 69 people, nearly 80% of people with HIV and AIDS (PLHIV) is derived from their productive age between 19-50 years or working age. A very significant figure in line with the development of industrialization in Sukabumi quite rapidly. This study was to determine the extent of rural industrialization impact on the reproductive health of women workers in the industrial sector Sukabumi. The output of this research as a decision support and intervention programs on reproductive health for women workers in the industrial sector in Sukabumi.

Key words: Reproductive, women, industry, rural, Indonesia, significant

INTRODUCTION

Industrialization in rural areas is seen as an alternative strategy to meet the needs of the rural economy. The industrial sector is considered more important because investment in agriculture is considered less profitable, even considered slow growth. Central government policies as stipulated in Presidential Decree No. 41 of 1996 which was then supported by Law 32 of 2002 on regional autonomy to encourage investment in industry sectors. Changing patterns of rural agrarian economy into industry, the development of rural industrial area related to changes in land use have an impact on narrowing of the land and damage the surrounding environment. In addition, the construction industry will have an impact in rural areas such as increased migration flows and the emerging business opportunities in the field of non-agricultural. Changes in the economic system from agriculture to industry co-employment, it leads to the mobility patterns of the non-industrial region to the industrial area, the village consequently not only more

crowded by newcomers who settled but became more open to change and cumulative impacts. One is the impact on Maternal and Child Health (MCH). This is because the majority of workers are women. Women workers have been imaged as an ideal worker skilled, diligent, conscientious and obedient and work for less (Aryeetey *et al.*, 2010).

Target achievement of the Millennium Development Goals (MDGs) in 2015 in reducing the Maternal Mortality Ratio (MMR) and Infant Mortality Rate (IMR) is a top priority in health development in Indonesia. From the MDG target Maternal Mortality Rate (MMR) 102/100,000 live births and the Infant Mortality Rate (IMR) 23/100,000 live births. The Maternal Mortality Rate (MMR), Infant Mortality Rate (IMR) and the Infant Mortality Rate (Akaba) an indicator of the health status of the community. In Sukabumi, the number of mothers dying in 2012 was as many as 76 people with the highest percentage caused by eclampsia, bleeding and infection. The number of babies dying as much as 491 people with the highest percentage of low birth weight due. In

mid-2013, toddlers death of 33 people and the maternal mortality reaches 31. In addition, the reproductive health problems such as the spread of HIV-Aids cases in Sukabumi increased from year to year. The number of cases of HIV Aids in Sukabumi in 2011 amounted to 14 people in 2012 amounted to 22 people and in 2013 had reached 69 people, nearly 80% of people with HIV and AIDS (PLHIV) is derived from their productive age between 19-50 years or working age. The developments of industrialization in Sukabumi grow quite rapidly. With regard to the above problem then that would be an issue in the discussion of this study is how the conditions of the reproductive health of female workers related to the impact of rural industrialization.

Aim of study: The aim of this study was knowing the impact of rural industrialization on the reproductive health of women workers in the industrial sector Sukabumi.

MATERIALS AND METHODS

The study population was all the workers in the industrial sector in the District of Sukabumi. Sampling technique used was purposive sample with analysis unit companies engaged in the industrial sector. Subject of analysis are 100 workers in the industrial sector and informants of the elements of community leaders, health workers and government employees in the village. Analysis of data used statistics analysis for quantitative methods (questionnaire survey and secondary data) and qualitative studies (interviews and observations) to obtain reproductive health-related indicators.

RESULTS AND DISCUSSION

The scope of the area of survey is the third industrial area of five regions in the RTRW because two other areas engaged in the mining, plantation and agro the assumption absorb more labor male and the other reason is the access to get there for four enumerators were all female condition is difficult and prone, general overview of the respondents female factory workers in Sukabumi. A total of 100 respondents showed that the vast majority are women with education level above high school/equivalent and at the age of 20-25 years. Status mostly married (62%) were married. Of the type of work status, mostly labor contract workers (61%).

The use of Long-Term contraceptive Method (LTM) and non-LTM method has the same amount, namely 21%, while those not using contraception as much as 58%. Of

living conditions, women who reside in their own homes using non LTM as much as 85.71%. Resources, obtained only 70 respondents who answered knowing the source of reproductive health information. The source of most information comes from health workers (47.14%) and of the mass media as much as 45.71%.

Factors affecting the use of contraceptives is the socio-demographic and socio-psychological (Bertand, 1980). A long-term method of contraception is contraception that is used within a period of more than 2 years (Prawihardjo, 1999). Age women factory workers showed no difference in the method of use of long-term contraceptive methods and counseling from health workers affect the use of methods of use of contraceptives (Crede *et al.*, 2012; Gebremariam and Addissie, 2014).

CONCLUSION

Improved dissemination of methods of contraception to all women of good women of childbearing age or not, so that, women have a lot of options in accordance with the socio-demograi and their social-psychology.

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