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## Vasectomy and Reproductive Justice: An Analysis of the Mubadalah Theory in Relation to Public Perceptions in Indramayu in the Context of Law No. 17 of 2023

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### ARTICLE

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### ABSTRACT

The issue of reproductive justice in Indonesia highlights a gap between state regulations, religious perspectives, and social realities. Although Law No. 17 of 2023 on Health guarantees every individual's right to reproductive health services without discrimination, male participation in family planning programs – particularly vasectomies – remains low and is influenced by social stigma. This study aims to analyze the relationship between these regulations and the principles of reproductive justice, examine Islamic legal perspectives through Faqihuddin Abdul Kodir's Mubadalah Theory, and understand public perceptions in Indramayu regarding vasectomy. This study employed a qualitative, socio-legal approach, using interviews with religious leaders, the Head of the Family Planning Division at the DPPKB PPPA, family planning medical staff at community health centers, and vasectomy recipients, and supported by statistical data from the 2024–2025 family planning program. The results of the study indicate that, normatively, vasectomy has gained religious legitimacy based on the principle of public welfare, while state policies have provided services and counseling. Empirical data show an increase in male sterilization procedure recipients from 2 individuals (2024) to 9 individuals (2025), yet this remains far below female sterilization procedures, which reached 106 (2024) and 259 (2025), reflecting strong gender bias and cultural barriers. The contribution of this study lies in integrating health law analysis, the *Mubadalah* Theory perspective, and empirical community data to explain male participation in family planning. These findings affirm that vasectomy is an instrument for the redistribution of reproductive responsibilities and the realization of relational justice within the family.

**Keywords:** Reproductive Justice; Vasectomy; *Mubadalah*

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## A. INTRODUCTION

The issue of reproductive justice is an integral part of human rights, affirming the right of every individual to make choices regarding their reproductive function and health. In social practices in Indonesia, which are still strongly influenced by patriarchal culture, the responsibility of birth control tends to be imposed on women through the use of hormonal contraceptives and sterilization. Meanwhile, men's involvement in Family Planning (KB) programs, especially through permanent contraceptive methods such as vasectomy, is still relatively low and is often viewed negatively.<sup>1</sup> This condition shows that there is gender inequality in the distribution of reproductive responsibilities in the family, as well as showing that reproductive justice has not been fully realized substantively.

Normatively, the state has provided legal guarantees through Law No. 17 of 2023. The regulation, in principle, opens up space for male participation in reproductive health. However, in social reality, acceptance of vasectomy still faces obstacles in the form of masculinity stigma, limited religious perceptions, and cultural constructs that place contraception as women's responsibility.<sup>2</sup> In Indramayu Regency, this condition is reflected in the low participation rate of men in the vasectomy method compared to the female contraceptive method, thus showing a gap between legal norms and social practices.<sup>3</sup> Meanwhile, studies from the perspective of contemporary Islamic law, especially through the *Mubadalah* Theory developed by Faqihuddin Abdul Kodir, emphasize the principle of *reciprocity* between men and women in fulfilling social responsibilities, including in the context of reproduction.<sup>4</sup> However, most of the research remains only partially developed, not yet integrating comprehensive analyses of state law, religious perspectives, and the empirical realities of society.

Several previous studies have shown that the issue of reproductive justice, particularly related to male participation in family planning programs and the *mubādada* approach, has been studied from various perspectives, but still leaves significant research gaps. Studies by Eko Wahyudi Nurriyanto (2023)<sup>5</sup> and Siti Halawatus Sa'diyah (2023)<sup>6</sup> both emphasize the principle of *mubadalah* as the basis for

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<sup>1</sup> Alifiulahtin Utaminingsih, *Kajian Gender Berperspektif Budaya Patriarki* (Malang: UB Press, 2023), 76–78.

<sup>2</sup> Muhamad Setiawan Efendy, et al., "Analisis Sentimen Terhadap KB Vasektomi di X dengan Pendekatan Kesetaraan Gender," *Journal of Gender Equality and Social Inclusion (GESI)* 4, no. 2 (2026): 87, <https://doi.org/10.38156/gesi.v4i2.209>.

<sup>3</sup> Lidya Indra Wahyuningsih, "Data Statistik KB Vasektomi Kab Indramayu Tahun 2024-2025," 20 Februari 2026.

<sup>4</sup> Faqihuddin Abdul Kodir, *Qira'ah Mubadalah* (IRCiSoD, 2021), 616:67.

<sup>5</sup> Eko Wahyudi Nurriyanto, *Mubadalah dan Relevansinya Terhadap Keharmonisan Rumah Tangga: Kajian Analisis Konsep Perspektif Sosiologi Keluarga* (Tesis, UIN SUSKA RIAU, 2024).

<sup>6</sup> Siti Halawatus Sa'diyah, *Konsep Mubadalah dalam Pendidikan Keluarga (Studi Terhadap Buku Qira'ah Mubadalah)* (Tesis, UIN SUKA YOGYAKARTA, 2022).

gender justice in the family, but remain conceptual and have not addressed the empirical reality of society. Meanwhile, Robiatul Adawiyah's (2019) research criticizes gender inequality in family planning programs from an Islamic perspective. However, it focuses more on symbolic violence against women without offering a framework for solutions based on male involvement.<sup>7</sup> On the other hand, I Gusti Ngurah Agung Krisna Aditya (2023)<sup>8</sup> and Yola Ninda Dwi Woro Dyah Sehnur (2024) have empirically studied vasectomy and barriers to masculinity, but focus more on social analysis and power relations without integrating Islamic theological perspectives or state legal frameworks such as Law Number 17 of 2023 concerning Health.<sup>9</sup>

Comparatively, previous studies have both highlighted low male participation and strong gender bias in contraceptive practices, but differed in approach in that some focused on health aspects. In contrast, others focused on social or religious perspectives. The main limitation of these studies is the lack of an integrative approach that connects legal regulation, Islamic perspectives through *Mubadalah* Theory, and the empirical conditions of society in a complete analytical framework. This shows that there is a research gap that is the basis for this research to present a more comprehensive, holistic, and contextual analysis of vasectomy in the framework of reproductive justice. This research has novelty in its efforts to fill the gap in the study of reproductive justice through the integration of national health law analysis, especially Law Number 17 of 2023 concerning Health, with a progressive Islamic theology perspective through the *Mubadalah* Theory developed by Faqihuddin Abdul Kodir, and supported by empirical data from the Indramayu community. Thus, this research not only enriches academic discourse but also makes a practical contribution in encouraging the transformation of the understanding of male participation in family planning as a form of relational justice.<sup>10</sup>

## B. RESEARCH METHODS

The methodology of this research employs a juridical-sociological approach using a qualitative method that integrates normative analysis (law in the book) and empirical reality (law in action). The normative approach is carried out through a review of Law Number 17 of 2023 concerning Health,<sup>11</sup> Government Regulation

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<sup>7</sup> Robiatul Adawiyah, "Kekerasan dalam Implementasi Keluarga Berencana Terhadap Perempuan dalam Perspektif Islam," *Jurnal Al-'Adl* 12, no. 1 (2019): 19.

<sup>8</sup> I Gusti Ngurah Agung Krisna Aditya, *Relasi Kuasa Pengguna Kontrasepsi Vasektomi Kecamatan Petang Kabupaten Bandung* (Tesis, UGM, 2017).

<sup>9</sup> Yola Ninda Dwi Woro Dyah Sehnur, "Fenomena Kepanikan Maskulin Dibalik Program Kontrasepsi Laki-Laki," *Lentera: Journal of Gender and Children Studies* 4, no. 2 (2024): 15.

<sup>10</sup> Sulistyowati Irianto, *Perempuan dan Hukum: Menuju Hukum yang Berperspektif Kesetaraan dan Keadilan* (Jakarta: Yayasan Pustaka Obor Indonesia, 2006), 130–132.

<sup>11</sup> Undang-Undang Nomor 17 Tahun 2023 Tentang Kesehatan.

Number 28 of 2024,<sup>12</sup> and Law Number 52 of 2009 concerning Population Development and Family Development<sup>13</sup>, which are the legal basis for the regulation of reproductive health and family planning programs. Meanwhile, an empirical approach was carried out to understand how the regulation was practiced and interpreted by the community, especially related to the participation of men in the vasectomy program in Indramayu. This research is also supported by a literature review that examines the concepts of reproductive justice, vasectomy, and *Mubadalah* Theory as a framework for analysis from an Islamic law perspective.

The informants in this study were four people selected through purposive sampling based on specific criteria. These criteria include direct involvement and a deep understanding of family planning and reproductive health issues. The informants consisted of one male acceptor of the Male Operating Method (MOP), one medical worker in the field of family planning at the health center, one official from the DPPKB PPPA Indramayu Regency, and one religious leader or academic with competence in family fiqh and gender justice. The selection of informants is intended to obtain diverse perspectives on practical experience, policy, and religious views. Data collection was carried out through in-depth interviews using semi-structured guidelines that were flexible, allowing for a more comprehensive exploration of informants' experiences, perceptions, and socio-religious constructions.<sup>14</sup>

The data analysis process is carried out in stages, following an interactive analysis model: data reduction, data presentation, and a conclusion.<sup>15</sup> In the reduction stage, data from the interview and documentation were selected, categorized, and focused on the research theme. Furthermore, the data are presented in a descriptive-analytical narrative to clarify the relationships among variables. The final stage, concluding, involves integrating empirical findings with normative and theoretical frameworks. The validity and credibility of the data are maintained through triangulation across sources, methods, and theories.<sup>16</sup> Source triangulation is carried out by comparing data from various informants; method triangulation is carried out by combining interviews and documentation studies; and theoretical triangulation is

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<sup>12</sup> Peraturan Pemerintah Nomor 28 Tahun 2024 Tentang Peraturan Pelaksanaan Undang-Undang Nomor 17 Tahun 2023 Tentang Kesehatan.

<sup>13</sup> Undang-Undang Nomor 52 Tahun 2009 Tentang Perkembangan Kependudukan dan Pembangunan Keluarga.

<sup>14</sup> Nur Intifada Zahroh, Lusy Amelia Nasution, and Aulia Dzulfa Tazqia, "Strategi Pengumpulan Data dalam Penelitian Kualitatif: Teknik, Tantangan dan Solusinya," *Tarbiyatul Ilmu: Jurnal Kajian Pendidikan* 3, no. 6 (2025): 108.

<sup>15</sup> Ahmad and Muslimah, "Memahami Teknik Pengolahan dan Analisis Data Kualitatif," *Palangka Raya International and National on Islamic Studies* 1, no. 1 (2021): 182.

<sup>16</sup> Dedi Susanto, Risnita, and M. Syahran Jailani, "Teknik Pemeriksaan Keabsahan Data dalam Penelitian Ilmiah," *Jurnal QOSIM Jurnal Pendidikan Sosial & Humaniora* 1, no. 1 (2023): 55, <https://doi.org/10.61104/jq.v1i1.60>.

carried out by examining research findings from the perspectives of positive law, Islamic law, and *Mubadalah* Theory.

## C. RESULTS AND DISCUSSION

### 1. Synthesis of *Mubadalah* Theory and Reproductive Justice

The theoretical synthesis in this study focuses on integrating two main frameworks, namely *Mubadalah* Theory and Reproductive Justice, as a conceptual basis for understanding vasectomy in the socio-religious context of the Indramayu community. These two approaches share common principles of justice, reciprocity, and respect for human dignity. *Mubadalah*'s theory emphasizes an equal and fair reciprocal relationship between men and women,<sup>17</sup> while *Reproductive Justice* presents a human rights perspective affirming individuals' freedom to make reproductive decisions. Thus, the combination of the two forms an integrative perspective between religious values and social justice.<sup>18</sup> According to Faqihuddin Abdul Kodir, *Mubadalah* is based on the principles of equality and justice that must be realized in the relationship between men and women. This principle is relevant in seeing the issue of vasectomy as a form of active participation of men in reproductive responsibility, not just a burden on women. Through this approach, reproductive decisions are understood as the result of equal and mutually beneficial deliberation in the family.<sup>19</sup>

Meanwhile, *Reproductive Justice* complements the framework by highlighting the social and structural dimensions that influence reproductive decisions.<sup>20</sup> This theory asserts that every individual has the right to freely make reproductive choices, including in the context of the use of contraceptives such as vasectomy. In a society that is still influenced by patriarchal culture, this approach helps to expose access inequalities, social stigma, and the construction of masculinity that hinders male involvement,<sup>21</sup> a practice that reflects relational justice within the family. Within this framework, men and women are positioned as equal subjects in reproductive decision-making, emphasizing the principles of shared responsibility

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<sup>17</sup> Abdul Kodir, *Qira'ah Mubadalah*, 616:40.

<sup>18</sup> Mohammad Ridwan and Lilik Andaryuni, "Religious Moderation in Addressing Gender, Human Rights, and Ecology Issues: A Study from the Perspective of Contemporary Islamic Studies," *International Journal on Advanced Science, Education, and Religion (IJOASER)* 8, no. 3 (2025): 441.

<sup>19</sup> Kholis Bidayati, *Perlindungan Hak Reproduksi Perempuan dan Interpretasinya di Pengadilan Agama: Studi Putusan Pengadilan Agama di DKI Jakarta 2015-2019* (Jakarta: A-Empat, 2021), 27.

<sup>20</sup> Herlina, et al., "Pemenuhan Hak-Hak Anak Pasca Kelahiran dalam Perspektif Islam: Strategi Membangun Keluarga Sejahtera di Era Kontemporer," *Moderasi: Journal of Islamic Studies* 4, no. 2 (2024): 106, <https://doi.org/10.54471/moderasi.v4i2.69>.

<sup>21</sup> Megawati and Husnah Amri, "Pengalaman Perempuan Terhadap Otonomi dalam Pengambilan Keputusan Kesehatan Reproduksi: Studi Fenomenologis," *Journal of Innovative Midwifery Practice* 1, no. 1 (2025): 2.

and equitable freedom. Thus, the synthesis of *Mubadalah* and *Reproductive Justice* presents a new paradigm for understanding reproductive justice that is not only grounded in religious norms but also attentive to the dimensions of human rights and social reality.<sup>22</sup> This approach provides a more comprehensive conceptual basis for bridging the gap between Islamic values and the demands of gender justice in reproductive health practices.

## 2. Government Regulation No. 17 of 2023 and *Reproductive Justice*

The right to health is a fundamental right inherent in every human being, regardless of gender, age, religion, social status, economic conditions, or other backgrounds.<sup>23</sup> In the national legal system, this principle is affirmed in Law Number 17 of 2023 concerning Health, which places health as the right of every person and the obligation of the state to guarantee it. The formulation "everyone" implies an inclusive, universal approach, so there should be no restrictions on access to health services based on any specific identity.

The principle of non-discrimination in the right to health also means that health services must be provided fairly and proportionately according to the medical needs of each individual.<sup>24</sup> In the context of reproductive health, this includes the right of both women and men to access safe and quality services, including counselling, pregnancy management, and sexual health protection. The state must not allow social norms or gender bias to hinder a person's access to the services they need.<sup>25</sup>

Furthermore, non-discrimination in the right to health also demands protection for vulnerable groups who are often socially marginalized.<sup>26</sup> The poor, rural communities, people with disabilities, and adolescents have the same right to reproductive health services. Therefore, the principle of the right to health is not

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<sup>22</sup> Naila Farah, "Childfree dalam Perspektif Teologi Pembebasan Ali Ashgar Engineer: Kebebasan, Keadilan, dan Kesejahteraan," *Jurnal Equalita* 7, no. 1 (2025): 190.

<sup>23</sup> Babib Shulton Asnawi, *Politik Hukum Perlindungan Hak-Hak Asasi Manusia Kaum Perempuan di Indonesia (Studi Tentang Upaya Mewujudkan Keadilan dan Kesetaraan Gender Kaum Perempuan di Bidang Kesehatan Era Pemerintahan Susilo Bambang Yudhoyono/SBY)* (Tesis, Universitas Islam Indonesia, 2011), 38.

<sup>24</sup> Nur Azizah Wulandari, Purwanto, and Erna Susanti, "Pertanggungjawaban Hukum Penyedia Layanan Kesehatan Terhadap Pemenuhan Hak Peserta Jaminan Kesehatan Nasional," *Jurnal Ilmiah Advokasi* 13, no. 4 (2026): 1494, <https://doi.org/10.36987/jiad.v13i4.6874>.

<sup>25</sup> Zalkia Salsabila, et al., "Kesenjangan Gender di Dunia Kerja Berdasarkan Perspektif Hukum," *Jurnal Kajian Hukum dan Kebijakan Publik* 2, no. 1 (2024): 491, <https://doi.org/10.62379/2ka7dr85>.

<sup>26</sup> Nicken Sarwo Rini, "Analisis Implementasi Prinsip Non-Diskriminasi dalam Peraturan Daerah di Bidang Pendidikan dan Kesehatan," *Jurnal HAM* 9, no. 1 (2018): 19, <https://doi.org/10.30641/ham.2018.9.19-36>.

only about formal access but also about ensuring that there are no structural or cultural barriers that prevent a person from obtaining services.<sup>27</sup>

The principle of equality in health services means that every individual has an equal position before the law and the health care system.<sup>28</sup> Equality does not always mean identical treatment, but fair treatment according to needs. In the context of reproductive health, equality demands a distribution of responsibilities and access to services that not only focus on women but also involve men as subjects of rights and responsibilities.<sup>29</sup> Equality and access are also related to the removal of gender-based barriers. In practice, reproductive health services are often more burdened on women, while male participation is not optimal. The principle of equality requires that health policies and programs provide a balanced space for participation to create reproductive justice based on shared responsibility.<sup>30</sup>

As a consequence of recognizing the right to health, the state is responsible for designing, implementing, and supervising the provision of safe, high-quality, and affordable reproductive health services.<sup>31</sup> This responsibility includes the provision of regulations, financing, health facilities, medical personnel, as well as public information and education systems. The state is also obliged to ensure that these services are carried out without discrimination and in line with the principles of human rights protection. Reproductive health can be understood as a state of complete physical, mental, and social health in relation to the reproductive system, its functions, and processes. The scope includes pre-pregnancy health, pregnancy, childbirth, the postpartum period, sexual health, and pregnancy management through family planning.<sup>32</sup>

The right to information, education, and reproductive services is an integral part of the right to health. Individuals have the right to know contraceptive options, medical risks, and the consequences of any reproductive health measures. In

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<sup>27</sup> Hanafi and Istiana Herianti, "Akseibilitas Jaminan Kesehatan Bagi Pekerja Informal di Indonesia: Analisis Kebijakan Jaminan Kesehatan Nasional Berdasarkan Prinsip Hak Asasi Manusia," *Al Adl: Jurnal Hukum* 18, no. 1 (2026): 77, <http://dx.doi.org/10.31602/al-adl.v18i1.20563>.

<sup>28</sup> Maulana Adieb Akbar, *Analisis Yuridis Penerapan Asas Kesetaraan pada Regulasi Pelayanan Jaminan Sosial Kesehatan* (Skripsi, Universitas Islam Indonesia, 2018), 15–16.

<sup>29</sup> Fitri Yanti, et al., "Kesetaraan Gender sebagai Pilar Pembangunan Masyarakat: Tantangan, Strategi, dan Rekomendasi Kebijakan," *Tatar Pasundan: Jurnal Diklat Keagamaan* 19, no. 2 (2025): 121, <https://doi.org/10.38075/tp.v19i2.582>.

<sup>30</sup> Asnawi, *Politik Hukum Perlindungan Hak-Hak Asasi Manusia Kaum Perempuan di Indonesia (Studi tentang Upaya Mewujudkan Keadilan dan Kesetaraan Gender Kaum Perempuan di Bidang Kesehatan Era Pemerintahan Susilo Bambang Yudhoyono/SBY)*, 6.

<sup>31</sup> Utari Dewi Fatimah, "Perlindungan Hukum Hak Kesehatan Reproduksi Perempuan," *Jurnal Hukum Sasana* 5, no. 2 (2020): 215, <https://doi.org/10.31599/sasana.v5i2.101>.

<sup>32</sup> Hasyim Hasanah, "Pemahaman Kesehatan Reproduksi bagi Perempuan: Sebuah Strategi Mencegah Berbagai Resiko Masalah Reproduksi Remaja," *Sawwa: Jurnal Studi Gender* 11, no. 2 (2017): 230, <https://doi.org/10.21580/sa.v11i2.1456>.

addition, family planning and pregnancy arrangements are carried out with a rights and safety protection approach, including protection for vulnerable groups such as high-risk women, adolescents, and underprivileged communities. Thus, reproductive health is not only a medical issue, but also a matter of social justice and the protection of human rights.<sup>33</sup>

### 3. Vasectomy from the Perspective of *Mubadalah*

The *Mubadalah* theory, developed by Faqihuddin Abdul Kodir, departs from the principle of reciprocity in reading religious texts and in social relations between men and women. *Mubadalah* holds that the teachings of Islam are essentially reciprocal, so that every value of goodness, responsibility, and rights addressed to one gender also applies to the other, unless there is evidence expressly distinguishing it.<sup>34</sup> In the context of the household, *Mubadalah* emphasizes relational justice, a relationship built on partnership rather than domination. Husbands and wives are positioned as equal subjects in dignity and responsibility, supporting each other in meeting spiritual, emotional, economic, and reproductive needs. This relational justice does not necessarily mean identical roles, but rather equality in value and appreciation for each other's contributions.

The principle of shared responsibility in decision-making is also an important element in *Mubadalah*. Family decisions, including in terms of reproductive health and contraceptive use, should be made through deliberation and mutual consideration. This approach rejects unilateral decision-making patterns, both male-dominated and fully burdened by the wife, and encourages the active participation of both parties in every aspect of family life.<sup>35</sup> Vasectomy is a method of permanent contraception in men through a simple medical procedure to cut or close the sperm duct (*vas deferens*), thus preventing fertilization.<sup>36</sup> This procedure is relatively safe, has minimal risk, and does not affect sexual or hormonal function,<sup>37</sup> and is highly effective without requiring routine adherence, such as daily contraception in women.<sup>38</sup>

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<sup>33</sup> Justicia Salsabila and Irsyaf Marsal, "Politik Hukum Pemenuhan Hak Atas Pelayanan Kebidanan yang Aman dan Bermutu Sebagai Bagian dari Hak Asasi Manusia," *Al-Zayn: Jurnal Ilmu Sosial & Hukum* 3, no. 6 (2025): 8961–62, <https://doi.org/10.61104/alz.v3i5.2607>.

<sup>34</sup> Abdul Kodir, *Qira'ah Mubadalah*, 616:15.

<sup>35</sup> Abdul Kodir, *Qira'ah Mubadalah*, 616:93.

<sup>36</sup> Zed Ahmad Kahfilani, Muhammad Umar Al Ghazali, and Dafi Muntazhar, "Penggunaan Kontrasepsi Vasektomi: Kesehatan, Agama, dan Keharmonisan Rumah Tangga," *Slamologi: Jurnal Ilmiah Keagamaan* 1, no. 2 (2024).

<sup>37</sup> Rahmawati Alil, Tadeus A. L. Regaletha, and Enjelita M. Ndoen, "Partisipasi Suami dalam Penggunaan Vasektomi di Kota Kupang," *Media Kesehatan Masyarakat* 2, no. 1 (2020): 18–25, <https://doi.org/10.35508/mkm.v2i1.1952>.

<sup>38</sup> Titin, "Wawancara: Tenaga Medis Puskesmas Plumbon Kec Indramayu," 10 Maret 2026.

In comparison, the biological burden of contraception has been borne by women, such as the use of hormonal pills, injections, implants, and invasive tubectomy procedures.<sup>39</sup> Many of these methods have side effects in the form of hormonal changes, menstrual cycle disruptions, and certain medical risks.<sup>40</sup> Meanwhile, contraceptive options for men are relatively limited, and their participation in family planning practices is still low. This inequality shows an unbalanced distribution of reproductive burden, both biological and social. In *Mubadalah's* perspective, vasectomy can be read as one of the instruments of redistribution of reproductive responsibility. When men are willing to take a role in birth control, there is a fairer practice of reciprocity between husband and wife. Thus, family planning is no longer understood as a "woman's affair" but rather as a shared commitment to maintain the health, welfare, and quality of family life.<sup>41</sup>

Although medically safe, a vasectomy still faces a strong social stigma. Men who undergo a vasectomy are often labeled as losing their virility or are no longer considered "perfect" as men.<sup>42</sup> This stigma not only comes from the general public but can also be reinforced by a lack of comprehensive understanding of religion or inadequate medical information.<sup>43</sup> The perception of masculinity in patriarchal cultures also strengthens resistance to male participation in contraception. Masculinity is often associated with unlimited reproductive ability, so birth restrictions through vasectomy are seen as contrary to male identity.<sup>44</sup> In this context, reproductive responsibility remains on women, even though the biological and psychological impacts are heavier for them.<sup>45</sup>

However, *Mubadalah's* approach offers the potential to transform husband-wife relationships. By emphasizing the principles of reciprocity, dialogue, and relational justice, couples can build more equal patterns of partnership in reproductive decision-making. This transformation not only impacts family

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<sup>39</sup> Fitri Afifah Nurullah, "Perkembangan Metode Kontrasepsi di Indonesia," *Continuing Medical Education* 48, no. 3 (2021): 168.

<sup>40</sup> Besty Agustina Silitonga and Asnita Sinaga, "Hubungan Jenis dan Lama Penggunaan Kontrasepsi Hormonal terhadap Gangguan Menstruasi pada Wanita Usia Subur di Puskesmas Pardamean Kecamatan Siantar Marihat Kota Pematangsiantar Tahun 2023," *Antigen: Jurnal Kesehatan Masyarakat dan Ilmu Gizi* 2, no. 1 (2024): 15, <https://doi.org/10.57213/antigen.v2i1.149>.

<sup>41</sup> Abdul Kodir, *Qira'ah Mubadalah*, 616:35–38.

<sup>42</sup> Farsya Sharikha Amani, et al., "Rekonstruksi Interpretasi Norma Agama Terhadap Kontrasepsi Vasektomi: Telaah Hukum Islam dan Etika Medis," *Halal Ecosystem Journal* 1, no. 1 (2024): 17.

<sup>43</sup> Woro Dyah Sehnur, "Fenomena Kepanikan Maskulin Dibalik Program Kontrasepsi Laki-Laki," 298.

<sup>44</sup> Woro Dyah Sehnur, "Fenomena Kepanikan Maskulin Dibalik Program Kontrasepsi Laki-Laki," 301.

<sup>45</sup> Winarni, Atun Wardatun, and Teti Indrawati Purnamasari, "Hak Reproduksi Perempuan dalam Islam: Telaah Normatif dan Dampak Psikologis Pengabaian," *Tasyri': Journal of Islamic Law* 4, no. 2 (2023): 804, <https://doi.org/10.53038/tsyr.v4i2.209>.

planning practices but also shapes a more equitable, healthy, and well-being-oriented family culture.<sup>46</sup>

#### 4. Public Perception of Vasectomy in Indramayu

The results of this study indicate a close relationship between religious perspectives, government policies, health care practices, and individual experiences in understanding vasectomy as part of reproductive justice in Indramayu. Based on interviews with religious leaders, officials from the DPPKB PPPA, medical staff at a community health center, and vasectomy recipients, it was found that, in general, there is common ground among religious norms, state policies, and individual awareness, although strong cultural barriers and social perceptions still pose challenges.

From a religious perspective, the religious leader emphasized that vasectomy is generally permitted in Islam as long as it aligns with the principle of public interest and does not cause harm. He stated, *"In Islam, everything is evaluated based on its benefits and harms. If a vasectomy is performed to protect the wife's health and is done by mutual agreement, then it is permitted."*<sup>47</sup> This view aligns with the *Mubadalah* Theory, which emphasizes reciprocity and mutual responsibility between husband and wife. He also highlighted the importance of straightening people's understanding by stating, *"Many people still misunderstand, thinking that vasectomy is the same as castration. Even though it is different and does not eliminate the function of masculinity."* These findings extend previous studies that tended to situate *Mubadalah* at a conceptual level, bringing it into real-world practice in reproductive decision-making.

From a policy perspective, the Head of the Family Planning Division at the Indramayu District Family Planning and Women's Empowerment Agency explained that the government continues to encourage men's involvement in family planning programs. He stated, *"We continue to raise awareness that family planning is not only the responsibility of women, but also of men."* Regarding service delivery, he emphasized, *"Vasectomy services are performed by trained medical personnel and provided free of charge by the government under specific programs."* Additionally, he highlighted the importance of education by saying, *"We do not merely perform medical procedures but also provide counseling to ensure couples fully understand the consequences."* This demonstrates the implementation of Law No. 17 of 2023 on Health, which guarantees the right to reproductive health without discrimination,

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<sup>46</sup> Wildan Novia Rosydiana, "Wanita Karier dalam Perspektif Gender dan Hukum Islam," *Journal of Gender and Social Inclusion in Muslim Societies* 4, no. 1 (2023).

<sup>47</sup> Aspuri, "Wawancara Pembina MUI Kab Indramayu," 25 Februari 2026.

while also building on previous research findings that still showed a predominance of women in family planning programs.

Meanwhile, a family planning health worker at the community health center offered a practical perspective on vasectomy procedures. She explained, *“Medically speaking, a vasectomy is a simple, safe procedure that does not affect a man’s sexual ability.”* She also emphasized the importance of pre-procedure counseling, stating, *“Before performing the procedure, we must ensure that both the husband and wife have agreed and understand the procedure through counseling.”* However, he acknowledged the existence of social barriers, saying, *“The biggest challenge is not the medical aspect, but the public’s fear stemming from beliefs in myths, such as the idea that men cannot work or that their masculinity will be compromised.”*<sup>48</sup> These findings align with previous research on “masculine panic,” but enrich the analysis through the practical perspective of health services.

From his personal experience, vasectomy recipient Mr. Warnadi explained that his decision to undergo the procedure was driven by a sense of responsibility toward his family. For him, this action represents a form of responsibility as a husband: *“As a husband, one must take full responsibility – not burden one’s partner.”* He even felt positive effects afterward: *“After my vasectomy, there was a difference in our relationship with my wife, who became even more harmonious.”* Regarding social stigma, he stated, *“For people who do not understand, there is certainly excessive fear; there is the assumption that one will not be able to get an erection anymore,”* but he emphasized that this was not the case in his experience: *“So far, thank God, I am healthy, and my daily activities are as usual.”*<sup>49</sup> This experience demonstrates a concrete practice of mutuality within the household and simultaneously challenges assumptions of gender dominance in contraceptive decision-making.

Statistically, data from the DPPKB PPPA of Indramayu Regency show that the number of MOP acceptors has increased from 2 in 2024 to 9 in 2025, with distribution across several sub-districts, including Jatibarang, Losarang, Lohbener, Juntinyuat, Kandanghaur, Gantar, Araham, and Sindang. Despite the significant increase, this number remains well below the MOW, which reached 106 people in 2024 and 259 in 2025. This inequality confirms the findings of previous studies on women's dominance<sup>50</sup> in contraceptive use, while also showing that the shift towards equality is still gradual.<sup>51</sup>

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<sup>48</sup> Titin, “Wawancara: Tenaga Medis Puskesmas Plumbon Kec Indramayu.”

<sup>49</sup> Warnadi, “Wawancara: Akseptor Vasektomi,” 24 Februari 2026.

<sup>50</sup> Sutinah, “Partisipasi Laki-laki dalam Program Keluarga Berencana di Era Masyarakat Postmodern,” *Masyarakat, Kebudayaan dan Politik* 30, no. 3 (2017): 10.

<sup>51</sup> Siti Zubaedah, “Wawancara Kepala Bidang DPPKB PPPA Kab Indramayu,” 5 Februari 2026.

From a sociological perspective, the dominance of MOW over MOP reflects the strong stigma of masculinity that associates male identity with sexual prowess and reproductive ability. Vasectomy is often misunderstood as a threat to masculinity, so men tend to avoid this method even though it is medically safe.<sup>52</sup> In addition, religious perceptions that are not fully comprehended have also strengthened this resistance, where some people still view contraception as the domain of women.

Thus, these statistical data serve not only as a quantitative snapshot but also as analytical evidence of structural inequalities in gender relations. The increase in the number of MOP users indicates the potential for a paradigm shift; however, the still-wide gap underscores that interventions based on education, the deconstruction of masculinity-related stigma, and the promotion of a more inclusive understanding of religion are key to encouraging more significant male participation in family planning programs.

The research corroborates previous findings that highlight the low participation of men in family planning due to gender bias and masculinity constructions, as revealed in previous studies on masculine panic and women's dominance in contraception. However, this research goes beyond this descriptive approach by showing that these barriers are not absolute, but can be negotiated through the integration of religious values, public policy, and empirical experience. In contrast to the research by Eko Wahyudi Nurriyanto and Siti Halawatus Sa'diyah, which situated the *Mubadalah* Theory at the conceptual level, this study demonstrates its implementation in reproductive decision-making. Meanwhile, compared with Robiatul Adawiyah's research, which highlighted inequality and symbolic violence in family planning programs, these findings show a shift driven by policy interventions and individual awareness. On the other hand, I Gusti Ngurah Agung Krisna Aditya's research that emphasizes power relations in the use of male contraceptives is challenged by these findings, which show a pattern of partnership and deliberation in vasectomy decision-making. Thus, this research not only reproduces old narratives but also enriches and reconstructs academic discourse by presenting an integrative approach that connects religion, the state, and social reality to understanding reproductive justice.

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<sup>52</sup> E. Suryani, "Persepsi Laki-Laki terhadap Vasektomi di Indonesia," *Jurnal Kesehatan Reproduksi* 12, no. 2 (2021): 88.

**Table 1.** Interview Data

No.	Informant	Interview Data (Quotes/Field Findings)	Theme Category	Researcher's Interpretation
1.	Medical Personnel (Midwives of Health Centers)	"Before serving, we do an examination first, called screening. Whether or not this mother deserves to be given the birth control she wants."	Reproductive health service procedures	The screening process shows that family planning services must pay attention to the aspects of medical safety and the patient's health condition before determining the contraceptive method.
2.	Medical Personnel (Midwives of Health Centers)	"If the vasectomy or MOP is not done at the health center, it is usually done in the hospital by a trained doctor."	Access to vasectomy services	Vasectomy services require special medical facilities, so they can only be done in hospitals, not in first-level health facilities such as health centers.
3.	Medical Personnel (Midwives of Health Centers)	"If it is hormonal, like injections or pills, it can cause dizziness or irregular periods."	Impact of women's contraceptive use	Hormonal contraceptive methods for women have the potential for certain side effects, thereby increasing the biological burden of reproduction in women.
4.	Religious Figures	"Basically, birth arrangements are allowed as long as they are done for the benefit of the family."	Religious views on family planning	The religious perspective does not absolutely reject family planning, as long as it serves the family's benefit and is undertaken voluntarily.
5.	Religious Figures	"If husband and wife agree on it, then it is part of the shared responsibility in the family."	Husband-wife relationship in reproduction	The concept of deliberation in the family reflects the principle of reciprocity, which aligns with the theory of <i>mubadalah</i> in the relationship between husband and wife.
6.	Head of Family Planning	"Actually, the regulation already exists and is quite clear, but in the community, the understanding is not evenly distributed."	Implementation of reproductive health policies	Government regulations on family planning are in place, but their implementation in the community still faces obstacles due to limited public understanding.
7.	Head of Family Planning	"Men still feel that family planning is a woman's business."	Gender perception in family planning programs	There is a social construct that places more reproductive responsibility on women than on men.
8.	Akseptor Vasektomi	"After a vasectomy, there is actually no change in home life."	Perceptions of vasectomy	The experience of acceptors shows that societal stigma related to male decline is not empirically proven.

Source: Compiled by the author from interview data (2026)

In this study, the themes that emerged from the data analysis include: reproductive health services, gender perceptions in family planning programs, religious views on birth control, the implementation of reproductive health policies, and the motivations and experiences of vasectomy recipients.

**Table 2.** Matrix of Field Findings Analysis Using the *Mubadalah* Theory

No	Field Findings	Source of Information	Principle of Mubadalah	Researcher's Analysis
1.	Family planning programs in the community are still more aimed at women through contraceptive methods such as pills, injections, IUDs, and implants.	Medical Personnel of the Health Center	Reciprocity of responsibility	These findings show that the burden of birth control is still more borne by women. From the <i>perspective of mubadalah</i> , reproductive responsibility should be borne jointly by husband and wife equally.
2.	The process of using contraceptives often requires the consent of the husband before the action is performed.	Medical Personnel of the Health Center	Deliberation in family relations	The practice of spousal approval reflects a deliberative process within the family. In the context of <i>mubadalah</i> , decisions related to reproduction should ideally be based on mutual agreement between husband and wife.
3.	Some people still think that family planning is women's responsibility.	Head of KB DPPKB PPPA	Criticism of unequal gender relations	This perception shows that there is a social construct that places women as the more responsible party in birth control. <i>Mubadalah</i> theory rejects such inequality and emphasizes a fair partnership between men and women.
4.	Religious leaders stated that birth arrangements are allowed as long as they benefit the family and are carried out with	Religious Figures	Principle of benefit and reciprocity	This view aligns with the <i>mubadalah</i> approach, which emphasizes that religious values can be interpreted fairly and equally for men and women in family affairs.

	the agreement of the husband and wife.			
5.	Vasectomy acceptors state that the decision to undergo a vasectomy was taken to reduce the burden on the wife in the use of contraception.	Akseptor Vasektomi	The practice of reciprocity in reproductive responsibility	The decision reflects the real practice of the principle of mubadalah, in which men take an active role in birth arrangements as a form of shared responsibility within the family.
6.	The low participation rate of vasectomy is due to the stigma that the procedure can reduce male virility.	Medical Personnel and Head of Family Planning	Social barriers to gender equality	This stigma is an obstacle to men's involvement in family planning programs. From the <i>perspective of mubadalah</i> , this form of social construction should be criticized for hindering the fair sharing of reproductive responsibilities.
7.	The medical procedure of vasectomy is considered safe by health workers if it is carried out according to medical standards.	Medical Personnel	Equal access to contraceptive options	This medical information shows that men have a safe contraceptive option, so in principle, there is no biological reason to place the entire burden of contraception on women.
8.	Reproductive health policies guarantee the community's right to access voluntary, safe family planning services.	Head of Family Planning	Justice in reproductive rights	This policy provides space to apply <i>the principle of mubadalah</i> in reproductive health practices by affirming equal rights for men and women to make reproductive choices.

Source: Compiled by the author from interview data (2026)

## D. CONCLUSION

Reproductive health rights, as part of human rights, are guaranteed under Law No. 17 of 2023 on Health based on the principles of equality and non-discrimination. However, men's participation in vasectomy remains hindered by cultural stigma,

despite its legal and religious legitimacy. Through the *Mubadalah* Theory, vasectomy is understood as a form of shared responsibility and relational justice within the family.

Empirical findings in Indramayu demonstrate a synergy between religious legitimacy, local policies, and individual experiences in promoting male participation, although the MOP–MOW disparity remains high. The increase in MOP acceptors from 2 (2024) to 9 (2025) signals potential for change, yet the dominance of women continues to reflect the strength of patriarchy and the stigma of masculinity. Therefore, religion-based education, family-centered approaches, and strengthening reproductive health literacy are key to achieving reproductive justice.

Theoretically, this study integrates health law, *Mubadalah* Theory, and empirical realities to enrich studies on reproductive justice in contemporary Islam. From a policy perspective, the findings underscore the importance of strengthening outreach, counseling, and male involvement in family planning programs to implement the principle of non-discrimination. Academically, this study offers an integrative approach that bridges law, religion, and social reality as a reference for the development of more inclusive studies and policies.

## E. BIBLIOGRAPHY

- Abdul Kodir, Faqihuddin. *Qira'ah Mubadalah*. Vol. 616. Ircisod, 2021.
- Adawiyah, Robiatul. "Kekerasan dalam Implementasi Keluarga Berencana Terhadap Perempuan dalam Perspektif Islam." *Jurnal Al-'Adl* 12, no. 1 (2019).
- Ahmad and Muslimah. "Memahami Teknik Pengolahan dan Analisis Data Kualitatif." *Palangka Raya International And National on Islamic Studies* 1, no. 1 (2021).
- Akbar, Maulana Adieb. *Analisis Yuridis Penerapan Asas Kesetaraan Pada Regulasi Pelayanan Jaminan Sosial Kesehatan*. Skripsi, Universitas Islam Indonesia, 2018.
- Alil, Rahmawati, Tadeus A. L. Regaletha, and Enjelita M. Ndoen. "Partisipasi Suami dalam Penggunaan Vasektomi di Kota Kupang." *Media Kesehatan Masyarakat* 2, no. 1 (2020). <https://doi.org/10.35508/Mkm.V2i1.1952>.
- Amani, Farsya Sharikha, Hasni Khairun Nisa, Muhammad Afif Rabbani, Willy Putra, Atie Rachmiatie, and Firman Aziz. "Rekonstruksi Interpretasi Norma Agama terhadap Kontrasepsivasektomi: Telaah Hukum Islam dan Etika Medis." *Halal Ecosystem Journal* 1, no. 1 (2024).
- Asnawi, Habib Shulton. *Politik Hukum Perlindungan Hak-Hak Asasi Manusia Kaum Perempuan di Indonesia (Studi tentang Upaya Mewujudkan Keadilan dan Kesetaraan Gender Kaum Perempuan di Bidang Kesehatan Era Pemerintahan Susilo Bambang Yudhoyono/SBY)*. Tesis, Universitas Islam Indonesia, 2011.
- Aspuri. "Wawancara Pembina MUI Kab Indramayu." 25 Februari 2026.
- Bidayati, Kholis. *Perlindungan Hak Reproduksi Perempuan dan Interpretasinya di Pengadilan Agama: Studi Putusan Pengadilan Agama di DKI Jakarta 2015-2019*. Jakarta: A-Empat, 2021.

- Dwi Woro Dyah Sehnur, Yola Ninda. "Fenomena Kepanikan Maskulin Di Balik Program Kontrasepsi Laki-Laki." *Lentera: Journal of Gender and Children Studies* 4, no. 2 (2024).
- Efendy, Muhamad Setiawan, Isnaini Muhandhis, Anisa Nur Azizah, and Suryo Atmojo. "Analisis Sentimen terhadap KB Vasektomi di X dengan Pendekatan Kesetaraan Gender." *Journal of Gender Equality and Social Inclusion (GESI)* 4, no. 2 (2026). <https://doi.org/10.38156/Gesi.V4i2.209>.
- Farah, Naila. "Childfree dalam Perspektif Teologi Pembebasan Ali Ashgar Engineer: Kebebasan, Keadilan, dan Kesejahteraan." *Jurnal Equalita* 7, no. 1 (2025).
- Fatimah, Utari Dewi. "Perlindungan Hukum Hak Kesehatan Reproduksi Perempuan." *Jurnal Hukum Sasana* 5, no. 2 (2020). <https://doi.org/10.31599/Sasana.V5i2.101>.
- Hanafi and Istiana Herianti. "Aksesibilitas Jaminan Kesehatan bagi Pekerja Informal di Indonesia: Analisis Kebijakan Jaminan Kesehatan Nasional Berdasarkan Prinsip Hak Asasi Manusia." *Al Adl: Jurnal Hukum* 18, no. 1 (2026). <http://dx.doi.org/10.31602/Al-Adl.V18i1.20563>.
- Hasanah, Hasyim. "Pemahaman Kesehatan Reproduksi bagi Perempuan: Sebuah Strategi Mencegah Berbagai Resiko Masalah Reproduksi Remaja." *Sawwa: Jurnal Studi Gender* 11, no. 2 (2017). <https://doi.org/10.21580/Sa.V11i2.1456>.
- Herlina, Fadila Rahmah, Asip Efendy, Muhammad Adib, Erlina Erlina, and Umi Hijriyah. "Pemenuhan Hak-Hak Anak Pasca Kelahiran dalam Perspektif Islam: Strategi Membangun Keluarga Sejahtera di Era Kontemporer." *Moderasi: Journal of Islamic Studies* 4, no. 2 (2024). <https://doi.org/10.54471/Moderasi.V4i2.69>.
- Irianto, Sulistyowati. *Perempuan dan Hukum: Menuju Hukum yang Berperspektif Kesetaraan dan Keadilan*. Jakarta: Yayasan Pustaka Obor Indonesia, 2006.
- Kahfilani, Zed Ahmad, Muhammad Umar Al Ghazali, and Dafi Muntazhar. "Penggunaan Kontrasepsi Vasektomi: Kesehatan, Agama, dan Keharmonisan Rumah Tangga." *Slamologi: Jurnal Ilmiah Keagamaan* 1, no. 2 (2024).
- Krisna Aditya, I Gusti Ngurah Agung. *Relasi Kuasa Pengguna Kontrasepsi Vasektomi Kecamatan Petang Kabupaten Bandung*. Tesis, UGM, 2017.
- Megawati and Husnah Amri. "Pengalaman Perempuan Terhadap Otonomi dalam Pengambilan Keputusan Kesehatan Reproduksi: Studi Fenomenologis." *Journal of Innovative Midwifery Practice* 1, no. 1 (2025).
- Novia Rosydiana, Wildan. "Wanita Karier dalam Perspektif Gender dan Hukum Islam." *Journal of Gender and Social Inclusion in Muslim Societies* 4, no. 1 (2023).
- Nurriyanto, Eko Wahyudi. *Mubadalah dan Relevansinya Terhadap Keharmonisan Rumah Tangga: Kajian Analisis Konsep Perspektif Sosiologi Keluarga*. Tesis, UIN SUSKA RIAU, 2024.
- Nurullah, Fitri Afifah. "Perkembangan Metode Kontrasepsi di Indonesia." *Continuing Medical Education* 48, no. 3 (2021).
- Peraturan Pemerintah Nomor 28 Tahun 2024 Tentang Peraturan Pelaksanaan Undang-Undang Nomor 17 Tahun 2023 Tentang Kesehatan.

- Ridwan, Mohammad and Lilik Andaryuni. "Religious Moderation in Addressing Gender, Human Rights, and Ecology Issues: A Study from the Perspective of Contemporary Islamic Studies." *International Journal on Advanced Science, Education, and Religion (IJOASER)* 8, no. 3 (2025).
- Rini, Nicken Sarwo. "Analisis Implementasi Prinsip Non-Diskriminasi dalam Peraturan Daerah di Bidang Pendidikan dan Kesehatan." *Jurnal Ham* 9, no. 1 (2018). <https://doi.org/10.30641/Ham.2018.9.19-36>.
- Sa'diyah, Siti Halawatus. *Konsep Mubadalah dalam Pendidikan Keluarga (Studi Terhadap Buku Qira'ah Mubadalah)*. Tesis, UIN SUKA YOGYAKARTA, 2022.
- Salsabila, Justicia and Irsyaf Marsal. "Politik Hukum Pemenuhan Hak Atas Pelayanan Kebidanan yang Aman dan Bermutu Sebagai Bagian dari Hak Asasi Manusia." *Al-Zayn: Jurnal Ilmu Sosial & Hukum* 3, no. 6 (2025). <https://doi.org/10.61104/Alz.V3i5.2607>.
- Salsabila, Zalkia, Aliya Perawita, Sudirman Sitepu, and Dwi Putri Lestarika. "Kesenjangan Gender di Dunia Kerja Berdasarkan Perspektif Hukum." *Jurnal Kajian Hukum dan Kebijakan Publik* 2, no. 1 (2024). <https://doi.org/10.62379/2ka7dr85>.
- Silitonga, Besty Agustina and Asnita Sinaga. "Hubungan Jenis dan Lama Penggunaan Kontrasepsi Hormonal terhadap Gangguan Menstruasi pada Wanita Usia Subur di Puskesmas Pardamean Kecamatan Siantar Marihat Kota Pematangsiantar Tahun 2023." *Antigen: Jurnal Kesehatan Masyarakat dan Ilmu Gizi* 2, no. 1 (2024). <https://doi.org/10.57213/Antigen.V2i1.149>
- Suryani, E. "Persepsi Laki-Laki terhadap Vasektomi di Indonesia." *Jurnal Kesehatan Reproduksi* 12, no. 2 (2021).
- Susanto, Dedi, Risnita, and M. Syahrani Jailani. "Teknik Pemeriksaan Keabsahan Data dalam Penelitian Ilmiah." *Jurnal Qosim Jurnal Pendidikan Sosial & Humaniora* 1, no. 1 (2023). <https://doi.org/10.61104/Jq.V1i1.60>.
- Sutinah. "Partisipasi Laki-Laki dalam Program Keluarga Berencana di Era Masyarakat Postmodern." *Masyarakat, Kebudayaan dan Politik* 30, no. 3 (2017).
- Titin. "Wawancara: Tenaga Medis Puskesmas Plumbon Kec Indramayu." 10 Maret 2026.
- Undang-Undang Nomor 17 Tahun 2023 Tentang Kesehatan.
- Undang-Undang Nomor 52 Tahun 2009 Tentang Perkembangan Kependudukan dan Pembangunan Keluarga.
- Utaminingsih, Alifiulahtin. *Kajian Gender Berperspektif Budaya Patriarki*. Malang: Ub Press, 2023.
- Wahyuningsih, Lidya Indra. "Data Statistik KB Vasektomi Kab Indramayu Tahun 2024-2025." 20 Februari 2026.
- Warnadi. "Wawancara: Akseptor Vasektomi." 24 Februari 2026.
- Winarni, Atun Wardatun, and Teti Indrawati Purnamasari. "Hak Reproduksi Perempuan dalam Islam: Telaah Normatif dan Dampak Psikologis Pengabaian." *Tasyri': Journal of Islamic Law* 4, no. 2 (2023). <https://doi.org/10.53038/Tsyri.V4i2.209>.

- Woro Dyah Sehnur, Yola Ninda Dwi. "Fenomena Kepanikan Maskulin Dibalik Program Kontrasepsi Laki-Laki." *Lentera: Journal of Gender and Children Studies* 4, no. 2 (2024).
- Wulandari, Nur Azizah, Purwanto, and Erna Susanti. "Pertanggungjawaban Hukum Penyedia Layanan Kesehatan terhadap Pemenuhan Hak Peserta Jaminan Kesehatan Nasional." *Jurnal Ilmiah Advokasi* 13, no. 4 (2026). <https://doi.org/10.36987/Jiad.V13i4.6874>.
- Yanti, Fitri, Mutiara Ramadhani, Fauzi Nadziiran Haq, and Devi Tias Pratiwi. "Kesetaraan Gender sebagai Pilar Pembangunan Masyarakat: Tantangan, Strategi, dan Rekomendasi Kebijakan." *Tatar Pasundan: Jurnal Diklat Keagamaan* 19, no. 2 (2025). <https://doi.org/10.38075/tp.V19i2.582>.
- Zahroh, Nur Intifada, Lusy Amelia Nasution, and Aulia Dzulfa Tazqia. "Strategi Pengumpulan Data dalam Penelitian Kualitatif: Teknik, Tantangan dan Solusinya." *Tarbiyatul Ilmu: Jurnal Kajian Pendidikan* 3, no. 6 (2025).
- Zubaedah, Siti. "Wawancara Kepala Bidang DPPKB PPPA Kab Indramayu." 5 Februari 2026.