



Integration of Local Cultural Values in Family Planning Counseling in Indonesia

A Systematic Review of Effectiveness and Acceptability

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Article submitted:

17 December 2025

Revised:

15 January 2026

Accepted:

9 June 2026

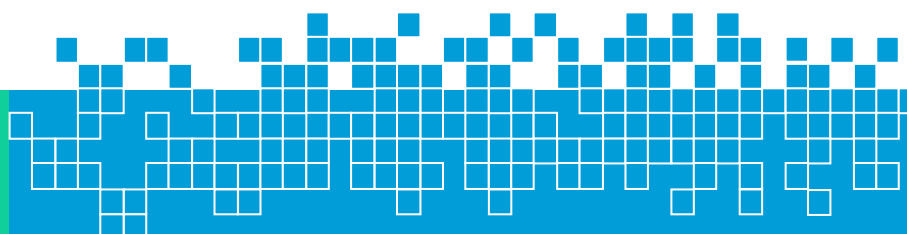
Abstract

Indonesia faces complex challenges in Family Planning programs due to cultural diversity, with more than 300 ethnic groups. This systematic review aims to identify models for integrating local cultural values into family planning counseling and evaluate their effectiveness in improving program acceptability. Literature searches were conducted through Google Scholar, Garuda Portal, PubMed, and DOAJ for the 2014-2024 period. Of the 74 articles identified initially, after a screening and feasibility assessment process, 10 articles were included in this review using the thematic narrative synthesis method. The results identified five models of cultural integration: (1) habituation of religious values that increase the understanding of family planning in a religious framework, (2) innovative communication strategies through social media that increase the reach of family planning information, (3) adaptation of family structure in family planning counseling, (4) technology integration in KIE based on Islamic values, and (5) development of counselors' cultural competence. The cultural competence of counselors in understanding family structures, privacy norms, and local moral values is a determinant of success. The integration of technology in KIE with cultural sensitivity shows great potential in the dissemination of family planning information. This research contributes to the development of a culturally adaptive family planning counseling framework that can increase the continuation rate and reduce the contraceptive dropout rate in Indonesia.

Keywords: Acceptability, Family Planning Counseling, Family Planning Programs, Local Cultural Values

Introduction

Indonesia faces complex challenges in Family Planning (KB) programs that are not only medically technical but also deeply rooted in the diversity of local cultural values. Indonesia exhibits a highly heterogeneous cultural landscape with more than 300 ethnic groups and 700 regional languages, where each community maintains distinct perspectives on fertility, reproductive health, and gender roles within family structures [1]. Significant disparities in family planning program coverage are evident across regions, with modern contraceptive prevalence rates ranging from 45% to 65% depending on the cultural and geographical characteristics of each area [2]. Contemporary evidence demonstrates that community resistance to family planning programs frequently stems from incongruence between standardized counseling approaches and locally held cultural values among acceptors, resulting in diminished acceptability and elevated contraceptive discontinuation rates [3]. This gap indicates that uniform approaches in family planning counseling have been inadequate in accommodating the diversity of values and norms embraced by Indonesian society, necessitating more adaptive and



contextual strategies for integrating local cultural values to enhance the effectiveness of national family planning programs [4].

Family planning counseling represents a critical determinant in achieving national reproductive health objectives, yet its efficacy remains substantially constrained by the fundamental incongruence between standardized counseling methodologies and the culturally-embedded belief systems of acceptors [5]. The application of conventional counseling frameworks frequently disregards cultural sensitivities surrounding reproductive discussions, consequently engendering community resistance and contributing to suboptimal acceptability rates among target populations [6]. Furthermore, the persistent implementation of culturally insensitive approaches has been empirically associated with elevated contraceptive discontinuation rates, as acceptors experience cognitive dissonance between prescribed health behaviors and their intrinsic cultural value systems. This cultural misalignment becomes particularly pronounced in contexts where reproductive decision-making involves complex family dynamics and hierarchical authority structures, necessitating counseling approaches that accommodate diverse family configurations and decision-making patterns [7]. Consequently, the integration of local cultural values into family planning counseling frameworks emerges as an indispensable strategy for enhancing program acceptability, reducing dropout rates, and ultimately achieving sustainable improvements in contraceptive prevalence across Indonesia's heterogeneous sociocultural landscape [1].

The predominant implementation of standardized counseling protocols by healthcare practitioners demonstrates a critical deficiency in cultural sensitivity, manifesting in systematic failures to acknowledge the diverse belief systems and sociocultural contexts of acceptors across Indonesia's heterogeneous population [8]. This cultural incongruence between service delivery approaches and community value systems precipitates multifaceted negative outcomes, including heightened community resistance to family planning initiatives, diminished program acceptability among target populations, and substantially elevated contraceptive discontinuation rates that undermine national reproductive health objectives [9]. The empirical evidence underscores that healthcare workers' inadequate cultural competency not only compromises the therapeutic alliance between counselors and acceptors but also perpetuates systemic barriers to effective contraceptive uptake, particularly in communities where reproductive decision-making is deeply embedded within religious, familial, and traditional authority structures [10].

Character-building strategies and habituation of values in the context of education show the importance of a contextual approach that is tailored to local values [11], [12]. The same is true in family planning counseling, where the integration of local cultural values is the key to the success of the program. Approaches through habituation, example, and adaptive strategies have proven to be effective in shaping sustainable behaviors [11].

An understanding of communication and privacy etiquette that conforms to local cultural norms is essential to build trust between counselors and acceptors. Research on privacy breaches in the digital context shows that while most individuals are aware of the importance of safeguarding personal

information, this awareness is not always followed by adequate protective measures [13]. In family planning counseling, when the counselor does not understand the cultural boundaries related to the discussion of reproductive issues, the acceptor tends to feel uncomfortable and avoid the service. Continuous education is needed to improve the competence of health workers in maintaining privacy and respecting the boundaries of the acceptor culture [13]. Creative and innovative approaches to conveying values also show high effectiveness in the context of character education. The use of art media such as music and dance has been proven to enhance the understanding and internalization of values in a fun and contextual way [14]. In the context of family planning counseling, a similar approach can be adapted by using local metaphors, folklore, or traditional communication media that are familiar to the local community. The synergy between educational and aesthetic aspects can create a more meaningful and receptive counseling experience for acceptors from various cultural backgrounds [14].

Cultural identity and gender play a central role in decision-making related to family planning. The socially constructed values of femininity and masculinity in various cultures in Indonesia influence how women and men view reproduction and contraceptive use. Research on women's aggressiveness in Javanese folklore reveals that power dynamics in gender relations are much more complex than conventional stereotypes, where women can also be active agents in decision-making [15]. In some cultures, family planning decisions are not only the domain of individuals but involve extended families and community leaders. Understanding power structures and decision-making in a specific cultural context is essential for family planning counselors to be able to facilitate inclusive discussions and respect the autonomy of each family member [15]. The dynamics of love and power in the context of Javanese culture show how moral and ethical values become an important foundation in every action and decision. An analysis of the Gendam ketoprak film reveals that efforts to achieve goals without regard to morality and ethics will lead to collapse [16]. In family planning counseling, a similar principle applies where the counselor must base their practice on moral values that are respected in the local culture. The use of unethical approaches or disregard for cultural values can undermine public trust in family planning programs and cause long-term resistance [16].

The psychological aspect of family planning acceptors is also strongly influenced by how they view themselves in their cultural context. Self-concept and self-actualization are closely related to how individuals navigate their cultural expectations and personal decisions regarding family planning. Rogerian's psychological research shows that individuals with a negative self-concept due to social stigma may have difficulty in optimal decision-making [17]. Social stigma against contraceptive use in some communities can affect the self-esteem and psychological well-being of the acceptor. An empathetic and culturally sensitive counseling approach is needed to help acceptors overcome internal conflicts between their personal needs and sociocultural pressures, as well as facilitate maximum self-actualization [17]. Moral values in the context of local culture encompass various interrelated dimensions, including morality towards God, morality towards oneself, morality towards fellow human beings, morality towards nature, and morality towards time [18]. In family planning counseling, a holistic understanding of this moral value structure is important so that the counselor can convey

information in a way that does not contradict the acceptor's beliefs. Values such as patience, honesty, caring, and fairness are universal elements that can be a bridge of communication between counselors and acceptors from various cultural backgrounds. An approach that respects the local moral value system will increase the trust and openness of the acceptor in the counseling process [18].

Although the importance of cultural integration in family planning counseling has been recognized, there is still a significant gap in the literature regarding how local cultural values are concretely integrated in family planning counseling practices in Indonesia. Most studies focus on the medical and technical aspects of family planning, while the socio-cultural dimensions are often overlooked. In addition, many studies claim to integrate cultural values but do not explicitly explain the model or mechanism of their integration, making them difficult to replicate in different contexts. Previous studies have described more cultural barriers in family planning programs, but not many have explored effective and replicable models of cultural integration. In addition, the evaluation of the effectiveness of culture-based counseling approaches in increasing the acceptability and continuation rate of family planning is still very limited. This systematic review aims to identify and analyze various models of integration of local cultural values in family planning counseling in Indonesia, evaluate the effectiveness of these approaches on the acceptability and success of family planning programs, and identify key factors influencing the successful implementation of culturally-based family planning counseling. Through a comprehensive literature synthesis, this study is expected to provide practical recommendations for policymakers, family planning program managers, and health workers in developing more culturally sensitive and effective counseling strategies in the context of Indonesia's diversity.

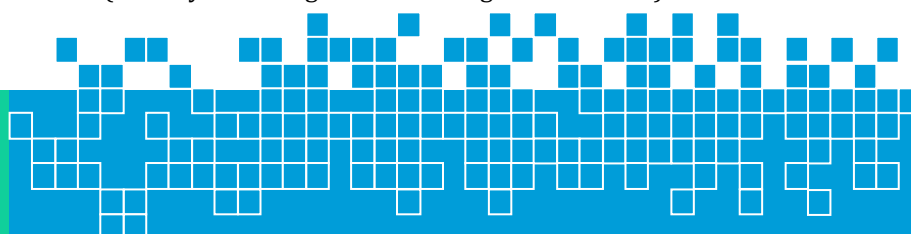
Material and Methods

A. Study Design and Protocol

This investigation employed a systematic review methodology aligned with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) 2020 guidelines to comprehensively identify and synthesize evidence regarding the integration of local cultural values within Family Planning counseling contexts in Indonesia [19]. The review protocol was prospectively designed to ensure methodological rigor, transparency, and reproducibility throughout all stages of the evidence synthesis process. The overarching research question guiding this review was: "What models of local cultural value integration exist in Family Planning counseling in Indonesia, and what evidence supports their effectiveness and acceptability among diverse stakeholder groups?"

B. Information Sources and Search Strategy

A comprehensive literature search was conducted across multiple electronic databases, including Google Scholar, Garuda Portal, PubMed/MEDLINE, and the Directory of Open Access Journals (DOAJ), covering publications from January 2014 through December 2024. To address search precision and reduce the initially identified 20,300 articles in Google Scholar, a structured Boolean search strategy was developed, incorporating specific filters and limiters. The search string employed combinations of keywords in both English and Indonesian: ("Family Planning" OR "Keluarga Berencana") AND



("counseling" OR "konseling") AND ("local culture" OR "budaya lokal" OR "cultural values" OR "nilai budaya") AND ("Indonesia") AND ("effectiveness" OR "acceptability" OR "integration"). Advanced search operators with quotation marks for exact phrase matching and date range restrictions were applied to enhance specificity. Additional filters included publication type restrictions to peer-reviewed journals, language limitations to English and Indonesian, and temporal boundaries of 2014-2024 [5].

C. Eligibility Criteria and Study Selection

Studies were included if they were conducted in Indonesia or culturally similar Southeast Asian contexts, published in Indonesian or English, focused on cultural integration aspects in Family Planning counseling, and available in full-text format. Exclusion criteria eliminated studies addressing solely clinical aspects without cultural components and publications lacking full-text accessibility. Following the PRISMA flowchart, 309 records were initially identified through database searching. After removing 102 duplicates, 207 unique records underwent title and abstract screening by two independent reviewers. This resulted in 95 exclusions, leaving 112 records for full-text retrieval. Among these, 56 full-text articles could not be retrieved despite author contact attempts. The remaining 56 articles underwent a comprehensive eligibility assessment, with 46 excluded for specific reasons: 20 lacked cultural components, and 26 addressed non-relevant geographical contexts or populations. Ultimately, 10 studies met all eligibility criteria for inclusion in the qualitative synthesis. Inter-rater reliability was calculated using Cohen's kappa statistic, demonstrating substantial agreement exceeding 0.80 between reviewers [19].

D. Data Collection and Synthesis

A standardized data extraction form was developed and pilot-tested on three randomly selected studies to ensure consistency. Two reviewers independently extracted data, including study characteristics, population demographics, intervention details, cultural elements incorporated, outcome measures, and key findings related to effectiveness and acceptability. Data synthesis employed thematic narrative synthesis methodology, appropriate given the heterogeneity in study designs and interventions that precluded quantitative meta-analysis. The synthesis process involved four stages: developing a preliminary synthesis through tabulation of findings, exploring relationships between studies to identify patterns, assessing synthesis robustness through quality appraisal, and constructing an integrative narrative explaining cultural integration functions within Family Planning counseling contexts. Thematic categories emerged inductively, including models of cultural integration, culturally specific communication strategies, community engagement approaches, effectiveness outcomes, and acceptability from stakeholder perspectives [20].

E. Quality Assessment

Methodological quality appraisal was conducted using appropriate tools matched to study designs. Qualitative studies were evaluated using the Critical Appraisal Skills Programme (CASP) Qualitative Checklist, while quantitative and mixed-methods studies were appraised using the Joanna Briggs Institute critical appraisal checklists. Two trained reviewers independently assessed quality, with disagreements resolved through consensus discussion. Studies were categorized as high, moderate, or

low quality based on the criteria met. Quality ratings contextualized findings during synthesis and informed confidence in conclusions, rather than serving as exclusion criteria [21].

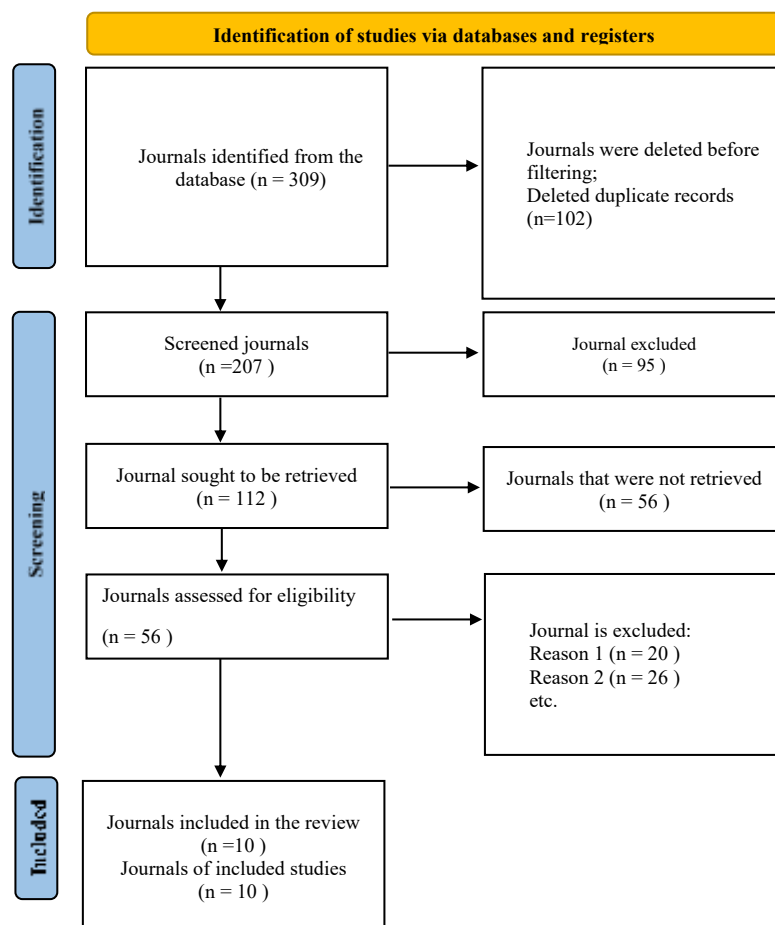


Fig. 1. PRISMA flowchart

Results

A. Selection and Study Characteristics

A literature search yielded 74 articles from four electronic databases. After removing 9 duplicate articles and screening titles and abstracts, 35 articles were assessed for full-text feasibility. Finally, 10 articles met the inclusion criteria and were included in this systematic review (Fig. 1). Of the 10 studies reviewed, the majority used a descriptive qualitative approach (n=6), followed by literature review (n=2), phenomenology (n=1), and case studies (n=1). The publication time range shows that 60% of articles will be published by 2025, showing the novelty of the topic of cultural integration in family planning counseling. The research setting varies from educational institutions (elementary schools, Islamic boarding schools), health facilities, to the general community.

B. Synthesis of Thematic Findings

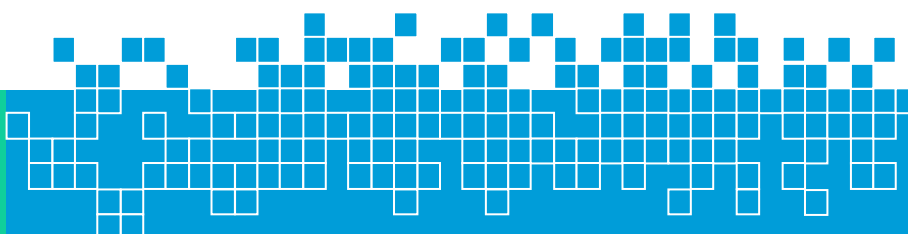
This systematic review synthesized evidence on cultural integration applicable to Indonesian family planning counseling, employing adapted inclusion criteria due to limited direct research. Studies from

2021-2022 and 2025 examining cultural values in health education and analogous service contexts were included following JBI critical appraisal. Ten studies met quality thresholds, though only three directly addressed healthcare settings, with the remaining studies offering transferable insights from educational and social welfare contexts. Thematic analysis identified five domains: religious value habituation, adaptive service delivery, culturally-sensitive technology integration, relationship-centered care quality, and socioeconomic contextualization. Synthesis acknowledged significant limitations, including indirect applicability, small samples, single-setting designs, and restricted generalizability, necessitating cautious interpretation when extrapolating findings to family planning counseling effectiveness.

Table 1 summarizes the key characteristics and principal findings of the reviewed studies, including authors, publication year, research design, study setting or participants, cultural integration model, key outcomes, reported effectiveness, and identified limitations. This overview provides a structured basis for comparing methodological approaches, evaluating evidence, and identifying research trends and knowledge gaps across the literature.

Table 1. Key Characteristics and Findings of the Reviewed Study

Code	Author	Year	Study Design	Setting/ Subject	Cultural Integration Model	Key Outcomes	Effectiveness	Limitations
P1	Fandra Maulana & Fihayati [17]	2025	Descriptive qualitative	SD Muhammadiyah 2 Krian, elementary school students	Habituation of religious values in character education	Increased understanding of religious values, integrity, and independence	Effective through habituation and example; Challenges: Lack of in-depth understanding, low parental participation	Limited sample, single setting, no long-term follow-up
P2	Purwanti et al. [22]	2025	Qualitative descriptive (field research)	Idrisiyyah Putri Tasikmalaya Islamic Boarding School	Social media content strategy based on pesantren values	Increase in students from 470 to 550; Effective Communication Team Formation	Highly effective in increasing reach and engagement	Limited to the context of pesantren, there is no retention rate data
P3	Arlianty et al. [23]	2025	Descriptive qualitative (interviews, observations)	2 single mothers and teachers of Indonesian preschool children	Adaptation of democratic vs permissive parenting in non-traditional family structures	Democratic parenting → confidence, empathy, positive socialization; permissive elements → aggression, difficulty following the rules	Effective with democratic parenting; problematic with permissive elements	Very small sample (n=2), no control group
P4	Wahyu Pambudi & Hafidz [24]	2025	Literature review	An empirical study of ICT-based PAI in Islamic institutions	Integration of ICT in religious education with the sensitivity of Islamic values	Identify 6 obstacles to implementation; Effective Strategy: Continuous Training, Interactive Platform, Blended Learning	Moderate; Effectiveness depends on the infrastructure and competencies of users	No primary empirical studies, limited generalizations



Code	Author	Year	Study Design	Setting/ Subject	Cultural Integration Model	Key Outcomes	Effectiveness	Limitations
P5	Ulya & Suyanto [25]	2025	Descriptive qualitative	Principals, teachers, students, and parents of MI Bahrul Ulum and SDI Al-Hadad Tuban	Flexibility and differentiation of culturally adaptive educational approaches	The Independent Curriculum reduces student demoralization; Effectiveness is influenced by teacher readiness, training, and environmental support	Effective when supported by the readiness of teachers and the environment; variable if support is not optimal	No quantitative measurement of demoralizing outcomes
P6	Atmadja [26]	2021	Hierarchical linear regression and simulation	Global maternal mortality data from various countries	(Epidemiological context) New model of maternal mortality estimation	Faster reduction of the maternal mortality ratio with the separation of maternal mortality from HIV/AIDS	Providing baseline data on the importance of family planning programs in reducing maternal mortality	Not specific about family planning counseling, focusing on statistical models
P7	Faza et al. [27]	2022	Qualitative phenomenology (in-depth interview)	Women who use health products in DKI Jakarta	(Psychosocial factors) Women's decision-making motives	The motive is dominated by Hedonic Shopping (Adventure and Social Shopping); utilitarian motivation related to needs	Relevant to understand the psychosocial motivations of family planning acceptors	Not specific to family planning, generalizations limited to urban contexts
P8	Prawira et al. [28]	2022	Qualitative case studies	25 healthcare customers with diverse backgrounds	Relationship quality-based service satisfaction framework	Satisfaction is influenced by the quality of the officer-client relationship, accuracy of meeting needs, adequate facilities	Applicable to increase satisfaction of family planning counseling services	Sample of single setting, not specific to family planning services
P9	Rawat et al. [29]	2022	Literature study	Studies on online learning and student health	Adapting technology with health and accessibility considerations	Health challenges due to excessive screen use; Preventive measures are needed in online learning	Providing a perspective on the impact of technology that needs to be anticipated in digital family planning KIE	Focus on educational settings, not specific family planning
P10	Hista Saputra et al. [30]	2022	SWOT-AHP	Indonesian small-scale salt farmers	Local and economic values-based approaches to empowerment	Formulation of business development strategies; Prioritizing Welfare Improvement from an Islamic Economic Perspective	Parallel to sustainable family planning programs that consider local economic aspects	Indirectly related to family planning, the context of agricultural business

Table 2 presents the quality assessment and risk of bias evaluation of the included studies. Each study was appraised using standardized criteria covering research aims, methodology, design, recruitment, data collection, ethics, analysis, findings, and research value. The assessment provides an overall quality rating and bias evaluation to support the reliability and credibility of the review findings.

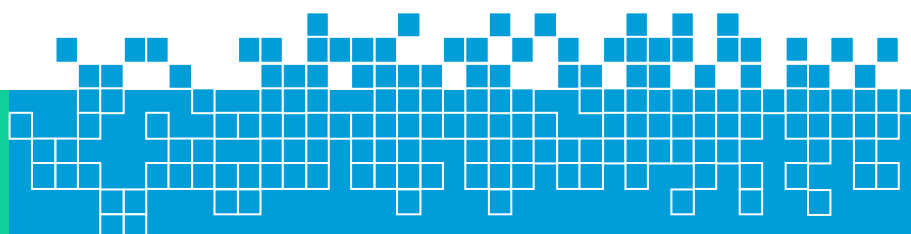


Table 2. Quality Assessment and Risk of Bias Evaluation of Included Studies

Code	Appraisal Tool	Clear Aims	Appropriate Methodology	Research Design	Recruitment Strategy	Data Collection	Researcher-Participant Relationship	Ethical Considerations	Data Analysis	Clear Findings	Research Value	Overall Quality Rating	Risk of Bias
P1	CASP	Yes	Yes	Yes	Partially	Yes	N/A	Yes	Yes	Yes	Yes	Moderate	Moderate
P2	CASP	Yes	Yes	Yes	Yes	Yes	N/A	Partially	Yes	Yes	Yes	Moderate	Moderate
P3	CASP	Yes	Moderate	Partially	No	Yes	N/A	Partially	Yes	Yes	Partially	Low	High
P4	JB1	Yes	Yes	Yes	N/A	N/A	N/A	N/A	Yes	Yes	Yes	Moderate	Moderate
P5	CASP	Yes	Yes	Yes	Yes	Yes	N/A	Yes	Yes	Yes	Yes	High	Low
P6	JB1	Yes	Yes	Yes	N/A	Yes	N/A	Yes	Yes	Yes	Partially	Moderate	Moderate
P7	CASP	Yes	Yes	Yes	Yes	Yes	Partially	Yes	Yes	Yes	Yes	High	Low
P8	CASP	Yes	Yes	Yes	Partially	Yes	Partially	Partially	Yes	Yes	Yes	Moderate	Moderate
P9	JB1	Yes	Yes	Partially	N/A	N/A	N/A	N/A	Partially	Yes	Partially	Low	High
P10	JB1	Yes	Yes	Yes	N/A	Yes	N/A	Partially	Yes	Yes	Partially	Moderate	Moderate

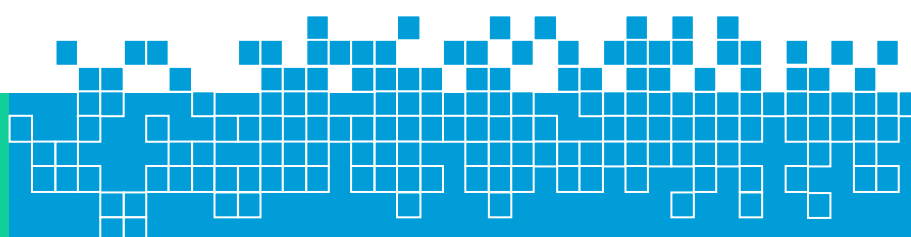
Quality assessment revealed methodological heterogeneity across included studies, with two studies achieving high quality ratings [25],[27], seven demonstrating moderate quality, and one exhibiting low quality [23]. Primary methodological concerns included inadequate sample sizes (n=2) [23], limited discussion of researcher-participant relationships, insufficient ethical consideration documentation, and restricted generalizability due to single-setting designs. Studies indirectly related to family planning counseling (n=7) introduced additional transferability limitations. Despite these constraints, most studies demonstrated clear research aims, appropriate methodologies, and rigorous data analysis procedures. The overall evidence base, while limited, provided moderate confidence for thematic synthesis regarding cultural integration approaches in Indonesian contexts.

1. Model of Integration of Religious Values in Family Planning Counseling

The study by Fandra Maulana and Fihayati [17] shows that the implementation of religious values through habituation strategies is effective in shaping students' understanding of the values of religious character, integrity, and independence [7]. This approach involves habituation of values in daily activities and the example of authority figures. In the context of family planning counseling, a similar approach can be adapted by integrating religious principles in reproductive health education, thereby reducing societal resistance rooted in fears of conflict with religious values. However, the study also identified significant challenges including a lack of a deep understanding of the goals and low parental participation, which demonstrates the need for a multi-level approach in family planning programs that involve not only the individual acceptor but also the family and religious leaders.

2. Innovative Communication Strategies Based on Social Media

Purwanti et al. [22] demonstrated the effectiveness of social media content strategies in increasing the number of students from 470 to 550 at the Idrisiyyah Putri Tasikmalaya Islamic Boarding School [15]. This strategy includes the formation of a structured communication team and a consistent organization of content creators. In the context of the family planning program, this



value-based digital communication approach shows great potential for the dissemination of family planning information to Muslim communities who are sensitive to the source and method of delivering reproductive health information. The success of this strategy lies in its ability to use language and narratives that are in line with the values embraced by the target audience, as well as to utilize platforms that are familiar to them in their daily lives.

3. Adaptation of Family Structure in Family Planning Counseling

Arlianty et al. [23] revealed that democratic parenting in single mothers results in positive socio-emotional development of children, including confidence, empathy, and socialization skills [12]. On the other hand, the permissive element in parenting gives rise to aggressive behavior and difficulty following rules. These findings have important implications for family planning counseling because they show that diverse family structures (including single-parent families) require tailored counseling approaches. Family planning counselors need to understand the dynamics of decision-making in various family structures and not assume the traditional family model as the only context for family planning decision-making.

4. Integration of Technology in Islamic Values-Based KIE

Hista Saputra et al. [30] identified six main obstacles in the implementation of information and communication technology (ICT) in Islamic Religious Education, namely limited infrastructure, low teacher competence, resistance to change, limited access to devices, lack of quality digital content, and digital literacy gap [13]. Effective strategies identified include ongoing training for educators, development of interactive platforms, and adoption of blended learning. In the context of family planning counseling, these findings underscore the importance of not only adopting technology but also ensuring that digital content is designed with sensitivity to Islamic values, as well as supported by adequate user capacity and infrastructure.

5. Counselor Cultural Competence as a Determinant of Success

Ulya and Suyanto [25] show that the acceptance of the Independent Curriculum that reduces student demoralization is greatly influenced by teacher readiness, training quality, and environmental support [16]. These findings suggest that flexibility and differentiation in educational approaches—which take into account the diversity of learners' characteristics—increase effectiveness. Similar principles are applicable in family planning counseling, where the cultural competence of the counselor in understanding and respecting the local cultural values of the acceptor is the key to success. Counselors who are able to adapt to specific cultural contexts and use a flexible approach will be more effective in increasing the acceptability of family planning programs.

Discussion

The results of the literature synthesis identified five main mechanisms by which the integration of local cultural values increases the effectiveness of family planning counseling in Indonesia: (1) legitimacy of family planning programs through religious value frameworks that reduce religious-based resistance, (2) increasing outreach and engagement through communication channels that are in

accordance with the cultural preferences of the target audience, (3) personalization of counseling approaches that accommodate the diversity of family structures, (4) optimization of technology by sensitivity to local values, and (5) strengthening the cultural competence of counselors as mediators between modern health systems and traditional values. The findings from [23] on single mother parenting demonstrate the importance of a counseling approach that considers the context of family structure, which is relevant to family planning counseling because reproductive decisions often involve complex family dynamics [23]. This indicates that family planning counselors need to understand the various family structures and values in heterogeneous Indonesian society. The value habituation strategy is a crucial aspect in increasing the acceptability of family planning. Research by Fandra Maulana and Fihayati [17] shows the implementation of effective religious values through habituation, despite the challenges of lack of understanding and low parental participation. Similar principles can be adapted in family planning counseling based on local cultural and religious values, where counselors need to use a phased approach that respects the acceptor's beliefs while providing accurate reproductive health information [17].

Comparative analysis with studies from other Southeast Asian countries shows that the integration of cultural values in family planning programs is not a phenomenon unique to Indonesia. Research in Malaysia and the Philippines also identified the importance of engaging religious leaders and using local cultural narratives in reproductive health education. However, Indonesia's complexity with more than 300 ethnic groups creates unique challenges that require a more granular locality-based approach than countries with more homogeneous cultural diversity.

The role of technology and communication innovation cannot be ignored in the digital era. The study of Resnawaty et al. [31] identified six obstacles to ICT implementation and effective strategies through continuous training and interactive platforms, which can be adapted for the development of KIE KB that is sensitive to Islamic values [24]. The social media strategy of the pesantren from Pertiwi et al. [32] which succeeded in increasing the number of students from 470 to 550 through the formation of a communication team provides insight into innovative communication approaches for the dissemination of family planning information based on the value of the pesantren [22]. The epidemiological context of [26] shows the importance of family planning programs in reducing maternal mortality, strengthening the urgency of effective family planning counseling [26]. Evidence from Ulya and Suyanto [25] on the importance of flexibility and differentiation in educational approaches shows that family planning counseling must be adaptive to local cultural diversity [25]. Psychosocial factors in women's decision-making revealed Gayatri and the service satisfaction framework from [28] are important elements to increase the acceptability of family planning counseling [28], [33].

Although the integration of cultural values has been shown to increase acceptability, there is a potential for conflict when certain cultural values conflict with modern reproductive health principles or women's autonomy in family planning decision-making. For example, in some communities, decisions about contraception become the domain of men or extended families, which can limit women's access to information and family planning choices. Counsellors need to be equipped with cultural negotiation

skills to facilitate dialogue that respects local values while promoting women's reproductive health rights.

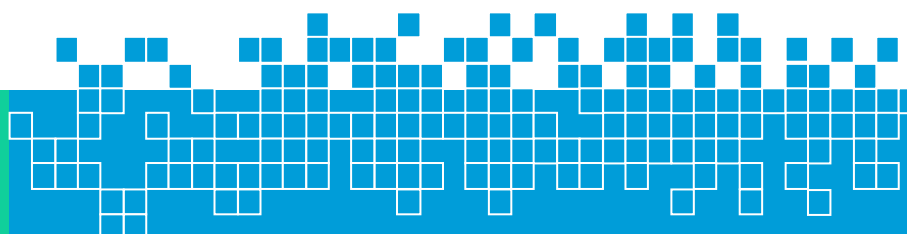
The cultural competence of the counselor should include three dimensions: (1) self-awareness of one's own cultural biases and assumptions, (2) knowledge of the acceptor's cultural value systems, norms, and practices, and (3) cross-cultural communication skills including the use of language, metaphors, and approaches appropriate to the local context. Cultural competency training for family planning counselors must be an integral component in capacity building of health workers.

Conclusion

This systematic review synthesized evidence from ten studies examining cultural integration in Indonesian family planning counseling, revealing five key mechanisms through which local cultural values may enhance program effectiveness: religious value legitimization, culturally-aligned communication strategies, family structure-responsive counseling, values-sensitive technology integration, and counselor cultural competence. Findings suggest that incorporating religious frameworks, utilizing culturally appropriate social media strategies, and adapting approaches to diverse family structures show promise in improving acceptability and engagement. However, these conclusions must be interpreted with considerable caution given substantial methodological limitations. The evidence base is constrained by indirect applicability (only three studies directly examined healthcare settings), predominance of descriptive qualitative designs precluding causal inference, inadequate sample sizes, and single-setting studies limiting generalizability. The nascent nature of this research domain, reflected in 60% of studies published in 2025, results in insufficient longitudinal evidence and limited understanding of sustained effectiveness. While thematic patterns indicate potential benefits of cultural integration, definitive conclusions regarding effectiveness require substantiation through rigorous, context-specific research employing experimental or quasi-experimental designs with larger, diverse samples within actual family planning service delivery settings. The current evidence suggests cultural integration as a potentially valuable approach warranting further investigation rather than an established best practice.

Limitation and Suggestions

This systematic review acknowledges several critical methodological constraints that warrant careful interpretation of findings. The limited corpus of ten included studies represents a significant restriction in establishing robust evidence for cultural integration effectiveness in Indonesian family planning counseling. Notably, only three studies directly examined healthcare settings, while seven provided transferable insights from educational and social welfare contexts, introducing substantial challenges in direct applicability to clinical family planning services. The predominance of descriptive qualitative designs (n=6) and absence of experimental or quasi-experimental studies preclude causal inference regarding the effectiveness of cultural integration interventions. Methodological heterogeneity across included studies, ranging from case studies to literature reviews, complicated cross-study synthesis and limited the strength of conclusions. Furthermore, significant quality concerns



emerged, including inadequate sample sizes exemplified by Arlianty et al.'s study of only two participants, single-setting designs restricting generalizability, and insufficient documentation of researcher reflexivity and ethical considerations. The temporal concentration of publications (60% from 2025) reflects the nascent stage of research in this domain, resulting in limited longitudinal evidence and follow-up data. Additionally, the indirect relationship of most studies to family planning counseling necessitated extrapolation of findings across contexts, introducing potential threats to external validity. These limitations collectively suggest that while thematic patterns emerge, definitive conclusions regarding cultural integration effectiveness require substantiation through rigorous, context-specific research employing mixed-methods approaches and larger, more diverse samples within actual family planning service delivery settings.

Acknowledgment

The authors would like to express their gratitude to STIKes Pelita Ilmu and Universitas Gunadarma for providing institutional support for this research.

Conflict of Interest

The authors declare no conflict of interest in this study. This systematic review was conducted independently without any financial or personal relationships that could inappropriately influence the research outcomes and interpretation of findings.

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