Quantitative analysis of the fertility level of the fishing community in the coastal environment of the Kolakasi and Anowoi Districts

Rusdiaman Rauf1, Hengki Wijaya2 and A R Kadir3

1Management, STIE Tri Dharma Nusantara Makassar, Makassar, Indonesia
2Education Science, Sekolah Tinggi Filsafat Jaffray Makassar, Makassar, Indonesia
3Faculty of Economics and Business, Hasanuddin University, Makassar, Indonesia

Email: rusdiaman@yahoo.com

Abstract. This study aims to determine the comparison of the fertility of the fishing communities in the coastal environment in the Kolakasi and Anawoi Sub-districts and study the relationship and influence of residence, Education, Income, Age of First Marriage, and the use of contraceptive tools on the fertility of the fishing community. The study population was women with marital status aged 15 - 49 years. The sample of this research is those located in the Kolakasi and Anawoi district, with simple random sampling. The results of this study indicate that only education variables, namely not graduating from elementary/graduating from elementary school, have significant relationships and affect the parturition of the fishing community. Other independent variables such as residence, income, age of first marriage, and use of contraception have no relationship and influence on the parity of the fishing community in the Kolakasi and Anawoi Kelurahan.

1. Introduction
Talking about fertility is inseparable from Indonesia's culture or traditions, who are happy with a large number of families [1]. In line with the current development, humans must think about the level of fertility with the welfare of the family including providing a place to stay (home), children's education and health [2], social economy and culture [3], human physiology, healthy environment, and demographics [4].

The fertility case study shows that the population in Kolaka Regency in 2018 was 256,827 people, and in 2019 there were 261,664 inhabitants, illustrating that in Southeast Sulawesi Kolaka District, the population growth was still high. Many factors influence the growth of a high-occupation area, including the high fertility rate, including factors that directly affect it, such as residence, education, income, age of first marriage, and birth control programs run by the Government, such as Family Planning [5,6]. One of the community communities that lack special attention, and their level of welfare is still below the poverty line, is the fishing community [5,7]. Research conducted by Rauf et al. shows that most fishing communities have income levels below 2,000,000 IDR. Likewise, the level of education is generally not in school or not completing elementary school [8]. The author is interested in examining indicators of the environment of residence, education, age of first marriage, and the use of contraceptives on fertility rates [9]. The results of this study can provide...
recommendations for the development of government policies for birth control, especially in the coastal environment of the fishing community.

The focus of this research is 1) How is the difference in the parity of the fishing communities in the coastal environment in the Kolakasi and Anawoi Kelurahan? 2) What is the effect of residence, education, income level, age of first marriage, and the status of the use of contraceptives on fertility in Kolaka Regency?

2. Research Method

2.1. Types of research
This research is descriptive quantitative survey research [10] with a comparative study between 2 locations to find out the Fertility of a Fishing Community between two coastal villages. One located in an urban suburb, namely Kolakasi Village and the other located far from an urban area with a distance of approximately 60 kilometers, the Kolakasi Village.

2.2. Population and samp
This study population is women with marital status between 15 - 49 years, where the family's primary income is derived from his livelihood as a fisherman and resides in the Kolakasi and Anawoi villages, Kolaka Regency, Southeast Sulawesi Province. Because the study population is all fishing communities in the two study sites and the number is below 100, the sampling technique is saturated samples, where the entire population is sampled in this study, [11] with the criteria of respondents aged 15-49 already married and still menstruating. In Kolakasi Kelurahan, the number of respondents was 32, and in the Anawoi district, the name was 47. So the number of respondents in this study was 79 respondents.

2.3. Analysis method
The analysis used in this study is a descriptive statistical technique [10] to describe or describe fertility variables and indicators by using a frequency and percentage table based on a specific standard or measurement scale. Besides that, to test the hypothesis in determining differences fertility at the two study sites. A multiple linear regression test was used to see the effect of the independent variable on parity (the average number of children born alive), so the veranda linear regression model was used as follows:

\[ Y = f(X1,X2,X3,X4,X5) \]

Where:
\[ Y \] = Parity, Number of children born alive (dependent variable)
\[ X \] = Independent variables, including:
\[ X1 = \text{Residence (categorical) with 2 indicators, namely;} \]
\[ 1) \text{Anawoi} = X1.1 \]
\[ 2) \text{Collation (comparator)} = X1.2 \]

\[ X2 = \text{Education (categorical) with 3 indicators, namely;} \]
\[ 1) \text{Not going to school / not completing elementary school / graduating from elementary school} = X2.1 \]
\[ 2) \text{Graduated SLTP} = X2.2 \]
\[ 3) \text{Graduated from high school (comparator)} = X2.3 \]

\[ X3 = \text{Revenue (categorical; with 3 indicators, namely;} \]
\[ 1) \text{Below 2,000,000 IDR} = X3.1 \]
\[ 2) \text{2,000,000 IDR up to 5,000,000 IDR} = X3.2 \]
\[ 3) \text{Above 5,000,000 IDR (comparator)} = X3.3 \]
X4 = Age of first marriage (categorical) with 2 indicators, namely:
1) Under 20 years = X4.1
2) 20 years and above (comparison) = X4.2

X5 = Use of contraception (categorical), with 2 indicators, namely:
1) Not used = X5.1
2) Use (comparison) = X5.2

Based on the functional relations of the variables and their measurements, the regression equation can be formulated as follows:

\[ Y = \beta_0 + \beta_1 X_{1.1} + \beta_2 X_{2.1} + \beta_3 X_{2.2} + \beta_4 X_{3.1} + \beta_5 X_{3.2} + \beta_6 X_{4.1} + \beta_7 X_{5.1} + \varepsilon \]

Where \( \beta_0, \beta_1, \beta_2, \beta_3, \beta_4, \beta_5, \beta_6, \beta_7 \) are the parameters to be estimated and \( \varepsilon \) = error term

3. Result and Discussion

3.1. Result

3.1.1. Average parturition of respondents by residence and education

| Education level                  | Kolakasi | Anawoi | Kolakasi and Anawoi |
|----------------------------------|----------|--------|---------------------|
| Not graduated from elementary school/graduated from elementary school | p = 4.50 | p = 4.69 | p = 4.63 |
|                                  | P = 63   | P = 164| P = 227             |
|                                  | N= 14    | N= 35  | N = 49              |
| Graduated from middle school     | p = 2.67 | p = 2.67| p = 2.67 |
|                                  | P = 32   | P = 24  | P = 56              |
|                                  | N= 12    | N = 9   | N = 21              |
| Graduated from high school       | p = 1.50 | p = 4.33| p = 2.44 |
|                                  | P = 9    | P = 13  | P = 22              |
|                                  | N = 6    | N = 3   | N = 9               |

Information:

- \( p \) = parturition (average number of children born alive)
- \( P \) = number of children born alive
- \( N \) = number of respondents

In general, the average parity of respondents at the two study sites was 3.86. This means that each respondent has an average number of children born alive 3.86 per respondent. Respondents who have a lower level of education have greater parity when compared to respondents who have a higher level of education, i.e., respondents who did not attend school/did not complete elementary school/graduated from elementary school with average parity of 4.63, graduated junior high school average parity 2.67 while graduating from high school 2.44. The difference in parity based on the education of the respondent does not generally apply to all respondents’ living places.

3.1.2. Average parturition of respondents according to residence and age of first marriage

| age of first marriage | Residence | Kolakasi | Anawoi | Kolakasi and Anawoi |
|-----------------------|-----------|----------|--------|---------------------|
|                       |           |          |        |                     |
|                       |           |          |        |                     |

Table 2. Average parturition according to house and age of early marriage.
The average parity of respondents at the age of first marriage below 20 years is 4.03 more than the age of first marriage over 20 years 3.13, the difference is significant, meaning that the difference is too large. The correlation between the age of first marriage and parity is a negative correlation involving that the age of first marriage under 20 years of fertility tends to be higher.

3.1.3. **Average parturition by residence based on age of first marriage and status of use of contraception**

| Use Contraception | Residence | Kolakasi | Anawoi | Kolakasi and Anawoi |
|-------------------|-----------|----------|--------|---------------------|
|                   | Under 20 years old | p = 3.52 | p = 4.28 | p = 4.03 |
|                   | P = 74 | P = 184 | P = 258 |
|                   | N = 21 | N = 43 | N = 64 |
|                   | 20 years and over | p = 2.73 | p = 4.25 | p = 3.13 |
|                   | P = 30 | P = 17 | P = 47 |
|                   | N = 11 | N = 4 | N = 15 |

One of the control variables of the insignificant difference in the average parity of respondents, especially in Anawoi district, is the use of contraceptives. Although the goal is limited to stopping pregnancy, generally, they already have many large children. Many children have a lot of fortune, as opposed to infertility [12]. In general, the parity is still quite high between respondents of first marriage age below 20 years who use contraception (3.67) and respondents of the age of first marriage over 20 years who do not use contraception (2.67). Likewise, respondents of the age of first marriage over 20 years using high parity contraception (5.0).

3.1.4. **Average parturition according to a residence and income level**

| Level Income (IDR) | Residence | Kolakasi | Anawoi | Kolakasi and Anawoi |
|-------------------|-----------|----------|--------|---------------------|
|                   | Under 20 years old | p = 3.73 | p = 4.33 | p = 4.12 |
|                   | P = 71 | P = 143 | P = 214 |
|                   | N = 19 | N = 33 | N = 52 |
|                   | Yes | p = 1.5 | p = 4.1 | p = 3.67 |
|                   | P = 3 | P = 41 | P = 44 |
|                   | N = 2 | N = 10 | N = 12 |
|                   | 20 years and over | p = 2.73 | p = 2 | p = 2.67 |
|                   | P = 30 | P = 2 | P = 32 |
|                   | N = 11 | N = 1 | N = 12 |
|                   | Ya | p = 0 | p = 5 | p = 5 |
|                   | P = 0 | P = 15 | P = 15 |
|                   | N = 0 | N = 3 | N = 3 |
Respondents who earn income 200,000 IDR to 5,000,000 IDR the share is higher when compared to respondents who receive less than 2,000,000 IDR. Higher incomes tend to have high parturition due to economic stability.

3.1.5. Average Parturition According to Residence and Status of Use of Contraception

Table 5. Average parturition according to residence and status of use of contraception.

| Use of contraception | Residence     | Kolakasi | Anawoi | Kolakasi and Anawoi |
|-----------------------|---------------|----------|--------|---------------------|
| Do not use            | p = 3.37      | p = 4.26 | p = 3.84 |
|                       | P = 101       | P = 145  | P = 246 |
|                       | N = 30        | N = 34   | N = 64  |
| Use                   | p = 1.5       | p = 4.31 | p = 3.93 |
|                       | P = 3         | P = 58   | P = 59  |
|                       | N = 2         | N = 13   | N = 15  |

In general, the use of contraception has no significant effect on the parturition of respondents. The results of interviews with respondents who have used contraceptives. In addition to the cause, many children have also been due to family economic pressure, so they use contraceptives.

3.1.6. Determination Coefficient Test (R2), F Test and t-Test

Table 6. Test results for the coefficient of determination (R2) model summary.

| Model | R     | R Square | Adjusted R Square | Std. Error of the Estimate |
|-------|-------|----------|-------------------|---------------------------|
| 1     | .470a | .221     | .144              | 2.061                      |

a. Predictors: (Constant), Residence, Education_1, Education_2, Income_1, Income_2, Age of first marriage, Family planning

Table 6 shows that the R-value is 0.470, and R Square is 0.221, meaning that the independent variables simultaneously have a positive effect on fertility, but are in a low category.

Table 7. Simultaneous testing (F-Test).

| Model       | Sum of Squares | DF | Mean Squares | F     | Sig  |
|-------------|----------------|----|--------------|-------|------|
| Regression  | 85.820         | 7  | 12.260       | 2.885 | .010a|
| Residual    | 301.648        | 71 | 4.248        |       |      |

a. Predictor: (Constant), Residence, Education_1, Education_2, Income_1, Income_2, Age of First marriage, Family planning
b. Dependent Variable: Fertility
Table 8. Partial testing (t-test).

| Model                      | Unstandardized Coefficients | Standardized Coefficients | T   | Sig |
|----------------------------|-----------------------------|---------------------------|-----|-----|
| (Constant)                 | 3.003                       | 1.085                     | 2.76| .007|
| Residence                  | .512                        | .559                      | .113|.931| .362|
| Education_1                | 2.047                       | .784                      | .448| 2.60| .011|
| Education_2                | .055                        | .836                      | .011|.066|.947|
| Revenue_1                  | -.230                       | .700                      | -.043|.329|.743|
| Revenue_2                  | .008                        | .569                      | .001|.015|.988|
| First marriage age         | -.524                       | .597                      | -.097|.877|.383|
| Family planning            | -.311                       | .640                      | -.055|-.487|.627|

- a. Dependent Variable: Fertilitas

The results of the calculation of multiple regression analysis to determine the effect of residence, education_1, education_2, income_1, income_2, age of first marriage and family planning on fertility in Kolaka Regency. Based on the calculation of the results of the regression of the independent and non-independent variables, the regression function is obtained with the equation:

\[ Y = \beta_0 + \beta_1 X_{1.1} + \beta_2 X_{2.1} + \beta_3 X_{2.2} + \beta_4 X_{3.1} + \beta_5 X_{3.2} + \beta_6 X_{4.1} + \beta_7 X_{5.1} + \varepsilon \]

\[ Y = 3.003 + 0.512 TT + 2.047 PDD_1 + 0.055 PDD_2 - 0.23 PDT_1 + 0.008 PDT_2 - 0.524 UKP - 0.311KB. \]

The model is significant (sif F = 0.0104 <α = 0.05) with R² = 0.22149 meaning that the variation of respondents' parturition number can be explained by the independent variable by 22%.

3.2. Discussion

3.2.1. Status of residence. The parturition of respondents living in Anawoi districts 0.51 more than that of the parturition of respondents who lives in Kelurahan Kolakasi. The difference was not significant sig t > α (0.3627 = 0.05). The results are not significant because the fishing communities in the two places have the same characteristics, such as ethnicity, family, and religion. The amount of parturition in fishing communities residing in villages, supported by Susilo's research, believes that fishing communities in Banjarkemuning Village have higher fertility compared to fertility in East Java Province and national fertility rates [7]. This study is not in line with research conducted by Arialdi, and Said revealed that the population living in urban areas had increased fertility compared to residents in the village [13]. From the two previous studies and compared with this study, it can be concluded that differences in parturition of fishing communities residing in cities and villages if it can occur if cultural and educational characteristics are different.

3.2.2. Education. Parturition of respondents who did not attend school/did not complete elementary school/graduated from elementary school was 2.047. It more than parturition of respondents who completed high school. The difference was significant, where sig t < α (0.0110 < 0.05). It means that the respondent's education on the size of the parturition, where the respondents who did not attend school/did not complete elementary school/graduated from elementary school, had a more significant share compared to respondents who graduated from high school. While the average parturition of respondents who graduated from junior high school also had 0.055 more respondents than those who graduated from high school and above, the difference was not significant, where sig t > α (0.9475 > 0.05). It means that graduating from junior high school with high school does not affect the size of the parturition. Sukim and Salam's research shows another thing that women with more education from junior high schools have a 0.92 times share compared to less than the same level of junior high school [14].

The low level of education has a significant effect on the parturition of the fishing community. The lower the level of education, the higher the parturition, especially those living in cities. It means that the higher level of education, the lower the parturition. It means that there is an inverse
relationship between education and parturition of the fishing community in Kolaka Regency. A high level of education will delay the age of the fishing community's first marriage, so the potential for giving birth to a child can be slowed.

Ismail and Maimunah conduct this research, each increase or increase in education by 1% will cause a decrease of 0.28% fertility in the Tanjung Raya sub-district [15]. Besides, Mahendra said education that took a long time would cause marriages to be delayed and open the choice between working and raising children [16]. Rahman and Syakur's research has a direct influence on the level of the wife's education on fertility through the age of first marriage [17].

3.2.3. Income. The parturition of respondents who earn below 2,000,000 IDR the parturition is less than -0.23 when compared to parturition of respondents who earn more than 5,000,000 IDR the difference is not significant, where \( \text{sig } t > \alpha (0.7432 > 0.05) \). While the parturition of respondents who earn between 2,000,000 IDR - 5,000,000 IDR the shareurition is 0.008 more than respondents who reach above 5,000,000 IDR. The difference is not significant, where \( \text{sig } t > \alpha (0.9885 > 0.05) \).

The difference in income level does not affect the size of the share except when comparing the fishing communities living in the City and the village with education. There is a difference in the parturition, where the parturition in the City is lower than in the district. It can happen because the higher income level is less than that of the low-income level in the fishing community in Kolaka Regency. Becker et al. Argued that personal income had played an essential role in the fertility of the transition to economic growth [18].

This study is in line with research conducted by Rahayu, partially socio-economic status variables do not influence the number of children desired by women of childbearing age who work [19]. However, this research is not in line with Arialdi and Said’s analysis that there is a negative relationship between income and fertility [13]. It means that the higher the level of income, the lower productivity from the two previous studies and compared with the results of this study. These more fishing communities have a high salary, the lower the participation.

3.2.4. First Marriage Age. The parturition of respondents of the first marriage age below 20 years of parturition was 0.524 fewer than the age of first marriage over 20 years. The difference was not significant, where \( \text{sig } t > \alpha (0.3835 > 0.05) \). The decision of parents primarily determines the existence of this difference in marrying their children. For example, in Anawoi district, many respondents had been married under the age of 15 years, while in Kolakasi village, there were no more respondents married under the age of 15.

The magnitude of the influence of the age of first marriage on parturition, which led to an increase in child supply, is the relatively low marriage age of women and the high level of intimacy 21. Furthermore, research conducted by Pratiwi and Herdayati, age at first marriage, affects the fertility of women of childbearing age in West Java [21].

Susilo said the primary marriage age factor for women is significant because it is closely related to the fertility rate of a household has [7]. In general, respondents have a long time to give birth because the majority of the age of first marriage is under 20 years, so that it has reasonably high parturition. Research Oktriyanto et al. revealed the results of multiple linear regression tests showed that the location of residence, age of first wife’s marriage, number of children still alive, income per capita, and family planning staff visits significantly influence the number of children desired [22].

3.2.5. Use of contraception. The parity of respondents who did not use contraceptives was at least 0.311 than the parity of respondents who used contraceptives. The difference is not significant, where \( \text{sig } t > \alpha (0.6279 > 0.05) \). The use of contraception in the fishing community in Kolaka District is deficient because the fishing community has difficulty accepting and understanding government programs, especially out of planning. At the time of the interview with the respondent, asked why not use contraception, the answer was not knowing. This respondent's attitude indicates that he does not know more about contraception. The existence of respondents' negative attitudes towards the use of
contraceptives needs more equitable counseling about the introduction and benefits of contraceptives as well as ways of their use and, most importantly, how to get it. This study is in line with research conducted by Ekawati that women who are classified as poor ranks lowest in contraceptive use [23]. The low use of contraceptives among women from the poor is caused by feeling burdened if they have to use contraceptives, where these tools have to incur costs (to buy or transport costs). Besides, awareness to reduce birth rates is relatively low. David and Lopez-Carr argue that the environment of consumption can be reduced at the community level through the diffusion of contraception and family planning rules, which result in lower family members [24]. Recommendations for strengthening communication, education, information, especially delayed age at first marriage, age at first birth and age at first sexual intercourse for young women, lowest wealth income, little education [25].

4. Conclusions

The parturition of respondents in Kelurahan Anawoi - areas far from urban areas - had more equality than respondents in Kolakasi district, but the effect was not significant. The education of respondents who did not attend school/did not complete elementary school/graduated from elementary school had greater parity and had a substantial effect on the number of parities compared to respondents. The latter graduated from high school and above. The respondent's income does not affect the size of the fishing community parity. The younger the age of first marriage, the higher the parity but has no significant effect. The use of contraceptives has no impact on the size of the parity of the fishing community.

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