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# Original Article

# The Effect of Video and Leaflets for Health Promotion on Adolescents Knowledge About Early Marriage in Rural Area Indonesia

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#### Abstract

**Background:** Marriage is mostly carried out by teenagers due to poor knowledge about reproductive health. This issue can lead to dangerous behaviors.

**Aim:** The purpose of this study was to analyze the effect of video education media and leaflets on adolescent knowledge about early marriage in Dobo, Aru Islands.

**Methods:** The research design used was a quasi-experimental approach with a two-group pretest-posttest design approach. The sampling technique in this study was purposive sampling with 98 respondents. Data analysis used SPSS 20.0 and the Paired Samples Test statistical test from independent t-test with a significance level of 95% (α: 0.05) was ran to get the results

**Results:** The two intervention groups using the Paired Samples Test showed the influence of islands on adolescent knowledge about marriage before using video media from leaflets with p-value <0.05. There was a difference in the effect of knowledge between the video groups of leaflets after the intervention was given using an independent t-test (p value 0.001 < 0.05).

**Conclusion:** There is an influence of the interventions with video and media leaflets. The advantages of leaflet media are clear images that can be seen together, interesting and easy to understand.

## INTRODUCTION

Based on data from the United Nations Development Economic and Social Affairs (UNDESA), it is stated that Indonesia is one of the countries with a high incidence of early marriage, which is 34%. Indonesia ranks 37 out of 158 countries in the world regarding early marriage, while in the order of the Association of South East Asia Nations (ASEAN), Indonesia ranks second after Cambodia. Based on these data, Early Marriage is a problem in Indonesia, Basic Health Research (Riskesdas 2013)among women aged 10-50 years, the most 2.6% of early marriage at the age of under 15 years and 23% at the age of 15-19 years (UNDESA 2015).

The Ministry of Health revealed, 1 in 9 girls get married in Indonesia. Women aged 20-24 years who married before the age of 18 in 2018 reached around 1,220,900 and this figure places Indonesia in the 10 countries with the highest absolute number of child marriages in the world, which is ranked 37. This position is the second highest in ASEAN after Cambodia. According to the 2013 Basic Health Research (Riskesdas) data, 2.6% of adolescents had early marriages under the age of 15 years and 23.9% at the age of 15-19 years (Riskesdas, 2013).

Furthermore, the factors that cause early marriage are economic difficulties, families experiencing economic difficulties will tend to marry off their children at a young age in the hope of reducing the family's economic burden, low levels of education and lack of knowledge of parents, children, and the community about the importance of education, Pregnancy unwanted (KTD) because children have relationships that violate norms, forcing them to have early marriages, parents' concerns about their children who already have very close girlfriends, make parents want to immediately marry off their children even though they are still minors. This is something that has been passed down from generation to generation. A family will not feel calm until their daughter is married.

The impact that occurs due to early marriage is that the reproductive organs are not ready to accept pregnancy so that it can cause various complications, early pregnancy and lack of nutrition for themselves, the risk of anemia, the increased incidence of depression, divorce, abortion, risk of early death and increased mortality. mother (AKI), premature is the delivery of a baby before 37 weeks of gestation. Lack of various substances needed during growth can lead to higher premature births and LBW (low birth weight), namely the baby's birth weight is less than 2500 grams, adolescent girls who begin to get pregnant when nutritional conditions are poor are at risk of giving birth to babies with low birth weights of 2-3 times greater than those with good nutritional status. The risk increases more than 10 times if the number of sex partners is more than six or if the first sex is under the age of 15 the younger the woman has her first child, the more susceptible she is to cervical cancer (Kumalasari dan Iwan 2012).

Early marriage is mostly done by teenagers because of the lack of knowledge about reproductive health. Limited knowledge and understanding can lead adolescents towards risky behavior. According to the community's view, they do not consider the magnitude of the impact of early marriage. Community leaders and religious leaders argue that early marriage for women is more about keeping unwanted things from happening such as pregnancy outside of marriage (BKKBN 2013). Knowledge is very important because with knowledge about the impact of marriage age, if you do early marriage, at least it can reduce underage marriage. this is in line with the research conducted by (Mutmainah 2017), the results showed that there was a relationship between the level of knowledge and attitudes of adolescents with the incidence of early marriage. From the results of the study, it was found that the level of knowledge was the most dominant thing causing early marriage. Based on research conducted by (Novitasari 2018), the results showed that there was an effect of counseling with video media on the level of adolescent knowledge about early marriage at SMP PGRI Kasihan Bantul Yogyakarta in 2018. an increase of 41.64%. This is in line with (Lestari dan Sundayani 2019) research with research results that there is an effect of counseling with video media and leaflets on the knowledge and attitudes of adolescents about the risk of early marriage in East Butun in 2017.

Educational media provided to adolescents is still not optimal and evenly distributed, it can be seen from the lack of knowledge and attitudes of teenagers which results in an increase in early marriage. In addition, in education the selection of methods and media will determine success, so that health education through video education media and leaflets has many advantages to increase adolescent knowledge (Rusliman 2019). Based on data from the Central Statistics Agency (BPS) in 2017, the percentage of early marriages in Maluku Province (34.41%), Riau Province (25.87%), West Papua (29.25%), Central Sulawesi (32.42%), South Kalimantan (39.53%), Islands Riau (20.92%) and DIY (11.07%). Ten children who are less than 18 years old, there is one child who has been married. In fact, in absolute terms, BPS (2015) stated that the number of children who married early in DIY reached 13,000 in 2015 (BPS 2017).

Furthermore, based on the results of the 2018 KKBPK survey, more than 95% of both male and female adolescents in Maluku have had sex before marriage, and the average age of adolescents who have sex before marriage is 17 years, but the level of awareness about early marriage is increasing. increase. As evidenced by the Indonesian health demographic survey, the median age at first marriage in Maluku is 21 years, while the national average is 20 years. In addition, the knowledge index of adolescents about adolescent reproductive health in Maluku is 57.1, which is the same as the national average, as evidenced by the birth rate according to ASFR 20-24 years, 127/1000 births (BKKBN 2019).

Based on the data obtained, the high number of cases of early marriage in Dobo, Aru Islands currently requires attention. This is because in Dobo it is customary for children aged 13 to 15 to be married off. The case with the highest incidence is in the Aru Islands, which is 31.11%. The results of the preliminary study found that from 2017 to November 2019 there were 131 cases. Dobo is the area with the highest incidence of early

marriage at 15.27%. The level of early marriage is due to the style of dating that crosses the boundaries of customary norms so that pregnancy occurs, Early marriage is mostly done in Dobo because of the freedom of teenagers in their association so that they have sexual relations outside of marriage, so that early marriage occurs, the aim is to cover up the disgrace in the family. Based on initial data, it was found that counseling efforts about early marriage were often carried out by local health workers, but had never used video education media and leaflet media, so researchers were interested in conducting research on the prevalence of Early Marriage in Dobo, Aru Islands with the title: Effects of Educational Media Videos and Leaflets on Adolescent Knowledge About Early Marriage in Dobo, Aru Islands.

#### **METHOD**

#### Study Design

The research approach used is a quantitative research approach. In this study, the researcher explained the data in the form of numbers and analyzed using statistics. This study uses a quasi-experimental design with a two-group pretest-posttest design approach. This research was conducted in the Dobo Working Area, Aru Islands. This research was carried out from March 1, 2021 to May 20, 2021.

## **Population and Sample**

The population in this study were all teenagers aged 12-15 years in Dobo, Aru Islands as many as 260 people. The sample in this study in Selilau Village, as many as 98 people who will be divided into 2 groups using a ratio of 1:1, namely 49 adolescents in the intervention group using video media and 49 adolescents in the intervention group using leaflet media, with purposive sampling technique the determination of the sample for a particular purpose and certain considerations made by the researcher based on the characteristics or characteristics of the population that have been previously known.

As for determining the sample will be taken based on the following criteria; Inclusion Criteria; The inclusion criteria in this study were: adolescents aged 12-15 years in Dobo, Aru Islands and adolescents who were willing to become respondents. Exclusion Criteria; adolescents who are not willing to be studied and are in a sick condition so they cannot be studied.

## Variable

The video media referred to in this study are audiovisual messages supported by sound regarding adolescent reproductive health. The leaflets referred to in this study are information media in the form of sheets containing brief, solid and clear material descriptions that will be given to adolescents. Knowledge is the ability of youth to answer questions about Early Marriage. To measure the knowledge of adolescents about Early Marriage using a question questionnaire. Questions in the questionnaire include aspects of understanding early marriage, early marriage age, causes of early marriage and the impact of early marriage. The number of questions to determine the knowledge of adolescents consists of 20 questions. The correct answer was given a score of 1 for the wrong answer was given a score of 0. By using the gutman scale, the calculation of the percentage of criteria is obtained using the following formula (Hidayat 2014). Enough: If the respondent's answer score is 50%. Less: If the respondent's answer score is <50%.

# Research Instruments

The instrument in this study consisted of 3 types, namely the instrument for education that was used, namely Video Media, Leaflet and the instrument for assessing adolescent knowledge about early marriage was a checklist. Video media is part of the Audio-Visual media, which means that it can present images, sounds, and movements simultaneously. Video is a technology for capturing, recording, processing, transmitting, and rearranging moving images. Thus, the ability of this media is considered more interesting because in addition to being able to be seen, it can also be heard simultaneously. Leaflet is a promotional or marketing tool that is printed on a piece of paper, which generally uses art paper or art carton, and has two or more folds. The leaflet itself usually contains information related to the image.

## Data analysis and Analysis

Materials and Instrumentation of activities; Pre-Test and Post-Test are given to adolescents aged 12-15 years before being given educational media and 1 week after being given educational media. Making materials is needed when conducting educational media about Early Marriage. The stages are: adolescent pretest related to early marriage, providing educational media to the video media intervention group and leaflet media. Then, posttest in the video media intervention group and the leaflet media intervention group one week after the provision of educational media. Data analyzed by univariate and bivariate tests using SPSS. 20.0.

#### Research Ethics

This research has been approved by the ethics committee of the Muslim University of Indonesia and the researcher guarantees the confidentiality of the respondents. Prior to participating in the study, all participants signed an informed consent.

## **RESULTS**

## Characteristics of Respondents

Table 1. Characteristics of Respondents in Dobo, Aru Islands in 2021

Variable		Video Intervention		Leaflet Intervention	
		N	%	N	%
Age	10-15	47	95.9	46	93.9
	16-20	2	4.1	3	6.1
Education	SD	6	12.2	6	12.2
	junior high school	39	79.6	29	59.2
	senior High School	4	8.2	14	28.6
Knowledge	Enough	14	28.6	18	36.7
(pre-test)	Not enough	35	71.4	31	63.3
Knowledge	Enough	40	81.6	40	81.6
(post-test)	Not enough	9	18.4	9	18.4

Source: Primary Data, 2021

Table 1 showed most of the participants were 10-15 years old. The education background was junior high school. This table also describes that there was a significant increase in the number of people with enough knowledge from 14 to 40 after the video intervention. While, after leaflet intervention also showed remarkable growth of people with enough knowledge from 18-40 people

The Effect of Video and Leaflet Media on Adolescent Knowledge About Early Marriage

Table 2. The Effect of Video and Leaflet Media on Adolescent Knowledge about Early Marriage in Dobo, Aru Islands in 2021

Variable Knowlede	mean	Standard Deviation	p value	
Video				
Pre test	41.71	12,456		
			0.000	
Post test	52.18	12,391		
Leaflet				

Pre test	41.63	14,487	
			0.000
Post test	52.10	12.306	

Source: Primary Data, 2021

The data in table 2 shows that the mean value for adolescent knowledge about early marriage before being given an intervention using video media has a value of 41.71, while the mean value of adolescent knowledge after the intervention is 52.18, indicating an increase in the value of knowledge before and after the intervention. The results of the test using the T paired test obtained a significance value of p value 0.000 (p value <0.05) so it can be concluded that there is an effect of video media on adolescent knowledge about early marriage. For adolescent knowledge about early marriage before being given an intervention using leaflet media has a value of 41.63, while the mean value of adolescent knowledge after the intervention is 52.10, indicating an increase in the value of knowledge before and after the intervention. The results of the test using the paired T test obtained a significance value of p value 0.000 (p value <0.05) so that it can be concluded that there is an influence of leaflet media on adolescent knowledge about early marriage.

## Independent t-test Knowledge Differences Between Groups of video media and leaflets

To find out the difference in knowledge before and after the intervention was given to each group, it is necessary to do a different test of two unpaired groups (*independent t-test*).

Table 3. Results of Independent t-test of Differences in Adolescent Knowledge About Early Marriage in Dobo, Aru Islands in 2021

Knowledge	Group				
	Videos		Leaflet		p
	mean	SD	mean	SD	•
Pre test	52.23	13,657	53.56	16,243	0.232
Post test	72.19	13,548	79.12	13,575	0.001
Total Sample	49		49		

Source: Primary Data 2021

Table 3 shows that of the 49 samples from each sample group, the average value of each treatment group has a difference. For the video group the mean and standard deviation before (pretest) treatment was 52.23 with SD 13,657 and after treatment (posttest) was given treatment of 72.19 with SD 13,548. while for the leaflet group the mean and standard deviation before (pretest) treatment was 53.56 with SD 16,243 and after treatment (posttest) treatment was given 79.12 with SD 13,575 more likely to increase. Based on statistical tests using independent t-test at the time of the pretest, the probability value (p = 0.232 > = 0.05) can be concluded that there is no difference in knowledge between the video and leaflet groups before being given treatment.

#### **DISCUSSION**

# The Effect of Video Media on Teenagers' Knowledge about Early Marriage

Knowledge is the result of knowing and this is produced after people sense a certain object. Sensing occurs through the five human senses, namely the senses of sight, hearing, smell, taste and touch. Knowledge or cognitive shutter is a very important domain in shaping one's actions (Salamah 2016). One's knowledge, among others, is influenced by the information factor, with new information about a matter providing a new cognitive foundation for the formation of attitudes towards the new thing. Good enough information from various media then it can increase one's knowledge. The ease of obtaining information can help speed up someone to acquire new knowledge. Information will have an influence on one's knowledge. Even though someone has a low

education, if he gets good information from various media, it can increase a person's knowledge (Notoatmodjo 2010). While adolescents who had sufficient knowledge were 28.6% before the intervention through video media, this was because young mothers had received information from their parents and participated in counseling programs held at local health centers related to early marriage (Istiyanto 2015).

The results showed that the average knowledge of adolescents on the results of the pretest using video was in the category of poor knowledge, but there were also some teenagers in the sufficient category. Sufficient knowledge because when they were pregnant, they had received information about the effects of early marriage, asked parents or accessed various sources of information about it, so that their knowledge increased. In adolescents who have less knowledge due to lack of information obtained, so far they only get limited information from their parents, or when they are married and pregnant because they are in remote areas, they are not exposed to information and the age factor is still young so they have not thought about making decisions. seek information about the impact of early marriage.

The intervention consisted of 5-10 teenagers by providing videos that were carried out for 2 days due to several obstacles, namely it was only done by the researchers themselves without being assisted by other health workers because the implementation of the research coincided with the number of programs that had to be completed at the end of the year so that all health workers were busy Apart from that, the Covid-19 pandemic condition means that some activities are limited and cannot gather large numbers of people and some parents of teenagers are afraid (Rusliman 2019).

The intervention group consisted of 49 adolescents then the researchers divided into small groups consisting of 5-10 adolescents which were carried out in different rooms and houses. The provision of educational media Vidio was carried out at 09.00 WIT in a room consisting of 5-10 teenagers, then at 10.00 WIT to 13.00 WIT the researchers visited the homes of teenagers consisting of 1-5 teenagers so that by implementing health protocols such as the use of masks, take care distance and wash hands. Then the teenagers who were present, had previously been informed not to bring their children, so they could focus on receiving counseling materials, counseling was carried out using a laptop so that the counseling materials could be received well, this was done because of difficulties. researchers in getting an LCD or projector so that researchers use a laptop to play videos (Amelia, Mohdari, dan Azizah 2017).

This research is in line with (Desiyanti 2015) that adolescents place the mass media as a more important source of sexual information than parents and teachers. According to (Desiyanti 2015) the factors that influence knowledge are the level of education, information obtained, experience, culture and socio-economics. Education with video media about early marriage is related to problems that often occur in the environment around teenagers so that it will attract interest and attention to counseling with video media that is carried out. The provision of knowledge about early marriage, interest and attention of teenagers to the material causes the information to be well absorbed (Mutmainah 2017).

After being given an intervention using video media, there was a very significant increase in knowledge, namely in the sufficient category as many as 40 adolescents (81.6%) and only 9 adolescents (18.4%) lacking knowledge. This is because the intervention carried out using video media was given for the first time for counseling in their village, therefore the enthusiasm of the youth to listen was very enthusiastic in playing the video. And this is a new thing, they can focus and there is enthusiasm to hear especially the video playback for 2 times even though there is no explanation and no discussion before the post-test and the results of this video have increased. Video media is part of Audio-Visual media, meaning that it can present images, sounds, and movements simultaneously. Video is a technology for capturing, recording, processing, transmitting, and rearranging moving images. Thus, the ability of this media is considered more interesting because in addition to being seen, it can also be heard simultaneously (Ibrahim dan et.al 2000)

The advantage of video is that the images are clear and can be seen together. From the results of (Edyati dan Khusnal 2014) research with the lecture method, the impact will be felt quickly but does not last long. So it would be better apart from lectures, delivery is also done with other methods and media such as using video media so that the knowledge, attitudes and behavior that are changed can last longer and find more effective media.

However, even though they have been given two repetitions for the video, some of them still have not changed their knowledge, as many as 9 teenagers 18.4%, this happens because they only have an elementary education background so they have limited memory for listening and lack of knowledge so it is rather difficult if

only providing video only without any communication in the local language. So that in addition to playing videos, researchers explain using their accent or everyday language so that they can understand the content of the video they are seeing or hearing. This is in line with the results of (Lestary, Dasuki, dan R 2014) research that mother tongue is very effectively used in counseling activities for children as the mother tongue is not only Indonesian, but there are regional languages in which each region lives. The use of regional languages as mother tongues is motivated by many things including parents, customs, and the environment.

Reproductive health education is a way of teaching or education that can help young people to deal with life problems that stem from sexual urges. The increase in the average value of adolescents is influenced by the effectiveness of the implementation of counseling with video media, the motivation of adolescents to listen to the material. While teenagers pay less attention to the videos given about early marriage so they are not absorbed properly which affects the increase in the average value of mothers who are perpetrators of low early marriage. In addition, some mothers have received information about early marriage from various sources of information, such as television/radio, internet/social media, teachers, parents, friends, and health workers (Novitasari 2018). Adolescents who have less knowledge after being given the intervention still show an increase in knowledge, as the increase in knowledge is caused by the learning process by adolescents and occurs due to an increase in sensitivity or readiness of the subject to the tests given to adolescents. Knowledge is the result of knowing that occurs after people sense a certain object. Sensing occurs through the senses of sight, hearing, smell and touch. Most of human knowledge is obtained through the eyes and ears. The power of video media is audio-visual media which is one of the media that can be used in listening learning. This media can increase teenagers' interest in learning because teenagers can listen and see pictures.

Changes in adolescent knowledge after being given an intervention using video because adolescents have reached the know stage, namely teenagers can remember the material that has been given related to early marriage. These results are an indication of the success of health education with video media carried out in the study. This success can not be separated from the various preparations of materials about early marriage, the use of language that can be understood by teenagers, the interests and motivations of teenagers and supported by the use of good media. So that the knowledge obtained by adolescents in the good category will encourage someone to behave and behave positively (Wawan dan Dewi 2015). The results of this study are in line with (Pambudi 2017) that the p value = 0.000 means that there is a significant difference in the increase in the average value of adolescents after the provision of marital age maturation videos. From several studies that have been carried out, so far health education is carried out more often using the lecture method and leaflet media. With the lecture method, the impact will be felt quickly but not for long. So it would be better apart from lectures, delivery is also done with other methods and media such as using video media so that the changed knowledge, attitudes and behavior can last longer and find more effective media (Edyati dan Khusnal 2014).

According to Bhakti (2010) in (Novitasari 2018), health education is one of the factors that influence the increase of one's cognitive abilities. Providing education provides stimuli as objects that must be recalled while also providing new input that adds or straightens the memory that has been stored. According to (Notoadmojo 2012) health promotion through counseling is an application of the concept of education in the health sector which aims to change behavior from detrimental to beneficial behavior. With this health promotion, adolescents can gain better insight and knowledge about early marriage. Health education with video media is a tool that can help to stimulate the hormones of the senses of hearing and sight, during the process of delivering educational materials. Audio-visual media has advantages such as being easier to understand and more interesting because there are sounds and images. The use of attractive media to convey information is very important in achieving the objectives of counseling and will further increase the knowledge received (Mubarak 2012)

Health education media is essentially a tool used in health education. It is called educational media because these tools are channels used to facilitate the reception of health messages for the public or clients. With the help of health education media, it is hoped that the purpose of providing health materials can be easily understood by clients (Fitriani 2011). The results of this study provide important information about the effect of video media on adolescent knowledge about early marriage. Researchers convey education with video media to teenagers, so that teenagers can reach understanding and understand themselves in relation to problems faced in the future, especially the problem of early marriage.

The difference between this study and previous research is that the target in this study is only teenagers who have elementary, middle and high school education, while in previous studies the target was only high school.

According to (Notoatmodjo 2010), the higher the level of education, the easier it is for adolescents to absorb and analyze the information they receive. However, in this study the average adolescent education was junior high school, but after being given the intervention, the increase in knowledge at the level of education was sufficient, which means that a high level of education cannot guarantee an increase in knowledge in adolescents regarding early marriage.

This research was conducted during the COVID-19 pandemic, which did not present at the same time a target, so the researchers divided them into several groups, so that their acceptance varied according to perceptions based on their respective educational and cultural backgrounds.

Based on the researcher's analysis, the increase in adolescent knowledge about early marriage after being given an intervention using video media cannot be separated from the enthusiasm or curiosity of teenagers who are very high. The right media and attractive packaging in delivering the message greatly affect the success rate of conveying the meaning of the message. Nevertheless, there are still some teenagers who do not show an increase in knowledge to the sufficient category. This is because there are other factors that influence so that the increase in adolescent knowledge is not achieved 100%, acceptance that is less focused is also a problem, and also because the level of education is still low.

#### Research Limitations

Due to the Covid-19 period, the application of health protocols must be applied, 2). Education is only carried out by researchers without assistance from local medical personnel. 3). The interventions provided are only video educational media and leaflets about early marriage. 4). No research was conducted to determine the level of education of adolescents who would be given education.

#### CONCLUSION

Based on the results of research and discussion on the knowledge and attitudes of Adolescents towards Early Marriage in Dobo, Aru Islands. Then it can be concluded as follows: 1). There is an influence of knowledge before and after being given an intervention with video media, with a p value of 0.000 (p value <0.05), the advantage of video media is that it describes a process accurately and can be seen repeatedly, videos also encourage and increase the motivation of adolescents to keep seeing it so that it can increase the knowledge of teenagers about early marriage. 2). There is an influence of knowledge before and after being given leaflet media intervention, with p value 0.000 (p value <0.05), as the advantages of leaflet media are clear images that can be seen together, interesting and easy to understand. In addition, although the contents of the leaflet media are quite dense and the images are not so many, they use language that is easily understood by teenagers. 3). Based on the statistical test using independent t-test on the probability value after being given treatment (p = 0.001 < = 0.05), it can be concluded that there is a difference in the effect of knowledge between the video and leaflet groups after being given treatment. The difference in the mean value in the video and leaflet media groups is 6.93.

Cooperation is needed with the health office and local health centers in increasing knowledge about early marriage as a source of health information for adolescents. Teenagers need to learn more about reproductive health so that they hope to understand more about the impact of early marriage. Further research is needed, developing and continuing this research with other variables that are adjusted to the characteristics of the respondents, such as conducting research on other factors that can affect the occurrence of early marriage.

# **Declaration of Conflicting Interest**

The author (s) declared no potential conflict of interest with respect to the research, authorship, and/or publication of this article



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