

# KNOWLEDGE OF REPRODUCTIVE HEALTH WITH EARLY MARRIAGE ON CHILDBEARING AGE (PUS)

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## **ABSTRACT**

*The problems of reproductive health knowledge with the incidence of early marriage in Indonesia is still found in rural areas, among others influenced by the knowledge, the characteristics of the physical environment, economic and social culture. Based on the results of a preliminary study in the Village Purwawinangun, interviews were conducted to 10 PUS known to most of them do not know the impact of early marriages on reproductive health. The purpose of this study to identify there a relationship between knowledge about reproductive health with pernikahan incident early on EFA in Sub Purwawinangun. Research type used is analytic with cross sectional design. The respondents totaled 135 respondents were taken by total population sampling. Data were collected using secondary data is data that is seen from the number of marriages in the can from the village and primary data using a questionnaire with interview research shows that the level of knowledge about reproductive health that respondents with good knowledge level of 14.8% (20 respondents), just as much as 71.2% (96 respondents) and less than 14% (19 respondents). Conclusion The level of knowledge about reproductive health that respondents with good knowledge level of 14.8%, just as much as 71.2% and less than 14%. The results of this study are expected to be material information or input for EFA in the village Puerwawinangun, so they are better prepared to plan a wedding.*

*Keywords: reproductive health; the incidence of early marriage*

## **2. INTRODUCTION**

The latest data from the Central Statistics Agency (BPS) in collaboration with the West Java Provincial Family Disaster Coordination Agency (BKKBN) shows that in 2014 from 288,318 couples of childbearing age (PUS), there are 281,243 (24.3%) PUS who performed early marriage. And some of them do not know about reproductive health. Data from the Center for Population Research of Padjajaran University (UNPAD) in collaboration with the West Java BKKBN reported that in 2015 the data shows that there are 12,975,458 family cards (KK). And 2357 PUS who performed early marriage on the reason of their parents' will, because they were forced and some were pregnant

outside of marriage. The young age of marriage in mountainous areas is still high, noted 36.7% first marriage between the ages of 12-14 years, 56.7% aged 15-19 years and 6.6% aged 20-24 years, with the background factor is the low level of knowledge and culture. Early marriages occur in many groups of the poor community which are characterized by low income, lack of education, lack of health, and lack of assets (Oyortey & Pobi, 2013). Early marriage in developing countries including Indonesia is related to economic, educational, demographic and socio-cultural aspects. In Indonesia, early childhood marriages still exist, especially in rural areas (Nurwati, 2014).

Adolescent reproductive health problems including early marriage in Indonesia are still found in rural areas. Early marriage in rural areas is influenced by knowledge, the characteristics of the physical, economic and socio-cultural environment of the community (Hanum, 2013). The median age at first marriage in Indonesia is at the age of 19.8 years, while the median age at first marriage in rural areas is 17.9 years (BPS & ORC Marco, 2014). This figure indicates that half of

couples of childbearing age in Indonesia are married under the age of 20 years. Likewise in Kuningan district, the obtained data shows that around 9,542,526 couples of childbearing age (PUS) and there are 100 couples of childbearing age were married early. Based on data in Purwawinangun village in 2015, there were 135 couples of childbearing age (PUS) and many were found under 20 years who had married early in 2015. The results of interviews conducted with 10 PUS showed that most of them did not know the impact of early marriage on reproduction health. Based on the above background, the researcher was interested in conducting research on the relationship between knowledge about reproductive health and the incidence of early marriage in PUS in Purwawinangun village, Kuningan district in 2015.

## **METHOD**

In this research, the writer uses analytical research type. According to Badriah (2009: 16), analytics is a research method that analyzes and presents data systematically so that it is easier to understand. The design plan in this research, the writer used a cross sectional. According to Badriah (2012: 27), a cross sectional research is a study that measures the prevalence of disease. Therefore it is often called as prevalence research. This study aims to study the relationship of exposure by observing a simultaneous exposure to disease in individuals from a single population at a certain time or period.

The population of this study were all couples of childbearing age (PUS) in Purwawinangun Village at the 2015 marriage as many as 135 couples of childbearing age. The sampling technique used in this research is total sampling technique, namely taking the sample with the total population used as respondents. The independent variable in this research was the knowledge of PUS about reproductive health. The dependent variable in this research is the incidence of early marriage. The method of this research used a questionnaire instrument with open interviews.

As for this research, the research used primary data, namely data obtained directly from respondents. Secondary data in this research is the marriage data obtained from the Purwawinangun Village Office.

Univariate analysis was carried out looking at description of each variable from the research results, in this analysis only uses the distribution and percentage of each variable. The univariate analysis used a relative frequency distribution where the frequency of each class was changed into a percentage (%). The change to a percent is done by dividing the frequency (f) by the number of observations (N) and multiplied by 100% (Notoatmodjo, 2002) by the formula:  
Description:

P = Percentage

$f$  = Frequency

N = Number of Respondents for Bivariate Analysis

The statistical test conducted is Chi Square to see the relationship between two variables, namely the independent variable and the dependent variable, both of which are in the form of categories.

### 3. RESULT

Based on research conducted on 20-24 June 2016, with a sample of all PUS at Junior high school in Purwawinangun village, Kuningan district in 2015, as many as 135 respondents with the title of the relationship between knowledge about reproductive health and the incidence of early marriage for PUS in Purwawinangun village, Kuningan district in 2015. The presentation of the research results of each variable can be seen in the following tables:

Univariate Analysis

**Table 1. Frequency distribution of the level of knowledge of PUS about reproductive health**

No	Knowledge level	n	Percentage
1.	Good	20	14,8
2.	Enough	96	71,2
3.	Less	19	14
	Total	135	100

Based on table 5.1.1 from the total of the 135 respondents, it showed the level of knowledge about reproductive health was mostly in the enough category, as much as 71.2% (96 respondents).

**Table 2. Frequency Distribution of Early Marriage incidence**

No	Incidence of early marriage	n	Persentase
1.	Forced marriage	39	28,8
2.	Marriage of the parents' will	84	62,2
3.	Unwed marriage	12	9
	Total	135	100 %

Based on table2, From the number of respondents as many as 135 people, it is known that the incidence of early marriage was mostly occurred due to the will of the parents as many as 84 respondents (62.2%).

### Bivariate Analysis

Incidence of early marriage knowledge	forced		parents' will		Unwed marriage		Total		P value
	N	%	N	%	N	%	N	%	
Good	5	12,8	23	58,9	11	28,3	39	100	0,002
Enough	10	12	48	57,1	26	30,9	84	100	
Less	2	16,7	4	33,3	6	50	12	100	
Total	17		75		43		135		

Based on table 5.1.3 from the total of 39 respondents, most of whom had good knowledge (58.9%), because of their parents' will, from the 84 respondents, most of them had enough knowledge (57.1%), because of the will of their parents, from the total of 12 who had less knowledge (50%), because of pregnant outside of marriage. The data was then performed statistical tests using SPSS version 16 for windows, the obtained value of P value = 0.002, while  $\alpha = 0.05$  because the value of P = 0.05 ( $0.002 < 0.05$ ).

#### **4.DISCUSSION**

##### **1.The level of knowledge of PUS about reproductive health in Purwawinangun village in 2015**

The results of this research are in accordance with the theory which states that knowledge of reproductive health is very important for PUS. Researcher has opinion that the majority of knowledge levels in Purwawinangun village are sufficient because in Purwawinangun the majority graduated from senior high school education (SMA) and a healthy environment so that the majority already understand about reproductive health. Knowledge is the result of knowing result, this happens after people sensing a certain object. Sensing occurs through the five senses, namely the senses of sight, hearing, smell, and taste. Most of human knowledge is obtained from the eyes and ears (Notoatmodjo, 2010: 01). Likewise with the research results of Marlinda (2010) that the level of knowledge of EFA regarding reproductive health is influenced by the lack of information sources, the social conditions of adolescents, and their families. With a P value =  $0.003 < 0.05$ .

##### **2. Incidence of early marriage in Purwawinangun village, Kuningan regency**

Researcher has opinion that the cause of early marriage is the majority due to the will of the parents, this is because in Purwawinangun village the parents think that marriage is better than undesirable things so that many of their children are married off after high school according to Notoatmodjo (2012: 56) Many things can influence the occurrence of early marriage, including

knowledge. Factors that affect knowledge according to Notoatmodjo (2010: 10-12) include experience including experiences from parents so it is only fitting that the results of this research are influenced by the wishes of the parents. As is the case with the results of research by Rismalinda (2010) that the incidence of early marriage is mostly justified because they were forced and because they were pregnant outside of marriage with a value of  $P = 0.002 < 0.05$ .

### **3. The Relationship Between Knowledge of Reproductive Health and the Incidence of Early Marriage at PUS in Purwawinangun, village Kuningan Regency**

Researcher has opinion that a high level of knowledge on reproductive health has little effect on someone not having early marriage, such as PUS who have a good level of knowledge about reproductive health. they did early marriage because of the parents' will and forced. not because of their own will. The data is then tested Statistically using SPSS version 16 for windows, the  $P$  value = 0.002, while  $\alpha = 0.05$  because the  $P$  value  $< 0.05$  ( $0.002 < 0.05$ ) then the decision  $H_a$  is accepted, it means that there is a relationship between knowledge of reproductive health and the incidence of early marriage for PUS in Purwawinangun village, Kuningan district in 2015.

According to Hyde (2012) The cause of early marriage occurs because of the forced circumstances of the family who are still living under the poverty line, to ease the burden on their parents, their daughter is married to someone who is considered capable. The results of this research are suitable with the opinion of Soetjningsih (2007) in his book, suggesting that early marriage is not only influenced by knowledge of reproductive health but there are still many factors that greatly influence the incidence of early marriage, namely forced marriage, marriage due to parents' will and marriage due to pregnancy out of married. There is also an internal factor, namely the influence that comes from within us. How do we express feelings, desires, and opinions about various kinds of

problems. determining choices or making decisions is not easy. In deciding something, we must have a basis consideration, insight and mature principles.. The internal factors can also be said that the Intelligence Quotient (IQ), Emotional Quotient (EQ), and Spiritual Quotient (SQ) factors.

The results of this research are also similar with the Research of Unul in Jakarta (2013) with the title of the relationship between knowledge about reproductive health and the incidence of early marriage in adolescents in 2013 which in terms of demographics shows that marriage before the age of 18 generally occurs in women in Indonesia, especially in rural areas. . This is due to compulsion, the will of the parents and because of pregnancy outside of marriage. With a P value = 0.001 <0.05. Likewise, Munaroh's research (2012) in Cirebon on the relationship between knowledge of reproductive health and the incidence of early marriage in 2012 stated that 27.2% of adolescents who married before the age of 16 years had enough knowledge about reproductive health (57.1%), with a P value. = 0.001 <0.05.



## REFERENCES

- Arikunto, S. (2010). *Prosedur Suatu Penelitian Pendekatan Praktek*. Jakarta: Rineka Cipta.
- . (2010). *Prosedur Suatu Penelitian Pendekatan Praktek*. Jakarta: Rineka Cipta.
- BKKBN, (2012). Diambil 6 Januari 2016. *Tumbuh Kembang Remaja dalam BKKBN.go.id*.
- Badriah, D.L. 2012. *Metodologi Penelitian Ilmu-Ilmu Kesehatan*. Bandung: Multazam
- Departemen Pendidikan Nasional. (2008). *Kamus Besar Bahasa Indonesia Pusat Bahasa*. Jakarta : Gramedia Pustaka Utama.
- Depkes RI. (2008). *Kesehatan Reproduksi Remaja*. Jakarta: Depkes RI.
- Manuaba, IBG. (2009). *Memahami Kesehatan Reproduksi pada Wanita*. Jakarta:
- Notoatmodjo, S. (2012). *Metodologi Penelitian Kesehatan. Ed. Rev.* Jakarta: Rineka Cipta.
- Rahmawati, A. (2009). *Kesehatan Reproduksi*. Yogyakarta: Fitramaya.
- Romauli, S. (2012). *Kesehatan Reproduksi Buat Mahasiswa Kebidanan*. Yogyakarta: Nuha Medika.
- Sarwono, SW. (2007). *Psikologi Remaja*. Jakarta: Raja Grafindo Persada.
- Soetjiningsih, (2007). *Tumbuh Kembang Remaja dan Permasalahannya*. Jakarta: ICCLC.
- Widyastuti, Yani dkk. (2009). *Kesehatan Reproduksi*. Yogyakarta: Fitramaya.
- Dinas Kesehatan Kuningan (DINKES), (2015). Diambil 16 Januari 2016 dari <http://www.dinkeskuningan.com>
- Munir, (2010) (t.t). Diambil Januari 2016 dari <http://news.okezone.com/2010> tiap tahun remaja seks pra nikah meningkat.
1. Mukaromah, (2009) (t.t). Diambil 7 Januari 2016 dari <http://eprints.undip.ac.id/>

Nancy, P. (t.t). (2014) Kesehatan reproduksi Diambil 6 Januari 2016  
Raden, (2007) (t.t). Diambil 7 Januari 2016 dari <http://www.kesrepro.info/?q=node>