

Impact Of Underage Marriage On Reproductive Health In Cileles District

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Abstract.

Married women under the age of 16 are usually 10-12 times more likely to develop cervical cancer than those who are married over the age of 20. At that age the uterus of a young woman is very sensitive. The juvenile cervix is more susceptible to carcinogenic stimuli because of the active process of metaplasia, which occurs in the transformation zone during the developmental period. Squamous epithelial metaplasia is usually a physiological process. But under the influence of carcinogens, cell changes can occur resulting in a pathological transformation zone (Melva, 2017). These atypical changes initiate a process called cervical intraepithelial neoplasm (CIN) which is the preinvasive phase of cervical cancer. Under the age of 18, a woman's reproductive organs are still very weak. If she is pregnant, then As a result, it will be easy to miscarry because the uterus is not that strong, making it difficult for the fetus to attach to the uterine wall. This type of research is descriptive research with the method used is a quantitative approach. The sample in this study was taken from the entire population, because the method used was total sampling with a total of 46 people. This study uses a cross-sectional or cross-sectional design which can show the relationship between the independent and dependent variables but cannot show a causal relationship. The results of the study that based on the results of the Paired Samples t Test correlation test obtained a p-value of 0.00. Because the p value is 0.00 ($p < 0.05$), there is a significant impact of early marriage on reproductive health.

Keywords: Early Marriage, Reproductive Health and Cileles District.

I. INTRODUCTION

Marriage is a very meaningful moment for every human life in the form of a physical and spiritual bond between a man and a woman as husband and wife with the aim of forming a harmonious and eternal family based on Belief in the One Supreme God. Besides uniting two different people, marriage will automatically change the status of both. The law regarding marriage is stated in Law no. 1 of 1974, Article 7 paragraph (1) states that marriage is permitted if the man has reached the age of 19 years and the woman has reached the age of 16 years. However, changes and revisions to return to marriage can be made if the male and female parties are at least 19 years old, then it is continued in paragraph 2 which states that the marriage of each candidate who has not reached the age of 21 must obtain permission from both parents. Then, the National Population and Family Planning Agency (BKKBN) has also issued a regulation that the ideal age for marriage for women is 20-35 years and 25-40 years for men (BKKBN, 2020). Marriage is not only a matter of a change in status and ratification of a life together between a man and a woman but more than that, marriage is a relationship and a sacred activity in the form of the union of two people who will carry out responsibilities that are not easy, so that maturity is required from the aspect of age, physical, psychological, biological and economic health of both partners to live it. But in reality there are still discrepancies with what is stated in the rules and laws. In fact there are still many citizens in Indonesia who are still carrying out underage marriages from the provisions issued by the National Family Planning Coordinating Board (BKKBN), especially residents who are located in rural areas.

Based on the information from the Child Marriage Report, when observed from the area of residence, it proves that the habit of girl marriage is more likely to occur in rural areas than in urban areas, whether before the age of 18 or before the age of 15. In 2018, women aged 20-24 in rural areas will carry out their first marriage before they are 18 years old, a larger percentage is shown in rural areas of 16.87% while in urban areas it is 7.15%. In contrast, for boys, approximately 1 in 100 men aged 20-24 years in 2018 had married before the age of 18. Similar to girls who have married early, rural areas also have a high number of boys who married early, namely 1.44% and urban areas, namely 0.77% (Sahrizal, Handayani, P. S., & et al, 2020) Getting married at the age of less than 18 years is a reality that must be faced by some teenagers around the world, including in Indonesia. It is estimated that more than 60 million women aged 20-24 years.

Nationally, the number of cases of early marriage in Indonesia reached 1359 cases with an average age of marriage under 19 years. (Siti Hawa, 2019)Indonesia is the second country with the highest child marriage rate in Southeast Asia after Cambodia. Throughout 2019 to 2020 there has been a decrease of 0.6%, but it is still far from the target of decreasing to 8.74% in 2024 (Ministry of PPPA, 2021). Child marriage can have serious and long-lasting negative effects. When an adolescent girl becomes pregnant, it can have a significant impact on her education, health (due to complications from childbirth), and employment opportunities, affecting her future life and income. The children they give birth are also at risk of death in infancy, stunting, and low birth weight (Buentjen & Walton, 2019: Rosalin, 16 February 2021).The National Family Planning Coordinating Board (BKKBN) also provides guidance regarding the minimum age for a person to enter into a marriage. This is due to taking into account various aspects such as reproductive, biological, and psychological readiness (BKKBN, 2017).

Similar to the possibility of divorce, the health of mothers and children during childbirth, increased fertility rates and many other things. In mental health, namely when entering the world of the household where there are rights and obligations that need to be fulfilled as best as possible, so that harmony in the household can be realized. In this context, mental health is needed and not only with love. Not a few marriages are carried out out of compulsion, which will affect household harmony because husbands and wives are not mentally ready to marry at a young age and the risk of divorce will be even greater (Fitriyani, D., & et al in Shafa, 2021).The Marriage Law No. 1 of 1974 allows a girl aged 16 years to marry, while the Health Law No. 36 of 2009 provides a limit of 20 years. Because sexual intercourse is carried out at the age of under 20 years there is a risk of cervical cancer, as well as sexually transmitted diseases. Young marriages cause complications in pregnancy and childbirth, including preeclampsia in pregnancy, the risk of obstructed labor because the size of the child's head cannot adjust to the shape of the back which is not yet fully developed. In labor there can be a tear that extends from the vagina through the bladder and extends to the anus. In infants, low birth weight or large birth weight can occur. The risk to the mother is that she can die (Bunnars in Shafa, 2021).According to research results (Kumaidi and Amperaningsih, in Shafa 2021). There are several negative impacts of early marriage in Indonesia. The impact is that 56% of young women experience Domestic Violence (KDRT), although not too often. Adolescents are unable to achieve higher education because only 5.6% of adolescents with early marriages continue their education after marriage, and the risk of maternal and infant mortality is 30%. Other research also states that early marriage is related to poverty and results in reduced access to education for women.

II. METHODS

This type of research is descriptive research with the method used is a quantitative approach. Primary data collection was carried out using a questionnaire on young mothers in the Cileles District area.The population in this study were teenagers who had underage marriages in Cileles District, with a total of 46 people. The sample in this study was taken from the entire population, because the method used was total sampling with a total of 46 people.This study uses a cross-sectional or cross-sectional design which can show the relationship between the independent and dependent variables but cannot show a causal relationship. The data used in this study is secondary data sourced from Cileles District data regarding underage marriages.At first the researcher wanted to examine several variables but during the collection process, the available data was not as complete as expected. The variables analyzed came from information or documents collected in Cileles District.Furthermore, in this study the data collection process was carried out by selecting the variables needed to be analyzed. In collecting data, the writer was assisted by District officers.Based on the purpose of conducting research, namely to find out the factors related to through the distribution and relationship of the independent variables with the dependent variable. The analysis used in this study are:

2.1 Univariate Analysis

This univariate data analysis was used to get an overview of the frequency distribution and percentage of each variable studied for both the dependent variable and the independent variable.

2.2 Bivariate Analysis

This analysis was carried out by connecting the independent variables and the dependent variables. The aim is to see a significant relationship between the independent and dependent variables. The statistical test used was the Chi Square statistical test (X²).

III. RESULTS AND DISCUSSION

3.1 Bivariate Analysis

3.1.1 Characteristics of Research Respondents

Table 3.1. Distribution of Research Respondent Characteristics

No.	Characteristics	Amount	Percentage
1	Age		
	≤ 17 Years	42	91
	18 Years - 20 Years	4	9
	Total	46	100
2	Education		
	Elementary	26	56,5
	Junior high	15	32,6
	Senior high	5	10,9
Total	46	100	
3	Job		
	Housewife	41	89,1
	Trader	5	10,9
Total	46	100	
4	Parity		
	Primipara	2	4,1
	Multipara	40	86,9
	Grandemultipara	4	9
Total	46	100	

Source: Respondent Data from Cileles District

Based on table 3.1, it can be seen that the majority of respondents aged ≤ 17 years totaled 42 people (91%) and a minority of 18 years - 20 years totaled 4 people (9%), the majority of elementary school respondents totaled 26 people (56.5%) and SMP with a total of 15 people (32.6%) and a minority of SMA with a total of 5 people (10.9%), while the majority of the respondents' jobs are IRT, totaling 41 people (89.1%) and a minority of traders with a total of 5 people (10.1%) plus the majority multipara parity with a total of 40 people (86.9%) and 4 people (9%) grandemultipara parity and a minority of 2 people (4.1%) primipara parity.

3.1.2 Reproductive Health

Table 3.2. Distribution of Respondents' Reproductive Health

Health Reproduction	f	%
Cervical cancer		
Critical	11	23,9
Currently	17	36,9
Light	18	39,2
Total	46	100

Source: Medical record data from the Cileles District Health Center

Based on table 3.2, it can be seen that the majority suffer from mild cervical cancer as many as 18 people (39.2%) and 17 people (36.9%) suffer from cervical cancer while a minority of 11 people (23.9%) suffer from severe cervical cancer.

3.2 Bivariate Analysis

3.2.1 Age factor impact of early marriage on Reproductive Health

Table 3.3. Age factor impact of early marriage on reproductive health

	N	Mean	St. Dev	P Value
Age	46			
Health		1,84	2,00	0,00
Reproduction	46			

Based on table 3.3 it can be seen that based on the results of the Paired Sample t Test correlation test, a p-value of 0.00 is obtained. Because the p value is 0.00 ($p < 0.05$), the hypothesis in this study is that the age factor impacts early marriage on reproductive health.

3.2.2 Educational Level Factors Impact of Early Marriage on Reproductive Health

Table 3.4. Educational Factors Impact of Early Marriage on Reproductive Health

	N	Mean	St. Dev	P Value
Education	4			
Health	6	0,15	16,73	0,00
Reproduction	4			
	6			

Based on table 3.4 it can be seen that based on the results of the Paired Sample t Test correlation test, a p-value of 0.00 is obtained. Because the p value is 0.00 ($p < 0.05$), the hypothesis in this study reads that the level of education factor impacts early marriage on reproductive health.

3.2.3 Occupational Factors The Impact of Early Marriage on Reproductive Health

Table 3.5. Occupational Factors Impact of Early Marriage on Reproductive Health

	N	Mean	St. Dev	P Value
Job	46			
Health		0,168	18,26	0,00
Reproduction	46			

Based on table 3.5 it can be seen that based on the results of the Paired Sample t Test correlation test, a p-value of 0.00 is obtained. Because the p value is 0.00 ($p < 0.05$), the hypothesis in this study reads that work factors impact early marriage on reproductive health.

3.2.4 Parity Factors Impact of Early Marriage on Reproductive Health

Table 3.6. Parity Factor Impact of Early Marriage on Reproductive Health

	N	Mean	St. Dev	P Value
Parity	46			
Health		0,180	19,482	0,00
Reproduction	46			

Based on table 3.6 it can be seen that based on the results of the Paired Samples t Test correlation test, a p-value of 0.00 is obtained. Because the p value is 0.00 ($p < 0.05$), the hypothesis in this study reads that parity is the impact of early marriage on reproductive health.

Discussion

4.1 Educational Level Factors Impact of Early Marriage on Reproductive Health in Cileles District

Based on table 3.1, it can be seen that the majority of the respondents' education level was elementary school, with a total of 56.5%, and junior high school with a total of 32.6% and a minority of high school students with a total of 10.9%. Based on table 3.4 it can be seen that based on the results of the Paired Sample t Test correlation test, a p-value of 0.00 is obtained. Because the p value is 0.00 ($p < 0.05$), the hypothesis in this study reads that the level of education factor impacts early marriage on reproductive health. The results of this study were strengthened by Saipul's research, 2011, in Sekarayu, 2021 that young

marriage is also influenced by the level of education of the community as a whole. Some people with low levels of education tend to marry off their children at a young age. Based on research conducted in Gejugjati and Lekok Districts, Pasuruan Regency, as many as 35% of couples who married underage were influenced by educational factors. Sekarayu (2021) also strengthens this research with the results of research that education is one of the factors that causes early marriage, namely youth education and parental education.

4.2 Occupational Factors impact of Early Marriage on Reproductive Health

Based on table 3.1, it can be seen that the majority of the respondents' jobs are housewives, who account for 89.1%, and the minority are traders, who account for 10.1%. Based on table 5.5 it can be seen that based on the results of the Paired Samples t Test correlation test, a p-value of 0.00 is obtained. Because the p value is 0.00 ($p < 0.05$), there is a significant impact of early marriage on reproductive health. Because the majority of respondents are housewives who only rely on their husband's income, the family's economy is automatically very low. Coupled with the age of this husband and wife are still very young. This is reinforced by research conducted by UNICEF & UNFPA (2018) which states that poverty is one of the factors that has a major influence on encouraging early marriage because in some areas, such as in Indonesia, women are still often given as an economic burden to the family. Parents who use economic welfare as an excuse to marry their children early, have the notion that giving up their daughters in marriage can ease the needs of life for the parents. Then, household expenses and income are also indicators of the level of welfare for a family. Islamiawati (2017) adds by stating that there are impacts of early marriage on the reproductive health of young women, namely economic factors, self-will and factors of pregnancy out of wedlock, during pregnancy hyperemesis and anemia occur, the condition of the child at birth occurs with LBW and does not get exclusive breastfeeding.

Lezi Yovita Sari, Desi Aulia Umami, and Darmawansyah (2020) also strengthened the results of this study stating that the causes of marriage incidents in Ilir Talo District, Seluma Regency, Bengkulu Province, namely pregnancy out of wedlock, premarital sex, self-will, economy, peers and culture of harmony developing in the area, the impact caused by the occurrence of anemia, narrow pelvis, LBW, hypertension, and other impacts caused by the occurrence of domestic violence (domestic violence). Based on the research, it can be concluded that the incidence of early marriage has an impact on women's reproductive health. The researcher's assumption states that the biggest impact of early marriage on reproductive health in Cileles District is the level of education where many young women and men do not continue their education because after puberty most of them experience promiscuity and get pregnant out of wedlock. And because they dropped out of school and had to support their families, there was a family economy that was completely deficient. Due to lack of knowledge and economy, they never pay attention to the reproductive health of both wives and husbands. So knowledge is the most important factor so as to know the importance of reproductive health.

IV. CONCLUSION

This research was conducted to analyze the impact of early marriage on reproductive health in Cileles District.

Based on the results of the study, it can be concluded as follows:

1. The majority of the respondents' education level is elementary school with a total of 56.5%, and junior high school with a total of 32.6% and a minority of senior high school with a total of 10.9%. And the majority of the respondents' jobs are housewives with a total of 89.1% and a minority of traders with a total of 10.1%.

2. Based on table 5.5 it can be seen that based on the results of the correlation test of the Paired Sample t Test, a p-value of 0.00 is obtained. Because the p value is 0.00 ($p < 0.05$), there is a significant impact of early marriage on reproductive health

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