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Article

Readiness For Behavioral Change to Prevent Child Marriage Based on Individual Characteristics and Adolescent Antecedent Factors

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Abstract: Child marriage cases place Indonesia in the seventh highest ranking in the world and are ranked second in ASEAN. Child marriage can have negative impacts both mentally and physically. Women's reproductive organs that are not ready to accept pregnancy make early marriage disrupt the reproductive health system so that it can cause various complications, especially in women. This research aims to analyze the readiness for behavioural changes in preventing child marriage based on individual characteristics and adolescent antecedents. This type of research is quantitative descriptive research with a Cross-sectional study approach. This study involved 160 teenagers aged <19 years. Individual characteristic variables, namely gender, are related to readiness for behavioural changes in preventing child marriage. Antecedent variables, namely Reproductive Health Knowledge, Parental Support and Motivation, are related to preparedness for behavioural changes in preventing child marriage. The readiness of teenagers to be able to make behavioural changes in preventing child marriage is related to individual characteristics and adolescent antecedents.

Keywords: Adolescents, Child Marriage, Risk Factors, Prevention.

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1. Introduction

Child marriage is a social problem that should be a concern for authorities. This is because the marriage happened on children below the adult age. Globally, child marriage is showing decline in numerous countries. In 2018, 1 of 9 children in Indonesia are married [1]. Child marriage cases place Indonesia in the seventh highest ranking in the world and are ranked second in ASEAN [2]. Child marriage in Indonesia belongs to the eighth place in the world and second in ASEAN with a total nearly one and half million cases [3]. The data from Women empowerment, Child Protection, and Family Planning (DP3AKB) of Jember Regency in 2023 mentioned that there were 1362 child marriages. However, these are not valid number since there are so many other unregistered child marriages including the secret marriage [4].

Child marriage could bring negative impacts both mentally and physically. Women's reproductive organs that have not yet ready to receive pregnancy concludes that early marriage has an impact in disrupting the reproductive organs and could cause complication, especially on women [5]. Beside the health impact on girls, child marriage in Indonesia is also cause by several factors such as the traditional mindset of the public where they adhere to a tradition and stigmatize any women who has enter the adolescent phase and does not marry as an 'old maid'. The next factor is deviant behavior of the teenagers that causes them experiencing pre-marital pregnancy. The less prosperous economic condition of the family also becomes a factor of child marriage[6].

Numerous health problems are commonly faced at adolescent phase, including the risky sexual behavior. According to the data from World Health Organization (WHO) in the third world countries, 40% of the 18-year-old teenagers have experienced sexual intercourse, where most of them are doing a deviant behavior because of curiosity or friend's invitation [7]. Around 17% of the teenagers with sexual intercourse experience had done it with more than 1 partner, meanwhile 62% respondents did not use condoms during intercourse. The teenagers with sexual intercourse experience explained that they had never got adequate information regarding reproductive organs health[8]. It is necessary to provide both formal and non-formal education regarding reproductive organs and sexual health for teenagers [8]. Premarital sex knowledge is an effort to prevent sexual deviation on teenagers. The health education shall be comprehensive, not only limited to increase the knowledge but also the teenager's skill in terms of self-control and decision making[9].

This research aims to analyze the readiness for behavioral change in preventing child marriage based on teenager's individual characteristics and antecedent. Antecedent as environmental phenomenon that triggers behavior is essential in nurturing and directing individual behavior. The antecedent factors that are reviewed in this research are reproductive organs health knowledge, teenager's social environment, parents' support, and motivation.

2. Materials and Methods

2.1 Design

This is quantitative descriptive research with cross-sectional study approach. This research is conducted for 6 months in 2024. The data used was collected from Junior and Senior Highschool and public places in Jember Regency where teenagers are commonly hanging out together at.

2.2 Participants and procedure

This research analyzes the readiness for behavioral change in preventing child marriage based on teenager's individual characteristics and antecedent. The research population was the whole teenagers in Jember Regency. The sample were some teenagers below 19 years old in Jember Regency. The size of sample was determined by the sample adequacy to analyze and as well as considering the 'rule of thumbs' in the Structural Equation Modeling. 160 teenagers below 19 years old were taken as Purposive sample. Data processing is done analytically to find the relationship using the spearman rank test.

2.3 Assessment

The research assessed data retrieval by filling out a questionnaire to determine the teenager's characteristics such as age, gender, last education. For the antecedent factors, this research observed their knowledge on reproductive health, social environment, parents' support, and motivation. Knowledge on reproductive health was measured through questionnaire by choosing the right answer. Teenager's social environment, parents' support, and motivation were measured based on their perception by choosing the answer that describe themselves accurately by marking strongly agree, agree or disagree.

Before answering the questionnaire, participants explained to the patients concerning the study objectives and data collection method, followed by the signing of informed consent by the respondents.

2.4 Ethics approval

The study protocol was approved by the Ethics Committee at the Politeknik Negeri Jember (Reference Number: 1085/PL17.4/PG/2024). All respondents were asked to provide written informed consent. They can resign at any time without affecting their current treatment.

3. Results and Discussion

The research respondents' characteristics description was obtained from analyzing the data that has been collected from 160 teenagers in Jember Regency. Data was taken at school where it became a hotspot for teenagers' gathering by spreading the questionnaire. The data was taken by an enumerator which was a student of health promotion study program that has been trained to have the same perception in interpreting the questionnaire..

The collected and analyzed data were presented in a table. Table 1 showed the correlation of teenagers' characteristics on the behavioral change readiness to prevent child marriage cases. The teenager's characteristics that were observed in this research were age, last education, residence, and gender. Teenager's gender has a significant correlation with the readiness for behavioral change in preventing child marriage where the p value was 0,041 with correlation coefficient value of 0,162 which indicates a very weak correlation. Early age marriage causes girls losing their access to higher education. 85% of girls in Indonesia ended their education after deciding to get married. This causes them having lack of opportunity to get a proper job in the future [10]. Meanwhile, the society are still arguing that women does not need higher education since they will end up only becoming a housewife and doing chores once they get married [11].

Other researches also mentioned that 44% of girls that practicing child marriage were experiencing domestic violence with high frequency rate. The rest 56% were experiencing low frequency domestic violence. Beside the high rate of domestic violence, child marriage also has an impact on the reproductive organs health. Girls aged between 10-14 years old are five times more likely to die during pregnancy or childbirth[12]. This showed that child marriage put women at risk for their reproductive and sexual health.

Table 1. The Correlation of Teenager Respondents'	Characteristics and the Readiness for Behavioral
Change to Prevent Child Marriage	

No	Variable Characteristics	The Readiness for Behavioral Change to Prevent Child Marriage			Total	p correlation
		Not Capable	Quite Capable	Very Capable	_	
1	Age	-	-	100		
	a. 12-14 y.o.	1 (5,6%)	3 (16,7%)	14 (77,8%)	18 (100%)	0,6
	b. 15-17 y.o.	-	13 (11%)	105 (89%)	118 (100%)	
	c. 17-19 y.o.	1 (4,2 %)	5 (20,8%)	18 (75%)	24 (100%)	
2	Education					
	a. Primary	-	1 (100%)	-	1 (100%)	0,46
	b. Junior High	1 (3%)	4 (12,1%)	28 (84,8%)	33 (100%)	
	c. Senior High	1 (0,8%)	16 (12,7%)	109 (86,5%)	126 (100%)	
3	Residence					
	a. City	1 (1,9%)	4 (9,6%)	46 (88,5%)	52 (100%)	0,5
	b. Village	1 (0,9%)	16 (14,8%)	91 (84,3%)	108 (100%)	
4	Gender					
	a. Male	2 (3%)	12 (17,9%)	53 (79,1%)	67 (100%)	0,041
	b. Female	-	9 (9,7%)	84 (90,3%)	93 (100%)	(0,162)

Table 2 showed the correlation of teenagers' antecedent with the readiness for behavioral change to prevent child marriage. Antecedent factor, an environmental phenomenon that triggers behavior, is essential in nurturing and directing individual behavior. Antecedent includes regulation, procedure, tools, knowledge, and training. Antecedent is affected by values, attitude, or individual awareness[13]. The antecedent factors observed in this research were teenagers' reproductive health knowledge, teenagers' perception concerning teenagers' social environment, teenagers' perception concerning parental support to prevent child marriage, and teenagers' motivation to prevent child marriage

Table 2. The Correlation of Teenagers' Antecedent Factors on the Readiness for Behavioral Change to Prevent Child Marriage

No	Antecedent Factor	The Readiness for Behavioral Change to Prevent Child Marriage			Total	p correlation
		Poor Capable	Quite Capable	Very Capable	_	
1	Reproductive Health Knowledge	-		-		
	a. Less	1 (7,7%)	5(38,5%)	7 (53,8%)	13 (100%)	0,000
	b. Fair	1 (2,9%)	10 (28,6%)	24 (68,6%)	35 (100%)	(0,407)
	c. Good	-	6 (5,4%)	106 (94,6%)	112 (100%)	
2	Teenagers' Social					
	Environment					
	a. Less	-	-	-	-	0,105
	b. Fair	-	2 (40%)	3 (60%)	5 (100%)	
	c. Good	2 (1,3%)	19 (12,3%)	134 (86,5%)	155(100%)	
3	Parental Support					
	a. Less	-	-	-	-	
	b. Fair	-	9 (25,7%)	26 (74,3%)	35 (100%)	0,036
	c. Good	2 (1,6%)	12 (9,^%)	111 (88,8%)	125 (100%)	(0,16)
4	Motivation					
	a. Less	-	-	-		0,026
	b. Fair	-	6 (31,6%)	13 (68,4%)	19 (100%)	(0,17)
	c. Good	2 (1,4%)	21 (13,1%)	124 (87,9%)	141 (100%)	,

Reproductive health knowledge antecedent has a significant correlation with the readiness for behavioral change to prevent child marriage where the p value was 0,000 and the correlation coefficient was 0,407 which indicates an adequate correlation. Other researches stated that teenagers with less knowledge on reproductive health were 10.54 times more likely to practice child marriage compared to those have adequate knowledge on child marriage [14]. Other results also stated that there was a meaningful correlation between teenagers with less knowledge on child marriage to practice child marriage itself compared to those having adequate knowledge[15]. Another research stated that the teenagers' level of reproductive health knowledge had a significant correlation with premarital sexual behavior[16].

Another antecedent factor, teenagers' perception concerning parental support to prevent child marriage had a significant correlation with the readiness for behavioral change to prevent child marriage where the p value was 0,036 and the correlation coefficient was 0,16 that indicates a very weak correlation. Parents' presence is essential during the growth period of a child in many aspects such as physical, intellectual, emotion, moral, personality and spiritual development. Psychological attachment, physical and mental stimulation that require a big concern from the parents, and a sense of security are basic necessities that shall be fulfilled by the parents to reach an optimum growth for their children [17]. Many child marriages happened due to matchmaking or coercion from the parents since they believe that they have to make sure their children got married once they had menstruated or those children would be considered as 'old maids'[5].

Teenagers' motivation to prevent child marriage was also an antecedent factor that had significant correlation with the readiness for behavioral change to prevent child marriage where the p value was 0,026 and coefficient value of 0,17 which indicates a very weak correlation. Factors that affected teenagers' knowledge on reproductive health and the dangers of early marriage were parents' knowledge, peers, and self-efficacy. Teenagers with low peers' influence and high self-efficacy are better than those with high peer's influence and low self-efficacy [8]. Other research mention that there was a correlation of female teenagers' knowledge, parents' income, female teenagers' education with early marriage that indicate an impact of early marriage towards female teenagers'

pregnancy ([18]. In preventing child marriage, a good communication and open dialog between parents and teenagers is required for example by actively providing information and advice to their children concerning the negative consequences that may emerge as the result of early marriage [19].

Teenagers that have the knowledge concerning premarital sexual behavior and high self-efficacy tend to be more confident and less likely to be influenced that they will also less likely to commit premarital sexual intercourse that will cause premarital pregnancy and early marriage.

4. Conclusions

This research analyzes the readiness for behavioral change in preventing child marriage based on teenager's individual characteristics and antecedent. This study found that gender, as one of individual character variables, had a correlation on the readiness for behavioral change in preventing child marriage. The antecedent variables; Reproductive Health Knowledge, Parental Support, and Motivation had a correlation with the readiness for behavioral change in preventing child marriage. The teenagers' readiness for behavioral change in preventing child marriage was correlated with individual characteristics and antecedent.

An accurate and appropriate intervention can be provided after precisely knowing the antecedent factors and behavioral consequences. Antecedents without consequences will only create a short-term effect. It is essential to strengthen the knowledge, parental support, and motivation carried out by authorities, society, and parents as an effort to strengthen the faith to prevent child marriage.

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Conflicts of Interest: The authors declare that they have no competing interests.".

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