



The Effect of Video Media Health Education on Marriage Age Maturity Knowledge (PUP) in Adolescents

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ABSTRACT

Marriage Age Maturity is a program of National Family Planning Coordinating Agency (BKKBN), this program is expected to help adolescents protect themselves against marriage at the age of less than 19 years. The number of cases of underage marriage is due to the lack of knowledge possessed by students, there are several steps to increase students' knowledge, one of them by providing health education. The purpose of this study was to determine the effectiveness of health education video on marriage age maturity (PUP) knowledge in adolescents at SMP Negeri 4 Sanana Utara. This study used a quasi experiment with one group pre test - post test research design. Taken 30 respondents by total sampling technique. The data collection using a questionnaire sheet. Furthermore, the data that has been collected be analyzed using the Mc-Nemar statistical test with a significant level of pre-post knowledge with p-value (α 0.05). The results of the Mc-Nemar test analysis for the level of knowledge obtained a p value of 0.000 ($<\alpha= 0.05$), the results of this study indicate that H_a is accepted. The conclusion in this study, health education video are effective on marriage age maturity (PUP) knowledge in adolescents at SMP Negeri 4 Sanana Utara. The results of this study are expected to be input and development material, especially in marriage age maturity knowledge. Researchers suggest, the schools play a role in increasing students' knowledge about marriage age maturity by coordinating with BKKBN to create a Youth Information and Counseling Center (PIK-R) at school.

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1. Introduction

Early marriage is a marriage carried out by underage individuals who are immature or not emotionally and physically ready to undergo marriage. According to Law Number 16 of 2019 contains the minimum age limit for marriage for men and women is 19 years old (Adam, 2020), (Susilawati, 2022). This change was made so as not to contradict Law No. 23 of 2002 concerning child protection where a child is someone who is not yet 18 years old, including children who are still in the womb. Based on data from the United Nations Children's Fund (UNICEF) in 2020, Indonesia is ranked 4th in the world, Southeast Asia is precisely in NTB with the highest cases of Marriage Age Maturity (PUP) with a total of 25.53 million cases. Meanwhile, based on the Association of South East Nations (ASEAN), Indonesia ranks 2nd (Zuhairi Lubis, 2023). According to 2018 National Socio-Economic Data (Susenas), more than one million women experienced their first marriage before the age of 18 (1.2

million people). A total of 61.3 thousand women have been married before the age of 15. Based on data from the Central Statistics Agency (BPS) in 2022, North Maluku is ranked 4th in cases of early marriage with a total of 12.25% data (BPS, 2022) (MONALISYA, Damarini, Rachmawati, Hartini, & Andriani, 2021).

Many teenagers today still lack understanding of the PUP Program, starting from the actions taken, their goals, benefits, and other aspects. Therefore, to plan a wedding, postpone pregnancy, as well as understand the productive period in marriage and pregnancy, it is important for adolescents to understand the PUP Program. It is hoped that the PUP Program can help adolescents in protecting themselves against marriage at the age of less than 19 years old (Zuhairi Lubis, 2023). Marriage Age Maturity (PUP) is a program from BKKBN (Nizwa, 2023). PUP is a form of violence against children, children who are forced to marry or due to certain conditions must marry under the age of 19 will have greater vulnerability both in terms of access to education, health quality, the potential to experience violence and living in poverty (BPS, 2020). The negative impact caused by early marriage is, for couples who marry at a young age will lose their adolescence, in terms of health, especially in women are very at risk of getting pregnant at a young age, affecting the high mortality rate of mothers and babies and the consequences of early marriage have to sacrifice education, mental and spiritual aspects of young couples are not ready to be morally responsible (Fauziatuh, 2019) (Wulandari et al., 2021).

Due to the lack of knowledge possessed by students, there are several steps that can be taken to increase students' knowledge, namely by providing health education, reading books or magazines, increasing relationships, and attending seminars. Health education can be carried out by several methods, namely using audio, visual media or a combination of both audiovisual media including video. Using video media is believed to have advantages compared to other media, namely it can be accessed by many people through social media platforms, a simple and fun learning medium and helps students understand lesson concepts (Johari, 2020). Identified knowledge about marital maturity (PUP) before being given video media health education at SMP Negeri 4 Sanana Utara. was identified knowledge about marital maturity (PUP) after being given video media health education at SMP Negeri 4 Sanana Utara. The influence of video media health education on the knowledge of maturing age (PUP) in adolescents at SMP Negeri 4 Sanana Utara.

2. Methods

This study uses a research design *Quasi Experiment One Group Pre Test – Post Test* That is the type of research that has a pre-test before being given treatment and a post-test after being given treatment. The population in this study is 30 students of junior high school class IX, the sample to be used in this study is 30 samples with inclusion criteria, grade IX students, willing to be respondents, students who can communicate well. The research instruments used in this study are extension event units, video media and questionnaires. The analysis used in this study is a static test *Mc Nemar*. There are several research ethics *Informed consent* It is a consent sheet that will be researched so that the subject understands the purpose and objectives of the research. If the respondent is not willing, the researcher must respect the respondent's rights, *anonymity* (anonymous) It is highly recommended that researchers respect the privacy of respondents, so that respondents' names will not be published when they participate in the study. *Confidentiality* (Confidentiality) A lot of information from a group of data is presented or reported as a result of the study, while guaranteeing that the confidentiality of the respondents is maintained.

3. Results and Discussion

Bajo Islamic Junior High School was established in 2003, with a school establishment permit Number: 54/BAP-SIM /KPTS/X/2012, TGL. FEBRUARY 11, 2023. At first, it only borrowed a room from SD Inpres Bajo, then in the 2004/2005 school year, the Education and Tourism Office of Sula Islands Regency provided assistance for the construction of 2 Learning Group Rooms (RKB), but with the help of

school residents, it could be 3 Learning Group Rooms. And thank God, now there is a permanent building with 6 (six) study group rooms (RKB). In 2011 the school was then donated to the local government under the name SMP Negeri 4 Sanana Utara. SMP Negeri 4 Sanana Utara quantitatively and qualitatively has experienced an increase from the increasing number of graduates at the beginning of the first year of 2006. a total of 7 (seven) students until 2024 totaling 33 (thirty-three) students and facilities. infrastructure is increasing, educators and education personnel are increasing. The school profile is as follows:

3.1 Research Results

a. Distribution of Respondents By Gender and Age

Table 1.

Of frequency distribution of respondents based on the age of students at SMP Negeri 4 Sanana Utara (n=30)

Characteristic	Number of Respondents	
	Frequency (n)	Percent (%)
Gender		
Man	16	53,3
Woman	14	46,7
Age		
14-15 years	30	100,0
Total	30	100

Source: Primary data

Based on the table above, it shows that the frequency distribution of respondents based on the age of 14-15 years is 30 respondents. Meanwhile, based on gender, out of 30 respondents, the highest gender results were male, 16 respondents with a percentage (53.3%), while the least were female, 14 respondents with a percentage (46.7%).

b. Univariate Analysis

Table 2.

Of Frequency Distribution of Respondents Based on Students' Knowledge Before Being Given Health Education Video Media on Marriage Age Maturation at SMP Negeri 4 Sanana Utara (n=30)

Before being given health education	Number of Respondents	
	Frequency (n)	Percentage(%)
Good	7	23.3
Not Good	23	76.7
Total	30	100.0

Source: Primary Data 2024

Based on the table above, it was obtained from the results of the respondents' knowledge before being given video media health education about PUP with a poor category as many as 23 respondents with a percentage (76.7%), while the good category was 7 respondents with a percentage (23.7%) of 30 respondents.

Table 3.

Of Frequency Distribution of Respondents Based on Students' Knowledge After Being Given Health Education Video Media on Marriage Age Maturation at SMP Negeri 4 Sanana Utara (n=30)

Knowledge After Being Given by the Health Minister	Number of Respondents	
	Frequency (n)	Percentage(%)
Good	27	90.0
Not Good	3	10.0
Total	30	100.0

Source: Primary data 2024

Based on the table above, it was obtained from the results of the respondents' knowledge after being given video media health education about PUP with a good category as many as 27 respondents with a percentage score (90.0) while in the poor category 3 respondents had a percentage value (10.0%) out of 30 respondents.

c. Bivariate Analysis

Table 4.
of Results of Analysis of the Influence of Video Media Health Education on Knowledge of Marriage Age Maturity (PUP) in Adolescents at SMP Negeri 4 Sanana Utara (n=30).

Knowledge before the health care	Knowledge after health care				Total		P Value
	Good		Not Good		f	%	
	F	%	f	%			
Good	7	23.3	0	0	7	23.3	0.000
Not Good	20	66.7	3	10.0	23	76.7	
Total	27	90.0	3	10.0	30	100.0	

Source: Uji Mc Nemar

Based on the table above, it was obtained before and after providing health education, video media showed an influence on knowledge of marital maturity (PUP). The results of the *Mc Nemar* test showed that before being given health education, as many as 7 respondents had good knowledge and after being given health education, their knowledge remained good. The number of respondents who had poor knowledge before being given health education and became good after being given health education was 20 respondents, the number of respondents who had good knowledge before being given health education and after being given poor health education did not exist. Then the number of respondents whose knowledge was not good before being given health education and remained poor after being given health education was 3 people. The results of the *Mc Nemar* test obtained that $p=0.000$ is smaller than $p(\alpha < 0.05)$ which means that H_a is accepted as having an effect of video media health education on the knowledge of marital age maturity (PUP) in adolescents at SMP Negeri 4 Sanna Utara.

3.2 Discussion

This research is entitled "The Effect of Video Media Health Education on Marriage Age Maturity Knowledge (PUP) in Adolescents at SMP Negeri 4 Sanana Utara" which was carried out on July 16, 2024. This study aims to find out whether there is an effect of video media health education on the knowledge of marital maturity (PUP) in adolescents at SMP Negeri 4 Sanana Utara. The sampling technique in this study uses a total sampling with a sample of 30 respondents. This study uses a *quasi-experiment one group pre test – post test* research design where this study only uses one group of subjects that are randomly selected and no tests are carried out before being given treatment. Measurements were carried out before and after the treatment was given.

Based on the frequency of the respondents in this study, the age and gender of the respondents were the respondents. The first characteristic in this study is that the age of all respondents is 14-15 years old. In this study, all respondents were in middle adolescence. Adolescence is a transitional period between childhood and adulthood, where rapid growth occurs. The development of secondary sexual characteristics, the maturation of abilities, as well as psychological and cognitive changes. In adolescence, a person is not yet fully able to control and use his mental physical abilities optimally (Setyaningrum & Aziz 2014).

The second characteristic of the respondents, namely gender based on the frequency distribution table, more than all respondents were male, while some of the respondents were female. Women have brains that are better able to connect memories and social circumstances, which allows them to look at things from different perspectives and draw conclusions faster than men. As a result, to answer the question of maturing the age of marriage, women sometimes also involve their feelings. Unlike men, they prefer to see something clearly visible and do not have a good connection about

things that are not seen. This is in line with a study (Aisah, 2018) on "Early Marriage in Saptosari District, Gunung Kidul Regency in 2018" where adolescents aged 15-16 with a percentage of 60.9% and male sex with a percentage of 54.5% have sufficient knowledge about the maturation of marriage age.

The results of the analysis show that there is an influence of video media health education on the knowledge of marital maturity (PUP) in adolescents. After data processing was carried out by statistical test on the influence of video media health education on the knowledge of marriage age maturity in adolescents at SMP Negeri 4 Sanana Utara using the *Mc Nemar* test, the results of H_a were accepted and H_0 was rejected, thus there was an effect of video media health education on the knowledge of marriage age maturity (PUP) in adolescents at SMP Negeri 4 Sanana Utara.

The results of this study can be attributed to table 5.5 which shows almost all respondents with increased knowledge after being given health education. In this study, a small number of respondents who before being given health education had good knowledge and after being given health education, their knowledge remained good. Based on information obtained from the school that the students had participated in counseling about early marriage carried out in the village in early 2022, this caused a small number of respondents to have good knowledge about the maturation of marriage age. Then in this study there were also 3 respondents who before being given health education and after being given health education still had poor knowledge. Based on the information obtained, the student indeed has a slow grasp that causes the student to lack understanding of what is taught.

In line with research conducted (Hermawati et al., 2021), age is one of the factors that affect knowledge. Age indicates physical, mental, and social maturity, which can affect the stages in adolescent learning. The ability to grasp information is also influenced by age, which ultimately affects the level of knowledge in adolescents themselves. In addition, many factors cause adolescents' lack of knowledge about early marriage and adolescents' ignorance about the impact of early marriage. Teenagers are reluctant to find out about health problems, especially early marriage. In addition to not looking for information, teenagers who have less knowledge can be caused because the information has not been informed to teenagers so that respondents certainly do not know about early marriage.

The results of this study are also in line with research conducted by Larassati and Rumintang in 2018 involving adolescents at SMPN 1 Lingsar which found that the use of video media had an impact on knowledge with average results of pre-test (69.00) and post-test (87.38) with an average increase of 18.38%. as done by (Johari et al.2019), it was also stated that educational videos were able to increase the average knowledge from 59.47 to 78.31 points (18.84 points). The average value of this knowledge increases because approximately 75–87% of knowledge will be channeled by the sense of vision, 12% of the other senses and 13% of the sense of hearing. Instructional videos provide sound and images so that respondents can absorb the information provided by around 88% while the e-module only contains text and pictures so that respondents are only able to absorb the information provided by about 75%.

In line with the research conducted by Vivi Monalisa 2021, the results of the analysis showed that there was an effect of providing educational videos on the level of knowledge of high school adolescents about the maturation of marriage age with a *p-value* of 0.024. The provision of educational videos is able to increase adolescents' knowledge about the maturity of marriage age (Abdurakhman & Rusli, 2022).

Videos can help students understand material that is difficult for teachers to convey. Students' positive views on videos related to material understanding can be seen from their learning outcomes. The learning outcomes using videos are more effective than those who do not use videos. Effective in this case means being able to improve learning outcomes compared to learning without using videos (Yudistira & Widodo, 2018). Leaflets, posters, educational videos, power points, modules are good health promotion support media and are proven to be able to increase knowledge, regardless of the advantages and disadvantages of each of these media. In this case, the impact of health promotion by means of education does take a long time, but if this behavior is successfully adopted by the community, this will continue to be remembered and continue to be applied.

Based on the description above, the researcher assumes that if the respondents already understand the information provided, the respondent's motivation to stay away from things that refer

to early marriage will increase because one of the factors that increases a person's motivation is the level of knowledge. One form of increasing respondents' knowledge is by providing health education through video media about maturing the age of marriage (PUP).

4. Conclusion

Based on the explanation above, it was concluded that before being given video media health education about the maturation of marriage age at SMP Negeri 4 Sanana Utara, most of the knowledge was not good, after being given video media health education about the maturation of marriage age at SMP Negeri 4 Sanana Utara almost all of the knowledge was good, there was an influence of video media health education on the knowledge of maturation of marriage age (PUP) in adolescents at SMP Negeri 4 Sanana Utara. It is hoped that the school should play a role in increasing students' knowledge about maturing the age of marriage by coordinating with BKKBN to create a Center for Information and Counseling for Adolescents (PIK-R) in schools, and also with this study, it is hoped that respondents will get additional information about maturing the age of marriage

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