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ANALYSIS OF DETERMINANTS OF CHILD MARRIAGE IN TEMPE DISTRICT, WAJO REGENCYaqdwfeds

Andi Muhammad Shalihin1, Tahir Abdullah2, Apik Indarty Moedjiono3

[1,2,3,4,5,6]*Faculty of Public Health, Hasanuddin University, Makassar, Indonesia*

*Corresponding author: Andi Muhammad Shalihin Faculty of Public Health, Hasanuddin University
Tel: (+62)852-9842-8783; E-mail:andimuhammadshalihin@gmail.com

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Abstract

Background: Even though it has decreased, the number of child marriages is still relatively high in the South Sulawesi region. Specifically for the Tempe District area, there were 23 children in the period between 2022-2023.

Objective: The aims of this research are:determine the determinants of the incidence of child marriage in Tempe District, Wajo Regency.

Method: This research uses quantitative methods, with a case-control survey study design, to explore the relationship between early marriage and related risk factors. The research population includes all teenagers who entered into early marriage in Tempe District in the period 2022-2023, with a total sample of cases and controls of 60 people. Data analysis using the SPSS program, including univariate analysis to describe the frequency distribution of single variables, bivariate analysis to evaluate the relationship between independent and dependent variables, and the Chi-Square test (X2).

Results: The research results show that several factors influence the incidence of child marriage in Tempe District, Wajo Regency. Father's education does not have a significant influence, while mother's education, parental role, and partner's education have an important role. Higher education in mothers and partners tends to prevent child marriage, while positive parental roles also have a similar impact. Economic status and availability of adolescent reproductive health services have not been proven to influence the incidence of child marriage, nor has the role of peers.

Conclusion: This shows the complexity of the factors involved in the phenomenon of child marriage in the region.

Keywords: Child Marriage; The role of parents; Environment

Introduction

Child marriage is a marriage in which one or both partners are under 18 years of age (1).Legally, generally the age of marriage and legal adulthood is set at 18 years, but both may differ in various countries. The marriage age may be older or younger depending on the country (2).Even though it is set at the age of 18 (for example), traditions and culture have the possibility of bypassing applicable laws and legal jurisdictions sometimes allow it with the condition of parental permission or in special circumstances such as teenage pregnancy (3). There are several terms that are similar in use in the context of underage marriage, including child marriage, forced marriage and early marriage. The United Nations Fund for Population Activities (UNFPA) states that these terms tend to overlap rather than have different meanings(4). In Indonesia, the age limit for marriage has been regulated in applicable legal norms. The basis has been in place since 1974 through the Marriage

Law Chapter II Article 7 Paragraph 1. In 2019, the law underwent changes with the approval of Law Number 16 of 2019 which grants permission for marriage to men and women only if both have reached the age of 19 years (5). Generally, child marriage occurs among women. Therefore, most scientists mention child marriage as a problem that reflects gender inequality and slowing economic development. The United Nations (UN), which set the SDGs targets, also included child marriage in the main targets that need to be eliminated (6). Child marriage violates children's rights and causes various health problems. Especially for women, apart from mental problems, dropping out of school and career (2), Women can also experience serious effects when giving birth at an early age(7).

Child marriage is known to have a negative impact on individuals from both health and social aspects. A spatial analysis conducted by Salsavira et al. Susenas data shows that there is a negative influence of child marriage on the Human Development Index (HDI) value of a region (8). Some of the areas tested include South Sulawesi. By using GWLR modeling, it was found that there was a negative impact of early marriage on the HDI value of a region. The explanation for this can be seen in relation to several things. First, it is known that child marriage increases the chances of high-risk pregnancy which is associated with the risk of maternal and child mortality. Second, the fact that child marriage is generally followed by dropping out of school. Third, Susenas data shows the influence of child marriage on poverty levels (8). Sagalova et al. states that the sustainability of child marriage needs to be seen from two points of view, both from the demand side and the supply side (9). Some men may think that women who marry at a young age are less assertive and therefore easier to manage in the household hierarchy. The long fertile period is also a consideration. The parents of these young women will take advantage of their marital status to gain financial favors and physical protection from the men who marry their children.

What factors cause child marriage has become the focus of researchers. Among the ones most frequently raised is the educational aspect. It is assumed that the lower the level of education, the more likely a person is to have an early marriage. This generally occurs in women who do not have the ability to continue their education. Research in the Cisauk area, Tangerang shows that 80% of those who marry early have low education (10). Parental education is the dominant aspect in children's marriage. Research using a cross-sectional method in the Jambi area shows that only 4.59% of fathers graduated from high school/PT and married their children. The rest have low education or have not even received primary education. Researchers highlight the weak understanding and lack of knowledge about the concept of teenage women and the negative impact of early marriage so that parents tend to marry off their children more quickly(11). Interestingly, not only parents, researchers also show the influence of a partner's education on children's marriage. Research conducted by analyzing data from the Indonesian Family Life Survey (IFLS) in 2015 shows that the education of couples who are not in school is 13.3 times more likely to have a child marriage compared to the education of a partner at junior high school level (12).

Other factors that are also associated with the incidence of marriage are peer factors, virginity values, and the role of parents and the availability of health services(13) (14) (15) (16). Peers are considered to have an important role in

teenagers' decision making, both positive and negative regarding early marriage. During adolescence, the role of parents shifts slightly to their social friends(13). The results of research in Kerinci Regency show significant results. As many as 67.2% or more than half of child marriage perpetrators were influenced by their peers(17). Apart from that, the role of parents and the availability of health services are also thought to influence the occurrence of child marriage. The role of parents is related to their very determining position in the marriage process. Meanwhile, the availability of health services refers to the information and education received by teenagers before getting married(16)(18).

Research in Seluma Regency, Bengkulu Province shows significant results between the role of parents in the incidence of child marriage. Of the 97 respondents studied, the OR result was 4.497. The less involved parents are, the more likely it is for a man to marry as a child. This can be seen in several questions asked in the questionnaire. Parents do not give advice about getting married at an early age and do not forbid them to get married if they have not finished high school(16). In relation to adolescent health services, since 2003 the Ministry of Health has presented a strategy to overcome health problems in adolescents through the Youth Care Health Service (PKPR). In practice, this is managed by the Community Health Center targeting schools. The existence of this program and the PIK-R program influences teenagers' knowledge and attitudes(18)(19)

In 2017, the average age at first marriage in Indonesia reached 20.8 years(20).The SDKI data estimates that 17% of Indonesian women marry under the age of 18(21) with the development of business carried out in various sectors, there has been a gradual decline. However, the pandemic conditions since 2020 have actually increased the number of child marriages. The KemenPPA report in June 2020 (only 3 months after the pandemic was announced nationally) stated that 24 thousand child marriages had occurred.(8). Child marriage in South Sulawesi is said to have a significant number. Quoted from the Institute Community of Justice (ICJ) Makassar End of Year Notes in 2021, several facts about child marriage were revealed. Data in South Sulawesi shows that the percentage of marriages between children aged 20 - 24 years who were married before the age of 18 years in 2018 - 2019 according to BPS and Susenas data was 14.10% (2018), 12.11% (2019) and 11.25% in 2020. This data is above the national average, namely 11.21% (2018), 10.82% (2019) and 10.35% (2020).

Wajo Regency has been the district with the highest rate of child marriage in South Sulawesi since 2020. Data from the Ministry of Religion of Wajo Regency shows the high number of child marriage cases. In 2020, the number of minors reached 562 cases and increased in 2021 to 694 cases(22). In 2022 and 2023, there will be a significant decline with the Wajo Regent Regulation which tightens the issuance of marriage permits. Moreover, after the viral child marriage case in the district. Tempe which resulted in the Indonesian Minister of Women's Empowerment and Child Protection (PPA) visiting Sutera City directly. The number of child marriages in Wajo Regency in 2022 and 2023 will be 264 and 73 respectively. Even though it has decreased, this number is still relatively high in the South Sulawesi region. So the aim of this research is:determine the determinants of the incidence of child marriage in Tempe District, Wajo Regency.

Participants & Methods

This study uses a quantitative approach to explore the relationship between early marriage and associated risk factors. This quantitative method involves collecting and analyzing data through questionnaire instruments, which are designed to measure relevant variables. The study design used was a case-control survey, where two groups were compared: the case group (women who married at an early age) and the control group (women who did not marry at an early age). This study was retrospective, exploring risk factors that might explain the differences between the two groups. The research population included all teenagers who entered into early marriage in Tempe District in the period 2022-2023, with a total of 23 people, while the total sample of cases and controls was determined at 60 people using the fixed-sampling disease method. Data analysis in this research was carried out using the SPSS program with three types of analysis: univariate, bivariate and multivariate. Univariate analysis is used to describe the frequency distribution of a single variable and provide an overview of the research objectives. Bivariate analysis was carried out to evaluate the relationship between independent variables (for example, risk factors) and the dependent variable (early marriage) using the Chi-Square test (X2).

Invention

1. Univariate Analysis

Univariate analysis is used to analyze each variable descriptively and aims to determine the characteristics of each research variable.

a. Distribution of Respondents based on General Characteristics

Analysis of the distribution of respondents shows that the majority of case group respondents are young women (85%) aged 16-17 years (75%), with middle or high school education (30% each), and most work as housewives (65%). In contrast, the majority of control group respondents were also female (72.5%), but older (24-28 years, 47.5%), with high school (40%) and tertiary education (55%). In terms of employment, most of the control group worked as entrepreneurs (40%) and housewives (35%), with a higher variety of occupations and better education levels than the case group.

b. Distribution of Respondents based on Father's, Mother's and Partner's Education

Analysis of the distribution of respondents based on father's, mother's and partner's education showed significant differences between the case and control groups. In the case group, the majority of fathers' and mothers' education had completed elementary school (50%), with a few having attained tertiary education (10% fathers, 15% mothers), and the majority of partners' education had completed elementary school and junior high school (30% each). In contrast, in the control group, fathers' education was higher with the highest proportion at high school (30%) and college (32.5%), and mothers' education was also higher (42.5% had graduated from high school, 30% had graduated from college). Education of spouses in the control group showed a higher level of education overall, with 32.5% having completed high school and 60% having completed college.

c. Distribution of Respondents based on Economic Status

Analysis of the distribution of respondents based on economic status shows that there are significant differences between the case group and the control group. In the case group, the majority of respondents were in low economic status, with a proportion of 65% (13 out of 20 respondents), while only 35% were in high economic status. In contrast, in the control group, the majority of respondents were in high economic status, reaching 57.5% (23 out of 40 respondents), with 42.5% in low economic status. This difference indicates that economic status may play a role in the tendency to marry early. Respondents from the case group tended to come from a lower economic background, which could influence their decision to marry at an early age compared to respondents from the control group who generally came from a higher economic status.

d. Distribution of Respondents based on Availability of Health Services

Analysis of the distribution of respondents based on the availability of health services shows that in the case group, the majority of respondents (60%) reported poor health service availability, while only 40% reported good service. In contrast, in the control group, the proportion of respondents who reported the availability of good health services was higher, namely 52.5%, compared to 47.5% who reported poor services. These differences suggest that access to adequate health services may be an important factor influencing the trend of early marriage, with the case group being more likely to experience limitations in health services than the control group.

e. Distribution of Respondents based on Parental Role

Analysis of the distribution of respondents based on parental role showed significant differences between the case and control groups. In the case group, the majority of respondents (65%) reported a negative parental role, while only 35% reported a positive role. In contrast, in the control group, the majority of respondents (72.5%) reported a positive parental role, with only 27.5% reporting a negative role. These differences indicate that positive parental roles are associated with a lower likelihood of early marriage, whereas negative parental roles appear to be more common among those who marry at an early age.

f. Distribution of Respondents based on Peer Roles

Analysis of the distribution of respondents based on peer roles showed significant differences between the case and control groups. In the case group, the majority of respondents (65%) reported a poor peer role, while only 35% reported a good role. In contrast, in the control group, most respondents (55%) reported a good peer role, with 45% reporting a poor peer role. This difference indicates that a supportive social environment, which is reflected in the role of good peers, can be a protective factor against early marriage.

2. Bivariate Analysis

Table 1. The relationship between father's education and the incidence of child marriage

Father's	Child Marriage	p-	OR

Education	Case		Control		value	(95%CI)
	n	(%)	n	(%)		
Low	13	65	15	37.5	0.082	3,095 (1,010-9,485)
Tall	7	35	25	62.5		
Total	20	100	40	100		

The table above shows that respondents who had low father's education were greater in the case group (65%) than in the control group (37.5%). Chi-Square test results show that there is no significant relationship between father's education and the incidence of child marriage (p-value 0.082).

Table 2. The relationship between maternal education and the incidence of child marriage

Mother's Education	Child Marriage				p-value	OR (95%CI)
	Case		Control			
	n	(%)	n	(%)		
Low	14	70	11	27.5	0.004	6,152 (1,887-20,053)
Tall	6	30	29	72.5		
Total	20	100	40	100		

The table above shows that respondents who had low maternal education were greater in the case group (70%) than in the control group (27.5%). The results of the Chi-Square test show that there is a significant relationship between maternal education and the incidence of child marriage (p-value 0.004). The OR calculation results show that respondents with low maternal education experienced 6.152 times the incidence of child marriage compared to those with high maternal education (95% CI 1.887-20.053).

Table 3. The relationship between economic status and the incidence of child marriage

Economic Status	Child Marriage				p-value	OR (95%CI)
	Case		Control			
	N	(%)	n	(%)		
Low	13	65	17	42.5	0.171	0.398 (0.131-1.210)
Tall	7	35	23	57.5		
Total	20	100	40	100		

The table above shows that respondents who had low economic status were greater in the case group (65%) than in the control group (42.5%). Chi-Square test results show that there is no significant relationship between economic status and the incidence of child marriage (p-value 0.171).

Table 4. The relationship between the availability of reproductive health services and the incidence of child marriage

Availability of adolescent reproductive health services	Child Marriage				p-value	OR (95%CI)
	Case		Control			
	N	(%)	n	(%)		

Bad	12	60	19	47.5	0.409	1,658 (0.558-4.925)
Good	8	40	21	52.5		
Total	20	100	40	100		

The table above shows that respondents who received poor adolescent reproductive health services were greater in the case group (60%) than in the control group (47.5%). Chi-Square test results show that there is no significant relationship between adolescent reproductive health services and the incidence of child marriage (p-value 0.171). The OR calculation results show that respondents with poor reproductive health services experienced 1.105 times the incidence of child marriage compared to those with poor reproductive health services (95% CI (0.378-3.235).

Table 5. The relationship between the role of parents and the incidence of child marriage

The role of parents	Child Marriage				p-value	OR (95%CI)
	Case		Control			
	n	(%)	n	(%)		
Negative	13	65	11	27.5	0.012	4,896 (1,548-15,486)
Positive	7	35	29	72.5		
Total	20	100	40	100		

The table above shows that respondents who had a negative parental role were greater in the case group (65%) than in the control group (27.5%). The results of the Chi-Square test show that there is a significant relationship between the role of parents and the incidence of child marriage (p-value 0.012). The OR calculation results show that respondents with a negative parental role experienced child marriage 4.896 times compared to those with a positive parental role (95% CI (1.548-15.486).

Table 6. The relationship between partner education and the incidence of child marriage

Spouse Education	Child Marriage				p-value	OR (95%CI)
	Case		Control			
	n	(%)	n	(%)		
Low	13	65	3	7.5	0,000	22,905 (5,147-101,920)
Tall	7	35	37	92.5		
Total	20	100	40	100		

The table above shows that respondents who had low partner education were greater in the case group (65%) than in the control group (7.5%). The results of the Chi-Square test show that there is a significant relationship between a partner's education and the incidence of child marriage (p-value 0.004). The OR calculation results show that respondents with low partner education experienced 22.905 times the incidence of child marriage compared to those with high partner education (95% CI 5.147-101.920).

Table 7. Peer relationships with the incidence of child marriage

The Role of Peers	Child Marriage				p-value	OR (95%CI)
	Case		Control			
	N	(%)	n	(%)		
Negative	13	65	18	45	0.235	2,270 (0.748-6.888)
Positive	7	35	22	55		
Total	20	100	40	100		

The table above shows that respondents whose peer roles were negative were greater in the case group (65%) than in the control group (45%). Chi-Square test results show that there is no significant relationship between a partner's education and the incidence of child marriage (p-value 0.235).

3. Discussion

This research shows that there is no significant relationship between father's education and the incidence of child marriage (p-value 0.082). Even though there is a visible difference in the percentage of father's education between the case and control groups, the statistical results show different results. These results are in line with previous findings which state that father's education has no effect on the incidence of child marriage. On the other hand, maternal education is related to the incidence of child marriage, where respondents with low maternal education have a six times higher risk of experiencing child marriage. This finding is consistent with previous research which found that mothers with low education tend to have children who marry earlier. This difference is likely caused by the mother's greater role in making decisions regarding her child's marriage, as well as the influence of education on parents' knowledge and mindset in directing their child's future (23).

This research shows that economic status does not significantly influence the incidence of child marriage (p-value 0.082). Although there is a difference in the percentage of low economic status between the case and control groups, the statistical results do not show a significant relationship. This finding contradicts several previous studies which highlighted economic factors as the main cause of child marriage, especially in Africa and South Asia. In Indonesia, research on the islands of Bawean and Jeneponto also found a relationship between low economic status and child marriage. However, there is also research which finds that economic status has no effect on child marriage, such as in South Konawe Regency and Magelang Regency (24). One analysis is that most parents from both groups have low economic status, while some of them work as entrepreneurs. This research also shows that there is no significant relationship between the availability of adolescent reproductive health services and the incidence of child marriage (p-value 0.171). Even though the majority of respondents had received adolescent reproductive health service programs while at school, there was no significant correlation with the incidence of child marriage. This shows that lack of access to adolescent reproductive health services can affect children's level of knowledge and awareness regarding early marriage. Several previous studies also found similar results, where the level of children's knowledge was not related to the incidence of child marriage. However, there is also research that finds a relationship between children's

knowledge and child marriage (25). Therefore, health education that touches on the knowledge aspect can be an important step in efforts to prevent child marriage.

This research found a significant relationship between the role of parents and the incidence of child marriage. Previous studies from Bengkulu also found similar results, where a greater parental role tended to reduce children's chances of marrying early. Parental factors are identified as the most dominant in children's marriage decisions. In addition, this study also found that partner education had a significant relationship with the incidence of child marriage, with the risk increasing when the partner's education level was low. This finding is consistent with other research which shows that couples with low education tend to choose to marry without considering the readiness of children (26). Therefore, partner education is an important factor in efforts to prevent child marriage. This research shows that there is no significant relationship between the role of peers and the incidence of child marriage (p-value 0.235). However, this finding is different from research in Padang City which found that peers have a significant influence on the incidence of child marriage, where almost half of the respondents really trusted their peers in making the decision to marry. Another study in West Java and Bengkulu also found a significant relationship between peers and child marriage, with some children choosing to marry young because they followed in their peers' footsteps (27). However, this research shows that the role of peers is not a significant factor in children's marriage decisions.

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References

1. UNFPA (2022) *Child Marriage - Frequently Asked Questions*.
2. Gastón, C.M., Misunas, C. and Cappa, C. (2019) 'Child marriage among boys: a global overview of available data', *Vulnerable Children and Youth Studies*, 14(3), pp. 219–228. Available at: https://doi.org/10.1080/17450128.2019.1566584

3. Nour, N.M. (2009) 'Child marriage: a silent health and human rights issue.', *Reviews in obstetrics & gynecology*, 2(1), pp. 51–6. Available at: http://www.ncbi.nlm.nih.gov/pubmed/19399295%0Ahttp://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=PMC2672998.
4. United Nations (2014) *Preventing and eliminating child, early, and forced marriage*
5. Janna, M., Palutturi, S. and Syafar, M. (2021) 'Determinan Terjadinya Pernikahan Usia Dini serta Dampaknya terhadap Keluarga dan Masyarakat', *Jurnal Ilmiah Kesehatan Sandi Husada*, 10(2), pp. 519–526. Available at: https://doi.org/10.35816/jiskh.v10i2.641.
6. Batyra, E. and Maria, L. (2021) 'Trends in child marriage and new evidence on the selective impact of changes in age-at-marriage laws on early marriage', *SSM-Population Health*, 14, p. 100811. Available at: https://doi.org/10.1016/j.ssmph.2021.100811.
7. Parsons, J. *et al.* (2015) 'Economic Impacts of Child Marriage: A Review of the Literature', *Review of Faith and International Affairs*, 13(3), pp. 12–22. Available at: https://doi.org/10.1080/15570274.2015.1075757
8. Salsavira, S. *et al.* (2021) 'Spatial Analysis of Prevalence of Early Marriage and HDI in Indonesia', *Jurnal Matematika, Statistika dan Komputasi*, 18(1), pp. 31–41. Available at: https://doi.org/10.20956/j.v18i1.13975.
9. Sagala, D.L., Nyorong, M. and Marianti, E. (2022) 'Analisis Faktor yang Berpengaruh terhadap Pernikahan Dini Desa Balimbingan Kecamatan Tanah Jawa Kabupaten Simalungun', *Miracle Journal*, 2(1), pp. 101–115
10. Ayuwardany, W. and Kautsar, A. (2021) 'Faktor-Faktor Probabilitas Terjadinya Pernikahan Dini Di Indonesia', *Jurnal Keluarga Berencana*, 6(02), pp. 49–57.
11. Hardiani, H. and Junaidi, J. (2018) 'Determinants of Early Marriage and Model of Maturing Marriage Age Policy', *Innovative Issues and Approaches in Social Sciences*, 11(1). Available at: https://doi.org/10.12959/issn.1855-0541.iiass-2018-no1-art5.
12. Eny, W. and Adi, C.P. (2017) 'Determinan Pernikahan Usia Dini di Indonesia', 14(4), pp. 13–14.
13. Wijayati, N.A. (2017) 'Socioeconomic and Cultural Determinants of Early Marriage in Ngawi, East Java: Application of PRECEDE-PROCEED Model', *Journal of Health Promotion and Behavior*, 02(04), pp. 302–312. Available at: https://doi.org/10.26911/thejhpb.2016.02.04.02
14. Meriati, B.A.P. (2018) *Faktor-Faktor yang Berhubungan dengan Pernikahan Dini di Dusun I Desa Baru Kecamatan Pancur Batu Kabupaten Deli Serdang Tahun 2017*. Universitas Sumatera Utara.
15. Kumala Dewi, L.P.R. and Dartanto, T. (2019) 'Natural disasters and girls vulnerability: is child marriage a coping strategy of economic shocks in

Indonesia?', *Vulnerable Children and Youth Studies*, 14(1), pp. 24–35. Available at: https://doi.org/10.1080/17450128.2018.1546025.

16. Febriawati, H., Wati, N. and Arlina, S. (2020) 'Faktor-Faktor Yang Berhubungan Dengan Pernikahan Usia Dini Di Kecamatan Semidang Alas Maras Kabupaten Seluma', *Avicenna: Jurnal Ilmiah*, 15(1), pp. 43–53. Available at: https://doi.org/10.36085/avicenna.v15i1.758.
17. Arikhman, N., Meva Efendi, T. and Eka Putri, G. (2019) 'Faktor yang Mempengaruhi Pernikahan Usia Dini di Desa Baru Kabupaten Kerinci', *Jurnal Endurance*, 4(3), p. 470. Available at: https://doi.org/10.22216/jen.v4i3.4614
18. Wulandari, K.A., Anggraini, A.N. and Suparman, S. (2017) 'Faktor-Faktor yang Berhubungan dengan Pernikahan Dini pada Wanita', *Jurnal Ners dan Kebidanan Indonesia*, 5(1), p. 68. Available at: https://doi.org/10.21927/jnki.2017.5(1).68-75
19. Hasmi, R., A.Rizki, A. and Wardiah, H. (2020) 'Faktor yang Berhubungan dengan Pemanfaatan Pelayanan Kesehatan Peduli Remaja dI SMA Muhammadiyah 7 Makassar', *Window of Public Health Journal*, 1(2), pp. 111–120.
20. Abdul Karim, K. and Eryando, T. (2018) 'Determinants Age of Marriage in Married Women 15-24 Years Old in Indonesia 2017', *International Journal of Science and Research*, 8(7), pp. 580–584. Available at: www.ijsr.net.
21. Rumble, L. *et al.* (2018) 'An empirical exploration of female child marriage determinants in Indonesia', *BMC Public Health*, 18(1), pp. 1–13. Available at: https://doi.org/10.1186/s12889-018-5313-0.
22. Nurwahidah Mansur (2023) *Dampak Pernikahan Usia Muda pada Keharmonisan Rumah Tangga di Kabupaten Gowa (Studi Kasus Desa Bolaromang)*.
23. Ambarwati, N.A. (2019) *Determinan Pernikahan Dini di Kecamatan Pakis Kabupaten Magelang*. Universitas Muhammadiyah Magelang.
24. Azyyati, R.A., Mega, U.B. and Hamidatul, Y. (2022) 'Pengaruh Pelatihan Pra-Nikah dan Teman Sebaya terhadap Kejadian Pernikahan Dini', *Jurnal Endurance*, 6(2), pp. 221–228. Available at: https://doi.org/10.22216/jen.v6i2.116.
25. Sekar, P. *et al.* (2019) 'Hubungan Pendidikan, Budaya, Teman Sebaya dengan Pernikahan Usia Muda di Kecamatan Kandanghaur Indramayu Tahun 2018', *Jurnal Kesehatan Masyarakat*, 7(4), pp. 261–265. Available at: http://ejournal3.undip.ac.id/index.php/jkm.
26. Lestari, M.Y. and Kurniawati, H.F. (2023) 'Pengaruh Penyuluhan Terhadap Pengetahuan Remaja Tentang Pernikahan Dini di SMA Negeri 01 Kelapa Tahun 2022', *Journal of Midwifery Information (JoMI)*, pp. 351–362. Available at: https://doi.org/10.57190/jomi.v3i2.59.
27. Septiasari, Y. (2019) 'Status Ekonomi Berperan Dalam Kejadian Anemia Pada Ibu Hamil Di Puskesmas Bernung Pesawaran Economic Status Of Role In The Occurrence Of Anemia In Pregnant Women At The Bernung Pesawaran Community Health Center', *14_Jurnal Ilmiah Kesehatan*, 8(1), pp. 14–19.