



Study of Determinant Factors of Early Marriage in Adolescents in Muara Tami District, Jayapura City

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ARTICLE INFO

Keywords: Early Marriage,
Culture, Education,
Reproductive Health,
Teenagers

Received : 14, May

Revised : 28, May

Accepted: 29, June

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ABSTRACT

This qualitative case study explores the determinants and impacts of early marriage in Muara Tami District, Jayapura City. Through interviews with adolescents, parents, and stakeholders, the study finds that cultural norms, poverty, weak supervision, and low reproductive health education are key drivers. Early marriage leads to high-risk pregnancies, psychological issues, school dropouts, and economic dependence. Existing prevention efforts are present but remain reactive and suboptimal. The study highlights the need for cross-sector collaboration and community-based interventions to effectively address early marriage in the region.

INTRODUCTION

Early marriage is a social phenomenon that is still a serious concern in various regions, especially in Indonesia. Legally, early marriage is defined as a marriage that occurs before the couple reaches the minimum age stipulated by law, which is 19 years for men and women (Law Number 16 of 2019). The World Health Organization (WHO) and UNICEF also categorize early marriage as a marriage that occurs before the age of 18, which generally involves individuals who are still teenagers (WHO, 2022; UNICEF, 2023). In Indonesia, although the prevalence rate of early marriage has shown a decline, data from the Central Statistics Agency (BPS, 2022) noted that there were still 9.23% of women aged 20-24 years who married before reaching the age of 18. The factors that influence the practice of early marriage are very complex, including cultural, social, economic, and educational aspects, which interact with each other in the local context (Sari, 2020; Samnuzulsari et al., 2025).

Especially in Papua, early marriage is a more significant problem with a figure much higher than the national average, reaching 24.71% of children married before the age of 19 (Wahana Visi Indonesia, 2021). Cultural factors, such as customary norms and patriarchal values, as well as economic conditions that force families to marry off children at a young age, are the main causes of this phenomenon. In Jayapura City, early marriage is also associated with low levels of education and difficult socio-economic conditions, which are exacerbated by cases of premarital pregnancy and promiscuity among adolescents (Women's Empowerment and Child Protection Service of Jayapura City, 2023). The impact of early marriage is not only seen in social and economic aspects, but also the reproductive health of young mothers who are at risk of experiencing complications during pregnancy and childbirth, as well as psychological problems such as stress and depression (WHO, 2022; Rismawati, 2024; Yulianti, 2019).

This study aims to examine the determinant factors that encourage early marriage in Muara Tami District, Jayapura City, and its impact on the health and social conditions of adolescents. By focusing on the working area of the Koya Barat Health Center, this study is expected to provide a comprehensive picture of the interaction of cultural, social, economic, and educational factors and provide strategic recommendations for effective and sustainable early marriage prevention efforts (Sela et al., 2025).

THEORETICAL REVIEW

Concept and Definition of Early Marriage

Early marriage is defined as a marriage that occurs before an individual reaches the age of 19, as regulated in the Republic of Indonesia Law Number 16 of 2019 concerning Marriage. International organizations such as UNICEF even use the age limit of 18 as an indicator of child marriage. Globally, this practice is still a serious issue, especially in developing countries, because it has a wide impact on social, economic, and public health aspects.

Determinant Factors of Early Marriage

Local culture plays a major role in maintaining the practice of early marriage. Traditional values and customary norms often place women in a subordinate position, so that marriage is considered an obligation to maintain family honor. In some communities, early marriage is also seen as a solution to avoid shame due to pregnancy outside of marriage or behavior that is considered not in accordance with social norms. Studies in various regions in Indonesia show that the tradition of arranged marriage and social pressure from the environment strengthen the tendency to marry off children at a young age (Nasrullah et al., 2019). In addition, social norms and societal pressure are the main drivers of early marriage. The assumption that marrying young can improve the family's social status or avoid social stigma makes parents tend to marry off their children early. Weak parental supervision, promiscuity, and lack of reproductive education also increase the risk of early marriage. In addition, unequal social relations between male and female adolescents worsen the situation, where girls are often in a vulnerable position to emotional and social pressure to marry (Kemen PPPA, 2021). Moreover, difficult economic conditions often push families to marry off their children at a young age as a strategy to reduce the economic burden. Research shows that early marriage rates are higher in areas with high poverty rates. In some cases, early marriage is seen as a way out of poverty, with families hoping that their daughters will receive economic protection from more established husbands (UNFPA, 2021). In additions, education has a strong correlation with early marriage rates. Children who have access to good education tend to delay marriage because they have career aspirations and a better understanding of the risks of early marriage. Conversely, low levels of education lead to a lack of awareness of the importance of delaying marriage and its impact on reproductive health and social well-being. The lack of integration of reproductive health education into the school curriculum is also a major cause of adolescents being unprepared for the transition to adulthood (Plan International, 2020).

Impact of Early Marriage

Early marriage has a significant impact on women's reproductive health. Young women who marry and become pregnant at a young age are at higher risk of experiencing pregnancy complications, such as anemia, preeclampsia, premature birth, and low birth weight babies. In addition, physical and mental unpreparedness to take on the role of motherhood increases the risk of stress, anxiety, and postpartum depression. Children born to young mothers are also more susceptible to growth and development problems and stunting due to the mother's lack of knowledge about nutrition and child health.

Psychologically, early marriage can cause anxiety disorders, stress, and decreased self-confidence. Teenagers who marry early are often not ready to face pressure and conflict in the household, so the risk of divorce and domestic violence increases. From a social perspective, early marriage causes school dropouts, low participation in the workforce, and strengthens the cycle of poverty between generations (Noor et al, 2018 in Rismawati, 2024). According to Walgito in Syalis & Nurwati (2020), because the psychological aspect of adolescents is still too

young, early marriage in adolescents invites many unexpected problems, such as anxiety disorders and actors. Anxiety is a form of emotional reaction where when someone faces pressure or inner conflict, they can feel various emotions that are interrelated and clashing. There are several psychological signs that indicate someone is experiencing anxiety, such as feeling afraid that something bad will happen, losing self-confidence, having difficulty concentrating, wanting to avoid reality and so on. The anxiety experienced by couples who marry young is usually caused by fear of existing threats and this perception makes them feel depressed or panicked. Thus, the anxiety felt by young married couples can be interpreted as feelings full of fear and worry in dealing with various problems that arise in their household life.

Early Marriage Prevention Efforts

Various efforts have been made to reduce the number of early marriages, ranging from socialization and education in the community, integration of reproductive health education in schools, to family economic empowerment. A multi-sector approach involving the government, schools, religious leaders, and local communities is the key to the success of the intervention. However, the main challenge still lies in the strength of cultural norms and weak cross-sector coordination in the implementation of prevention policies (Kemen PPPA, 2021).

The theoretical framework used in this study places cultural, social, economic, and educational factors as the main determinants of early marriage. These four factors interact with each other and influence the decisions of families and adolescents to marry at a young age. The impact of early marriage is analyzed from health, psychological, and social aspects, as well as community perceptions of the risks posed. Effective prevention efforts require a community-based approach and cross-sector collaboration to build awareness and change community behavior.

METHODOLOGY

This research is a qualitative research with a case study approach. Qualitative research is used because it aims to deeply understand the experiences, perceptions, and social and cultural factors that underlie early marriage in the working area of the Koya Barat Health Center, Jayapura City. The social situation in this study covers all aspects of community life in the working area of the Koya Barat Health Center, Muara Tami District, Jayapura City, which are related to early marriage. This area was chosen because of the still high rate of teenage pregnancy and the increasing cases of pregnancy outside of marriage and domestic violence, which often lead to early marriage. The study will explore the social, cultural, economic, and health factors that influence the occurrence of early marriage, as well as its impact on individuals who experience it.

Informants in this study were selected by purposive sampling, namely those who have direct experience or are related to the phenomenon of early marriage in the working area of the Koya Koya Barat Health Center. Informants to be interviewed include adolescents who are married early, parents or families of adolescents who are married early, health workers at the Koya Health Center (midwives, doctors, health promotion workers), community leaders and

religious leaders, and representatives of the Women's Empowerment and Child Protection Service (DP3A) of Jayapura City.

This study uses qualitative data, obtained through in-depth interviews, observations, and document studies. Qualitative data were selected to deeply understand the social, economic, cultural, and health factors that contribute to early marriage in Muara Tami District, Jayapura City.

Primary Data Sources come from the results of interviews, observations, and documentation. While Secondary Data sources come from documents from related agencies (Women's Empowerment and Child Protection Service, Health Service, Koya Barat Health Center Report, Government Regulations and policies, and related research literature.

Data analysis techniques are carried out qualitatively with a thematic analysis approach. First, by reducing data, selecting data that is relevant to the research objectives, grouping data based on main themes, such as social, economic, cultural, and health actors related to early marriage, and eliminating data that is not relevant or does not support the research analysis. Second, the data is presented in the form of descriptive narratives to describe the phenomenon of early marriage based on findings in the field. The data validity checking technique uses triangulation techniques, data from various sources and methods to increase the validity of the findings.

RESEARCH RESULTS

The results of this study revealed that the practice of early marriage in the Koya Barat Health Center work area is greatly influenced by various interrelated factors, ranging from culture, economy, social, to education. From a cultural aspect, it was found that traditional values adopted by several ethnic groups such as Bugis, Makassar, and Java still strongly influence the decision to marry young. Early marriage is often considered a normal social norm and even a solution to maintain family honor, especially when pregnancy occurs outside of marriage. This cultural pressure is reinforced by weak family supervision and the role of parents who tend to relinquish supervision responsibilities to schools or the surrounding environment. In addition, the development of technology and social media has also changed the behavior of adolescents, expanding the influence of external cultures that sometimes conflict with local norms, thus accelerating the occurrence of early marriage.

From an economic perspective, poverty is a dominant factor driving early marriage. Many low-income families see marriage as a way out to reduce their economic burden. Young women who marry early are usually immediately involved in earning a living, without adequate mental or physical preparation. This phenomenon is exacerbated by the lack of social sanctions in the community against early marriage, so that this practice is socially accepted as part of a survival strategy. Difficult social conditions and limited employment opportunities also strengthen the decision to marry young as a practical solution to deal with family economic pressures.

Social factors also play an important role in the practice of early marriage. Weak parental and family supervision of adolescent activities opens up

opportunities for uncontrolled promiscuity. Peer pressure and unequal social relations between men and women make adolescent girls vulnerable to coercion in sexual relations and ultimately early marriage. The lack of access to information and education on reproductive health further exacerbates this situation, because adolescents do not understand the risks of pregnancy and marriage at a young age. In addition, social norms that normalize early marriage without any cultural or religious sanctions make this practice continue in society.

Low levels of formal education are a crucial factor that reinforces the cycle of early marriage. Many teenage girls drop out of school due to early pregnancy and lack the motivation to continue their education after marriage. The lack of reproductive health education in schools and the minimal integration of adolescent health programs into the curriculum mean that adolescents do not gain sufficient knowledge about the risks of early marriage and reproductive health. Limited cooperation between the education and health sectors is also an obstacle in delivering effective education to adolescents.

The impact of early marriage on maternal and child health in this region is significant. Young women who marry and become pregnant at a young age face the risk of pregnancy complications such as anemia, premature birth, and low birth weight babies. In addition, mental and physical unpreparedness causes stress, anxiety, and increased risk of domestic violence. Weak economic conditions and low health literacy also have an impact on the lack of fulfillment of children's nutrition and immunization, which has the potential to hinder their growth and development. The double burden of being a housewife and breadwinner without adequate support worsens the health and well-being of young mothers and their children.

Public perception of early marriage in Muara Tami District still tends to be permissive. Many families and teenagers consider early marriage as a common thing and a social solution to overcome pregnancy outside marriage or avoid promiscuity. Understanding of the social and health risks that accompany early marriage is still very limited, especially among teenagers and families with low levels of education. Although there is growing awareness from community leaders and related agencies, the transformation of public perception in general still requires a more intensive and systematic approach.

Various prevention efforts have been carried out by local governments, schools, religious leaders, and health facilities, such as outreach, counseling, youth posyandu programs, and moral and spiritual development. However, most programs are still reactive and sectoral, unable to target the root of the problem comprehensively. Limited cross-sector coordination and the lack of partnerships between educational and health institutions are major obstacles in implementing prevention programs. Therefore, a multi-sector and community-based approach involving families, schools, religious leaders, and the government is needed to reduce the number of early marriages effectively and sustainably.

DISCUSSION

The practice of early marriage in the Koya Barat Health Center working area is significantly influenced by cultural values that are still strongly held by

the community. The results of the study showed that early marriage is often considered a legitimate way out according to custom when teenage girls experience pregnancy outside of marriage. In addition, the assumption that marrying at a young age is part of family tradition or cultural fairness also strengthens the decision to marry off children. The concept of family honor is the main motivation, where maintaining the image and dignity of the family is prioritized over considering the long-term impact on the child's life.

This finding is in line with recent research by Lazuardi (2024) which shows that in some Indonesian communities, especially in areas dominated by patriarchal values, early marriage is still tolerated as a form of solving social problems. The study also revealed that local customary values and traditions are dominant factors in marriage decision-making, overriding considerations of adolescent education and health. Social norms that support this practice continue to be reproduced through families and communities, making it a practice that persists amidst various government and social institution intervention efforts.

Scientifically, this phenomenon can be explained through the structural functionalism theory approach proposed by Talcott Parsons. In this perspective, culture functions as a mechanism to maintain social stability. When deviations occur, such as out-of-wedlock pregnancy, society responds in a way that is considered capable of restoring social order – in this case through early marriage. Culture also forms a collective framework of thought about honor and gender roles, where women are seen as guardians of family morality. Therefore, early marriage becomes a symbol of saving values and honor, even though this is contrary to children's rights and the principles of adolescent health development.

The results of the study indicate that economic factors are one of the main determinants in encouraging early marriage practices in the Koya Barat Health Center work area. Poverty conditions, low family income, and limited access to education and employment, indirectly encourage families and young women to see marriage as a solution to economic pressure. Some families with low income levels choose to marry off their daughters early to reduce the economic burden on the household.

Teenagers who marry early generally have to immediately play a dual role: as a wife, mother, and breadwinner. This shows how economic pressures ignore the psychological and social transition process towards adulthood, forcing teenagers to enter the informal workforce without adequate legal and social protection. In communities with weak economic backgrounds, the norm of delaying early marriage also tends not to be enforced.

Marriage is even considered a natural event. Limited local economic structures, lack of employment opportunities, minimal skills training, and the absence of economic support for young people are also factors driving the practice of early marriage. This finding is in line with the UNICEF and BPS (2020) report which states that child marriage in Indonesia tends to be high in areas with high poverty rates and limited access to education. The report also highlights that girls in rural areas and from low-income families are three times more likely to be married before the age of 18 compared to girls from high-income families. This shows that economic pressures in households often shift social norms and shape

the view that marrying off children is a practical solution, especially when opportunities to continue education or get a job are almost non-existent. UNFPA Indonesia

This phenomenon can be explained through the Rational Choice theory, which explains that individuals or families will make decisions that are considered the most rational in limited situations. In the context of poverty, the choice to marry off children is not merely a tradition, but an adaptive strategy that arises from economic inability and inaccessibility to resources. Weak local economic structures, minimal skills training, and the lack of concrete economic interventions for adolescents and their families further strengthen this practice. Therefore, to reduce the practice of early marriage in a sustainable manner, educational interventions must be followed by economic empowerment programs that target adolescent girls and low-income families.

In addition, social dynamics also play a major role in encouraging the practice of early marriage in the Koya Barat Health Center work area. Factors such as weak parental supervision, promiscuity, inequality in social relations between male and female adolescents, and the normalization of early marriage in society, are interrelated social elements. The lack of parental involvement in the care and control of children's activities, especially female adolescents, creates a gap for the emergence of risky behavior. The decision to marry off children often arises as a response to unanticipated out-of-wedlock pregnancies due to weak supervision and lack of sexuality education.

This finding is in line with the UNFPA report (2020) which states that in areas with low social control and permissive norms towards adolescent sexuality, early marriage practices are more likely to occur. The report also explains that peer pressure, minimal literacy about reproductive health, and the absence of open communication between adolescents and adults are the main social factors that drive the decision to marry at a young age. This study confirms that unequal social relations between adolescent boys and girls also worsen the situation, where girls are often in a vulnerable position to emotional and social pressure to marry.

Scientifically, this phenomenon can be explained through Hirschi's Social Control theory, which states that when an individual's social ties to institutions such as family and school weaken, the possibility of committing deviant behavior will increase. Early marriage appears as a form of normalized deviation in the community because it is considered a social solution to unwanted pregnancies or relationships.

Connell's (2016) gender power imbalance theory asserts that male social dominance over females in adolescent relationships contributes to decision-making that is detrimental to females, including coercion in sexual relations and marriage. Therefore, preventing early marriage requires not only reproductive education, but also strengthening the role of the family, community, and transformation of social values that support equality and protection of children.

The education factor plays a very important role as a protector against early marriage practices. However, in the Koya Barat Health Center working area, the level of formal education of adolescents—especially girls—is still

relatively low. Many of them drop out of school before completing primary or secondary education. Early pregnancy is often the main reason for stopping education, where marriage is used as a form of “social resolution”. After marriage, the motivation to return to school also tends to decrease drastically. The lack of support from family or community also strengthens the cycle of low education and limited socio-economic roles of adolescent girls.

This finding is supported by the UNESCO report (2018) which states that the lack of integration of reproductive health education in the school curriculum is one of the main causes of adolescents being unprepared to face the transition to adulthood. Limited, brief, and often taboo sexuality education results in adolescents not having a deep understanding of the consequences of unsafe sexual relations. In addition, the WHO report (2021) emphasizes the importance of cross-sector collaboration—especially between schools and health services—in providing comprehensive information and assistance to adolescents. Unfortunately, coordination between schools and health centers in this region has not been effective, so that important education is not conveyed to vulnerable age groups.

Scientifically, this phenomenon can be analyzed through life course theory, which explains how the interruption of education due to pregnancy or early marriage accelerates the child's social transition to adult roles. This has a long-term impact on the quality of life of women, both in terms of economy, health, and social participation. When adolescents do not receive proper education and are not equipped with information about reproductive health, they become more vulnerable to social pressure and decisions that are detrimental to themselves. Therefore, efforts to prevent early marriage must be carried out through increasing access to quality education, integrating reproductive health materials into the curriculum, training teachers as information facilitators, and active collaboration between schools, health centers, and related agencies.

Early marriage has a significant impact on maternal and child health in the Koya Barat Health Center work area. Adolescent girls who become pregnant and give birth at a very young age face various risks of pregnancy complications such as anemia, eclampsia, premature birth, and low birth weight babies. Not only that, physical and mental unpreparedness to play the role of a mother increases the risk of stress, anxiety, and even postpartum depression. This condition is increasingly complex when adolescents have to bear the double burden of being a housewife and breadwinner, often without support from their partners, family, or the surrounding social system. In many cases, low understanding of the importance of nutrition, immunization, and parenting patterns has an impact on the quality of children's growth and development, which then worsens the cycle of vulnerability between generations.

This finding is in line with the WHO report (2022) which confirms that teenage pregnancy increases the risk of maternal death by two times compared to adult women. In addition, UNICEF (2021) noted that women who marry at an early age are more vulnerable to mental health problems, have lower levels of self-confidence, and have less access to child health services. The Indonesian

Ministry of Health (2023) also showed that children of young mothers have a higher prevalence of stunting, due to low nutritional intake, lack of education about exclusive breastfeeding, and incomplete basic immunization. This combination of biological, social, and emotional vulnerabilities makes early marriage a major risk factor for poor maternal and child health status.

Scientifically, this impact can be explained through the life course epidemiology approach, which shows that negative experiences early in reproductive life, such as early pregnancy and marriage, have long-term health consequences for both mothers and children. The physical and mental unpreparedness of adolescent girls to care for children results in suboptimal parenting, which has an impact on children's physical and psychosocial health (Rima et al., 2020). In addition, under conditions of economic pressure and gender inequality, early marriage also increases the risk of domestic violence, chronic stress, and household conflict. Therefore, interventions must be holistic: strengthening reproductive health education from an early age, improving adolescent ANC and posyandu services, providing psychosocial support for young mothers, and integrating parenting and nutrition education programs at the family and community levels.

Then, the public perception in the Koya Barat Health Center work area towards early marriage is still very permissive. Many families and teenagers view early marriage as a social solution that is considered normal, especially to resolve pregnancy outside of marriage or avoid promiscuity. This normalization is reinforced by collective social experiences and deep-rooted cultural values, so that early marriage is not seen as a problem that contains health or social risks. This view creates a social environment that is less responsive to prevention efforts, and tends to place the burden on teenagers, especially girls, to adjust to the situation of early marriage forced by circumstances.

This finding is supported by reports from UNFPA (2020) and Plan International (2021), which state that in many regions of Indonesia, people still consider early marriage as part of the social norm and a solution to prevent family disgrace. However, these studies also reveal that this perception is generally stronger in communities with low levels of education and minimal access to information. Meanwhile, awareness is starting to emerge among institutions such as schools, health centers, and religious institutions that are starting to voice the importance of reproductive health education and strengthening the role of the family. However, this shift in perception is still sectoral and has not touched the roots of the community evenly.

The low understanding of the social and health risks of early marriage can be explained through the social cognitive theory approach, which explains that individual behavior and societal perceptions are shaped by environmental observations, social norms, and social learning (Bandura, 2023). When the social environment normalizes early marriage and does not provide adequate alternative information, then public perception will tend to support the practice. Efforts to change perceptions must be directed at increasing community literacy through a community-based approach involving religious leaders, teachers, parents, and adolescents themselves. Integration of reproductive education into

the school curriculum and consistent public campaigns will accelerate the transformation of values and understanding (Ariawan et al., 2021; Nafisah et al., 2023; Sholahuddin, 2023). So that the community can actively play a role in preventing the practice of early marriage.

This study found that various efforts to prevent early marriage have been carried out by related agencies, educational institutions, religious leaders, and health service facilities in the working area of the Koya Barat Health Center, Jayapura City. However, most of the programs implemented are still responsive and have not been able to comprehensively target the root causes. Interventions from the Women's Empowerment Service are still more focused on post-pregnancy counseling, while preventive efforts such as premarital reproductive health education have not been widely integrated in the community. Churches and schools have started moral development and early detection programs, but have not been followed by active parental involvement and systemic curriculum policy support. On the other hand, health center initiatives in providing counseling are often hampered by a lack of access and partnerships with educational institutions.

This finding is in line with a study by BAPPENAS and UNICEF (2021) which highlighted that the main challenges in preventing child marriage in Indonesia are weak cross-sectoral coordination and low regional budget allocation for prevention programs. UNFPA research (2020) also emphasized that reproductive education and youth empowerment programs will only be effective if accompanied by policy support and synergy between the government, religious leaders, schools, and families. Sectoral efforts tend to be ineffective when each institution works separately without building a collaborative platform to formulate integrated strategies and interventions (Larasati et al., 2023; Suryanti & Muttaqin, 2023). Therefore, it is important for Jayapura City to develop a multi-sectoral and community-based approach so that interventions can run more comprehensively and sustainably.

Theoretically, the approach needed is a transformation from a responsive model to a promotive and preventive model based on a social ecosystem. In this context, every actor—whether government, school, family, or religious institution—has an important role in shaping adolescent perceptions and behaviors related to marriage. Strategic recommendations to reduce the number of early marriages include: the establishment of a cross-agency collaborative forum at the city level, integration of reproductive health education curriculum in schools, strengthening integrated health service posts and youth classes, increasing literacy of parents and traditional leaders, and economic empowerment and access to education for adolescent girls. Only with a systemic, participatory, and evidence-based approach can the number of early marriages in Jayapura City be reduced significantly and sustainably.

CONCLUSIONS AND RECOMMENDATIONS

Based on the results of qualitative analysis of in-depth interview data, it can be concluded that the practice of early marriage is still considered normal in some communities due to the strong influence of cultural values and customs. Some

ethnic groups view child marriage as a social norm that is passed down from generation to generation, even as a solution to maintain family honor so that there is no pregnancy outside of marriage. In addition, economic factors such as poverty and economic limitations are also the main triggers for early marriage. Families with low incomes tend to choose marriage as a way out of financial burdens, so that young women are forced to take on adult roles faster in order to help the family economy, even though they are not mentally or physically ready.

Social factors also play an important role, such as peer influence, promiscuity, and weak parental and community supervision that increase the chances of early marriage. Unequal social relations between male and female adolescents and the normalization of these practices in the environment further strengthen this tendency. Low levels of formal education and minimal access to information about reproductive health also influence the decision to marry early. The lack of integration between the education and health sectors causes adolescents to lack knowledge about the risks of child marriage.

The impact of early marriage on maternal and child health is very significant, such as increasing the risk of complications in pregnancy and childbirth at a young age, as well as limited knowledge of adolescents about reproductive health which can have long-term impacts. In addition, understanding of social and health risks is still low, especially among families with low levels of education, so that even though there is awareness of the dangers of early marriage, the perception of the wider community is still very limited. Various prevention efforts and recommendations have been made, but a more integrated strategy is needed that involves various parties in order to reduce the number of early marriages significantly and sustainably.

FURTHER STUDY

This study has several limitations that need to be considered. First, the analysis only focuses on social and economic factors that influence early marriage practices in several communities, without examining in depth the cultural factors and government policies that may play a role. In addition, the data used came from in-depth interviews with a limited number of informants, so the findings cannot be generalized to the entire population. This study also does not specifically discuss the long-term psychological impacts on adolescents who experience early marriage, and does not examine in detail the interventions that have been carried out by related parties to reduce the number of early marriages in the study area.

Based on these limitations, further research is suggested to expand the scope by involving more informants from various cultural and regional backgrounds, so that the results obtained can be more representative. Future research should also examine the role of government policies and the effectiveness of intervention programs that have been implemented in reducing the number of early marriages. In addition, it is important to examine the long-term psychological and social impacts experienced by adolescents after early marriage, in order to provide a more comprehensive picture of the consequences of early marriage. Thus, the results of the study can be a stronger basis for the

formulation of more effective and sustainable early marriage prevention policies and programs.

ACKNOWLEDGMENT

All authors would like to thank everyone involved in this research.

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