

THE EFFECT OF EDUCATIONAL VIDEOS ON CONTRACEPTIVE METHODS ON THE KNOWLEDGE OF PROSPECTIVE BRIDES REGARDING CONTRACEPTIVES METHODS AT THE OFFICE OF RELIGIOUS AFFAIRS IN KEDIRI REGENCY

Nabilla Putri Adilla¹, Desy Dwi Cahyani²,
Lumastari Ajeng Wijayanti³, Indah Rahmaningtyas⁴

¹⁻⁴ Department of Midwifery, Health Polytechnic
of the Ministry of Health Malang
correspondence e-mail : putribella1909@gmail.com



Submitted : Sept 03, 2026/ Reviewed : Sept 18, 2026 /Accepted : Sept 29, 2026

ABSTRAK

Pernikahan pada usia di bawah usia reproduksi (<20 tahun) berisiko terhadap kesehatan reproduksi akibat rendahnya pengetahuan calon pengantin tentang alat kontrasepsi, sehingga diperlukan media edukasi yang efektif seperti video. Penelitian ini bertujuan menganalisis pengaruh media video edukasi pengenalan alat kontrasepsi terhadap pengetahuan calon pengantin remaja yang menikah di bawah usia reproduksi di Kantor Urusan Agama (KUA) Kabupaten Kediri. Penelitian ini menggunakan *desain pre-experimental one group pretest-posttest* terhadap 41 calon pengantin remaja di KUA Kecamatan Ngancar, Mojo, dan Wates yang dipilih menggunakan *total sampling*. Data dikumpulkan menggunakan kuesioner pengetahuan skala *Guttman* dan dianalisis dengan uji *Paired Sample T-Test*. Hasil penelitian menunjukkan rata-rata skor pengetahuan meningkat dari 9,4634 (pre-test) menjadi 12,3415 (post-test), dengan nilai signifikansi $p = 0,000$ ($p < 0,05$), sehingga H_0 ditolak dan H_a diterima. Sebelum intervensi, sebagian besar responden berada pada kategori pengetahuan kurang (70,7%), sedangkan setelah intervensi kategori baik meningkat menjadi 31,7%. Hasil ini menunjukkan bahwa media video edukasi berpengaruh signifikan dalam meningkatkan pengetahuan calon pengantin remaja tentang alat kontrasepsi, sehingga dapat dijadikan alternatif media edukasi pranikah di Kantor Urusan Agama (KUA).

Kata Kunci : Alat Kontrasepsi; Calon Pengantin; Media Video Edukasi; Pengetahuan; Usia Reproduksi

ABSTRACT

Marriage before reaching reproductive maturity (<20 years) poses a risk to reproductive health due to the prospective spouses' limited knowledge of contraceptives; therefore, effective educational media such as videos are required. This study aims to analyse the effect of educational videos introducing contraceptive methods on the knowledge of female adolescent prospective brides marrying before reaching reproductive maturity at the Office of Religious Affairs in Kediri Regency. This study employed a pre-experimental, single-group, pre-test-post-test design involving 41 adolescent prospective brides at the Offices of Religious Affairs in the sub-districts of Ngancar, Mojo and Wates, selected using total sampling. Data were collected using a Guttman-scale knowledge questionnaire and analysed using a Paired Sample T-Test. The results showed that the average knowledge score increased from 9.4634 (pre-test) to 12.3415 (post-test), with a significance value of $p = 0.000$ ($p < 0.05$); consequently, H_0 was rejected and H_a accepted. Prior to the intervention, the majority of respondents fell into the 'poor knowledge' category (70.7%), whilst after the intervention, the proportion in the 'good' category rose to 31.7%. These results indicate that educational video media has a significant effect on improving the knowledge of teenage prospective brides regarding contraceptives, and can therefore serve as an alternative medium for premarital education at the Office of Religious Affairs.

Keywords : Contraceptives; Prospective Brides; Educational Video Media; Knowledge; Reproductive Age

Copyright © 2025 by authors. This is an open access article under the CC BY-SA
License (<https://creativecommons.org/licenses/by-sa/4.0/>)

INTRODUCTION

Marriage is the initial stage of family formation and is associated with reproductive, parenting, and generational continuity functions. The readiness of prospective brides and, particularly adolescents who marry before attaining reproductive maturity, is an important concern because it is directly related to a couple's ability to navigate married life adaptively. Knowledge of contraceptives is one aspect that determines the ability of prospective brides to plan a healthy pregnancy, particularly among those marrying before the age of 20 years and whose reproductive organs have not yet reached optimal maturity (Puspasari & Pawitaningtyas, 2020).

Marriage occurring below reproductive age, namely under 20 years, is classified as early-age marriage because, within this age range, the female reproductive organs are biologically still undergoing maturation and are therefore not fully prepared for pregnancy and childbirth (Zelharsandy, 2022). This issue has also become a global concern because it is related to the achievement of the Sustainable Development Goals (SDGs), particularly the pillars of health, gender equality, and education (UNICEF, 2025). The World Health Organization (WHO) reports that pregnancy before

reproductive maturity contributes to an increased risk of maternal and neonatal mortality in developing countries, with the risk of maternal death being twice as high in this age group as in the healthy reproductive-age group (World Health Organization, 2025).

Data from Statistics Indonesia in Indonesian Youth Statistics 2024 recorded that 21,49% of young people married at the age of 18 years or younger, while overall approximately 55,21% of young people married below the ideal age (CNBC Indonesia, 2025). Data from the United Nations Population Fund (UNFFPA) show that 121 million pregnancies each year are unintended, largely due to low literacy regarding effective contraceptive methods, including among younger age groups (United Nations Population Fund (UNFFPA), 2022). Marriage and pregnancy before reproductive maturity are also associated with an increased risk of long-term health problems, including the high national prevalence of stunting due to inadequate knowledge and nutritional caregiving practices among young mothers (Kementerian Kesehatan Republik Indonesia, 2023).

Based on data from the Ministry of Religious Affairs of Kediri Regency, the number of early-age prospective brides in Kediri Regency decreased during 2023–

2025, from 457 people in 2023 to 322 people in 2024 and 168 people in 2025. Despite this decline, adolescent prospective brides marrying below reproductive age (<20 years) are still found, particularly in Ngancar, Mojo, and Wates Subdistricts. This condition is consistent with the national trend showing a decrease in the number of couples marrying under the age of 19 years, from 8.804 couples in 2022 to 4.150 couples in 2024 (Wandi, 2025). Mukmin and Saroji (2022) found that marriage below the ideal age in Kediri Regency is influenced by family economic conditions, low educational attainment, parental encouragement, individual factors, and customs prevailing in the local community.

Marriage before reaching reproductive age carries a risk of adverse reproductive health effects because the female reproductive organs are not yet fully biologically mature, meaning that couples are not physically or psychologically prepared for married life (Sekarayu & Nurwati, 2021). Zelharsandy (2022) found that health consequences among women who marry and become pregnant before the age of 20 years include anaemia, miscarriage, pre-eclampsia, and postpartum haemorrhage, while infants are at risk of low birth weight (LBW) and preterm birth. In

addition to physical risks, age-related readiness also affects the mental and emotional preparedness of prospective brides; a survey of adolescent girls showed that marriage before the age of 20 years is associated with a tendency toward less stable psychological conditions, particularly in decision-making (Diaris, 2024). Marriage at this age may also have psychological consequences in the form of domestic violence and mental distress due to couples' lack of preparedness to face household responsibilities (Friska et al., 2025).

A study at the Office of Religious Affairs of Kapanewon Bantul showed that the majority of prospective brides had a good level of knowledge about contraceptives, accounting for 51,9%, although some prospective brides still had poor knowledge (Ma'aruf et al., 2023). This condition is of particular concern among adolescent prospective brides marrying below reproductive age because limited knowledge of contraceptives may increase the likelihood of unintended pregnancy at an age when they are not yet biologically prepared (Emmi, 2022).

Introduction to various methods, ranging from short-term methods (pills, injections, condoms) to Long-Term Contraceptive Methods (MKJP), such as the Intrauterine Device (IUD) and implants, enables prospective brides and

to exercise full autonomy in determining healthy birth spacing according to their biological condition (World Health Organization, 2025). A study conducted by Arisandi et al. (2023) showed that health education on contraception among young prospective brides plays an important role in improving couples' ability to make decisions regarding contraceptive use, allowing pregnancy to be delayed until a more reproductively mature age (above 20 years) and until reproductive readiness has been achieved. Consistent with this finding, Muzayanah and Agustina (2022) found that contraceptive education improves prospective brides knowledge of contraceptive methods and pregnancy planning and can therefore serve as a preventive effort to avoid pregnancy at a less-than-ideal age.

The Office of Religious Affairs of Ngancar and Mojo Subdistricts conducts marriage guidance on Wednesdays, while the Office of Religious Affairs of Wates Subdistrict conducts marriage guidance twice, on Tuesdays and Thursdays. Marriage guidance activities are attended by 5–15 prospective couples, with the material delivered covering harmonious family life and early marriage. All marriage guidance material is delivered directly by counsellors from the Office of Religious Affairs.

Based on the description above, a study is needed to determine the effect of educational video media introducing contraceptives on the knowledge of adolescent prospective brides marrying below reproductive age (<20 years) at the Office of Religious Affairs of Kediri Regency. The novelty of this study lies in the use of educational video media introducing contraceptives specifically focused on adolescent prospective brides who marry before reaching reproductive age, as an effort to improve knowledge from the premarital period in an area where cases of early-age marriage are still found.

METHODS

This study was a quantitative study with a pre-experimental design using a one-group pre-test–post-test conducted on 15–17 July 2026 at the Office of Religious Affairs of Ngancar, Mojo, and Wates Subdistricts, Kediri Regency. The study population and sample comprised 41 female adolescent prospective brides aged <20 years who were not pregnant, consisting of 16 respondents from the Ngancar office, 11 respondents from the Mojo office, and 14 respondents from the Wates office, using a non-probability sampling technique in the form of total sampling. The inclusion criteria were

female prospective brides aged <20 years who were not pregnant, were registered in marriage guidance, had not received formal education or in-depth counselling on contraception from healthcare workers within the previous three months, were entering their first marriage, were able to read, write, and communicate in Indonesian, and were willing to participate in the study and provide written consent. Respondents who did not attend all intervention sessions, had severe visual or hearing impairment, or did not complete the pre-test or post-test in full were excluded from the study.

Data were collected using a Guttman-scale knowledge questionnaire consisting of 20 questions regarding the definition, types, effectiveness, benefits, and side effects of contraceptives. Respondents first completed the pre-test, then received an intervention consisting of a single viewing of a 6-minute educational video introducing contraceptives, followed by a resting period of 15 minutes before completing the post-test. Questionnaire responses were scored according to favourable and unfavourable item criteria, then categorised as good knowledge (76–100%), adequate knowledge (56–75%), and poor knowledge (<56%). All 20 questionnaire items were declared valid, while the reliability test yielded a Cronbach's alpha of 0,831. Data were

processed through editing, scoring, coding, tabulating, and cleaning, then analysed univariately using frequency distributions, percentages, means, and standard deviations, and bivariate using the Paired Sample t-Test after meeting the normality assumption based on the Shapiro–Wilk test, with a significance level of $p < 0,05$. The study received ethical approval from the Health Research Ethics Committee of STIKES Rumah Sakit Baptis Kediri under number 077/7/VII/KEPK-3/STIKES RSBK/2026.

RESULTS

Frequency Distribution by Highest Education

Table 1 Frequency Distribution by Highest Education

Highest Education	Frequency (persons)	Percentage (%)
Elementary school	4	9,8 %
Junior high school	8	19,5 %
Senior high school	29	70,7 %
Total	41	100 %

Source: Primary Data, 2026

Based on Table 1, most respondents had senior high school as their highest level of education, namely 29 respondents (70,7%). Respondents whose highest education was junior high school numbered 8 respondents (19,5%), while those whose highest education was elementary school numbered 4

respondents (9,8%).

Frequency Distribution of Respondents by Marriage Number

Table 2 Frequency Distribution of Respondents by Marriage Number

Marriage No.	Frequency (persons)	Percentage (%)
First	41	100 %
Total	41	100 %

Source: Primary Data, 2026

Based on Table 2, all adolescent prospective brides in this study were entering their first marriage at an age below reproductive age (<20 years), totalling 41 respondents (100,0%).

Frequency Distribution Based on History of Education about Contraceptives

Table 3 Frequency Distribution Based on History of Education about Contraceptives

History of Contraceptive Education	Frequency (persons)	Percentage (%)
No	41	100 %
Total	41	100 %

Source: Primary Data, 2026

Based on Table 3, all respondents had never previously received education or formal instruction about contraceptives, totalling 41 respondents (100 %).

Knowledge Level of Adolescent Prospective Brides Marrying Below Reproductive Age (<20 Years) about Contraceptives Before Being Given Educational Video Media (Pre-test)

The level of knowledge of adolescent prospective brides marrying below reproductive age (<20 years) about contraceptives before being given educational video media can be seen in the table below:

Table 4 Knowledge Level of Adolescent Prospective Brides Marrying Below Reproductive Age (<20 Years) Regarding Contraceptives Before Being Given Educational Video Media (Pre-Test)

Knowledge Level	Score	Frequency (persons)	Percentage (%)
Good	16-20	2	4,9 %
Adequate	12-15	10	24,4 %
Poor	0-11	29	70,7 %
Total		41	100 %

Source: Primary Data, 2026

Based on Table 4, before the intervention, most respondents were in the poor knowledge category, namely 29 respondents (70,7%), while 10 respondents (24,4%) were in the adequate category and 2 respondents (4,9%) were in the good category.

Knowledge Level of Adolescent Prospective Brides Marrying Below Reproductive Age (<20 Years) about Contraceptives After Being Given Educational Video Media (Post-test)

The level of knowledge of adolescent prospective brides marrying below reproductive age (<20 years) about contraceptives after being given

educational video media can be seen in the table below:

Table 5 Knowledge Level of Adolescent Prospective Brides Marrying Below Reproductive Age (<20 Years) Regarding Contraceptives After Being Given Educational Video Media (Post-Test)

Know ledge Level	Score	Freque ncy (person s)	Percent age (%)
Good	16-20	13	31,7 %
Adeq uate	12-15	9	22,0 %
Poor	0-11	19	46,3 %
Total		41	100 %

Source: Primary Data, 2026

Based on Table 5, the distribution of prospective brides' knowledge levels after the educational video media intervention showed that the respondents' level of knowledge increased after receiving the intervention in the form of an educational video. Respondents in the good knowledge category increased to 13 respondents (31,7%), while 9 respondents (22,0%) were in the adequate category and 19 respondents (46,3%) were in the poor category.

Data Normality Test Results

Before hypothesis testing, a normality test was first performed on the pre-test and post-test knowledge score data using the *Kolmogorov-Smirnov* and *Shapiro-Wilk* tests to determine whether a parametric or non-parametric statistical test would be used. The normality test

results are presented in the following table:

Table 6 Normality Test Results for Pre-Test and Post-Test Knowledge Score Data

Data	Kolmogorov-Smirnov (Sig.)	Shapiro-Wilk (Sig.)	Remarks
Pre-test	0,200	0,267	Normal
Post-test	0,135	0,285	Normal

Source: Primary Data, 2026

Based on Table 6, the normality test using the *Kolmogorov-Smirnov* test showed a significance value of 0,200 for the pre-test score and 0,135 for the post-test score, while the *Shapiro-Wilk* test showed a significance value of 0,267 for the pre-test score and 0,285 for the post-test score. Because all significance values in both tests were greater than 0,05 ($p > 0,05$), the pre-test and post-test knowledge score data were concluded to be normally distributed. Based on these results, the hypothesis test in this study used the parametric statistical test, namely the *Paired Sample T-Test*.

Analysis of the Effect of Educational Video Media on the Knowledge of Adolescent Prospective Brides Marrying Below Reproductive Age (<20 Years) about Contraceptives

Table 7 Analysis Results of Mean Knowledge Scores of Adolescent Prospective Brides Marrying Below Reproductive Age (<20 Years) Before and After Being Given Educational Video Media (Paired Sample T-Test)

Variable	Mean	SD	SE Mean	N
Pre-test	9,4634	3,74898	0,58549	41
Pos-test	12,3415	4,26972	0,66682	41

Source: Primary Data, 2026

Based on Table 7, the mean knowledge score of adolescent prospective brides marrying below reproductive age (<20 years) about

contraceptives before being given educational video media (pre-test) was 9,4634, with a standard deviation of 3,74898. After receiving the intervention in the form of educational video media, the mean knowledge score increased to 12,3415, with a standard deviation of 4,26972. The correlation test between pre-test and post-test scores showed a correlation value of 0,618 with a significance value of 0,000 ($p < 0,05$), indicating a significant relationship between knowledge scores before and after the intervention.

Table 8 Paired Sample T-Test Results for Differences in Pre-Test and Post-Test Knowledge Scores

Pair	Mean Difference	SD	95 % CI	t	Df	Sig. (2-tailed)
Pre-test – Pos-test	-2,87805	3,53691	-3,99444 to -1,76166	-5,210	40	0,000

Source: Primary Data, 2026

Based on Table 8, the *Paired Sample T-Test* results showed a mean difference between pre-test and post-test scores of -2,87805, with a standard deviation of 3,53691. The 95% confidence interval (95% CI) ranged from -3,99444 to -1,76166. The calculated t value was -5,210 with 40 degrees of freedom (df) and a significance value of 0,000 ($p < \alpha = 0,05$). The negative mean difference indicates that the mean post-test knowledge score was higher than the

mean pre-test knowledge score.

Based on these test results, H_0 was rejected and H_a was accepted, indicating a significant difference between the level of knowledge of adolescent prospective brides marrying below reproductive age (<20 years) about contraceptives before and after being given educational video media. Thus, the provision of educational video media introducing contraceptives had an effect on improving the knowledge of adolescent prospective brides marrying below reproductive age (<20 years) at the

Office of Religious Affairs of Ngancar, Mojo, and Wates Subdistricts.

DISCUSSION

Knowledge Level of Adolescent Prospective Brides Marrying Below Reproductive Age (<20 Years) about Contraceptives Before Being Given Educational Video Media

Based on the study conducted among 41 adolescent prospective brides marrying below reproductive age (<20 years) at the Office of Religious Affairs of Ngancar, Mojo, and Wates Subdistricts, it was found that before the educational video media intervention, most respondents had a poor level of knowledge about contraceptives, namely 29 respondents (70,7%). In addition, 10 respondents (24,4%) had an adequate level of knowledge, and only 2 respondents (4,9%) had a good level of knowledge.

The low level of knowledge of prospective brides about contraceptives before the intervention is consistent with the respondents' characteristics, which showed that all respondents (100%) had never previously received education or formal instruction about contraceptives. This finding is consistent with the study by Pertiwi et al. (2021) among prospective brides intending to marry at an early age in Semarang Regency, which found that

most prospective brides marrying early still had low knowledge regarding healthy pregnancy planning, including contraception, due to limited exposure to reproductive health information before marriage.

Consistent with this, Adhiyanti et al. (2025) found that adolescents' lack of knowledge about child marriage is one factor contributing to negative attitudes among adolescents regarding the risks of marriage before reproductive maturity. This condition reinforces the findings of the present study that adolescent prospective brides marrying before the age of 20 years remain vulnerable to low reproductive health literacy, including knowledge of contraceptives, before receiving adequate educational exposure.

Similar findings were also reported by Mawaddah et al. (2023) among prospective brides at the Office of Religious Affairs of Cibadak, Lebak, Banten, showing that before reproductive health education was provided, most prospective brides were in the low-knowledge category regarding healthy pregnancy planning. Premarital education is therefore considered important for equipping prospective brides, particularly those marrying at a young age, before entering marriage.

In terms of highest educational attainment, most respondents (70,7%) had

completed senior high school, while the remainder had completed junior high school and elementary school. Rachma et al. (2025) showed that educational level is associated with the level of knowledge regarding the selection of contraceptive methods, indicating that formal education supported by adequate health education can improve an individual's understanding of contraception.

Based on the description above, the level of knowledge about contraceptives among adolescent prospective brides marrying below reproductive age (<20 years) before the intervention at the Office of Religious Affairs of Ngancar, Mojo, and Wates Subdistricts was dominated by the poor knowledge category; therefore, this group requires targeted reproductive health education interventions.

Knowledge Level of Adolescent Prospective Brides Marrying Below Reproductive Age (<20 Years) about Contraceptives After Being Given Educational Video Media

Based on the study results, the distribution of knowledge levels changed after the educational video media intervention. Respondents with a good level of knowledge increased from 2 respondents (4,9%) to 13 respondents (31,7%), while respondents with poor knowledge decreased from 29 respondents (70,7%) to 19 respondents

(46,3%). These results demonstrate a consistent shift toward improved knowledge compared with the condition before the intervention.

The increase in knowledge in this study was presumed to occur because video media can present material about contraceptives in a more engaging and systematic manner, making it easier for respondents to receive the information provided. This is consistent with the study by Adhiyanti et al. (2025) among adolescents, which showed that an educational video intervention significantly improved adolescents' knowledge and attitudes in preventing child marriage ($p < 0,001$), demonstrating that video media are effective as a means of reproductive health education for adolescent groups at risk of marrying at a young age.

These results are also supported by the study by Nurhana et al. (2024), which showed that a video media intervention significantly increased knowledge about contraception, with the majority of respondents (96,9%) reaching the good knowledge category after the intervention ($p < 0,05$). This finding confirms that video media are an effective method for improving understanding of contraceptive methods in various target groups, including adolescent prospective brides.

The results of this study are also

supported by the Ministry of Health of the Republic of Indonesia, which emphasises the importance of premarital education, including reproductive health and contraceptives, as part of efforts to prepare prospective brides for healthy and well-planned family life. Providing appropriate information before marriage is expected to equip prospective brides with adequate knowledge to make decisions regarding future family planning (Kementerian Kesehatan Republik Indonesia, 2023).

Based on the study results and discussion above, the researchers consider educational video media to be an effective health education method for improving the knowledge of adolescent prospective brides marrying below reproductive age (<20 years) about contraceptives. The improvement in knowledge was influenced not only by the content of the material delivered, but also by the characteristics of video media, which can present information in an engaging, concrete, and easily understandable manner for adolescents. Although some respondents remained in the poor knowledge category after the intervention, overall the study results showed an improvement in respondents' knowledge levels.

Analysis of the Effect of Educational Video Media Introducing

Contraceptives on the Knowledge of Adolescent Prospective Brides Marrying Below Reproductive Age (<20 Years) about Contraceptives

The normality test using the *Shapiro-Wilk* test showed that the pre-test and post-test knowledge score data were normally distributed. The significance value was 0,267 for the pre-test score and 0,285 for the post-test score, both greater than 0,05 ($p > 0,05$). Based on these results, analysis of the difference in knowledge scores before and after the educational video media intervention was performed using the parametric statistical test, namely the *Paired Sample T-Test*.

The analysis showed that the mean knowledge score of adolescent prospective brides marrying below reproductive age (<20 years) about contraceptives before being given educational video media (pre-test) was 9,4634, while after being given educational video media (post-test) it increased to 12,3415. Thus, the mean knowledge score increased by 2,8781 points after the educational video media intervention. The *Paired Sample T-Test* showed a calculated t value of -5,210 with 40 degrees of freedom (df) and a significance value of 0,000 ($p < \alpha = 0,05$).

Based on these results, H_0 was rejected and H_a was accepted, indicating a significant difference between the

knowledge scores of adolescent prospective brides marrying below reproductive age (<20 years) before and after being given educational video media introducing contraceptives at the Office of Religious Affairs of Ngancar, Mojo, and Wates Subdistricts.

In addition, the correlation test between pre-test and post-test scores showed a correlation value of 0,618 with a significance value of 0,000 ($p < 0,05$). This value indicates a significant relationship between knowledge scores before and after the intervention. The correlation test in this study was used as additional information regarding the relationship between pre-test and post-test scores, while the assessment of differences in knowledge scores before and after the intervention was based on the Paired Sample T-Test results.

These findings are consistent with the study by Mawaddah et al. (2023) among prospective brides at the Office of Religious Affairs of Cibadak, Lebak, Banten, which found that reproductive health education using video media significantly improved the knowledge and attitudes of prospective brides compared with leaflet media. The similarity in population and type of intervention strengthens the assumption that video media are effective for premarital education, including the introduction of

contraceptives in the present study.

The advantages of video media compared with lecture/oral methods are also confirmed by recent research. A true experimental study conducted in Pesisir Barat Regency found significant differences in respondents' knowledge and attitudes between the group receiving education through video media and the group receiving education through the lecture method, with $p = 0,000$ for both variables, indicating that video media were consistently superior to oral/conventional delivery of material (Alfi & Jayadi, 2025).

Similar findings were also reported in a comparison of audiovisual media and lecture methods in health education, in which the level of understanding in the group receiving audiovisual media reached 85,17%, substantially higher than the 69,37% achieved by the lecture group ($p < 0,05$) (Safitra et al., 2022).

Based on the study conducted, the researchers assumed that educational video media constitute an effective health education method for improving the knowledge of adolescent prospective brides marrying below reproductive age (<20 years) about contraceptives, as reflected in changes in respondents' knowledge scores before and after the intervention.

This method is also considered

advantageous because it is easy to implement, can be used repeatedly, and does not require substantial cost. It can therefore serve as an alternative premarital education medium routinely implemented at the Office of Religious Affairs as part of the Marriage Guidance programme, particularly for adolescent prospective brides planning to marry below reproductive age, either as a complement to or a replacement for the conventional lecture method that has traditionally been relied upon.

CONCLUSION

Based on the study results, educational video media introducing contraceptives effectively improved the knowledge of adolescent prospective brides marrying below reproductive age (<20 years) at the Office of Religious Affairs of Ngancar, Mojo, and Wates Subdistricts, Kediri Regency. Before the intervention, most respondents had a poor level of knowledge, whereas after the intervention knowledge increased, although nearly half of the respondents remained in the poor category. The study results showed a significant effect of educational video media on improving knowledge about contraceptives, indicating that this medium can be used as an alternative form of reproductive health

education in preparation for marriage. Adolescent prospective brides are advised to use video media and other health information sources to improve their knowledge of contraception, while the Office of Religious Affairs may consider integrating educational video media into the Marriage Guidance (BIMWIN) programme. Future studies are recommended to use a control group, involve a larger number of respondents and a broader geographical area, and consider other factors that may influence knowledge, such as information sources, experience, and learning interest.

REFERENCES

- Adhiyanti, I. P., Mediastuti, F., Hindriyawati, W., & Setyorini, R. H. (2025). Efektivitas video edukasi terhadap pengetahuan dan sikap remaja dalam mencegah perkawinan usia anak. *Jurnal Kesehatan dan Pengelolaan Lingkungan*, 6(1), 35–40. <https://doi.org/10.12928/jkpl.v6i1.12800>
- Alfi, H., & Jayadi, A. (2025). Perbedaan penyuluhan menggunakan media video dan media ceramah terhadap pengetahuan dan sikap tentang pencegahan wasting di Pekon Seray Kecamatan Pesisir Tengah Kabupaten

- Pesisir Barat tahun 2025. *Jurnal Kesehatan Integratif*, 7(4), 1–6.
- Arisandi, E. L. P., Purnamasari, D., & Danti, R. R. (2023). Pendidikan kesehatan pada calon pengantin (catin) usia muda mendukung pengambilan keputusan alat kontrasepsi. *WOMB Midwifery Journal*, 2(2), 35–41. <https://doi.org/10.54832/wombmidj.v2i2.230>
- CNBC Indonesia. (2025, January 31). *Miris! 21% pemuda di Indonesia nikah di bawah umur, apa penyebabnya?* CNBC Indonesia. <https://www.cnbcindonesia.com/research/20250131161112-128-607067/miris-21-pemuda-di-indonesia-nikah-di-bawah-umur-apa-penyebabnya>
- Diaris, N. M. (2024). Rencana usia menikah dan hamil pada remaja putri dilihat dari perspektif kesehatan reproduksi. *Jurnal Yoga dan Kesehatan*, 7(2), 26–34. <https://doi.org/10.25078/jyk.v7i2.4057>
- Emmi. (2022). *Penyuluhan Kespro-Catin di Puskesmas Kayu Gadang*. Dinas Kesehatan Kabupaten Pesisir Selatan. <https://dinkes.pesisirselatankab.go.id/berita/penyuluhan-keprocatin-di-puskesmas-kayu-gadang>
- Friska, J., Nainggolan, D. A., Siregar, I. S., Siregar, I. H., Purba, S. D. B., & Tuka, T. A. (2025). Analisis sosial ekonomi dampak pernikahan dini di kalangan remaja. *Jurnal Hukum, Pendidikan dan Sosial Humaniora*, 2(1), 40–64. <https://doi.org/10.62383/aliansi.v2i1.636>
- Kementerian Kesehatan Republik Indonesia. (2023). *Profil Kesehatan Indonesia 2023*. Kementerian Kesehatan Republik Indonesia. <https://kemkes.go.id/id/profil-kesehatan-indonesia-2023>
- Ma'aruf, N. M. S., Kurniawati, E. Y., & Ratnawati, A. E. (2023). Gambaran tingkat pengetahuan calon pengantin di wilayah KUA Kapanewon Bantul. *Jurnal Ilmu Kebidanan Poltekkes Ummi Khasanah*, 10(1), 14–18.
- Mawaddah, D. S., Azis, M. A., & Susiarno, H. (2023). Pengaruh edukasi kesehatan reproduksi menggunakan media video terhadap pengetahuan dan sikap calon pengantin dalam perencanaan kehamilan sehat di KUA Cibadak Lebak Banten. *Jurnal Medikes (Media Informasi Kesehatan)*, 10(2), 175–190.
- Mukmin, A., & Saroji, I. (2022). Pernikahan dini dalam perspektif penetapan Pengadilan Agama Kabupaten Kediri di KUA Kunjang. *Jurnal Ilmu Hukum*, 1(1), 46–66.

- Muzayanah, A., & Agustina. (2022). Peningkatan pengetahuan kontrasepsi pada calon pengantin melalui komunikasi persuasif. *Jurnal Penelitian Kesehatan Suara Forikes*, 13, 92–96. <https://doi.org/10.33846/sf13nk316>
- Nurhana, Susanti, Laily, N. A., Ratnanengsih, Octamelia, M., & Permatasari, A. E. (2024). Pengaruh media video edukasi terhadap pengetahuan tentang kontrasepsi implan pada wanita usia subur. *Jurnal Kesehatan Ilmiah Indonesia*, 9(2). <https://doi.org/10.51933/health.v9i2.1439>
- Pertiwi, N. A. K., Indraswari, R., & Husodo, B. T. (2021). Perencanaan kehamilan sehat pada calon pengantin yang berniat menikah usia dini di Kabupaten Semarang tahun 2020. *Jurnal Kesehatan Masyarakat*, 9(3), 360–367. <https://doi.org/10.14710/jkm.v9i3.29476>
- Puspasari, H. W., & Pawitaningtyas, I. (2020). Masalah kesehatan ibu dan anak pada pernikahan usia dini di beberapa etnis Indonesia: Dampak dan pencegahannya. *Buletin Penelitian Sistem Kesehatan*, 23(4), 275–283. <https://doi.org/10.22435/hsr.v23i4.3672>
- Rachma, U. A., Ariningtyas, N. D., Levani, Y., Anas, M., & Urrachman, S. K. (2025). Relationship between education level and mother's knowledge about choosing contraceptive devices. *MAGNA MEDIKA: Berkala Ilmiah Kedokteran dan Kesehatan*, 12(1), 50–56. <https://doi.org/10.26714/magnamed.12.1.2025.50-56>
- Safitra, M. M., Zulkarnain, M., & Syakurah, R. A. (2022). Perbedaan efektivitas media audiovisual dan ceramah dalam pembekalan menghadapi kepaniteraan klinik. *PREPOTIF: Jurnal Kesehatan Masyarakat*, 6(1), 381–389.
- Sekarayu, S. Y., & Nurwati, N. (2021). Dampak pernikahan usia dini terhadap kesehatan reproduksi. *Jurnal Pengabdian dan Penelitian Kepada Masyarakat (JPPM)*, 2(1), 37–45.
- UNICEF. (2025). *State of the World's Children 2025: Statistical compendium*. United Nations Children's Fund. <https://data.unicef.org/resources/sowc-2025/>
- United Nations Population Fund (UNFFPA). (2022). *State of World Population 2022: Seeing the unseen—The case for action in the neglected crisis of unintended pregnancy*. UNFFPA.