ANALYSIS OF PROVISION OF PREMARRIAGE HEALTH COUNSELING ON THE INTEREST OF DELAYING RISK PREGNANCY IN PROSPECTIVE COUPLES FERTILIZER AGE UNDER 20 YEARS OLD

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ABSTRACT
Background: The low number of couples of childbearing age (PUS) under the age of 20 years in the interest of delaying risky pregnancies, as well as the lack of complete information in providing premarital health counseling to couples of childbearing age (EFA) under the age of 20 years about the impact of risky pregnancies, namely the occurrence of low birth weight, the risk of maternal death, and infants and the risk of abnormalities. The purpose of this study was to analyze the effect of providing premarital health counseling on the interest in delaying risky pregnancies in prospective couples of childbearing age under 20 years at KUA, Cempaga District, East Kotawaringin Regency.

Method: The research design uses a pre-experimental design with a one-group pre-test-post-test design. The sample of this study was some prospective couples of childbearing age under 20 years in in May - June 2022, as many as 12 respondents. sampling method using accidental sampling technique. Data collection by using a questionnaire. Bivariate analysis using Wilcoxon statistical test with significant level = 0.05.

Results: The results showed that from 12 respondents before giving premarital health counseling had a low interest in delaying a risky pregnancy as many as 9 respondents (75.0%) and after giving premarital health counseling had a moderate interest in delaying a risky pregnancy as many as 7 respondents. (58.3%). The Wilcoxon test results obtained p = 0.002 <0.05, which means that there is an effect of providing premarital health counseling on the interest in delaying risky pregnancies in prospective couples of childbearing age under 20 years at KUA, Cempaga District, East Kotawaringin Regency.

Conclusion: is that there is an effect of providing premarital health counseling on the interest in delaying risky pregnancies in prospective couples of childbearing age under 20 years at KUA, Cempaga District, East Kotawaringin Regency.

Keywords: Premarriage Health Counseling, Interest in Delaying Pregnancy, Age under 20 Years

BACKGROUND
The prevalence of child marriage in Indonesia has more than doubled in recent years but is still one of the highest in the East Asia and Pacific region (Central Bureau of Statistics & UNICEF, 2016). In line with the various efforts that have been made by the government in dealing with the number of early marriages, the BKKBN has intensively carried out campaigns but it is still not optimal, through GenRe (Generation Planning) it is hoped that it can reduce the number of early marriages in Indonesia, namely under 21 years for women, and under 25 years. for men

Premarital preparations carried out in Indonesia are still limited to providing TT immunization, not yet related to providing education on reproductive health specifically. In terms of services, which are
still limited to professionals who provide education about the lack of knowledge of prospective partners so that it is possible not to delay pregnancy, even though pregnancy at the age of less than 20 years can lead to various complications during childbirth, babies born to mothers who are under 20 years old can face a 50% higher risk of stillbirth or infant death in the first few weeks compared to babies born to mothers aged 20-29 years. Babies born to mothers under the age of 20 years are more likely to have low birth weight with long-term risk effects (Sri Astuti et al, 2017).

Meanwhile, high-risk pregnancy is a pregnancy that allows complications during pregnancy and childbirth from the risks that the mother has compared to normal pregnancies. Pregnancy has a high risk if it is influenced by trigger factors that will cause complications during pregnancy, even during childbirth and also during the puerperium (Sri Astuti et al, 2017). The process of pregnancy and birth during adolescence also contributes to increasing the perinatal mortality rate in Indonesia. Newborns born to adolescent mothers are also more likely to have low birth weight, with the risk of long-term effects (WHO, 2016). The first pregnant woman aged <20 years is a risky mother because her pelvis has not developed optimally and her mental condition is not ready to face pregnancy and carry out her role as a mother (Fina et al, 2016)

Pregnancy with complications in pregnant women and childbirth is a complex problem, because these pregnancy complications can cause direct death of pregnant women or childbirth. As many as 50,000 women die every year in Nigeria due to complications of pregnancy and childbirth. Most 50% of maternal deaths occur in one week after delivery and 25% occur during the first 24 hours after delivery. (WHO, 2016).

Causes of high risk in pregnancy are age <20 years or> 35 years, children more than 4 last delivery interval and current pregnancy less than 2 years, height less than 145 cm, family history of diabetes, hypertension, etc. (Helmi, 2015). The Central Statistics Agency (BPS) also noted that 33.30% of youth in Indonesia were married for the first time at the age of 19-21 years in 2020. A total of 26.83% of youth married at the age of 22-24 years. Then, 19.68% of youth married at the age of 16-18 years. (Data word, 2020)

The number of high-risk pregnancies in Central Kalimantan Province in the last two years has increased the coverage of high-risk pregnant women from (56%) in 2019 to (76%) in 2020 (Central Kalimantan Provincial Health Office 2020). The Central Statistics Agency (BPS) in 2020 recorded the number of early marriages (under 20 years old) in Kalimantan Province at 16.3%, higher than Java at 11.2% (BPS, 2021).

Services for high-risk/complicated pregnant women in 2020 in East Kotawaringin Regency reached 2,715 people. High-risk pregnant women (referred pregnant women/complications are 19.13% of the target number of pregnant women. This achievement is down when compared to the previous year of 95.2%. Data as of June 30, 2021 as many as 953 cases. For this case in East Kotawaringin Regency has around 176 cases, Paser 151 cases and Samarinda City 109. (Health Profile of East Kotawaringin Health Office, 2021).

The number of couples of childbearing age (<20 years) in the KUA Cempaga area, East Kotawaringin Regency is 15 people. From the results of a preliminary study conducted by conducting interviews with 5 prospective bride and groom couples (PUS < 20 years) at KUA Cempaga, East Kotawaringin Regency, it was found that 3 of them did not want to delay pregnancy and 2 other prospective bridal couples wished to postpone pregnancy. Knowledge of reproductive health is still lacking, accompanied by factors of education, economic status, behavior, socio-culture, and mass media related to early pregnancy, causing many young couples under the age of 20 not to delay pregnancy, even though it is very risky for the mother and baby.
Efforts are being made to reduce pregnancy at an early age, namely by providing pre-marital health counseling which aims or is intended to help prospective brides and grooms to analyze possible problems and challenges that will arise in their household and equip them with the skills to solve problems including in determining family planning wishes or delayed pregnancy. In addition, midwives or health workers are expected to provide education related to contraception/KB programs to prospective brides and grooms to prevent pregnancy at an early age.

Based on the description above, the researcher is interested in conducting research on the analysis of the provision of premarital health counseling on the interest in delaying risky pregnancies in prospective couples of childbearing age under 20 years at KUA Cempaga, East Kotawaringin Regency.

METHODS

In this study using pre-experimental research with a one-group pre-test-post-test design. The sample of this study was some prospective couples of childbearing age under 20 years at KUA KUA, Cempaga District, East Kotawaringin Regency in May - June 2022, as many as 12 respondents. sampling method using accidental sampling technique. Data collection by using a questionnaire. Bivariate analysis to see the relationship between the independent variable and the dependent variable using the Wilcoxon statistical test with a significant level of = 0.05. This research has also received information that it has passed the ethical test, namely sampling by dividing the population into strata (study programs) consisting of 30 people in Bachelor of Pharmacy, Bachelor of Nursing, Diploma 3 of Nursing, and Diploma 3 of Midwifery, each of which amounted to 30 people. The collection of data in this study is secondary data based on the value of the research achievement index obtained by students to determine the development of student research. This study was conducted with univariate analysis, Shapiro-Wilk normality test, and independent t-test analysis with the STATA 14 program.

RESULTS

Tabel 1 The effect of providing premarital health counseling on the interest in delaying pregnancy at risk for prospective couples of childbearing age under 20 years at KUA Cempaga

<table>
<thead>
<tr>
<th>No.</th>
<th>Minat Penundaan kehamilan</th>
<th>Konseling Kesehatan Pra Nikah</th>
<th>Sebelum</th>
<th>Sesudah</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>1.</td>
<td>Tinggi</td>
<td></td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>2.</td>
<td>Sedang</td>
<td></td>
<td>3</td>
<td>25.0</td>
</tr>
<tr>
<td>3.</td>
<td>Rendah</td>
<td></td>
<td>9</td>
<td>75.0</td>
</tr>
<tr>
<td></td>
<td>Jumlah</td>
<td></td>
<td>12</td>
<td>100</td>
</tr>
</tbody>
</table>

The results showed that before giving premarital health counseling they had a low interest in delaying pregnancy, as many as 9 respondents (75.0%). 58.3%). program (IP score = 3.50). The result of the average value of the research development of the entire sample of students is 3.43.
### Statistical Test Results

**Table 2** The results of statistical tests on the effect of providing premarital health counseling on the interest in delaying risky pregnancies in prospective couples of childbearing age under 20 years

<table>
<thead>
<tr>
<th></th>
<th>After Counseling – Before Counseling</th>
</tr>
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<tbody>
<tr>
<td>$\text{Z}$</td>
<td>$-3.064$</td>
</tr>
<tr>
<td>$P$-value</td>
<td>$0.002$</td>
</tr>
</tbody>
</table>

Based on the Wilcoxon signed rank test statistic using SPSS, it was found that the $p$-value was smaller than 0.05 ($0.002 < 0.05$). So H0 is rejected and H1 is accepted, meaning that there is an effect of providing premarital health counseling on the interest in delaying risky pregnancies in prospective couples of childbearing age under 20 years in Cempaga, East Kotawaringin Regency.

### DISCUSSION

Based on the results of the study, it was found that before giving pre-marital health counseling had a low interest, namely as many as 9 respondents (75.0%), while after giving pre-marital health counseling they had moderate interest, namely as many as 7 respondents (58.3%).

The results of the Wilcoxon signed rank test statistic using SPSS showed that the $p$ value was smaller than 0.05 ($0.002 < 0.05$). So H0 is rejected and H1 is accepted, meaning that there is an effect of providing premarital health counseling on the interest in delaying risky pregnancies in prospective couples of childbearing age under 20 years at KUA Cempaga, East Kotawaringin Regency.

This study is in line with research conducted by Kirana (2016) regarding the relationship of premarital counseling for brides and grooms in the city of Yogyakarta, showing that there is a significant positive relationship between premarital counseling for prospective brides where the rcount value is 0.549 with $p = 0.0000 < 0.05$. This also agrees with research (Dewi Susanti et al., 2018) which states that there is an effect of providing premarital education on knowledge and attitudes of prospective brides with values ($p$ values of 0.001 and 0.013).

Counseling is a face to face situation. Someone who has been trained and has the skills or because he has gained the trust of others tries to help face, explain, and overcome adjustment problems (Eny Kusmiran, 2016).

According to the researcher’s assumption that premarital health counseling on the interest in delaying pregnancy in couples of childbearing age under the age of 20 years has proven to be successfully applied to the subject. This can be seen from the results of the pre-test and post-test which have differences. These results conclude that there is a change in interest from low to moderate interest. According to researchers, the existence of premarital health counseling for prospective couples of childbearing age under 20 years is very necessary and good to increase knowledge about reproductive health which they still lack. The delivery of this counseling also greatly influences their perception of delaying pregnancy.

Some other reasons if a woman physically has completed growth which is around the age of 20 years then it is permissible to get pregnant. Based on this explanation, if it is less than 20 years, then it is better for a woman to postpone pregnancy. It is permissible to get pregnant if mentally ready, in the sense that a woman and her partner feel they want to have children and
feel they are ready to become parents, including caring for and educating their children, but if they are not mentally ready, it is advisable to postpone pregnancy. Therefore, the prospective bride and groom are expected to consult with health workers about delaying pregnancy so that in the future they can avoid risky pregnancies. In addition, the bride and groom can also check their reproductive health when getting married as an effort to prepare for pregnancy and prevent risky pregnancies. So it is recommended that health workers can provide premarital reproductive health counseling, especially to prospective couples of childbearing age so that they are motivated to be interested in delaying pregnancy at childbearing age under the age of 20.

CONCLUSION
The conclusion in this study is that most of the respondents at KUA Cempaga, East Kotawaringin Regency before giving premarital health counseling had a low interest in delaying risky pregnancies, as many as 9 respondents (75.0%). Most of the respondents at KUA Cempaga, East Kotawaringin Regency after giving premarital health counseling had moderate interest in delaying risky pregnancies, as many as 7 respondents (58.3%). There is an effect of providing premarital health counseling on the interest in delaying risky pregnancy in prospective couples of childbearing age under 20 years at KUA Cempaga, East Kotawaringin Regency with P value < 0.05 (0.002 < 0.05). It is hoped that the KUA will also need to provide encouragement through programs such as SusCatin (Bride and Groom Course) and work together with health workers so that prospective couples of childbearing age under the age of 20 have the motivation to delay pregnancy to avoid risks to the mother and baby as well as the population explosion.

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