

## Empowering Communities to Prevent Child Marriage and Promote Reproductive Health

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### ABSTRACT

The activity was carried out using the Community-Based Participatory Approach (CBPA) in August 2025 through a hybrid learning method, involving 37 offline participants and 14 online participants, comprising Kader and members of the Tim Penggerak PKK. The evaluation was conducted using pre- and post-tests as well as discussion feedback to assess changes in participants' knowledge and attitudes towards child marriage and reproductive health issues. The evaluation results showed an increase in participants' knowledge and attitudes after participating in the activity. The CBPA approach is effective in building collective awareness and strengthening community capacity through participatory learning processes. The Role of Kader and Tim Penggerak PKK as representatives of women's communities at the village level is key to the success of the intervention.

## **INTRODUCTION**

Marriage before the age of 18 is a violation of human rights (Fan & Koski, 2022; UNICEF, 2024). Every year, around 10 million girls marry before the age of 18, according to global data, which shows that around 21% of marriages are child marriages (Lami et al., 2023). Child marriage is strongly linked to an increased risk of teenage pregnancy, maternal and infant mortality, domestic violence, school dropout, and intergenerational poverty (Mulyaningsih, Dwi, et al., 2024; Naghizadeh et al., 2021).

In Indonesia, child marriage remains a real challenge, with approximately one in nine women aged 20–24 having married before the age of 18 (Bappenas, 2020). Various factors, including economics, patriarchal culture, gender inequality, low levels of education, and a lack of knowledge about reproductive health, influence child marriage in Indonesia. This leads to sexual behaviour at a young age, which results in unwanted pregnancies (Cohen et al., 2024; Suyanto et al., 2023). Preventing child marriage and improving the reproductive health of young women is not only a health issue, but also relates to human development, poverty reduction and gender equality. Increasing the length of schooling for girls will significantly reduce the incidence of child marriage (UNFPA, 2020). Furthermore, women who marry before the age of 18 are more likely to become pregnant at a young age, experience pregnancy complications, and give birth to high-risk babies. This is exacerbated when access to reproductive health services, education, and social support is limited (Seta, 2023)

The unresolved issue of child marriage requires cooperation from all parties, requiring policymakers and programme managers to focus their programmes on preventing children from becoming mothers at a perilous age. They must receive information and education, and discussions about child marriage should be held in various communities (Mehari et al., 2023). Actions in community empowerment and the involvement of local actors, such as community kader (health workers), women's groups (e.g., Tim Penggerak PKK), and community leaders, provide opportunities for changing harmful practices.

Given the current situation, with high rates of child marriage, teenage pregnancy, and challenges in accessing and ensuring the quality of education and reproductive health services, there is a pressing need for sustained, community-based interventions that involve various stakeholders to achieve change on a large scale and ensure its sustainability (UNFPA et al., 2019). Despite various government and NGO initiatives, most interventions remain top-down and lack community participation, especially involving midwives and women's groups at the grassroots level.

Ending the practice of child marriage as part of efforts to improve women's reproductive health. Women who are victims of child marriage are at greater risk of becoming victims of violence, and this also has an impact on their reproductive health (Mulyaningsih, Dwi, et al., 2024). This is a fundamental right of every individual, guaranteed globally through the Sustainable Development Goals (SDGs), particularly targets 3.7 and 5.6, which emphasise universal access to reproductive health services.

This activity aims to describe a community-based participatory programme designed to empower local actors, comprising the PKK Activation Team and health kaders, in preventing child marriage and improving reproductive health literacy. This intervention integrates gender-responsive community dialogue and is supported by the local Health Office. Aims to empower communities in efforts to prevent child marriage and improve women's reproductive health.

Specifically, the objectives of this programme are to:

1. Improving knowledge and awareness among Kader and Tim Penggerak PKK members in preventing child marriage.
2. Building cross-sector collaboration in efforts to prevent child marriage.
3. Developing sustainable community mechanisms, such as youth classes, family discussion groups, or village forums, to ensure the continuity of reproductive health promotion and child protection programmes.

## IMPLEMENTATION AND METHODS

This activity was carried out using the Community-Based Participatory Approach (CBPA), a collaborative approach that places the community as active partners in the entire programme process, from problem identification and planning to implementation and evaluation. CBPA combines scientific strength and local knowledge to produce sustainable interventions that are relevant to the local socio-cultural context (Rink et al., 2022). This approach was chosen because the issues of child marriage and women's reproductive health are greatly influenced by social and cultural norms, as well as the level of literacy in the community. Therefore, effective solutions need to emerge from community participation and empowerment, rather than solely from top-down interventions, and reproductive health and child marriage must be shaped by deep cultural norms. Empowering the community ensures that solutions are contextually relevant and sustainable.

The event, entitled "Maraknya Perkawinan Anak, Kita Bisa Apa?" was held on 21 August 2025 in a hybrid learning format and attended by the Tim Penggerak PKK and Kader of Jombang Regency. 14 participants attended the online session, and 37 participants participated in the offline session. The sole speaker at the event was a midwifery lecturer specialising in research on child marriage. Data collection was conducted using questionnaires and discussion feedback from participants and the Health Department.

## RESULTS AND DISCUSSION

The implementation of community service through workshops and webinars is an effort to empower essential elements in the community. Child marriage, with its various detrimental effects on individuals, families and countries, requires synergistic cooperation across multiple sectors. The participation of *Kader* and the *Tim Penggerak PKK* in these activities was highly appreciated by both the Health Office and the participants, as it broadened their perspective on the strategic Role that community groups can play in actively preventing child marriage.

To determine the success of the activity, pre- and post-tests were conducted, and questionnaires were given to measure the knowledge and attitudes of the 51 participants who attended in person.

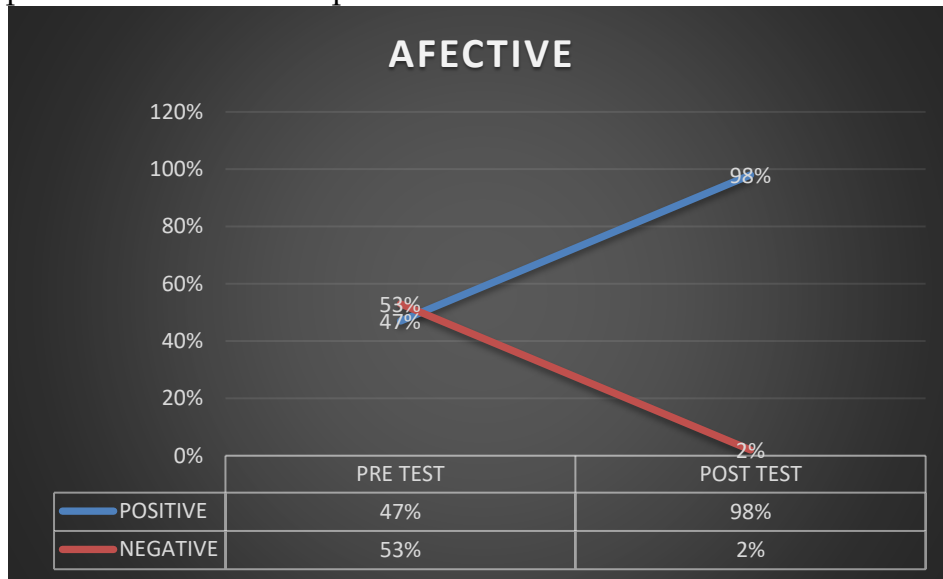


Figure 1. Diagram Results of "Attitude" Measurements in The Pre-Test and Post-Test

Based on the diagram above, it can be seen that before the activity, some participants already had a positive attitude; however, there was an increase in positive attitudes in the post-test evaluation, and very few (2%) did not fall into the positive attitude category. The activity, which was attended by the health Kader and the Jombang Regency *Tim Penggerak PKK* received an excellent response. The following are the results of the participants' knowledge evaluation.

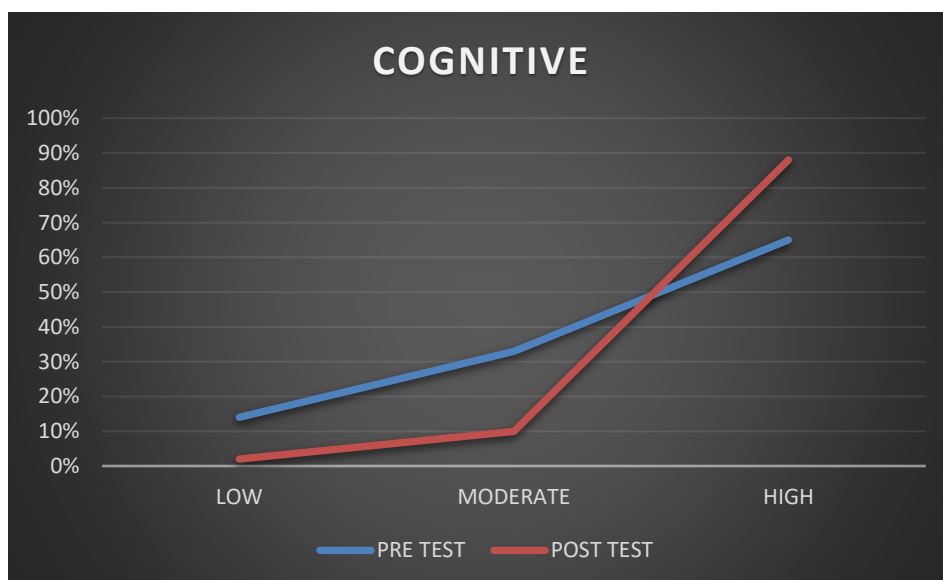


Figure 2. Diagram Results of Cognitive Pre-Test and Post-Test Measurements

The diagram shows that during the post-test, there was an increase in knowledge in the high knowledge category. It shows that the activity had an impact on the participants' knowledge. Community service activities involving the *Tim Penggerak PKK* and health *Kader* are a good example of coordination. They are individuals who are closely connected to the community and can interact with it directly. The implementation of these activities has resulted in increased knowledge and changes in attitudes. Increase in the number of participants. This activity employs a Community-Based Participatory Approach (CBPA), with the principle of collaboration among the community, health workers, and local stakeholders. Basically, CBPA is based on the principles of cooperation, shared learning, and empowerment. Through the CBPA approach, movements can be initiated at the grassroots level, which are often successful because they are familiar with the actual situation in the area. The methodological shift aims to build trust and mutual respect between the community and researchers, thereby facilitating a more inclusive environment for information exchange and intervention planning (Collins et al., 2018; Ricks et al., 2022; Suto et al., 2019). The results obtained from these activities are:

1. Increased knowledge of the phenomenon of child marriage in Indonesia  
Data on child marriage in Indonesia has shown a decline, but it is still slow and requires accelerated efforts. There is more than one million women aged 20–24 whose first marriage occurred before the age of 18 (1.2 million people). Meanwhile, 61,300 women aged 20–24 were recorded as having married before the age of 15 (Badan Pusat Statistik, 2020). Participants understand that the phenomenon of child marriage in Indonesia is an issue that requires serious attention, as is the case in Jombang Regency, which states that the prevention of child marriage must involve many parties. Child marriage is identified as being influenced by the complex interaction of factors at the individual, interpersonal, community, and policy levels (United Nations Children's Fund, 2020). Cultural and gender norms, economics, and social pressure emerge as the leading interrelated causes (Chumairoh, 2021). Additional themes highlight inequality in accessing information and services, especially for women and girls. Awareness among stakeholders and the wider community must be optimally built. Various groups need to care and actively participate in the planning and implementation of interventions led by local government initiatives, as well as regional groups (Chandra-Mouli et al., 2018).
2. Raising awareness of the strategic Role of community groups in helping to address the impact of child marriage  
Women and families who engage in child marriage often end up being the subject of gossip in the community, without any specific efforts being made to help the victims through this challenging period, as they take on the new Role of motherhood at a very young age. Such issues are considered a private matter, so the community often distances itself and does not want to get involved, despite the risk of violence and other health problems.

Community groups are central to addressing the impacts of child marriage, employing diverse, strategic approaches that span advocacy, education, legal reform, and economic empowerment. Effective interventions are multi-level, participatory, and context-sensitive, engaging a broad spectrum of stakeholders – including men, faith leaders, and children themselves. Despite progress, significant challenges remain, particularly in overcoming entrenched norms and addressing the unique needs of displaced populations. Research gaps persist in understanding long-term impacts, legal challenges, and children’s agency, underscoring the need for innovative, participatory, and context-specific research (Baynesagn & Maru Wubie, 2025; Chow & Vivalta, 2022).

3. The spirit of pioneering by the *Tim Penggerak PKK* and *Kader*. Participants stated that community prevention should involve public awareness, as the proliferation of boarding houses that tend to be "free" can create opportunities for promiscuity. The impact of promiscuity is unwanted pregnancies and forced child marriages.
4. Preventing child marriage is a multifaceted challenge that necessitates the involvement of multiple stakeholders. Governments must enforce robust legal frameworks, NGOs should implement targeted interventions, community leaders need to advocate for change, and families must be empowered to support their children’s education and autonomy. By working together, these stakeholders can create a comprehensive and sustainable approach to ending child marriage (Rahmawati, 2024; Rijal et al., 2025).

In addition, CBPA seeks to address social and health inequalities by recognising and integrating the unique strengths and perspectives of community members, which is an essential foundation for developing culturally relevant and sensitive health interventions (Boatswain-Kyte et al., 2022; Brush et al., 2019). Involving the *Tim Penggerak PKK* and *Kader* is a strategic step to promote the prevention of child marriage. *Kader*, who are members of the community themselves, can take approaches that bridge social and health issues. Similarly, the *Tim Penggerak PKK* is a forum for women in their respective villages to be actively involved in various social and health activities.

One example of an activity that can be implemented in other villages is the Women’s School. The existence of this women’s school serves as a means of increasing knowledge and changing the mindset of the community to improve women’s health, thereby avoiding harmful practices (Mulyaningsih, 2024). The success of CBPA lies in its ability to increase community involvement and strengthen the relevance of research findings. By involving community stakeholders throughout the research process from the design stage to the dissemination of results CBPA increases the likelihood that research findings will be used in real-world contexts (Lindsjö et al., 2021; Mosavel et al., 2019). For example, research has shown that when the community’s voice is involved in health research, the solutions produced are often more effective because they are tailored to the community’s real needs and context (Lu et al., 2018; Tremblay et al., 2018; Ward et al., 2018). Additionally, engaging community members fosters

a sense of ownership over the research and its outcomes, thereby improving trust and participation (Adam et al., 2025; Collins et al., 2018; Ricks et al., 2022).

CBPA is particularly useful in addressing complex social issues, such as health inequalities that are influenced by a range of social problems. The programme promotes health literacy and encourages community capacity building by utilising local knowledge (Ndwiga et al., 2021; Tremblay et al., 2018; Winterbauer et al., 2016)

## CONCLUSIONS AND RECOMMENDATIONS

Community service activities using the Community-Based Participatory Approach (CBPA) have proven effective in increasing the knowledge and awareness of Kader and members of the Tim Penggerak PKK regarding the prevention of child marriage and the importance of reproductive health. Through a collaborative learning process between the community, health workers, and local stakeholders, there has been a significant improvement in participants' knowledge and attitudes towards the issue of child marriage.

The direct involvement of women's groups and Kader as community actors shows that gender-based community empowerment can strengthen local roles in addressing complex social issues, such as child marriage. This participatory approach has also succeeded in fostering a sense of ownership and shared responsibility, which is an essential foundation for the sustainability of programmes at the community level.

Thus, this activity addresses the main objectives of the programme, namely (1) increasing community capacity and awareness in preventing child marriage, (2) strengthening cross-sector collaboration at the community level, and (3) developing sustainable community mechanisms through dialogue, education, and strengthening the Role of Kader and Tim Penggerak PKK.

1. Strengthening the sustainability of the programme.

DA follow-up is needed in the form of establishing sustainable community forums, such as Healthy Teen Classes or Family Discussion Forums, managed by Kader and the PKK Activation Team with assistance from the Health Department.

2. Integration into regional policy.

Local governments are expected to integrate the CBPA-based empowerment model into reproductive health and child marriage prevention programmes at the village/sub-district level.

3. Increased participation of the community and religious leaders:

Future programmes need to involve more religious leaders and community leaders to strengthen a gender-sensitive approach to promoting reproductive health and protecting girls.

4. Development of online-based evaluation:

As some participants participate in activities online, it is recommended that a digital evaluation system be developed to cover all participants, both offline and online, with pre- and post-test data.

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