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Youth education through focus group discussions: An effective strategy for preventing early marriage and child violence

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ABSTRACT

Early marriage remains a problem that impacts health, psychological, social, and economic aspects, and increases the risk of violence against children. This study aims to analyze the effectiveness of educational media through the Focus Group Discussion (FGD) method in increasing adolescents' knowledge about the dangers of early marriage and the risks of violence against children. The study used a quasi-experimental design with a one-group pretest-posttest design. The study was conducted in February 2026 at SMPN 2 Cikarang Utara, Wanajaya Village, Bekasi Regency, involving 30 adolescents as a sample. Data were analyzed using the Wilcoxon test to compare the level of knowledge before and after the intervention. The research results show that the focus group discussion (FGD) method is effective in increasing adolescents' knowledge about the impacts of early marriage and the risks of violence against children. The FGD method enables adolescents to better understand the dangers of early marriage, recognize the risks of violence against children, and be better prepared to apply this information in their daily lives. The findings of this study indicate that adolescent education through Focus Group Discussions (FGDs) is effective in increasing adolescents' knowledge, awareness, and attitudes regarding the dangers of early marriage and the risks of violence against children. Therefore, the FGD method can be implemented as an effective educational strategy in schools and communities to support efforts to prevent early marriage and protect children on an ongoing basis.

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INTRODUCTION

Child marriage increases the risk of dropping out of school, pregnancy, childbirth complications, mental health disorders, and increases the likelihood of domestic violence and intergenerational poverty. Low reproductive health literacy, strong social norms, and limited access to accurate information are factors that drive adolescents to marry at an immature age. Therefore, prevention

efforts should focus not only on changing individual behavior but also on improving adolescents' knowledge, attitudes, and abilities to make responsible decisions through appropriate education. Early marriage can be understood as a sacred institution that unites two individuals of different sexes who are still teenagers in a marriage bond (Hardiyati et al., 2023).

Adolescent education is a proven preventive strategy for reducing early marriage and various forms of violence against children. Participatory education can improve adolescents' understanding of children's rights, reproductive health, marriage readiness, and the social, economic, and psychological consequences of early marriage. Research shows that increased educational attainment is associated with a reduced likelihood of a girl marrying before adulthood, as education broadens horizons, improves critical thinking skills, and strengthens adolescents' aspirations for the future. Therefore, schools are a strategic environment for implementing sustainable early marriage prevention education programs (Suci & Sulistyaningrum, 2024).

Based on the 2023 report on the implementation of the Cikarang Religious Court's activities in Bekasi Regency, there were 1,078 divorce cases, 2,977 divorce cases, and 31 applications for marriage dispensation. Compared to the previous year, the number of applications for marriage dispensation for minors increased, from 26 cases in 2022 to 31 cases in 2023. This data indicates an increasing trend in applications for marriage dispensation for minors, making it a crucial focus in efforts to prevent early marriage through education and strengthening the roles of families, schools, and the community.

Early marriage is influenced by various interrelated factors, including individual, family, and social factors. A literature review indicates that low levels of education and knowledge among adolescents are key determinants of early marriage, as adolescents with low levels of education tend to have limited understanding of reproductive health, psychological preparedness, and the social and economic consequences of early marriage. Furthermore, family economic conditions, cultural norms that still support child marriage, and a lack of access to reproductive health information and education contribute to the increased risk of early marriage. Therefore, increasing access to education and providing ongoing education to adolescents is a crucial strategy for reducing the rate of early marriage in Indonesia (Yelvianti & Handayani, 2021).

Early marriage has various detrimental impacts on adolescents, including health, psychological, educational, and socioeconomic aspects. From a health perspective, adolescents who marry at a young age have a higher risk of experiencing pregnancy and childbirth complications, such as anemia, hemorrhage, premature delivery, low birth weight, and increased maternal and infant mortality rates due to underdeveloped reproductive organs. Furthermore, psychological unpreparedness for married life can trigger stress, depression, family conflict, and domestic violence. From an educational perspective, early marriage often leads to school dropout, limiting opportunities for decent employment and worsening the family's economic situation. Therefore, early marriage not only impacts reproductive health but also impacts adolescents' quality of life and sustainable human resource development (Sari et al., 2024).

The Indonesian government has made various efforts to reduce the number of early marriages through policies, education, and youth empowerment. Following the enactment of the minimum age for marriage to 19 years through Law Number 16 of 2019, the central and regional governments developed various prevention programs, such as the Planning Generation Program (GenRe), the Youth Information and Counseling Center (PIK-R), Marriage Guidance (Bimwin), the Children's Forum, and reproductive health education involving schools, families, and the community. Research shows that the implementation of these programs contributes to increasing adolescents' knowledge about the risks of early marriage, strengthening decision-making skills, and encouraging delays in marriage. However, the effectiveness of these programs still faces various challenges, such as strong local culture, low community participation, and limited educational reach in some areas. Therefore, cross-sector collaboration is needed to ensure optimal implementation of early marriage prevention efforts (Maya Trisiswati et al., 2024).

Although several early marriage prevention programs, such as the Planning Generation Program (GenRe), the Youth Information and Counseling Center (PIK-R), and reproductive health education programs, have been implemented to improve adolescent understanding and awareness, evidence suggests that the effectiveness of educational interventions still depends heavily on the methods used and the quality of their implementation. Educational interventions are a potential strategy to delay early marriage, but the effectiveness of various learning methods still requires more in-depth evaluation in various local contexts (Malhotra & Elnakib, 2021). The importance of developing and continuously evaluating participatory reproductive health education to improve knowledge, critical thinking skills, and decision-making abilities among adolescents. However, research specifically assessing the effectiveness of Focus Group Discussions (FGDs) as a participatory educational approach to improve adolescents' understanding of the dangers of early marriage is still rare, especially in the context of schools in areas with increasing cases of marriage dispensation, such as Bekasi Regency. Therefore, this study was conducted to assess the effectiveness of FGDs in improving adolescents' understanding of the risks of early marriage (*World Health Organization. (2026)*, n.d.). The findings of this study are expected to provide scientific evidence regarding the use of FGD as a more participatory, interactive, and youth-focused adolescent health promotion strategy, as well as serve as a basis for the development of educational programs in schools, PIK-R, and the Planning Generation Program (GenRe) to support the prevention of early marriage and violence against children in a sustainable manner (Malhotra & Elnakib, 2021)

One educational approach considered effective is the Focus Group Discussion (FGD). This method provides an opportunity for adolescents to actively discuss, express opinions, exchange experiences, and build a shared understanding of the issues they face. Community service research among high school students shows that FGDs can increase adolescents' knowledge and awareness of the negative impacts of early marriage because participants not only receive one-way material but also engage in a process of reflection and problem-solving together. Interaction between participants makes the learning process more contextual, making prevention messages easier to understand and apply in everyday life (Talar et al., 2024).

A peer-to-peer approach and peer-to-peer communication can improve adolescents' knowledge and attitudes regarding early marriage. The study's findings demonstrate that social interaction-based learning is more effective because adolescents tend to feel comfortable discussing with their peers. This characteristic also contributes to focus group discussions (FGDs), as participants can express their opinions without feeling judged, enabling a more open and participatory learning process (Defitri et al., 2024).

Health education significantly increases adolescents' knowledge in preventing early marriage. The study confirms that health education is an effective promotional strategy for improving adolescent reproductive health literacy. Focus group discussions (FGDs) can be viewed as a development of the education method because, in addition to conveying information, they also encourage participants to actively participate in the learning process, thus deepening their understanding (Ferusgel & Esti, 2022).

In addition to preventing early marriage, education through focus group discussions also plays a crucial role in preventing violence against children. Properly facilitated discussions can improve adolescents' ability to recognize forms of physical, psychological, sexual, and digital violence, while also fostering the courage to report any acts of violence they experience or witness. Educational programs combined with peer counseling and group dialogue have been shown to improve adolescents' knowledge, communication skills, and ability to protect themselves from various forms of violence and exploitation. With the active involvement of participants, the educational process becomes more relevant to adolescents' developmental needs (Maya Trisiswati et al., 2024).

Overall, the results of this study indicate that Focus Group Discussions (FGDs) are an effective health education method for increasing adolescent knowledge regarding the prevention of early marriage. The success of FGDs is supported by the characteristics of participatory, interactive, and participant-centered learning, which can increase understanding more optimally than passive learning. Therefore, FGDs can be recommended as a reproductive health education strategy in schools and communities to improve adolescent literacy and support efforts to prevent early marriage. This finding is consistent with various studies showing that interactive educational approaches can improve adolescent knowledge and attitudes towards preventing early marriage (Muriana et al., 2026).

RESEARCH METHOD

This study used a quasi-experimental method, a research design that aims to test the effect of an intervention, but does not fulfill all the characteristics of a pure experiment because researchers cannot fully control external variables that could potentially influence the results of the study (Arikunto 2019, S. (2019)., n.d.) The research design applied was a one-group pretest-posttest design, a design involving one group of respondents without a control group. In this design, measurements are taken twice, namely before the intervention (pretest) and after the intervention (posttest). The difference in measurement results before and after treatment is used to evaluate the effect of the intervention on the variables studied, so that changes that occur after treatment can be interpreted as the effect of the intervention given. In addition, the one-group pretest-posttest design is a form of quasi-experiment that is widely used in health and education research to assess the effectiveness of a program or intervention when the formation of a control group is not possible.

RESULT AND DISCUSSIONS

Univariate analysis was conducted to describe the characteristics and distribution of each research variable before and after the implementation of educational programs through Focus Group Discussions (FGDs) to increase adolescents' knowledge about the dangers of early marriage and the risk of violence against children. The results of the univariate analysis are presented in the form of frequency distributions, percentages, and descriptive statistical measures including the average value (mean), standard deviation, minimum value, and maximum value.

Table 1. Adolescent knowledge before and after Intervention

Knowledge	retest		osttest	
Not	2	0		,3
Good	5	0		3,3
Enough		0	2	3,3
Amount	0	00	0	00

In the pretest stage, there were 12 adolescents (40%) with low levels of knowledge, 15 adolescents (50%) with sufficient knowledge, and 3 adolescents (10%) with good knowledge. After the intervention, the posttest results showed an improvement, namely only 1 adolescent (3.3%) had low knowledge, 7 adolescents (23.3%) with sufficient knowledge, and 22 adolescents (73.3%) had achieved a good level of knowledge.

The results of the study showed that before the educational intervention, most respondents still had inadequate knowledge regarding the dangers of early marriage. As many as 40% of

adolescents were in the low knowledge category, 50% were in the adequate category, and only 10% had good knowledge. This condition indicates that most adolescents have not received comprehensive information regarding the reproductive health, psychological, social, and economic impacts of early marriage. This low level of knowledge can be influenced by limited access to reproductive health education, lack of communication within the family, and minimal health promotion activities in the school environment. The results of this study are in line with the research of Ainun Mardia et al. (2024) which stated that reproductive health knowledge in adolescents is closely related to their perceptions of early marriage. Thus, the better the knowledge possessed, the lower the tendency of adolescents to support the practice of early marriage (Mardia et al., 2024).

Following the educational intervention, there was a significant increase in respondents' knowledge levels. The percentage of adolescents with good knowledge increased from 10% to 73.3%, while the percentage with low knowledge decreased drastically to only 3.3%. These changes demonstrate that education is an effective method for improving adolescents' cognitive abilities regarding the dangers of early marriage. The learning process allows respondents to acquire new information, understand the material presented, and then integrate it with their prior knowledge, resulting in a greater understanding. These results reinforce the effectiveness of health education as a promotive and preventive measure for adolescent reproductive health (Khidayah et al., 2024).

The decrease in the number of respondents with low knowledge from 12 to just one indicates that the educational materials successfully reached almost all participants, regardless of their initial knowledge level. This demonstrates that systematic delivery methods, using simple language, and tailoring to the characteristics of adolescents, can increase information absorption. Interactive learning also provides opportunities for participants to ask questions, discuss, and clarify previously unclear information, thus making the learning process more effective (Riana, 2024).

The increase in the good knowledge category to over 70% indicates that most respondents understand the various consequences that can arise from early marriage. This knowledge includes the risks of pregnancy complications in adolescents, high maternal and infant mortality rates, reproductive health problems, school dropout, and psychosocial impacts on family life. The broader the understanding adolescents have, the greater their chances of delaying marriage and preparing for a brighter future through education. This finding aligns with research on reproductive health education, which confirms that increased knowledge is a protective factor against risky behavior in adolescents (Khidayah et al., 2024).

The results of the bivariate analysis were conducted to examine the differences between two variables, with the dependent variable being education through focus group discussions (FGDs) and the dependent variable being adolescents' knowledge about the dangers of early marriage. The analysis was conducted to determine the influence of these two variables.

Table 2. Pretest and posttest normality test

	Kolmogorov-Smirnova			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Prior adolescent knowledge Adolescent knowledge after	.360	7	.007	.664	7	.001
	.290	22	.000	.793	22	.000

The results of the data normality test using Shapiro Wilk with a sample size of 30 respondents obtained a p-value <0.05, which means the data is not normal, so bivariate analysis using the Wilcoxon test analysis was used.

Table 3. Wilcoxon test

Knowledge	Asymp.Sig	Negatif Rank	Positive Rank	Ties

			N	Mean Rank	Sum of Rank	
Pretest Posttest	.000	0a	23b	12.00	276.00	7c

The results of Table 3 show that the Asymp.Sig value is 0.000 (P<0.05), which means the hypothesis is proven by the presence of a significant difference between before and after the intervention. The results of the statistical test concluded that there is an influence of FGD educational media on adolescents' knowledge about the dangers of early marriage and the risk of violence against children.

This is in line with research findings showing a significant increase in adolescents' knowledge after receiving education through focus group discussions (FGDs). This aligns with research showing that health education interventions can significantly increase knowledge (p<0.05). FGDs allow participants to actively engage in discussion, resulting in deeper understanding compared to one-way methods (Isrohmaniar & Susanti, 2023).

Focus group discussions (FGDs), as an interactive method, have been shown to be more effective than passive media such as leaflets because they involve active participation and the exchange of experiences. Other research shows that interactive methods significantly increase adolescent literacy (Damaris et al., 2025). Low knowledge is a major factor in early marriage. Studies show a significant relationship between knowledge and the incidence of early marriage (p=0.000). With focus group discussions (FGDs), increased knowledge is expected to reduce this practice (Safitri et al., 2023).

Adolescents tend to be more receptive to information through communicative and informal methods such as focus group discussions (FGDs). This is supported by research that shows that engaging and interactive educational media improve understanding better than conventional methods (Mulyani et al., n.d.). Group discussions help identify sociocultural factors influencing early marriage, such as family pressure, societal norms, and economic factors. The literature indicates that the social and cultural environment significantly influences adolescents' knowledge and decisions (Nentika et al., n.d.).

This is demonstrated by a significant increase in knowledge scores between the pre-test and post-test interventions, with most respondents who previously had low to moderate knowledge shifting to a good level after receiving education. Video media has been shown to capture attention, facilitate understanding, and improve respondents' recall of the information presented regarding the causes, signs and symptoms, prevention, and treatment of anemia. Therefore, the use of video media as a health education tool can be an effective alternative in efforts to increase adolescent girls' knowledge regarding anemia (Nova et al., 2025).

The research results show that education through the Focus Group Discussion (FGD) method for mothers of toddlers and posyandu cadres at the Mekarmukti Community Health Center is effective in increasing knowledge and understanding about stunting. After the intervention, there was a significant increase in respondents' knowledge scores regarding the causes, risk factors, prevention and treatment of stunting compared to before education. Apart from that, FGD also encourages participants' active participation in sharing experiences and discussions, thereby strengthening contextual understanding and increasing awareness of the important role of families and cadres in efforts to prevent stunting. Thus, the FGD method can be an effective and applicable educational strategy in increasing the capacity of mothers of toddlers and posyandu cadres in tackling stunting in the community (Nurpratama et al., 2025).

FGDs are more effective than lectures due to the two-way interaction. Adolescents understand material more easily through discussion and shared experiences. According to the WHO (2022), a participatory approach has been shown to increase the effectiveness of health promotion in adolescents. In addition to increasing knowledge, FGDs also play a role in shaping adolescents' critical attitudes toward early marriage practices (Notoatmodjo, 2020). Good knowledge will influence behavioral change. The results of this study indicate that FGDs can be

used as a promotive-preventive strategy to reduce early marriage and violence against children. This approach aligns with the adolescent reproductive health program (Badan Kependudukan dan Keluarga Berencana Nasional (BKKBN). (2021)., n.d.).

Although this study demonstrated that Focus Group Discussion (FGD) effectively improved adolescents' knowledge regarding the dangers of early marriage, increased knowledge alone does not automatically translate into sustained changes in attitudes and behaviors. According to the Theory of Planned Behavior, knowledge contributes to attitude formation, while behavioral change is also influenced by subjective norms, perceived behavioral control, and behavioral intentions (Icek Ajzen. 1991, n.d.). Therefore, the sustainability of knowledge gained through FGD is likely to be influenced by continuous family support, school reinforcement, peer influence, access to reproductive health information, and ongoing health promotion activities. Furthermore, socio-cultural factors, including community norms supporting early marriage, economic hardship, gender inequality, and cultural expectations, may reduce the effectiveness of educational interventions if they are not addressed simultaneously (UNICEF. 2024, n.d., n.d.). Consequently, strengthening collaboration among schools, families, and healthcare professionals is essential to reinforce the messages delivered during FGD sessions and facilitate long-term behavioral change. Future studies should evaluate not only changes in knowledge but also long-term changes in attitudes, behavioral intentions, and actual behaviors using longitudinal or controlled experimental designs (WHO. 2024, n.d.).

CONCLUSION

Based on research results, Focus Group Discussions (FGDs) have proven effective in increasing adolescents' knowledge and awareness of the dangers of early marriage and the risks of violence against children. Through participatory and interactive discussion processes, FGDs help adolescents understand the comprehensive impacts of early marriage, develop more critical thinking, and support healthy and responsible decision-making. Therefore, FGDs have the potential to be an effective educational strategy in preventing early marriage and violence against children.

The results of the study indicate that Focus Group Discussions (FGDs) are effective in increasing adolescents' knowledge and awareness regarding the dangers of early marriage and the risks of violence against children. This increase in knowledge occurs because FGDs provide participants with the opportunity to actively participate in the learning process through discussions, sharing experiences, and expressing opinions regarding issues faced by adolescents. This participatory approach allows participants not only to receive information but also to build understanding based on experience and social interaction. This finding aligns with research that suggests that focus group discussions significantly improve adolescents' reproductive health knowledge compared to lectures because they encourage active participant involvement during the learning process (Savitry & Sari, n.d.).

In addition to increasing knowledge, FGDs also play a role in raising adolescent awareness of the various consequences of early marriage. During the discussions, participants gained an understanding of the biological, psychological, social, and economic impacts of child marriage, enabling them to assess that early marriage impacts not only individuals but also families and communities. Increased knowledge through health education contributes to changing adolescents' perceptions of child marriage and increases the tendency to delay marriage (Bibby et al., 2023).

Learning through focus group discussions (FGDs) also develops adolescents' critical thinking skills in dealing with various social pressures that can lead to early marriage. Through case discussions and exchanges of opinions, participants are encouraged to analyze the causes of early marriage, identify potential risks, and discuss possible solutions. This helps adolescents develop skills in making more rational and responsible decisions (Widman et al., 2018).

This study also shows that increasing knowledge through focus group discussions (FGDs) has the potential to be a preventive strategy in preventing violence against children related to early marriage. Adolescents who understand the risks of early pregnancy, psychological unpreparedness, economic instability, and the potential for domestic violence will be better able to consider the consequences before deciding to marry at an early age. Reproductive health education and adolescent empowerment are effective interventions to reduce child marriage rates and prevent various forms of gender-based violence and violence against children (Plan International, n.d.).

Overall, the results of this study strengthen the evidence that Focus Group Discussions (FGDs) are an effective health education method for increasing knowledge, building awareness, developing critical thinking skills, and supporting healthy decision-making in adolescents. The advantage of FGDs lies in their interactive, collaborative, and participant-centered learning process, making the material easier to understand and internalize. These findings align with a systematic review by the World Health Organization, which concluded that a group-based participatory educational approach has a greater impact on improving reproductive health literacy and preventing child marriage than conventional counseling methods. Therefore, FGDs are worthy of recommendation as a health education strategy that can be integrated into school programs and adolescent health services to support efforts to prevent early marriage and violence against children (WHO. 2024, n.d.).

The findings of this study provide a significant contribution to the development of participatory reproductive health education methods by demonstrating that Focus Group Discussions (FGDs) are an efficient learning approach for increasing adolescents' knowledge, awareness, critical thinking skills, and decision-making regarding the prevention of early marriage and violence against children. Participatory approaches such as FGDs provide opportunities for adolescents to play an active role in learning through discussion, reflection, and sharing experiences, resulting in more meaningful learning than methods that focus solely on conveying information. The findings of this study also align (World Health Organization. (2026), n.d.) recommendation that reproductive health promotion among adolescents should be implemented with a whole-school approach involving active learning, a supportive school environment, and intersectoral collaboration between schools, families, and health services. Therefore, FGDs can be implemented not only in school learning activities but can also be strengthened through parental participation in supporting and communicating about reproductive health at home, as well as health workers as facilitators of education, guidance, and mentoring for adolescents. This collaboration is expected to create a stable atmosphere for developing healthy behaviors among adolescents. Furthermore, future studies should assess the effectiveness of FGDs not only in increasing knowledge, but also in changing attitudes, behavior, decision-making skills, and the sustainability of their impact in the long term through longitudinal research designs or experiments with control groups (Coakley et al., 2024).

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