

Increasing Adolescents' Knowledge of Family Preparation Through the Use of Audio-Visual Media

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Abstract

The high number of marriages and divorces in Indonesia, particularly in the DKI Jakarta area, is caused by the lack of readiness to marry both physically, mentally, and socially to be together in carrying out all of the family's obligations. The purpose of this research is to find out the comparison of knowledge and effectiveness between the use of audio-visual media and lectures on the level of knowledge of young adults about family preparation. This research uses the quasi-experimental method with a cross-sectional design. The population of this study is "Karang Taruna" in the Cipayung District, East Jakarta. The determination of sample size was calculated using a hypothetical test formula of two proportions: the determination of samples with purposive sampling and 33 respondents for audiovisual media and 33 respondents for lectures. The data were tested with statistical tests such as paired t-tests and sample t-tests using the SPSS programme. *The results of the study* show that there is an influence between audio-visual and lecture methods in family planning on the knowledge of young or early adults, with the method of lectures ($p = 0.01$) and audio-visual ($p = 0.00$). There are also significant differences in knowledge between lecture methods and audiovisual methods towards improving young or early adult knowledge about family planning, with a P value of 0.000. The differences in effectiveness have been found for the value of audio-visuals (M value = 41.612 and P value = .001), while the value of lectures is M value = 19,550 and P value = .001. From the result above, it can be concluded that audio-visual have higher effectiveness compared to lectures.

Keywords: Family Preparation, Knowledge, Young Adult.



A. INTRODUCTION

Based on societal and religious marital regulations, marriage is an agreement between a man and a woman to be legally recognized as husband and wife. Ensuring the prospective bride and groom are both physically, psychologically and socially mature is one way to ensure that the couple can carry out their shared responsibilities in the family. Every young person or early adult has the right to receive pre-marital education on reproductive rights and reproductive health (Kustini, 2012).

According to data from the Indonesian Central Statistics Agency (CSA) the number of marriages in Indonesia in 2015 totalled 1,958,394, and the divorce rate was 347,256. The total population of Indonesia is 255 million people, and the number of couples of childbearing age in Indonesia in 2016 was recorded at 36,993,725. Couples who are in the age range of 15 to 49 years, husband and wife couples who are in the age range less than 15 years and have menstruated, or a wife who is over 50 years old but still having menstruation are called Couples of Fertile Age (Kurniawan, 2014). The marriage rate in DKI Jakarta in 2015 was 55,969, and the divorce rate in DKI Jakarta

was 10,303. According to data from the Central Statistics Agency in 2017, it was noted that the highest marriage and divorce rate in DKI Jakarta was East Jakarta, with a marriage rate of 21,894 and 112 divorces.

The issue of divorce is an important one. Many families are affected by divorce problems. Unwanted consequences arise from divorce cases. Starting from minor violence to serious violence that results in a prison sentence. Enmity and infighting between families Children abandoned by divorce Divorce is a problem that needs attention at the regional and national levels. There are always problems in a household, and if they cannot be resolved, it will result in divorce (Alfa, 2019).

According to research by Susanti et al. (2018), the divorce rate in Indonesia in the last five years has shown quite significant numbers, with Indonesia ranking fifth with 276,791 cases. The results of a study of 38 prospective brides showed that 31.6% of respondents had low knowledge before premarital education and 97.4% after premarital education had high knowledge; 76.3% before premarital education had a negative attitude.

Due to the young age at which divorced couples opt to remarry, there are a high number of divorce cases. Economic issues, for example, are the main causes of divorce, not the reasons for getting married early. These issues are, of course, a result of marriages that are conducted in all respects without self-maturity. This is a result of the decision-making process in marriage, which is excessively quick and careless in order to save time, leading to problems being compounded rather than being resolved. in order for the high divorce rate to be closely correlated with the number of young marriages (Hasanah, 2018).

Divorce can arise due to a lack of self-preparation and self-adjustment by individuals and partners in carrying out their new duties in the family. According to Veronika & Afdal (2019), humans are creatures that are near perfect because they have reason and mind so that they are able to carry out self-understanding and reflection, be aware of what they are doing, and evaluate their own strengths and weaknesses, especially in entering their readiness to marry. Duvall and Miller define readiness for marriage as the state of being able or willing to relate to a partner, accept responsibilities as a husband or wife, engage in sexual activity, manage a family, and raise children (Sari & Sunarti, 2013).

When a person is grown and capable of handling the duties of family life, they are ready for marriage. According to Susilowati (2013), men and women should get married at ages of 25 and 20, respectively. Every person will go through several stages of development. Beginning with conception and continuing through childhood, adolescence, adulthood, old age, and finally death, humans go through a number of transformations and developmental responsibilities. According to Harlock (2003), at the stage of human youth, there are several developmental tasks to be achieved, one of which is preparing for marriage and family life. Whereas in the early adult stage, the developmental tasks to be achieved are: choosing a partner, learning to live with a partner, starting to build a family, raising children, managing the household, and having a career (Abdurrahman & Mudjiran, 2020; Priyatno, 2006).

In order to lower the divorce rate, premarital education can be a way for future wives, particularly young or early adults, to learn about life after marriage. Due to the high rates of marriage and divorce in the East Jakarta region, researchers became interested in comparing the efficacy of health counseling by offering lectures and audiovisuals on family preparation in order to raise the knowledge of young and early adults and lower the high divorce rate.

B. METHODS

This research is a quantitative study with a quasi-experimental design to find out if there is a comparison of knowledge and the effectiveness of using audio-visual media and lectures on the level of young or early adult knowledge about family preparation. Data collection was carried out simultaneously on the independent variables, namely the provision of audio-visual media and lectures, and the dependent variables, namely the level of knowledge of young adults and beginners. The sampling technique used was purposive sampling in Cipayung District, East Jakarta. Data collection was carried out using the two-group pre-test and post-test design methods. The bivariate analysis used was a statistical test of the difference in mean dependent sample t-test (paired t-test) to determine differences in the level of knowledge before and after the intervention in each of the intervention and control groups. Statistical test of the difference between two mean independents using an independent sample t-test to determine the difference in knowledge between the intervention group and the control group

C. RESULT AND DISCUSSION

1. Univariat

Table 1 Overview of Knowledge of Early and Young Adults About Family Planning Before and After Given Intervention Using Lecture Methods and Audio-Visual Methods

Groups	Intervention	N	Mean	Std. Deviation (SD)	Min-Max
Audio Visual	<i>Pre-Test</i>	33	22.5758	1.54172	20-26
	<i>Post-Test</i>	33	25.8182	1.44600	23-28
Lecture	<i>Pre-Test</i>	33	22.8485	1.71612	20-26
	<i>Post-Test</i>	33	24.3939	1.57994	21-27

The univariate analysis in Table 1 shows that the average knowledge score in the audio-visual group during the pre-test was 22.5, with a minimum score of 20 and a maximum score of 26, and a standard deviation value of 1.54. Whereas during the post-test, the average knowledge score increased to 25.8, with a minimum score of 23 and a maximum score of 28, and the standard deviation value was 1.44. The average knowledge score in the pre-test lecture group was 22.8, with a minimum score of 20 and a maximum score of 26. The standard deviation was 1.71. The average post-test score increases to 24.3, with a minimum value of 21 and a maximum of 27. The standard deviation value is 1.57.

2. Bivariat

Table 2: Differences in Knowledge of Young Adults: Beginning Before and After Being Given Family Planning Knowledge Through the Audio-Visual Method

Intervention	N	Mean	Std. Deviation	Std. Error	95% Confidence Interval		p value
					Lower	Upper	
Audio Visual	33	-3.24242	1.78589	.31088	-3.87567	-2.60918	.000

The table's results display the paired t-test statistic, with an average value of -3.24 and a standard deviation of 1.78 for knowledge about family planning before and after receiving an audio-visual intervention. The p-value achieved was 0.000 (p-value 0.05), indicating that there was a significant difference in the early knowledge of family planning among young adults between before and after they received family planning education using the audio-visual technique.

Table 3 Differences in Knowledge of Young Adults: Beginning Before and After Being Given Family Planning Knowledge Through the Lecture Method

Intervention	N	Mean	Std. Deviasi	Std. Error	95% Confidance Interval		p value
					Lower	Upper	
Lecture	33	-1.54545	2.35970	.41077	-2.38217	-.70874	.001

The table results show the results of the paired t-test statistic, with the average value of knowledge before and after being given an intervention through the lecture method about family planning being -1.54 with a standard deviation of 2.34. The p-value obtained was 0.001 (p-value 0.05), meaning that there was a significant difference in young adults' early knowledge about family planning between before and after being given education about family planning through the lecture method.

Table 4 Differences in Knowledge Between Lecture and Audio-Visual Methods for Young Adults and Early Knowledge About Family Planning

Variable	Intervention	N	Mean	Std. Deviation	Std. Error	p value
Knowledge	Audio Visual	33	25.8182	1.44600	.25172	.000
	Lecture	33	24.3939	1.57994	.27503	.000

The Independent Paired T-Test statistic test findings are displayed in the table. Young adults with audio-visual interventions had an average knowledge score of 25.81, with a standard deviation of 1.44. The statistical test's findings revealed p-value = 0.00 (p 0.05). With a standard deviation of 1.57, the lecture intervention is 24.39. The statistical test's findings revealed p-value = 0.00 (p 0.05). In contrast, it indicates that there is a large gap in knowledge of family planning among young or early adults between the lecture and audio-visual groups.

The table displays the results of the Independent Paired T-Test statistic test conducted on the average knowledge of young adults starting with the audio-visual intervention: the average knowledge is 25.81 and the lecture intervention is 24.39, with a comparison of the difference in value of 1.42, indicating that the audio-visual media have different levels of knowledge that are 1.42 times higher than the lecture.

Table 5. Differences in Effectiveness Between Lecture and Audio Visual Methods on Young Adults' Knowledge of Family Planning

	Intervention	N	Mean	Std. Deviation	Std. Error Mean
NGain	Audio Visual	33	41.612	225.953	.39333
	Lecture	33	19.550	304.691	.53040

The results of the table show that the results of the NGain Independent T-Test obtained showed that the average level of knowledge in audiovisual media (M = 41,612) had a higher change than the average level of knowledge in lecture media (M = 19,550).

3. Knowledge of Respondents After Being Given Knowledge About Family Planning Through the Audio-Visual Method

People only become aware of an object when they have sensed it, which is the result of knowing. The five senses of the human body—sight, hearing, smell, taste, and touch—can all be utilised to detect things. Humans learn most things through their eyes and ears (Evrianasari & Dwijayanti, 2017).

Based on the results of the study in the group that received information about family planning with the audio-visual intervention, it was found that the average score of young adults' initial knowledge about family planning before and after being given the intervention with the audio-visual method was obtained. The results of the statistical test using the paired t-test obtained a p-value of 0.00 (p-value 0.00). There was a significant difference in young or early adult knowledge about family planning between before and after being given the intervention with the audio-visual method. This means that there is an influence of education with audio-visual methods on young or early adult knowledge about family planning. This is in line with the research of Demsa et al. (2018) regarding empowering cadres to increase the knowledge and attitudes of teenage mothers towards family planning (78) and after (80.47), assisted by cadres.

This is consistent with Susanti's research (2018), which found that Indonesia ranked fifth with 276,791 divorce cases over the course of the previous five years. According to the findings of a study done on 38 would-be brides, 31.6% of respondents had little information prior to premarital education, 97.4% had a lot of knowledge after premarital education, and 76.3% had a bad attitude prior to premarital education.

4. Knowledge of Respondents After Being Given Knowledge About Family Planning Through the Lecture Method

The average score of young adults' prior knowledge of family planning increased in the lecture intervention group between before and after receiving the intervention using the lecture approach. The paired t-test findings obtained a p-value of 0.01 (p-value 0.05) for the statistical analysis. Early or young adults' knowledge of family planning differed significantly between before and after receiving lecture-style

family planning instruction. This indicates that education that uses the lecture technique has an impact on young or early adult children's awareness of family planning.

One factor that is directly tied to one's knowledge is formal schooling. The goal of higher education is to increase knowledge. But not everyone with a modest level of education is knowledgeable. Increased knowledge can be acquired through non-formal education as well as formal education if desired (Hasanah, 2017).

The average value of knowledge in the lecture method group was 24.39, the instrument in the control group was given by using lectures. The advantage of the method of providing information with lectures in this study is that the lecture method can be accepted by all targets with high and low education. The material provided in counselling allows young adults to get it directly from the resource person so they can ask questions after the lesson is given. With Guspita's research (20), it is known that the lecture method is an effective method of providing counselling. In his research, an increase in knowledge after receiving counselling using the lecture method was known among adolescents who attended health education with the theme of HIV and AIDS. The material provided in counselling makes teenagers feel better because they get it directly from the source. They can also ask questions after the health lecture.⁽¹⁶⁾ Thus, the lecture method is a good way of conveying information to young or early adults.

5. Differences in Knowledge of Audio-Visual Methods and Lectures on Family Planning Against Young or Early Adult Knowledge

The results to assess the difference in knowledge between the two interventions used a statistical test with the independent t-test. The p-value obtained from the independent t-test is 0.00, which means $p < 0.05$, so it can be seen that there is a significant difference between the audio-visual method and lectures on increasing young or early adult knowledge about family planning. The results of this study were to determine differences in knowledge by looking at the average value of knowledge in the audio-visual method group, which was 25.81, and in the lecture method group, which was 24.39, so that the difference was only 1.42. When viewed from the average value per group, it appears that the difference in knowledge that occurs is not much different. However, because there is a difference in the value of 1.42, the level of change in knowledge is higher, namely in audio-visual media.

This is consistent with Hilda's research (2019) on menarche, which found that depending on the respondents' level of knowledge, the audio-visual medium and the lecture approach have different health education strategies. The average score on the post-test following the intervention for lecture media was 17.32 and 18.82 for audio-visual media. It is clear from the statistical analysis's p-value of 0.001 (p-value of 0.05) that there is a significant difference between the knowledge of female students regarding menarche before and after the use of lecture materials and audiovisual media. Compared to lecture media, the use of audiovisual media is more effective.

The same is true of Zakaria's research (2017) in audio-visual media, which states that there was a significant increase in respondents' knowledge before and after receiving health education with audio-visual media. Audiovisual media also attracts more attention, saves time, and can be played repeatedly.

6. Differences in the Effectiveness of Audio-Visual Methods and Lectures on Family Planning on Young and Early Adult Knowledge

The results for assessing the difference in effectiveness of the two interventions used the N-Gain Independent T-Test test. It was found that the average level of knowledge in audiovisual media ($M = 41,612$) had a higher change than the average level of knowledge in lecture media ($M = 19,550$). The results of Table 14 show that the results of the N-Gain Independent T-Test showed that the data was homogeneous ($F = 1,081$; $p > 0.05$), meaning that there was no variance between the audio-visual and lecture groups; the variation in data in both groups was the same. Because the data is homogeneous, the t-test analysis must use the assumption of equal variance. It can be seen that the t value on the assumption of equal variance is 3,341, with a significant probability of 0.001 (0.0010.05). It can be concluded that H_0 is rejected and H_a is accepted, meaning that the audiovisual group has a significant change compared to the lecture group.

According to Susanti et al. (2017) study, video media can boost attitudes by 1.57 times and knowledge by 1.52 times, respectively. This is consistent with "Edgar-Dale's cone of learning experience (1946)," which states that after 3 days of audio-visual interaction, a person's memory capacity learned through seeing a film can be absorbed in memory by as much as 65%. The results are maximised by audio-visual media's ability to activate the senses of hearing and vision (Mulati, 2015). The ability of this audio-visual medium is considered better and more interesting because it contains both elements, namely being heard and seen.

Learning through audio-visual means has the advantages that it can grab participants' attention quickly, demonstrate a skill, save time because the video can be played repeatedly, and participants can adjust the volume of the sound as necessary to clearly understand what they are hearing from videos (Handayani et al., 2012).

D. CONCLUSION

The audio-visual approach and the lecture method have different effects on the respondent's ability to learn. With a mean value of 24.39 and a P value of 0.000 for lectures and 25.81 and a P value of 0.000 for audiovisuals, respectively, there is a substantial difference between lectures and audiovisuals in terms of enhancing adolescent or early adult understanding of family planning. Compared to lectures, audiovisual has a 1.42 times greater knowledge gap. The audiovisual approach is more effective than the lecturing approach. Audio-visual has a value of $M = 41,612$ and a value of $P\text{-Value} = .001$, while lectures have a value of $M = 19,550$ and a value of

P-Value =.001, so audio-visual has a higher effectiveness compared to lectures in increasing young.

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