



- Relationship of Optimism Attitude with Academic Resilience Indeveloping Final Assignments of Nursing Science Students
- Nursing Diagnosis Frequently Enforced by Nurse to Clients with Ischemic Stroke
- The Relationship Nurses' Knowledge and Implementation of Early Warning Score (EWS) In Critical Patients at Sulianti Saroso Infectious Disease Hospital
- Nurse Experience in Providing Holistic Care to Covid-19 Patients in Indonesia: A Qualitative Research
- Perception of Anxiety Levels in Families of Patients Given Informed Consent Ventilator Installation at ICU Cileungsi Hospital
- The Relationship of Long Time Hemodialization with Anxiety Level in Chronic Kidney Failure Patients
- The Effect of Reproductive Health Education on "Bridge to Be" Knowledge in Pre-Marriage Preparation in the Working Area of Sukadami Public Health Center
- Implementation of Fetal Welfare Monitoring with CTG in Third Trimester Pregnant Women at Gatot Soebroto Hospital Jakarta
- Community Knowledge and Attitude to Conduct Covid-19 Booster Vaccination
- The Influence of Social Media on the Knowledge of Youth about People with HIV and AIDS
- The Effect of Cork Fish (*Channa Striata*) Extract on Perineum Wounds among Post-partum Clients
- Interventions to Improve Nurse Therapeutic Communications in the Context of Palliative Care: Literature Review
- The Effect of Social Support on the Parents with Disabilities Children in Experiencing Stress: Literature Review
- Music Therapy on Pain Management Among Post-Operative Patients: A Systematic Review
- Interventions among Child and Adolescent Inmates with Anxiety: A Literature Review
- Moving Cupping and Wet Cupping Based on Bibliometric Analysis and Review: The Novelty of Combination Cupping

JURNAL KEPERAWATAN KOMPREHENSIF	VOL. 8	NO. 3	Page 294 - 432	Bandung July 2022	ISSN 2354-8428 e-ISSN 2598-8727
------------------------------------	--------	-------	-------------------	-------------------------	--

Research Article

The Effect of Reproductive Health Education on “Bridge to Be” Knowledge in Pre-Marriage Preparation in the Working Area of Sukadami Public Health Center

Ai Sariningsih^{1*} | Nofa Anggraini²

^{1,2}Department of Nursing,
STIKes Abdi Nusantara,
Jakarta, Indonesia

*contact

ai.sariningsih02@gmail.com

Received : 06/07/2022

Revised : 29/07/2022

Accepted : 30/07/2022

Online : 31/07/2022

Published : 31/07/2022

Abstract

Aims: This study aimed to determine the effect of reproductive health counseling on the bride and groom’s knowledge of pre-marital preparation. This research was conducted in the working area of the Sukadami Health Center, South Cikarang District.

Methods: This study used quantitative analytical methods with a *pre-experimental* type of research with a *one-group pretest-posttest design* with a *paired t-test statistical test*. The research data collection used primary data taken directly from respondents using a questionnaire with a total sample of 52 respondents.

Results: The results showed that of the 52 respondents studied, 33 respondents with good category reproductive health knowledge were found (63.46%), enough there were 16 people (30.77%) and there were 3 people (5.77%). The results of the t-test showed a *p-value = 0.001*, namely that there was a *significant* difference in the reproductive health knowledge of the bride and groom in pre-marital preparation in the Sukadami Primary health center work area before and after counseling was carried out.

Conclusion: In connection with less knowledgeable respondents, 5.77% of extension workers are expected to provide unhurried counseling following the counseling SOP. Counseling with special needs counseling is provided with more quality.

Keywords:

Counseling, Knowledge, Reproductive Health

INTRODUCTION

Marriage readiness consists of emotional, social, spiritual, role, age, sexual, and financial readiness (1). Reproductive health that has been prepared since pre-marital can reduce unwanted pregnancies and also reduce abnormalities that occur during pregnancy, childbirth, and puerperium. Therefore, the pre-marital preparation program becomes important in pregnancy planning. As the spearhead of maternal and

child health, midwives have a role in providing education about pregnancy planning to brides-to-be in pre-marital obstetric care.

The basic word for pre-marital is “marriage,” a marriage bond (contract) carried out according to the provisions of the law and religious teachings. The affix of the word pre has meaning before. Therefore, the meaning of the word pre-marital is before marriage or before the existence of a marital bond (inner birth)

<https://doi.org/10.33755/jkk>

This is an open access article under the [CC BY-SA](https://creativecommons.org/licenses/by-sa/4.0/) license



between a man and a woman as husband and wife (2).

The pre-marital period can be classified as the pre-conception period, but the pre-conception period is not always classified as the pre-marital period. Pregnancy planning is optimal family planning through safe, healthy, and desired pregnancy planning is one of the important factors in reducing maternal mortality. Therefore, planning a pregnancy is pregnancy planning to prepare for pregnancy to support the creation of a healthy pregnancy and produce offspring that has the quality desired by the family (3). Pre-marital screening and Pre-conception are very important so that pregnancy can run well. Unfortunately, this awareness is still very low, so the rate of pregnancy pain and complications is still very high. Medical examinations before marriage or pregnancy, especially in women, will reduce mothers' and children's pain and mortality rates. In addition, pre-marital and Pre-conception screenings have many advantages, including enabling the identification of medical diseases, assessing psychological and financial readiness, and achieving goals.

Based on a preliminary study conducted at the Sukadami Health Center on 10 brides-to-be, 30% of results were obtained with good knowledge, 30% with sufficient knowledge, and 40% lack knowledge about pre-marital preparation. Based on the above exposure, this study aims to determine the effect of reproductive health counseling on calon bridal knowledge in pre-marital preparation in the work area of the Sukadami Health Center, South Cikarang District, in 2022.

METHODS

This type of research is a *pre-experimental* study with a *one-group pretest-posttest design*. Pre-experimental research is a form of experimental research that does not have a *control* group (4). Instead, behavior is measured before and after the intervention, namely by providing counseling on

reproductive health by distributing leaflets. This study design aims to determine the differences before and after a certain treatment is carried out on the sample.

The population in this study was all brides-to-be who visited for consultation at the Sukadami Health Center from February to March 2022. The sample in this study was taken from 52 brides-to-be taken from populations. The samples used in the study were observed twice, namely before and after counseling. Then a *paired t-test* statistical test is used to see the effect of the counseling results.

Reproductive health counseling is carried out by researchers using the lecture method. This research was conducted at the Sukadami Health Center from February to March 2022. This study used primary data taken directly from respondents using a questionnaire. First, primary data was obtained by conducting a *pre-test* by distributing questionnaires about counseling materials to respondents before counseling. Then a post-test is carried out after counseling reproductive health material with a questionnaire containing the same questions during the pre-test. This post-test is done to evaluate the counseling process by measuring the level of knowledge of respondents.

The data obtained is then processed by assessing the pre-test and post-test results. The assessment of the level of knowledge uses the Guttman scale with two alternative answers, namely True given a value of 1 and False given a value of 0. The criteria for the knowledge level assessment score are divided into three categories. According to (5), with good criteria, if the result of the correct answer percentage is 76% – 100%, sufficient if the result of the correct answer percentage is 56% – 75%, and Less if the result of the correct answer percentage is <56% of all the questions.

Then the data were analyzed with a paired t-test to determine whether or not the influence of counseling on increasing the knowledge of the bride and groom. The α

value in the significance test of this study was 0.05. Therefore, the hypothesis in this study is any The influence of counseling on

the knowledge of bride-to-be reproductive health in pre-marital preparation in the work area of the Sukadami health center.

RESULTS

This research was conducted to determine the effect of counseling on the knowledge of brides-to-be in pre-marital preparation with a sample of 52 respondents both before and after being given counseling with the same person. The study results were analyzed univariately and bivariate in the *T-dependent pair test* and displayed in a distribution table and a *table of the T-dependent pair test*.

Univariate Analysis

From the results of the study, data on the results of the pre-test and post-test were obtained with the following data:

Table 1.
Distribution of Respondents' Knowledge Before and After Counseling

No	Level of Knowledge	Before Counseling		After Counseling	
		Frequency	Percentage	Frequency	Percentage
1	Good	20	38,46%	33	63,46%
2	Enough	22	42,31%	16	30,77%
3	Less	10	19,23%	3	5,77%
	Total	52	100%	52	100%

The respondents' knowledge during the pre-test and post-test experienced an increase in results from the High category from 38.46% to 63.46%. On the other hand, the Sufficient and Fewer categories experienced a decrease in percentage due to an increase in the knowledge of brides-to-be from the Sufficient category from 42.31% to 30.77%, and the Less than 19.23% to 5.77% category.

Bivariate Analysis

Providing reproductive health counseling on the bride-to-be's knowledge can be seen from the paired t-test statistical test results. The data that can be seen is the average value, standard deviation, and *p-value* before and after counseling, with the data obtained as follows:

Table 2.
Mean Value, Standard Deviation, and P-Value

Knowledge	Mean	SD	HERSELF	<i>p-value</i>	N
Before	14,29	2,420	0.336	0,001	52
After	15,12	2,175	0,302		

From the table. 2; it is known that the knowledge of the bride-to-be before reproductive health counseling has an average value of 14.29 with a Standard Deviation value of 2,420, and the knowledge of the bride-to-be after reproductive health counseling has an average value of 15.12 with a standard deviation value of 2.175. Therefore, it can be seen that the difference in the average value and standard deviation of knowledge of prospective brides before and after reproductive health counseling is 0.83 with a standard deviation of 0.245.

The statistical test results with the *t-dependent pair test* are obtained at *p-value* = 0.001 with an alpha of 0.05. Therefore, it can be concluded that there is a *significant* difference in the knowledge of the reproductive health of the bride and groom in pre-marital preparation in the work area of the Sukadami Health Center after counseling.

DISCUSSION

Knowledge of Brides-to-be Before and after Being Given Reproductive Health Counseling.

The results showed an increase in reproductive health knowledge of prospective brides, namely the knowledge category of 52 respondents to the bride and groom before counseling obtained good knowledge results as many as 20 people (38.46%), the sufficient category as 22 people (42.31%) and the less category as 10 people (19.23%) and after counseling, there was an increase, namely the well-rounded category was 33 people (63.46%), the sufficient category was 16 people (30.77%), and the less category was 3 people (5.77%). The results of this study follow those stated by (4), which states that counseling has great potential to increase knowledge.

The findings of researchers in respondents found that there were still 5.77% still had insufficient knowledge about the reproductive health of the bride and groom. This was due to the age factor because the respondents had young age. This follows

the theory proposed by (4). One of the factors that affect a person's knowledge is age. Therefore, the increase in a person's age can affect the increase in his knowledge.

Knowledge of reproductive health is very important to be understood by brides-to-be before marriage to achieve well-being related to the function and processes of the reproductive system in marriage. The large number of brides-to-be who have high knowledge related to reproductive health will affect the health and safety of their reproductive system. This is following the understanding of reproductive health, which is a condition where humans can enjoy their sexual life and can carry out their reproductive functions and processes healthily and safely (6). In addition, according to PP No.61 of 2014, Reproductive health is a state of physical, mental, and social health as a whole, not solely free from diseases or disabilities related to reproductive systems, functions, and processes.

Given the importance of reproductive health knowledge, counseling in Pre-marital activities is the right tool as a medium that can influence the knowledge of brides-to-be related to reproductive health. Following Constitution No.1 of 1974, screening pre-marital and Pre-conception are care given before pregnancy to make it easier for a woman to reach the optimal level of health before she becomes pregnant. A healthy pregnant woman has a great probability of having a healthy baby. Ideally, every pregnancy is planned, and every baby is in a healthy environment. Therefore, in preparing for pregnancy, women must have good knowledge about reproductive health.

The results of this study are also following those carried out by other researchers, based on the research of (7), with the title "The Effect of Premarital Health Education on the Knowledge and Attitudes of Brides-to-be in Lubuk Begalung Padang" The results of a study of 38 brides-to-be showed that 31.6% of respondents were low-knowledgeable before pre-marital

education and 97.4% were highly knowledgeable after pre-marital education, 76.3% were negative before pre-marital education. Therefore, there is an influence of pre-marital education on the knowledge and attitudes of the bride and groom (p values 0.001 and 0.013), meaning that there is an influence between health education and the knowledge and attitudes of the bride and groom.

According to researchers, based on the research results, reproductive health counseling in pre-marital preparation can be an effective means to increase the knowledge of the reproductive health of brides-to-be. However, in this study, there were still 5.77% of respondents who had insufficient knowledge about the reproductive health of the bride and groom. This is because the respondents were still young (< 18 years old) and had a low educational history. So they lack understanding of the counseling material.

The Effect of Reproductive Health Counseling on the Knowledge of Brides-to-be.

From the results of the bivariate analysis of statistical tests with the *t-dependent pair test*, a p -value = 0.001, then with an alpha of 0.05, it can be concluded that the hypothesis is that there is a *significant* difference in the knowledge of reproductive health of prospective brides in pre-marital preparation in the work area of the Sukadami Health Center after counseling.

The results of this study, following (4), state that health counseling is a health promotion medium that can affect a person's knowledge. Counseling can provide a stimulus or reinforcement of rudimentary knowledge that has been previously possessed. This study is in line with the data from the study, which shows that providing reproductive health information through good and targeted counseling during Premarital can significantly influence the reproductive health knowledge of the bride and groom.

Counseling is carried out during pre-marital because there are pre-marital and pre-conception screenings during pre-marital, one of which is health efforts in pre-marital couples. According to (8), one of the health efforts is Promotive Efforts, namely Sex Education at this stage is carried out to provide knowledge to pre-marital couples so that their relationships remain harmonious, such as education about reproductive health, STDs (Sexually Transmitted Diseases), How and when to have healthy relationships, etc. So that during pre-marital, the bride and groom must understand well about reproductive health.

According to the Ministry of Health of the Republic of Indonesia, reproductive health is a healthy state, comprehensively covering physical and mental. Social positions related to reproductive tools, functions, and processes, and reproductive health thinking are a condition free from disease and how a person can have safe and satisfying sex before and married (9). This shows that it is important for brides-to-be to understand reproductive health knowledge to achieve well-being related to the functions and processes of the reproductive system.

The *significant* influence on the bride and groom's knowledge after the reproductive health counseling shows that reproductive health counseling in pre-marital is very instrumental in increasing this knowledge so that the bride and groom have mature provisions regarding reproductive health before the wedding. They were considering that the main purpose of reproductive health is to provide comprehensive reproductive health services to women, including sexual life and women's reproductive rights, which are expected to be able to increase women's independence in regulating their reproductive functions and processes to improve the quality of life (10). In general, reproductive health aims to increase awareness, understanding, protection, and support for the fulfillment



of reproductive rights for individuals and families (11).

The results of this study are also following those carried out by other researchers, based on research by (12) with the title "The effectiveness of reproductive health counseling in prospective brides at primary health care of Pucang Sewu Surabaya," the results of a study of 32 respondents showed that before counseling was carried out, there were 20 (62.5%) prospective brides categorized as less and 12 respondents (37.5%) with sufficient categories. Still, after counseling was carried out, there were 20 (62.5%) prospective brides categorized as less and 12 respondents (37.5%) with sufficient categories, but after counseling was carried out, the results of respondents with a category of fewer than 4 people (12.5%), sufficient categories as many as 19 people (59.3%), and good category as many as 9 people (28.2%). Furthermore, differences in knowledge before and after reproductive health counseling for brides-to-be are also presented using a *paired sample T-test* with a *p-value* of 0.031 (less than α of 0.05). There is a significant difference in the bride and groom's knowledge before and after counseling.

Based on the study results, most brides-to-be experienced an increase in knowledge after reproductive health counseling in pre-marital, so there is a significant influence on reproductive health knowledge before and after counseling.

CONCLUSION

The reproductive health knowledge of prospective brides before and after counseling has increased; namely, the level of knowledge before counseling obtained good knowledge results of 20 people (38.46%), sufficient categories as many as 22 people (42.31%), and fewer categories as many as 10 people (19.23%). After counseling, there was an increase, namely in the category of good knowledge, 33 people (63.46%), the sufficient category as many as 16 people (30.77%), and the less

category as many as 3 people (5, 77%). The statistical test results with the t-dependent pair test obtained a *p-value* = 0.001 with an alpha of 5%. Therefore, it can be concluded that the hypothesis is accepted, namely the influence of counseling on the knowledge of reproductive health of the bride and groom in pre-marital preparation in the work area of the Sukadami Health Center.

REFERENCES

1. Sari MN. An overview of the knowledge of young women about early marriage at SMAN 1 Tamban Barito Kuala in 2013. Karya Tulis Ilm DIII Kebidanan Sari Mulia. 2013;
2. Ministry of Health RI. 2014 data and information (Indonesian health profile). Kemenkes RI, Jakarta. 2015;
3. Setiawan T. BREAST MILK (AR-RADHA') MAKES HOPE IN MARRIAGE (STUDY OF MAUDU'I AL-QURAN SURAT AN-NISA verse 23). JURIS (Jurnal Ilm Syariah). 2017;16(1):19-30.
4. Wulandari P, Fihastutik P, Arifianto A. Psychological Experience of Premarital Pregnancy at Adolescent Age in Purwosari District, Mijen District. J Holist Nurs Sci. 2019;6(2):64-73.
5. Notoatmodjo S. Health Research Methodology. Jakarta: Rineka Cipta; 2012.
6. Wawan A, Dewi M. Teori dan pengukuran pengetahuan, sikap dan perilaku manusia. Yogyakarta Nuha Med. 2010;12.
7. Nugroho Taufan UB. Women's reproductive health problems. 2014;
8. Susanti D, Doni AW, Rustam Y. The Effect of Premarital Health Education on Knowledge and Attitudes of Prospective Bride and Grooms in Lubuk Begalung Padang in 2017. J sehat mandiri. 2018;13(2):18-25.
9. Pratiwi NL, Basuki H. The Relationship between Adolescent Characteristics Regarding the Risk of Transmission of Hiv-Aids and Unsafe

- Sex Behavior in Indonesia. Bul
Penelit Sist Kesehat.
2011;14(4):20975.
10. Prijatni I, Rahayu S. Reproductive health and family planning. Jakarta, Modul Bahan Ajar Cetak Kebidanan. 2016;
 11. Pinem S. Reproductive health and contraception. 2009;
 12. Noviana N, Wilujeng RD. Reproduction health. Trans Info Media. 2014;
 13. Amalia R, Siswantara P. Effectiveness of Reproductive Health Counseling for Bride and Groom at Pucang Sewu Health Center Surabaya. J Biometrika dan Kependud. 2018;7(1):29–38.