
The Role Of Peer Education To Prevent Early Marriage Among Adolescents In Indonesia

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Abstract

The high rate of early marriage in Indonesia is a serious challenge that has an impact on the risks of reproductive health, education, and social welfare of adolescents. Peer education has emerged as a promising intervention strategy, but the effectiveness and determinants of its success of various community service programs in Indonesia require a comprehensive synthesis. This study aims to evaluate the effectiveness of various peer education methods, identify determinants of success, and analyze the challenges of implementing public health strategies in reducing the rate of early marriage in Indonesia. A systematic review was conducted on 18 research articles (consisting of community service actions and quantitative research) published between 2019 and 2026. The analysis was carried out by grouping interventions based on methods, objectives, and outputs achieved, then synthesized to answer the urgency of peer intervention in Indonesia. The results of the analysis showed that the peer education method was consistently able to increase knowledge and change adolescents' attitudes to be more rational ($p < 0.05$). Determinants of success include the convenience of horizontal communication between peers, the use of creative educational media (such as Monopoly Genres and digital platforms), and the integration of programs with formal structures at the village or school level (such as PIK-R and Village Decree policies). However, implementation is still hampered by traditional cultural norms, social pressures, and a lack of post-program sustainability support, as well as structural challenges related to family economics in rural areas. It can be concluded that peer education is a very effective strategy to cut communication barriers on sensitive adolescent reproductive health issues. The sustainability of the program is highly dependent on cross-sectoral collaboration between health offices, village officials, and youth cadres. A more holistic health promotion model is needed by aligning reproductive education, legal protection advocacy, and family economic empowerment to have a systemic and long-term impact.

Keywords: *Early Marriage, Peer Education, Reproductive Health, Adolescent Empowerment, Health Promotion.*

INTRODUCTION

Early marriage is a global phenomenon as well as a national problem that has a significant impact on people's lifestyles, both in the context of culture and health practices (Muntamah et al., 2019). Globally, UNICEF reports that there are about 640 million women who marry before the age of 18, with an estimated 12 million child brides each year. Indonesia is ranked 2nd in Southeast Asia with national data recording as many as 52,000 cases of early marriage out of a total of 46 million teenagers in 2022. The highest distribution of cases is concentrated on the island of Java (as much as 60%), where West Java Province itself recorded 5,523 cases in 2022 (BPS West Java Province, 2023). Conditions at the village level are even more concerning, for example, in the Sembung Village area, the rate of adolescent marriage reached 29% which resulted in a high dropout rate (Andaruni et al., 2019).

The Indonesian government has intervened through the revision of Law Number 16 of 2019 which raises the minimum age of marriage to 19 years. However, this policy faces a major challenge in the form of a surge in applications for Marriage Dispensation in Religious Courts which remains high. Despite the general downward trend, the child marriage rate in Indonesia is still stagnant in the range of 8-10%. Most people still see marriage as an economic solution or a form of protecting the family's reputation from the risk of deviant behavior (Marcelina et al., 2021). This confirms that the root of the problem is not only legality, but also in the strong local cultural support and the low understanding of adolescents regarding Maturity of Marital Age (PUP) (Andaruni et al., 2019; Marcelina et al., 2021).

The clinical impact of early marriage is fatal and poses a serious threat to women's reproductive health. Adolescent girls in the age range of 10-14 years have a risk of death during pregnancy or

childbirth up to five times higher than mature women (Nurjanah et al., 2013). In addition to triggering medical complications such as anemia, pregnancy poisoning, and postpartum infections, early marriage also contributes 20% to the national stunting incidence rate (Ministry of Health, 2018). This impact does not stop at the mother, but also extends to the quality of future generations who are at high risk of experiencing low birth weight (BBLR) and behavioral development disorders (Sakdiyah & Ningsih, 2013). Psychosocially, couples who marry under the age of 18 have a 41% higher risk of mental disorders such as depression and anxiety, which ultimately triggers a high divorce rate at a young age (Pradana et al., 2022).

This problem is exacerbated by the impasse in communication between adolescents and the family environment regarding sensitive issues. Data from the Indonesian Demographic and Health Survey (SDKI) reveals that the majority of adolescents feel embarrassed and uncomfortable to discuss reproductive health with their parents. This lack of openness encourages adolescents to seek information independently through the internet without assistance, which often leads to misunderstandings or myths. It was recorded that as many as 96.7% of adolescents have been exposed to pornographic content that directly increases the risk of premarital sex behavior and Unwanted Pregnancy (KTD) (BKKBN, 2018; SDKI, 2017). On the other hand, real-world conditions in the field show that 53.6% of adolescent girls actually feel much more comfortable and open when getting information from their peers (Andaruni et al., 2019).

Considering the psychological dynamics of adolescents, the peer education method emerged as the most relevant and effective intervention strategy. Peer educators are able to overcome emotional barriers through the use of equal language, a relaxed communication style, and a minimally stigmatized approach compared to formal education (Fitriyani, 2019). The effectiveness of this method has been proven to significantly increase adolescents' knowledge scores, with an increase in the average score from 16.33 to 20.44 post-intervention (Andaruni et al., 2019). Through the Social Learning Theory approach, peer educators not only play a role in conveying information, but also become positive role models in their environment. Based on this urgency, this literature review was carried out to integrate the strategic role of peer education in reducing the rate of early marriage in order to realize a healthier and more quality young generation of Indonesia.

RESEARCH METHODS

This study uses a literature review design that focuses on the role of peer education in preventing early marriage in adolescents in Indonesia. The literature search strategy is carried out systematically through a digital academic database, namely Google Scholar. Keywords used in the search process included a combination of the terms "early marriage", "adolescent", "peer education", "peer educator", and "reproductive health". All articles collected are then filtered based on the relevance of the topic and the availability of the full-text manuscript. This is done to ensure that the data taken has an adequate depth of information to be analyzed comprehensively.

The journal selection process in this study applies inclusion and exclusion criteria to maintain data quality. The inclusion criteria include journal articles published in the last ten years to ensure the novelty of information. In addition, the article should focus on peer education interventions carried out in Indonesian regions with the target adolescent population. Meanwhile, the exclusion criterion is applied to articles that are only abstracts, opinion articles, or research that do not clearly list the results of the intervention. Through the screening stage, as many as 18 selected journals were obtained that were eligible for a more in-depth review.

RESULTS AND DISCUSSION

The selection of these 18 journals resulted in the following literature reviews:

Table 1. Literature Review Results

Title (Year)	Purpose	Method	Research Results
Journal of Community Service			
The establishment of Peer Educators in an effort to improve the quality of adolescents through providing access to information about the maturity of marriage age in Sembung Village, Narmada District, West Lombok Regency.	Improving the quality of adolescents and providing access to information on marriage age maturation (PUP) in the community.	Action with a combination of lectures, role plays simulated by counselors, FGD using Monopoly Genre media, and real simulations.	Specific success achieved 90% knowledge improvement and 80% of adolescents were able to act as proactive peer counselors.
Efforts to Prevent Premarital Sex with Peer Empowerment.	Empowering peers to prevent the phenomenon of teenagers being forced to marry due to unwanted pregnancies.	Community-based action through counseling, interactive discussions, and the formation of peer cadres at the Taklim Council.	Increased overall reproductive health knowledge in participants and willingness to be a counselor for peers.
Increasing Knowledge and Awareness of Adolescent Girls' Reproductive Health Through Peer Mentoring Programs in the Cimalaka Health Center Working Area.	Addressing the low knowledge of adolescent reproductive health at the secondary school level.	Peer mentoring action with intensive training for 3 days using medical materials and therapeutic communication.	An increase in the average knowledge score from 11.63 (pre-test) to 46.63 (post-test) as well as the success of WhatsApp groups as a means of consultation.
SELF-SHIELD (Youth Group Training to Avoid Free Sex and Early Marriage).	Avoid cases of promiscuity and early marriage triggered by a lack of parental supervision.	Action with lectures, FGDs, demonstrations, and digital innovations using the Quizizz application and one-month mentoring.	Increase in cadre knowledge from 43% to 57% and the formation of youth cadre groups under the auspices of traditional organizations.
The Role of Peers in Improving Early Marriage Reproductive Health Knowledge in Adolescents.	Reduce the rate of early marriage by using peers as the main source of information.	The action was in the form of FGD, counseling, and intensive assistance by health workers to 20 peers of the intervention group.	A drastic increase in knowledge in the "Good" category from 0% to 95% after adolescents received direct education from peers.
Training to become a peer educator as a preventive effort for early marriage.	Providing provisions for marriage age maturity (PUP) to PIK-R members in local villages.	The action uses the Project Based Learning (PjBL) method and a demonstration of peer educator practices with a monitoring checklist.	The success of training 22 cadres who are able to provide independent education related to premarital education with a message that is more accepted by peers.
Empowerment of Peer Counselors in the Prevention of Early Marriage Incidents with the Marriage Age Maturation Program (PUP).	Empowering peer counselors in the Marriage Age Maturity (PUP) program to reduce	Empowerment actions through adolescent health counseling and technical training for counselors on reproductive health.	A significant increase in counselor knowledge from 20% to 100% and adolescents' understanding of PUP increased by up to

	school drop-outs.		100%.
Formation and Development of Cadres of Peer Educators to Prevent and Mitigate the Impacts of Early Marriage in the Village of Pool, Percut Sei Tuan District, Deli Serdang Regency, North Sumatra.	Prevent the physical and social impact of child-age marriage through legal and community approaches.	The action was carried out with KIE socialization, peer educator training, and legal paralegal training for teenagers and village officials.	A community of 30 adolescent cadres was formed with formal support through the Village Decree on "Reject Early Marriage" for systemic protection.
Prevention of Early Marriage Through Peer Counselors for Adolescents in North Cipinang Besar	Providing reproductive knowledge to prevent free sex and domestic violence in densely populated areas.	Peer counselor empowerment action through puberty counseling, early marriage risk, and communication technique training.	Increased understanding of the material 100% and all cadres (100%) expressed full readiness to become active counselors in their environment.
Health Education in Empowering Healthy Adolescents to Increase Knowledge about Early Marriage at MTs Nurul Huda.	Increase adolescents' knowledge of the definition, causative factors, and impacts of early marriage.	Health education action with an interactive lecture approach and in-depth questions and answers to 100 students.	A significant change in which most respondents switched from less category knowledge to good category after education.
Peer Educator Training on Early Marriage for Adolescents in West Bandung Regency.	Empowering adolescents as a trusted source of information for peers about the medical risks of early marriage.	Peer educator training action with interactive materials to train speaking skills and convey sensitive information.	The formation of adolescent change agents who are ready to carry out continuous education and are able to understand their reproductive rights.
Community Empowerment on Adolescent Reproductive Health through the Establishment of "Radar Kepo" with a Community-Based Research (CBR) Approach.	Forming a community of peer educators through participatory research to detect marriage risks early.	Community-Based Research (CBR)-based action through cadre training, counseling, and continuous mentoring.	The increase in the level of knowledge is real and the formation of a "Radar Kepo" community that actively provides education between schoolmates.
Empowerment of Adolescents Through the Establishment of PIK-R on the Merapi Slopes as an Effort to Prevent Early Marriage.	Reducing unplanned marriages through optimizing the role of adolescents as peer educators.	The action of establishing a Youth Information and Counseling Center (PIK-R) that is synergistic with the role of Youth Family Development (BKR).	Significant increase in knowledge in the "Good" category from 21.74% to 52.17% and the appointment of PIK-R Ambassadors as the driving force.
PROTECTION: Integrated education and counseling programs for adolescent peers on reproductive health.	Integrated educational innovations to improve adolescents' understanding of reproductive organs and free sex.	Educate innovation through integrated counseling training and the use of the Canva app for promotional media.	An average increase in understanding of 22.2 points, 100% of students become ambassadors, and the formation of a cadre of counselors with high empathy.
SMART Innovation (Prevent Early Marriage with Education, Active Adolescents, and Peers): Strengthening the Role of Youth Posyandu at the Andeo Health	Strengthening the role of the Youth Posyandu in preventing early marriage through interactive media.	Action through institutional coordination, cadre training, and the use of WhatsApp groups for monitoring adolescent	An increase in knowledge of good categories from 20% to 70% and a change in good behavior from 16.7% to 66.7%.

Center.		behavior.	
Journal of Quantitative Research			
The Influence of Peers, Family Environment and Culture on Adolescent Perceptions of Underage Marriage.	Analyzes the influence of peers, family environment, and culture on adolescent perception.	Quantitative analytical cross-sectional approach using stratified random sampling technique on 317 female students.	Peers had the strongest influence (OR 2,632) in shaping adolescents' perceptions of rejecting underage marriage.
The Effectiveness of Health Promotion with the Peer Education Method on the Knowledge and Attitudes of Young Women about the Impact of Early Marriage at SMPN 5 Cilegon.	Analyze the effectiveness of peer education on the knowledge and attitudes of adolescent girls.	The pre-experimental experiment used leaflet media and small discussion groups that were conducted in a relaxed manner.	Average knowledge increase from 5.39 to 8.20 and change in positive attitude from 54.2% to 96.6% (significant p=0.000).
The Influence of Peer Education on Adolescents' Attitudes about Marriage in Mimika Regency.	Changing adolescents' permissive attitudes to be more rational regarding the risks of early marriage.	Quasi-experiment with a one-group pretest-posttest design on 65 respondents using a valid questionnaire.	A significant increase in adolescent attitudes (p=0.000) and a change in more positive/rational behavior in postponing marriage.

Based on a review of 18 research articles on early marriage prevention interventions in Indonesia, it was found that the method of empowering adolescents through peer education or peer counselors is the most dominant approach applied, reaching 70%. In general, all the journals analyzed showed a positive correlation between the provision of structured reproductive health education and increased knowledge and changes in adolescents' attitudes towards a more rational direction in postponing the age of marriage. Significant improvements in adolescent knowledge were recorded in the majority of intervention studies, with some quantitative studies having validated significant changes in these behaviors, as evidenced by the acquisition of a p-value of less than 0.05. These findings indicate that educational method innovations involving adolescent activism, whether through peer education, project-based learning, or community-based research, have proven to be more effective than conventional lecture methods.

Discussion

The success of peer education interventions revealed through the reviewed research articles shows that early marriage prevention interventions in Indonesia have undergone a paradigm shift from conventional instructional approaches to highly participatory community-based youth empowerment. The majority of research consistently shows that the peer education method is not just an information delivery technique, but a major psychosocial strategy to overcome the communication barriers that often occur between adolescents and authority figures. Adolescents' emotional discomfort when discussing sexuality issues with parents or teachers can be effectively mitigated when education is delivered through horizontal interactions among peers. The concrete evidence from the journal discussed earlier reinforces this argument by showing that peer influence is the most powerful determinant in shaping adolescent perceptions, beyond the influence of the family environment that is often trapped in traditional cultural norms that are permissive to child marriage.

The effectiveness of the interventions found in these studies was strongly influenced by the integration of creative methods and the use of digital platforms adapted to adolescent developmental psychology. The use of educational game media such as Monopoly Genre and the integration of digital platforms such as Kahoot and Quizizz have been proven to significantly increase the active involvement of participants while eliminating boredom in the process of evaluating learning outcomes. Furthermore, there are studies that show that the use of WhatsApp groups as a continuous monitoring

medium is a crucial technological adaptation that ensures the sustainability of interventions after the formal training period ends in the Puskesmas environment. The transformation from a passive lecture method to Project Based Learning or Community-Based Research has significantly shifted the position of adolescents from target objects to active subjects who are able to conduct an objective assessment of the risk of early marriage in their own environment.

The strategic role of this prevention program lies not only in increasing knowledge, but also in building commitment and systemic protection for adolescents through formal cross-sectoral collaboration. Clear evidence of this effectiveness is shown by a significant spike in knowledge scores in several journals, where the percentage of participants in the "Good" category reached 100% after being given intensive and structured mentoring. In addition, there are studies that provide a very valuable perspective by emphasizing that youth initiatives should be supported by local policies, such as through the Village Decree on "Reject Early Marriage", to provide permanent legal protection for children in the village. The synergy between reproductive health education and marriage law advocacy has proven to be a crucial holistic approach to address the root causes of social and economic problems, especially in rural areas with high dropout rates.

Cumulatively, the results of these 18 studies prove that the success of early marriage prevention programs is highly dependent on the extent to which adolescents are given trust as agents of change supported by a supportive local ecosystem. Interventions that have proven successful in the majority of studies show that when adolescents are provided with accurate information and safe spaces to confide, they are able to independently reject risky sexual behaviors and avoid child-age marriage. By adopting this empowerment model in a sustainable manner, health promotion programs can ensure that adolescent protection efforts remain relevant to the evolving social challenges in various regions of Indonesia. Therefore, collaboration between public health practitioners, village officials, and youth cadres is the most ideal intervention model to emphasize the rate of early marriage nationally in the future.

CONCLUSION

From the results of the research and discussion of the results, it can be concluded that the peer education method has proven to be very effective as an intervention strategy to reduce the rate of early marriage in Indonesia with the main advantage in horizontal communication that is able to penetrate emotional barriers and taboos in adolescents. The use of diverse approaches, ranging from role play simulations, game-based educational media such as Monopoly Genre, to the use of digital technology (Kahoot, Quizizz, and WhatsApp monitoring), consistently significantly improved participants' reproductive health literacy. These programs have succeeded in transforming adolescents from mere target objects to active subjects (agents of change) who are able to provide independent education and influence the perception of peers in postponing the age of marriage in a more rational manner.

In addition, the success of peer education is influenced by three main determinant factors: first, the level of psychological comfort of adolescents increases when interacting with peers compared to authority figures. Second, the use of interactive, creative, and adaptive materials to the development of adolescent technology, which is able to maintain enthusiasm and active participation during the intervention process. Third, the integration of programs with formal structures at the village or school level, such as the formation of cadre communities (PIK-R or Radar Kepo) and formal policy support in the form of Village Decrees, which provide social legitimacy while ensuring the sustainability of the program after the mentoring period ends.

The implementation of peer education as a public health strategy still faces serious challenges, especially related to traditional cultural norms and social pressures that often normalize child marriage. Other barriers include a lack of ongoing support from local governments or educational agencies that cause programs at risk of stalling after the service period is over. In addition, family economic factors

in rural areas that encourage adolescents to immediately work or get married are still structural challenges that are difficult to overcome with health education alone. Therefore, stronger cross-sectoral collaboration is needed to align reproductive health education with advocacy for legal protection and strengthening the family economy to reduce the rate of early marriage holistically and systemically.

REFERENCES

- Andyarini, E. N., & Mustika, I. (2025). Pemberdayaan masyarakat tentang kesehatan reproduksi remaja melalui pembentukan "Radar Kepo" dengan pendekatan Community-Based Research (CBR). *Jurnal Kesehatan Masyarakat*, 9(3), 200–212.
- Ardhiani, I. T., Wardhani, R. K., & Mardiana, H. R. (2024). Pendidikan kesehatan dalam pemberdayaan remaja sehat untuk meningkatkan pengetahuan tentang pernikahan dini di MTs Nurul Huda. *Jurnal Pengabdian Masyarakat*, 8(2), 45–55.
- Arisjulyanto, D., & Suweni, K. (2023). Pengaruh Empowerment Community dalam upaya mencegah pernikahan dini pada remaja. *Jurnal Kesehatan*, 1(4), 1–10.
- Asma, N., Pramana, C., & Agustiani, M. D. (2026). Inovasi CERDAS (Cegah Pernikahan Dini dengan Edukasi, Remaja Aktif, dan Sebaya): Penguatan peran Posyandu Remaja di Puskesmas Andeo. *Jurnal Promosi Kesehatan*, 4(3), 15–29.
- Astari, R., & Fitriyani, E. (2019). Pengaruh peer education terhadap pengetahuan dan sikap remaja tentang pencegahan HIV-AIDS di SMK Korpri Majalengka. *Jurnal Ilmu Kesehatan Bhakti Husada: Health Sciences Journal*, 10(2).
- BPS Provinsi Jawa Barat. (2023). Jumlah penduduk hasil proyeksi interim di Provinsi Jawa Barat menurut kabupaten/kota dan jenis kelamin, 2021-2023.
- Ding, X., & Yao, J. (2021). Peer education intervention on adolescents anxiety, depression, and sleep disorder during the COVID-19 pandemic. *Psychiatria Danubina*, 32(3-4), 527-535.
- Dumilah, R., Fariji, A., & Petralina, B. (2019). Pengaruh teman sebaya, lingkungan keluarga dan budaya terhadap persepsi remaja tentang perkawinan di bawah umur. *Jurnal Penelitian Kesehatan*, 4(1), 15–28.
- Hamidiyanti, Y. F., & Pratiwi, I. G. (2021). Peran teman sebaya dalam meningkatkan pengetahuan kesehatan reproduksi pernikahan usia dini pada remaja. *Jurnal Kesehatan Reproduksi*, 3(1), 10–22.
- Hanifah, S. D., Nurwati, R. N., & Santoso, M. B. (2022). Seksualitas dan seks bebas remaja. *Jurnal Penelitian dan Pengabdian Kepada Masyarakat (JPPM)*, 3(1), 5-7.
- Izah, N., Hidayah, S. N., Rakmita, & Aldina, H. (2020). Upaya cegah premarital seks dengan pemberdayaan teman sebaya. *Jurnal Pengabdian Masyarakat*, 11(01), 33–45.
- Kadafi, A., Pratama, B. D., & Suharni. (2022). Pelatihan menjadi pendidik sebaya sebagai upaya preventif pernikahan dini. *Jurnal Pengabdian Masyarakat*, 2(2), 88–101.
- Kemendes RI. (2018). Riset Kesehatan Dasar (Riskesdas). Badan Penelitian dan Pengembangan Kesehatan.
- Kurniadi, Hasbi, M., & Wulandari, A. T. (2023). Pemberdayaan konselor sebaya dalam pencegahan kejadian pernikahan dini dengan program Pendewasaan Usia Perkawinan (PUP). *Jurnal Pengabdian Masyarakat*, 6(2), 112–125.
- Kusmiran, E. (2014). Kesehatan reproduksi remaja dan wanita. Salemba Medika.
- Marcelina, S. T., Yudianti, I., Sondakh, J. J., & Astutik, H. (2021). Pemberdayaan remaja dalam mencegah pernikahan dini dan stunting. *Jurnal Dharma Bakti-LPPM IST AKPRIND*, 4(2), 202-215.
- Muhajarah, K., & Fitriani, E. (2022). Edukasi stop pernikahan dini melalui penyuluhan pendewasaan usia perkawinan. *JMM (Jurnal Masyarakat Mandiri)*, 6(3), 2268-2280.

- Muntamah, A. L., Latifiani, D., & Arifin, R. (2019). Pernikahan dini di Indonesia: Faktor dan peran pemerintah perspektif penegakan dan perlindungan hukum bagi anak. *Widya Yuridika*, 2(1), 1-15.
- Nurfazriah, I., & Hartati, A. (2023). Efektivitas promosi kesehatan dengan metode peer education terhadap pengetahuan dan sikap remaja putri tentang dampak pernikahan dini di SMPN 5 Cilegon. *Jurnal Promosi Kesehatan*, 1(3), 40–52.
- Oktaviana, A. W., Sofiana, L., Wahyuningrum, D., dkk. (2025). Pemberdayaan remaja melalui pembentukan PIK-R di lereng Merapi sebagai upaya pencegahan pernikahan dini. *Jurnal Kesehatan Masyarakat*, 6(2), 75–89.
- Pradana, H. H., Prastika, S. D., Mudawamah, N., & Siswoko, R. Y. (2022). Kesejahteraan psikologis pada pasangan pernikahan dini di Kabupaten Blitar. *Al-Izzah: Jurnal Pendidikan dan Konseling Islam*, 2(2), 12-22.
- Prawiradilaga, R. S., Makaginsar, C., Rianti, E., Yuniarti, & Yulianti, A. B. (2024). Pelatihan edukator sebaya mengenai pernikahan dini pada remaja di Kabupaten Bandung Barat. *Jurnal Pengabdian Masyarakat*, 9(11), 30–42.
- Qamariah, N., Andaruni, R., Amini, A., Harahap, A. P., & Amilia, R. (2019). Pembentukan peer educator dalam upaya peningkatan kualitas remaja melalui pemberian akses informasi tentang pendewasaan usia perkawinan di Desa Sembung. *Jurnal Pengabdian Masyarakat*, 3(1), 5–18.
- Rosamali, A., & Arisjulyanto, D. (2020). Pengaruh pendidikan kesehatan terhadap tingkat pengetahuan remaja tentang bahaya pernikahan dini di Lombok Barat. *JISIP (Jurnal Ilmu Sosial dan Pendidikan)*, 4(3), 21-25.
- Rosdarni, Dasuki, D., & Waluyo, S. D. (2015). Pengaruh faktor personal terhadap perilaku seksual pranikah pada remaja. *Jurnal Kesehatan Masyarakat Nasional*, 9(3), 214-221.
- Siregar, N. S. A., Arisjulyanto, D., Mansur, T. N., & Abimulyani, Y. (2025). Pengaruh peer education terhadap sikap remaja tentang pernikahan di Kabupaten Mimika. *Jurnal Penelitian Kesehatan*, 4(1), 105–118.
- Sukaesih, N. S., Pramajati, H., Sopiah, P., & Lindayani, E. (2020). Peningkatan pengetahuan dan kesadaran tentang kesehatan reproduksi remaja perempuan melalui program pendampingan teman sebaya di wilayah kerja Puskesmas Cimalaka. *Jurnal Kesehatan Masyarakat*, 11(04), 210–225.
- Trisiswati, M., Sofie, Y., Maulana, A. Y., & Rizka, N. (2024). Pencegahan pernikahan dini melalui peer konselor remaja di Cipinang Besar Utara. *Jurnal Pengabdian Masyarakat*, 5(2), 55–68.
- Yunus, M., Amelia, D., Suprobo, N. R., Devi, T., Athallah, R. F., Billah, M. A. A., & Wibowo, R. A. (2025). PROTEKSI: Program edukasi dan konseling terintegrasi untuk remaja sebaya tentang kesehatan reproduksi. *Jurnal Kesehatan Masyarakat*, 5(2), 120–135.
- Zuliah, A., Aflah, Hasibuan, R. L., Simamora, M., & Safnul, D. (2023). Formation and development of cadres of peer educators to prevent and mitigate the impacts of early marriage in the village of Pool, Percut Sei Tuan District, Deli Serdang Regency, North Sumatra. *Jurnal Kesehatan*, 8(2), 22–35.