

FULL PAPER

Intention to prepare family life of female adolescent in Islamic boarding school: a pilot study

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Rate of early marriage in Indonesia is still high, linear with number of early marriages in Islamic boarding schools (IBS). IBS is the oldest Islamic educational institutions which are dominated by teenagers and half of them are female. The high number of early marriages in IBS indicates that there is still a lack of preparation for family life which can cause health problems to death, psychological, economic and social. This situation is exacerbated by patriarchal practices in IBS which are still very high. The aim of this research was to determine the differences in intentions to prepare family life of female adolescent among types of IBS, namely salafiah, modern, and other forms of IBS (based on Law of the Republic of Indonesia No. 18 of 2019 concerning IBS). This research is a pilot study in developing interventions to prepare family life of female adolescent in IBS. This research was quantitative with cross sectional design. This pilot study research used a sample of 90 respondents consisting of 30 female adolescent in each type of IBS in East Java Province, Indonesia. The sampling technique using accidental sampling technique. Data collection was carried out using a questionnaire containing the intention of first age to get married, number of children, pregnancy spacing and use of contraception. Data analysis with univariate and bivariate (Kruskal Wallis test). The results of the research show that in general there is no difference in the intention to prepare family life of female adolescent among types of IBS, majority of intention to prepare family life of female adolescent in IBS are in poor category. However, there are differences in the intention of first age to get married and pregnancy spacing. Likewise, there are no significant differences in the intention of number of children and use of contraception.

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Introduction

Early marriage rate in Indonesia is still high. Early marriage is a marriage carried out by someone who is relatively young (less than 19 years old). In 2018, 1 of 9 girls got married. In that year, women aged 20-24 years who were married before 18 years old is estimated to reach 1,220,900 children. This high rate of early marriage puts Indonesia in tenth with the highest child marriages in the world [1].

In 2021, Indonesia's ranking for child marriage cases rises to 8th in the world. In ASEAN, Indonesia was ranked 2nd after Cambodia. About 22 out of 34 provinces in Indonesia have a higher rate of child marriage than the national average [2].

Early marriage has an impact on pregnancy and childbirth and increases the risk of morbidity and mortality for mothers and babies [3-7]. Early marriage is at risk of interruption of education, husband and wife quarrels to violence and divorce. In addition, there is also a risk of having many pregnancies or children due to the longer reproductive age [8-10].

The high number of early marriages in Indonesia is directly proportional to the number of early marriages that occur among female adolescent at IBS [11-13].

IBS are the oldest Islamic educational institutions that have produced many Islamic figures [14]. IBS in Indonesia are dominated by adolescent with a total of 30,495 IBS with 4,373,694 santri or student [15], and 49.81% consisting of female santri. In addition to the relatively large number, IBS has the ability to become a community mobilizer in the political, economic, social, and cultural fields is the fact that IBS is the potential for national development. IBS is the most autonomous Islamic educational institutions, not dependent on the government or existing powers, and cannot be intervened by any party except the kiai. Kiai is a central figure (male) in the life system of IBS, as well as the

leader of IBS [16]. The existence of this male central figure also has an impact on the patriarchal system and practices that still reside in IBS. Patriarchal systems and practices in IBS can be seen from the response of IBS to women in the leadership system, gender bias in learning texts and masculinity and norms in IBS [17].

The patriarchal practice in IBS that is still often found is arranged early marriage which are carried out privately. A woman who is still a virgin does not have the authority to decide when and with whom to marry because everything will be determined by her father. Father is considered to have full authority to marry off daughters who are still virgins. Not infrequently, fathers also delegate their rights to the kiai in making decisions about marrying their children [11-13,18-19].

The patriarchy that is strongly felt in IBS can also be seen from the understanding of learning texts. In the "yellow book", the term for a book that is used as a reference for learning, it is explained that one of the roles of women is as a "fields" which means that a good woman to be a wife is a fertile woman who can produce many children. In fact, the interpretation of the "field" means it is very noble, namely not necessarily producing children, but how a husband can look after the field so that it can maintain its function by looking after it so that it is healthy and produces quality offspring. Thus, if we examine it more deeply, the purpose of the "field" here is not the quantity of children, but the quality of the children and taking into account that the wife's reproductive function is healthy. Linked to the understanding that having many children means a lot of fortune, if having many children can harm women, then prevention efforts need to be taken [20-22].

Based on the Law of Republic of Indonesia No. 18 of 2019 concerning IBS, IBS are divided into three types, namely; Salafiah, modern, and other forms of IBS. Because of

these differences in type, each IBS also has different characteristics and culture [23].

The existence of several types of Islamic boarding schools can influence the diversity of intentions to prepare family life of female adolescent in IBS. Therefore, in an effort to overcome this, it is necessary to study the differences in intentions to prepare family life of female adolescent in each type of IBS so that appropriate measures can be taken among types of IBS according to the conditions and characteristics of each IBS. The aim of this pilot study research was to determine differences in intentions to prepare family life of female adolescent among types of IBS.

Materials and methods

This research is a cross-sectional study. The population in this study were female adolescent aged 15-24 years old in three types of IBS. The selected IBS were in East Java Province, Indonesia, because this province has the largest number of IBS with mukim santri in Indonesia. The research was conducted in May-July 2022. The sample in this study was 90 respondents consisting of 30 female adolescent from each type of IBS refers to the minimum number of samples in research conducted in addition to multivariate analysis, namely 30 to 500 [24]. The sampling technique was carried out by accidental sampling technique. Data collection in this study was carried out by distributing questionnaires to representative respondents using a survey questionnaire

adopted from IDHS questionnaire. Intentions was categorized as good and less. Intentions was categorized as good if they have appropriate intentions in 4 aspects of preparing for family life, i.e. first age to get marry, number of children, pregnancy spacing, and use of contraception. Intentions was categorized as less, if there is one of the 4 aspects of preparing for family life that is not appropriate. Data analysis was performed using univariate and bivariate tests (Kruskal Wallis). This research has passed an ethical review with number Ket 543/UN2.F10.D11/PPM.00.02/2022.

Results and discussion

Majority of female adolescent in this study are aged 20-24 years (95%). Female adolescent with the youngest age being 18 years and the oldest being 24 years (Table 1). The results of this study show that there is no difference in the intention to prepare family life of female adolescent among IBS with p -value > 0.05. The majority of female adolescent's intentions to prepare family life in IBS are less than 99%. Only 3% of female adolescent in modern IBS have good intentions in preparing family life (Table 2).

The results of this research are linear with the results of previous research, namely that adolescent in IBS have less intention in preparing for family life. Although previous research has not carried out comparisons among types of Islamic boarding schools (Azza, et al., 2014; Ardiana 2018; Istawati, 2019).

TABLE 1 Frequency distribution of respondents age among types of IBS

Age	Types of IBS			Total, n (%)
	Salafiah, n (%)	Modern, n (%)	Other form, n (%)	
15-19	1 (3)	1 (3)	31 (10)	5 (5)
20-24	29 (97)	29 (97)	27 (90)	85 (95)
				90 (100)

TABLE 2 Frequency distribution of intentions to prepare family life of female adolescent among IBS

Intention	Family Life Preparation Intention			Total, n (%)	P- value
	Salafiah, n (%)	Modern, n (%)	Other form, n (%)		
Less Intention	30 (100)	29 (97)	30 (100)	89 (99)	0.
Good Intention	0 (0)	1 (3)	0 (0)	1(1)	3
				7	
				90 (100)	

Intentions for preparing family life for young women in this study included first age to get marry, number of children, pregnancy spacing, and use of contraception. The results of this study also show that there is a significant difference in the intention of first age to get marry and the pregnancy spacing among female adolescent in IBS's type with a p-value <0.05. However, there was no significant difference in the intention of the number of children and the use of contraception among types of IBS with p-value > 0.05 (Table 3). The majority of female adolescent have the intention to get married at the age of 21 years. However, the majority of female adolescent in Salafiah IBS answered that they did not know the age at which they first to get marry (73%). Meanwhile, the majority of female adolescent in modern and other forms IBS have an age at first to get marry of over 21 years, respectively 83% and 97% (Table 3).

In filling out the questionnaire, some of the female adolescent at the salafiah IBS answered surrender to fate. Other answers were also found, it is useless to intend because the decision rests with the parents completely. This is linear with the findings in this study which show that the dominance of planning for decision-making at the first age to get marry of female adolescent at salafiah IBS lies with the parents. Unlike the female adolescent in modern and other forms IBS, the majority of decision-making intentions at the first age to get marry are themselves and their parents (Table 4). Accordingly, it can be seen that the majority of female adolescent at salafiah IBS are powerless in making decisions. The majority of female adolescent

have the intention to have more than 2 children, respectively 63%, 80%, and 90% in female adolescent at salafiah, modern, and other forms IBS. (Table3). Some of them wrote down the reason for having many children, namely to have a more prosperous life, because many children will bring a lot of sustenance. Islamic scholars (Ulama') differ on the number of children born to Muslim families. Ulama are not concerned with the number of children that Muslims must have. In this case, the most important task that must be done by parents is to look after and be responsible for providing the best education and ensuring food intake including nutrition for their children [25].

The results of previous research conducted by Bhakti and Lubis (2021) showed that the number of children is also a determining factor for the level of family welfare [26]. Therefore, it can be assumed that fewer children means fewer needs that must be met by a family. In addition, economic ability also does not necessarily justify having many children, but ability is needed to ensure that children can grow with quality. Therefore, the meaning of "many children" is not in the quantity aspect but in the quality aspect as quoted from Al-Qur'an Surah An-Nisa Verse 9. Therefore, it is necessary to equalize the perception about the importance of prioritizing the quality of children over quantity. If this inaccurate perception is allowed, there will be many female adolescent competing to have many children which will endanger the health of both mother and child. Most female adolescent have the intention to have pregnancy spacing more than 2 years. But,

majority of female adolescent at salafiah IBS answered that they did not know about the intention to pregnancy spacing (54%). Likewise, the intention for the pregnancy spacing to be less than 2 years was the highest among female adolescent at the salafiah IBS (13%) (Table3).

The results of this study also showed that only a small proportion of female adolescent among three types of IBS had use of contraception intention (10%). Majority of female adolescent unknown whether they will use contraceptive or not in the future, i.e. 63%, 47%, and 43%, respectively, there are female adolescent in salafiah, modern and other form IBS while the female adolescent did not have use of contraception intention, respectively, 33%, 43%, and 38% of the female adolescent in salafiah, modern and other forms IBS (Table 3).

This finding is directly proportional to the number of female adolescent who have the intention to have more than two children. Therefore, it is very important to provide education to provide correct understanding to female adolescent in terms of preparing for family life both in terms of intention at first age to get marry, number of children, pregnancy spacing, and use of contraception so that the intentions of female adolescent in preparing family life are correct and in accordance with Islam and health. The findings of this study show that although in general there is no significant difference in intentions to prepare family life among types of IBS, there are significant differences in intentions for first age to get marry and pregnancy spacing. The different types of IBS influence young women's intentions to prepare family life, which are influenced by the culture and characteristics of each type of Islamic boarding school. As is known, Salafiah IBS generally focus more on local customs and traditions with the power of the "Yellow Book" and respect for their respective kiai. In contrast to modern IBS,

respect for kiai is not as strong as in Salafiah IBS [23].

The strength of the "Yellow Book", which is a reference in the learning process in IBS, needs to be ensured that it has been interpreted comprehensively and with a gender perspective. Not translated in the narrow old context. Because many studies have found that there is a lack of precise understanding of the "Yellow Book" studies that have been understood so far. Where it is more often interpreted in a narrow way that marginalizes several things, one of which is women's reproductive rights.

This is because the existence of women in epistemological purposes in the past was almost not involved. Most Ulama in the classical period were men. Coupled with the patriarchal monarchical system of government in the Islamic world at that time, it added to the impression of a conspiracy in public policy regulations between the rulers and religious experts. So that the emergence of religious interpretations according to gender domination and power ideology at that time could not be avoided. Even though not all existing regulations actually harm women, the dominance of masculinity in public policies that marginalize women, which is summarized in classical books, leaves signs of elements of patriarchy and the politics of gender differences so that women are subordinated and always become objects [17].

Data from the Ministry of Religion of the Republic of Indonesia showed that the large number of female santri is not matched by teaching staff or opportunities for functional positions for women. This condition will allow certain norms and values to become dominant [27]. Dominant values and norms will be considered as knowledge that becomes a reference for each individual. Therefore, the domination of men over women allows women to be marginalized in social interactions in Islamic boarding schools [28].

TABLE 3 Intentions, number of children, pregnancy spacing, and use of contraception of female adolescent among IBS type

Intention to Prepare Family Life	Types of Islamic Boarding Schools			Total, n (%)	P-value
	Salafiah, n (%)	Modern, n (%)	Other form, n (%)		
First Age to Get Marry					
≥21 Years Old	8 (27)	45 (83)	29 (97)	62 (69)	0.00*
Unknown	22 (73)	5 (17)	1 (3)	28 (31)	
				90 (100)	
Intention Number of Children					
≤ 2	0 (0)	4 (13)	0 (0)	4 (4)	0.06
>2	19 (63)	24 (80)	17 (90)	70 (79)	
Unknown	11 (37)	2 (7)	3 (10)	16 (17)	
				90 (100)	
Pregnancy Spacing Intention					
≥2 Years	10 (33)	24 (80)	24 (80)	58 (64)	0.01*
<2 Years	4 (13)	3 (10)	3 (10)	10 (11)	
Unknown	16 (54)	3 (10)	3 (10)	22 (25)	
				90 (100)	
Use of contraception Intention					
Yes	1 (3)	3 (10)	6 (20)	20 (10)	0.66
No	10 (33)	13 (43)	11 (38)	34 (38)	
Unknown	19 (63)	14 (47)	13 (43)	43 (47)	
				90 (100)	

* significant = $p < 0.05$

This study also found that the majority of female adolescent had the intention to make a decision on the age for marriage and the decision to determine a potential partner for marriage through a joint decision between female adolescent and their parents, respectively by 44% and 60%. There are quite a number of female adolescent in salafiah IBS who leave decisions only to their parents, both in terms of age at marriage (37%) and 23% in making decisions about choosing partners candidate (Table 4).

It can be concluded that female adolescent in Salafiyah IBS have a lower level of empowerment than female adolescent in other IBS. This is the same as the findings regarding first age to get marry, number of children, pregnancy spacing and use of contraception intention. This difference occurs possibly because of the differences in characteristics, culture, and typology salafiah IBS are stronger than other Islamic boarding schools.

TABLE 4 Decision making intentions of married age and partner candidate of female adolescent among types of IBS

	Types of IBS			Total, n (%)
	Salafiah, n (%)	Modern, n (%)	Other form, n (%)	
Intention of Married Age Decision Making				
Myself	4 (13)	5 (16)	6 (20)	15 (17)
My Parents and I	10 (34)	17 (57)	13 (43)	40 (44)
Parents	11 (37)	5 (17)	11 (37)	27 (30)
Kiai/Teacher	4 (13)	1 (3)	0 (0)	5 (6)
Others	1 (3)	2 (7)	0 (0)	3 (3)
				90 (100)
Intention of Choosing Partner Candidate				

	Types of IBS			Total, n (%)
	Salafiah, n (%)	Modern, n (%)	Other form, n (%)	
Myself	4 (13)	8 (27)	6 (20)	18 (20)
My Parents and I	15 (50)	18 (60)	21 (70)	54 (60)
Parents	7 (23)	2 (7)	2 (7)	11 (12)
Kiai/Teacher	2 (7)	0 (0)	0 (0)	2 (2)
Others	2 (7)	2 (6)	1 (3)	5 (6)
				90 (100)

Conclusion

The conclusion of this research is that there is no difference in the intention to prepare family life of female adolescent among types of IBS, majority of intentions to prepare family life of female adolescent in IBS are in the poor category. However, there are significant differences in the intention of first age to get marry and pregnancy spacing among female adolescent in IBS's type. In addition, there is no significant difference in the intention of the number of children and the use of contraception of female adolescent among IBS Therefore, the recommendation given for further research is to examine the factors that influence the intentions of each IBS and conduct appropriate intervention studies in an effort to increase intentions in preparing for family life.

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Authors' contributions

Conceived and designed the analysis; Collected the data; Contributed data (analysis tools); Performed the analysis; Wrote the paper.

Conflict of interest

The authors declare no conflict of interest

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