



PERSPEKTIF TEORI TRANSAKSIONAL TERHADAP PILIHAN REMAJA UNTUK MEMPERTAHANKAN KEHAMILAN PRANIKAH: TINJAUAN PUSTAKA

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Abstrak

Tinjauan literatur naratif ini bertujuan untuk mengeksplorasi bagaimana teori transaksional dapat menjelaskan persepsi stres, faktor-faktor yang memengaruhinya, serta pemilihan strategi coping pada remaja dengan kehamilan pranikah yang memutuskan untuk mempertahankan kehamilannya. Analisis dilakukan terhadap sembilan artikel dengan akses terbuka yang diterbitkan antara tahun 2019 hingga 2023 dari PubMed dan Google Scholar. Hasil tinjauan menunjukkan bahwa remaja memandang kehamilan sebagai stresor yang mengancam. Penilaian primer dipengaruhi oleh ketakutan terhadap respons sosial, kekhawatiran tentang masa depan, dan reaksi pasangan. Penilaian sekunder melibatkan evaluasi terhadap respons keluarga, pasangan, masyarakat atau lingkungan sekitar, serta tingkat religiositas remaja itu sendiri. Apabila dinilai secara positif, remaja akan cenderung menerapkan strategi coping adaptif seperti menikah, memperkuat hubungan keluarga, meningkatkan religiositas, dan menerima keadaan mereka. Sebaliknya, coping maladaptif meliputi mempertimbangkan atau mencoba aborsi, menghindari interaksi sosial, serta tidak mengakses literatur kesehatan. Reappraisal terjadi ketika remaja pada akhirnya menerima dukungan sosial dari keluarga, yang memungkinkan mereka menafsirkan kehamilannya secara lebih positif.

Kata Kunci: Dampak Psikologis, Kehamilan pranikah, Kehamilan remaja, Koping, Teori transaksional.

GENERAL BACKGROUND

Pregnancy and childbirth are possibilities for anyone who is biologically born a woman.

Advancements in the medical field contribute to greater awareness of the need for thorough preparation before a woman conceives, gives birth, and raises

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DOI : 10.31604/jips.v13i2.2026. 483-496

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children effectively. Various initiatives, including enhancing the quality and facilities of education, have been put into practice. *Badan Pusat Statistik* (BPS) Indonesia reported that these efforts had reduced the birth rate to 26.64 per thousand women aged 15-19 years in Indonesia by 2020, from 41.30 in 2010. However, the same report states that the trend of teenage pregnancy in Indonesia is still ranked seventh among ASEAN countries (Tusianti et al., 2023)

Pregnancy during adolescence poses significant risks for the mother and the foetus because the recommended age range for a woman's biological readiness is 20 to 35 years (Kamil & Prabowo, 2022). Furthermore, the Siapnikah.org website managed by BKKBN Indonesia states that pregnancy after the age of 21 years can reduce the risk of cervical cancer, sexually transmitted infections (STIs), and other female organ health problems (Siapnikah.org, 2020). A study by Zelharsandy (2022) supports this assertion by identifying numerous health risks of early pregnancy for mothers, including anaemia, increased risk of miscarriage, postpartum haemorrhage, preeclampsia, heightened risk of premature birth, and the birth of children with low birth weight.

Despite the risks, several factors drive adolescents to engage in risky behaviours that may lead to premarital pregnancy, including low knowledge of reproductive health and sexuality, curiosity, the need to express affection towards their partners, disharmonious family conditions, and the influence of peers and the community (Adyani et al., 2024). Residential setting is also an antecedent of premarital pregnancy. Adolescents in rural areas are twice as likely to experience early and premarital pregnancy compared to their urban counterparts, which may be explained by differences in access to education, healthcare, and sexual health information (Tusianti et al., 2023).

Transactional theory can be applied to premarital pregnancy to explain how adolescents perceive the pregnancy and how they make subsequent decisions to either terminate or continue it. According to Lazarus & Folkman (1987), stress arises from a transactional process between the individual and the community, mediated by cognitive appraisal. An event is perceived as threatening when the individual interprets the community's demands as exceeding their coping resources. In the context of adolescent premarital pregnancy, societal norms often frame it as a disgrace and a violation of social and religious values. Consequently, the transaction between societal expectations and an adolescent's self-worth shapes their self-perception and circumstances, potentially resulting in significant stress and psychological distress (Biggs et al., 2017; Durak et al., 2023). It also highlights how an individual's appraisal of a stressor influences the choice of coping strategies and involves continuous reappraisal to assess the effectiveness of these strategies or to determine whether the event is still perceived as a stressor (Biggs et al., 2017).

Adolescent girls often face more severe social consequences than their partners when they become pregnant. Some were forced to drop out of school, either because of shame or because the school expelled them (Ayuandini et al., 2023; Itriyati & Asriani, 2014). This deprives adolescents with premarital pregnancies of better education and employment opportunities, especially for those living in rural areas, and reduces opportunities to socialise with peers. Emotional pressure can also arise from the surrounding community, such as neighbours, even relatives or parents of adolescents, who believe that pregnancy occurs because adolescent girls have bad morals or have failed to protect their own virtue (Yuniati et al.,

2023). The same study also identified a link between the economic status of adolescents experiencing premarital pregnancy and psychological distress, showing that lower economic status correlates with higher levels of distress. In many cases, adolescent girls who experience premarital pregnancy are married off quickly, which makes them dependent on their husbands or parents-in-law for support. Such dependence can create economic vulnerability and heighten the risk of domestic violence (Yudha & Yunanto, 2023). A study conducted by Isir et al (2021) found that 50.02% of participants, namely adolescent girls who experienced early pregnancy, felt high stress, followed by 32.36% at moderate levels and 17.01% at low stress levels. In addition to stress, the incidence of postpartum depression tends to be significantly higher in teenage pregnancies compared to non-teen pregnancies (Illustri, 2022).

Many adolescents with premarital pregnancies decide to continue the pregnancy and raise their children. Their decision is shaped by factors such as fear, guilt, emotional attachment to the unborn child, social pressures, moral convictions, religious prohibitions, and a genuine commitment to motherhood (Samawati & Nurchayati, 2021). Furthermore, abortion in Indonesia is prohibited by law, with limited exceptions permitted in cases of sexual violence and certain medical emergencies (Ayuandini et al., 2023). This may imply that the decision to continue a premarital pregnancy, particularly for adolescents, may not be fully voluntary but instead be shaped by adherence to legal constraints.

Regardless, adolescents' experiences involve a process of self-acceptance, emotional maturity, and adaptation to their new role as mothers. They are engaged in a continuous process of appraisal and reappraisal to

manage the stressors associated with pregnancy. Given that most cases of teenage pregnancy place young women in vulnerable positions, it is crucial to understand their perspectives on coping with and responding to these stressors. While reducing teenage pregnancy rates and strengthening human resources remain priorities, equal attention must also be given to empowering adolescents who have already experienced premarital pregnancy.

The findings of this literature review are expected to contribute to the development of effective sexual and reproductive health support systems for adolescent girls, as well as interventions and policy formulations aimed at improving their quality of life and reproductive well-being.

RESEARCH METHOD

This narrative literature review aims to explore how transactional theory can explain the perception of stress, the factors influencing it, and the selection of coping strategies among adolescents with premarital pregnancies who choose to continue their pregnancies. Articles were searched using online databases, namely Google Scholar and PubMed, with the keywords 'psychological impact', 'premarital pregnancy', and 'teenage pregnancy'. Boolean operators (AND, OR) were applied, and both English- and Indonesian-language articles were considered.

The inclusion criteria were: (1) articles published within the last six years (2019–2025); (2) studies involving unplanned adolescent pregnancies; and (3) findings that described psychological conditions and factors influencing adolescent acceptance of pregnancy. The exclusion criteria were: (1) unpublished theses or dissertations, (2) studies in which participants had successfully had

abortions, and (3) premarital pregnancy as a result of sexual violence.

The search yielded 37 articles from Google Scholar and 25 from PubMed. After screening using the inclusion and exclusion criteria, nine articles were identified for inclusion in this review.

Of the nine articles included in this review, six were conducted in

Indonesia and three in international contexts (South Africa, Ghana, and Malaysia). All employed qualitative designs with respondents aged 12-20 years. The key findings are presented in Table 1.

RESULT AND DISCUSSION

Table 1. The Results of the Literature Review on the Experiences of Adolescents with Premarital Pregnancy

Author (Year)	Title	Study Results
Nor et al. (2019)	The Turning Point in an Unwanted Teenage Pregnancy: A Psycho-emotional Perspective	Qualitative research with phenomenological approach on 10 Muslim adolescent female participants in Malaysia aged 16-18 years. The three main themes revealed are (1) self-transformation, including identity changes as a result of pregnancy; (2) transition to motherhood; and (3) spiritual reinforcement as one of the coping mechanisms. All participants initially considered and had attempted abortions, but failed. Leading up to birth, participants form an emotional bond with the unborn baby and accept it.
Wulandari et al. (2019)	Pengalaman Psikologis Kehamilan Pranikah pada Usia Remaja di Kelurahan Purwosari Kecamatan Mijen	Descriptive qualitative research with 3 female adolescent participants in Purwosari Village, Mijen District aged 12-19. The psychological impacts experienced include fear, anger, stress, depression, and worry. These feelings arise because of unpreparedness, social environment, and the behaviour of partners who refuse to take responsibility. Adolescents use <i>emotion-focused coping</i> , such as remembering the unborn baby in the womb, remembering their family, surrendering, and deepening their religion. All participants wanted to have an abortion but ultimately decided not to because it would be a sin based on their religion.
Jacobs et al. (2020)	Stigma Diri dan Subjective Well-Being pada Remaja yang Melahirkan di Usia Dini di Kota Ambon	Qualitative research with a case study approach on 8 adolescent girls aged 17-19 years who gave birth at an early age in Ambon City. Participants formed self-stigma such as feeling that they were not good women, humiliating their parents, and not being able to take care of themselves. Positive subjective well-being aspects were obtained from gratitude, support from parents, the existence of children, recognition from their partner, and fulfilment of needs. On the other hand, negative aspects include stress, hopelessness, and difficulty in meeting material and psychic needs.
Liputo et al. (2021)	Overview of The Impact of Unwanted Pregnancy on Adolescent Psychological in The Working Area of Telaga Biru Community Health Center	Descriptive qualitative research with 5 female adolescent participants in the Telaga Biru Health Centre work area aged 13-18 years. Adolescents experience negative psychological images early in pregnancy, such as fear, distress, loss of hope, and depression caused by family responses, thinking about the future, and social sanctions. All participants maintained their pregnancy, with 3 out of 5

		participants able to have positive acceptance thanks to a positive shift in support from the family and the environment.
Astari & Laksmiwati, (2021)	Psychological Well-Being Remaja yang Mengalami Hamil di Luar Pernikahan	Qualitative research with a phenomenological approach on 4 female adolescent participants aged 15-18 years. The themes revealed are (1) a picture of psychological well-being, including negative feelings when knowing about their pregnancy, being able to accept the condition, and feelings of inferiority due to social pressure; (2) the influence of premarital pregnancy on life, where adolescents experience negative impacts, but some develop changes in more positive social relationships with parents, (3) efforts to improve themselves, namely considering the best decision-making efforts for the future, one of which is by getting married, and the process of interpreting life by taking lessons from the conditions experienced.
Ntshayintshayi et al. (2022)	Exploring the Psychosocial Challenges Faced by Pregnant Teenagers in Ditsobotla Subdistrict	A descriptive-exploratory qualitative study with 9 female adolescent participants in Ditsobotla, South Africa aged 13-19 years. The main themes in this study include (1) psychological challenges, including feelings of shock and anxiety, stressful moods, and poor coping mechanisms; (2) social challenges, namely disappointment from their family, stigma, rejection from the surrounding environment and peers, as well as negative responses from health workers, and financial difficulties; and (3) suggestions for overcoming challenges faced by pregnant adolescents.
Prasetyaningati et al. (2022)	Kehamilan Remaja Diluar Pernikahan Studi Fenomenologi di Kota Kediri	Qualitative research with phenomenological approach on 5 female adolescent participants in Kediri City aged 14-19 years. 4 main themes were found, (1) Adolescent perceptions of pregnancy experienced, adolescents express an understanding that a baby is growing in their womb; (2) adolescent pregnancy problems experienced by adolescents, including psychosocial, family, and psychosomatic aspects; (3) Family response to pregnancy, where most showed negative initial responses such as shock, anger, and limiting facilities; and (4) readiness in pregnancy care, some respondents admitted that they did not routinely conduct antenatal examinations and had tried to terminate their pregnancy.
Sumarsih et al. (2023)	The Psychology Changes and Self-concept Adolescent Given Birth Premarital in Dealing With Change of Role as a Mother	Qualitative research with a phenomenological approach on 9 participants of adolescent girls who had given birth premarital in Sumpiuh, Banyumas, Central Java. Adolescents experience negative psychological responses, such as stress, frequent crying, fear, confusion, and disappointment. With an analysis of adolescent self-concept, it was found that (1) <i>self-esteem</i> is characterized by shame for being the subject of gossip and having to stay at home; (2) <i>self-ideal</i> , feeling unable to fulfil the wishes and expectations of their parents to pursue education; (3) <i>self-image</i> , being uncomfortable and dissatisfied with body shapes such as breasts and enlarged belly; (4) <i>self-identity</i> , most respondents feel low satisfaction in motherhood at a young age, but some find wisdom

Mawutor & Setsoafia, (2023)	Psychosocial Experiences and Challenges of Pregnant Teenagers in GA South Municipality	and gratitude for still getting social support; (5) <i>self-role</i> , participants feel a change in role to become a mother.
		An explanatory qualitative study on 20 adolescent girls aged 12-19 years in Ga South Municipal, Ghana. Psychological factors experienced by pregnant adolescents include depression, anxiety, feelings of anger and violence, sadness, and suicidal urges. Social factors include lack of social support from family and community, isolation, abandonment from a partner, and stigmatisation and discrimination.

Based on the results of the analysis of 9 research articles, several factors were found that can be associated with transactional stress and coping theory by Lazarus & Folkman, as follows:

Cognitive Appraisal

Lazarus & Folkman (as cited in Biggs et al., 2017) describe appraisal as a mental process through which individuals evaluate a particular situation or event in their life. The manner in which an individual appraises an event influences their emotional and behavioural responses. In other words, appraisal is the stage at which individuals determine whether an event is perceived as stressful. This process consists of two stages: primary and secondary appraisal.

Primary appraisal

This stage constitutes the initial evaluation of a situation or event in relation to the individual's goals, values, and well-being. The relationship (transaction) between the situation and these personal factors can be appraised as benign-positive (potentially beneficial), irrelevant (no significance), or stressful (detrimental, with further categorisation into harm/loss, threat, or challenge) (Biggs et al., 2017). Events perceived as stressful may elicit negative emotions and heightened stress responses.

The result of this review shows that adolescents with premarital

pregnancies generally appraise their condition as stressful and threatening (Astari & Laksmitiati, 2021; Jacobs et al., 2020; Liputo et al., 2021; Mawutor & Setsoafia, 2023; Nor et al., 2019; Wulandari et al., 2019) Their appraisals are shaped by perceptions of parental, spousal, and community responses, anticipated consequences for their future (such as dropping out of school and failing to meet parental expectations), and adherence to religious values and norms. Consequently, adolescents' initial attitudes are often characterised by negative emotions, including fear, disappointment, confusion, anxiety, shame, and anger. This aligns with the findings of Tjolly & Soetjiningsih (2023), who reported that adolescents commonly experience negative feelings arising from fears of social rejection and unmet family expectations.

Furthermore, teenagers frequently express concern about having to leave school. Such decisions may stem from internalised shame or fear of social responses, or from institutional actions such as school expulsion (Jamir & Layuk, 2022; Ningrum et al., 2021). This reflects broader trends in which girls' dropout rates in cases of premarital pregnancy are estimated to be almost twice as high as those of boys (Salinas & Jorquer-Samter, 2021).

Secondary appraisal

Within Lazarus and Folkman's framework, when an event is perceived as stressful and threatening, the next

stage is the individual's evaluation of the resources available to cope with or deal with the situation, and assess how much control they have over the event at hand (Biggs et al., 2017). In the case of adolescent premarital pregnancy, social support, especially from family, emerges as the most influential factor in this appraisal process. The literature reviewed found no instances where adolescents received positive initial responses from their families or social circles; instead, many experienced tension with family members upon disclosing their pregnancies (Astari & Laksmiati, 2021; Jacobs et al., 2020; Liputo et al., 2021; Mawutor & Setsoafia, 2023; Nor et al., 2019; Ntshayintshayi et al., 2022; Prasetyaningati et al., 2022; Sumarsih et al., 2023; Wulandari et al., 2019). This aligns with Triyono & Yulindawati (2022) who found that parents often respond with anger, sadness, disappointment, shame, and regret. Such parental reactions reflect broader social norms in which premarital pregnancy is judged as a violation of religious teachings and societal expectations (Nengsih et al., 2023).

Negative appraisals of support are not limited to family and community but also extend to healthcare settings. Some adolescents reported unfavourable treatment from nurses due to their pregnancies Ntshayintshayi et al., (2022). Conversely, Govender et al. (2020) highlight that while many health workers view teenage pregnancy as a serious issue and feel empathy, they also acknowledge challenges in delivering education, as adolescents often perceive the information as forced or imposed upon them.

Family support is also crucial as a financial supporter, given that adolescents are not yet independent and are physically limited to working during pregnancy. Several studies report that

participants experienced financial difficulties, forcing them to rely on others for support (Mawutor & Setsoafia, 2023; Ntshayintshayi et al., 2022; Prasetyaningati et al., 2022). Early pregnancy frequently affects adolescents from middle- to lower-income backgrounds; consequently, the additional expenses associated with pregnancy exacerbate their already challenging financial circumstances (Erfina et al., 2019; Gselamu et al., 2019).

Pregnancy also alters adolescents' peer relationships. While some participants in Wulandari et al. (2019) described their friendships as supportive, they also reported feelings of insecurity stemming from embarrassment and fear of being the topic of gossip. By contrast, Mawutor & Setsoafia ((2023) found that participants were shunned or viewed negatively by peers, though in one case a friend provided accommodation when the participant was expelled from her home by her father. Similarly, Emeri & Olarenwaju (2022) reported that adolescents frequently experienced strained peer relationships following pregnancy, with the exception of support from a few close friends.

Another critical source of support is the adolescent's male partner. A partner's willingness to acknowledge and accept the pregnancy through marriage or emotional support can strongly influence how adolescents perceive their situation. In contrast, rejection or avoidance by partners often provokes anger, disappointment, and confusion, raising concerns about the adolescent's and her child's future (Khayun et al., 2021; Sulistyaniingsih et al., 2019).

Religious beliefs and access to information about reproductive health services also shape adolescents' decisions to continue their pregnancies. In Wulandari et al. (2019), respondents

who considered abortion but did not pursue it reported feeling sinful and lacking knowledge about abortion services, leading them to abandon the idea. More broadly, adolescents recognise premarital sexual relations as religiously forbidden; thus, once pregnancy occurs, many strive to change their behaviour, strengthen their relationship with God, and avoid committing further sins by terminating the pregnancy (Astuti et al., 2020).

Coping Strategy

Coping strategies are dynamic processes involving continuous cognitive efforts to manage demands that exceed an individual's capabilities Biggs et al. (2017). Transactional theory characterises coping strategies as either problem-focused coping or emotion-focused coping. However, coping strategies are not always effective; in some cases, they may even worsen the situation and are then considered maladaptive. Such maladaptive coping often arises when, during secondary appraisal, individuals perceive their resources as insufficient to manage stress. Conversely, adaptive coping strategies typically produce positive outcomes, even when applied to difficult or severe circumstances Cortez et al. (2023).

Problem-focused coping (PFC)

This strategy centres on the individual's attempt to resolve a problem or event perceived as a source of stress (Carroll, 2020). According to Lazarus & Folkman (1987), problem-focused coping (PFC) is most effective when the stressor is appraised as controllable or changeable.

In the context of premarital pregnancy, PFC strategies are directed at the root of the problem, the pregnancy itself. A common initial step is disclosing the pregnancy to the male partner and demanding accountability. Marriage is

frequently pursued as a solution because it offers legal and social recognition, provides certainty regarding the adolescent's status and the future of the child, and reduces negative stigma associated with out-of-wedlock births (Ayuandini et al., 2023). Literature shows that adolescents whose partners agree to marry may initially feel regret but subsequently report greater acceptance of their pregnancy, finding meaning and even happiness in motherhood (Astari & Laksmiwati, 2021; Istiqomah, 2022; Jacobs et al., 2020; Liputo et al., 2021; Nor et al., 2019). In the study conducted by Istiqomah (2022), it was found that married adolescents exhibited more positive self-acceptance of pregnancy. However, marriage is not always an adaptive solution, as some adolescents experience physical, emotional, and financial violence, which can ultimately lead to divorce (Sari et al., 2020; Wowor, 2021).

Conversely, adolescents who do not receive acknowledgement or support from their partners often contemplate or attempt abortion as a means of escaping their situation (Mayendri & Prihantoro, 2021). While abortion can be conceptualised as a problem-focused coping strategy, it is legally prohibited in Indonesia under *Undang Undang Nomor 36 of 2009 Tentang Kesehatan*, except in cases of sexual violence or when the pregnancy poses a high risk to the mother. Consequently, adolescents facing pregnancy due to consensual premarital relations often resort to illegal abortion providers or unsafe traditional methods (e.g., consuming certain drugs, herbs, or pineapples), which endanger their lives. When such attempts fail or prove unsuccessful, adolescents are forced to seek alternative strategies to cope with the ongoing stress of their situation.

Emotion-focused coping (EFC)

This strategy aims to regulate

the emotions arising from problems or events that are perceived as sources of stress (Ben-Zur, 2020). Unlike problem-focused coping, EFC is employed when individuals appraise the situation as beyond their control and requiring acceptance (Lazarus & Folkman, 1987).

Concerning adolescent premarital pregnancy, rejection by male partners, the visible physical changes of pregnancy, and unsuccessful abortion attempts often leave adolescents with no option but to attempt to accept their situation. Strategies found in the reviewed articles include strengthening family relationships, engaging in self-reflection, accepting their situation, and deepening religious devotion (Astari & Laksmiati, 2021; Liputo et al., 2021; Nor et al., 2019; Prasetyaningati et al., 2022; Sumarsih et al., 2023; Wulandari et al., 2019). Islamy et al. et al. (2022) also identified that adolescents used EFC to distract themselves from problems, reduce stress, and foster acceptance. Importantly, these strategies should not be dismissed as mere 'escapism'; rather, they represent legitimate attempts to cope and to move forward when the stressor itself cannot be changed. As Irwansyah et al. (2021) noted, the effectiveness of EFC depends heavily on adolescents' perception of social support. When stigma and rejection dominate their social environment, adolescents tend to withdraw and isolate themselves, which hinders acceptance and complicates their coping process.

Reappraisal

After applying coping strategies, individuals engage in reappraisal, a follow-up evaluation to assess the effectiveness of those strategies and to determine whether the stressor has shifted in meaning—potentially from being stressful to becoming irrelevant or even benign-positive (Biggs et al., 2017). Reappraisal can influence short-term

subjective experience by altering how events are interpreted (Troy et al., 2018). In transactional theory, Lazarus & Folkman (1987) defined positive reappraisal as the tendency to reassess situations in a positive light, identifying potential benefits or opportunities for growth within challenges. This reframing process is a key factor in fostering resilience (Riepenhausen et al., 2022).

The challenging circumstances of adolescents with premarital pregnancy often prompt them to reevaluate their perceptions of pregnancy and the resources available to them. Triyono & Yulindawati (2022) found that although parents frequently reacted negatively at first, many maintained a sense of responsibility that led them to provide social support and secure their daughter's future through marriage. Even in cases where marriage did not occur, some parents eventually accepted the pregnancy and offered financial assistance or guidance in preparing for motherhood. Such forms of support can enable adolescents to reinterpret their situation more positively and find meaning in their experiences (Astari & Laksmiati, 2021; Istiqomah, 2022; Jacobs et al., 2020; Liputo et al., 2021; Nor et al., 2019; Sumarsih et al., 2023; Wulandari et al., 2019).

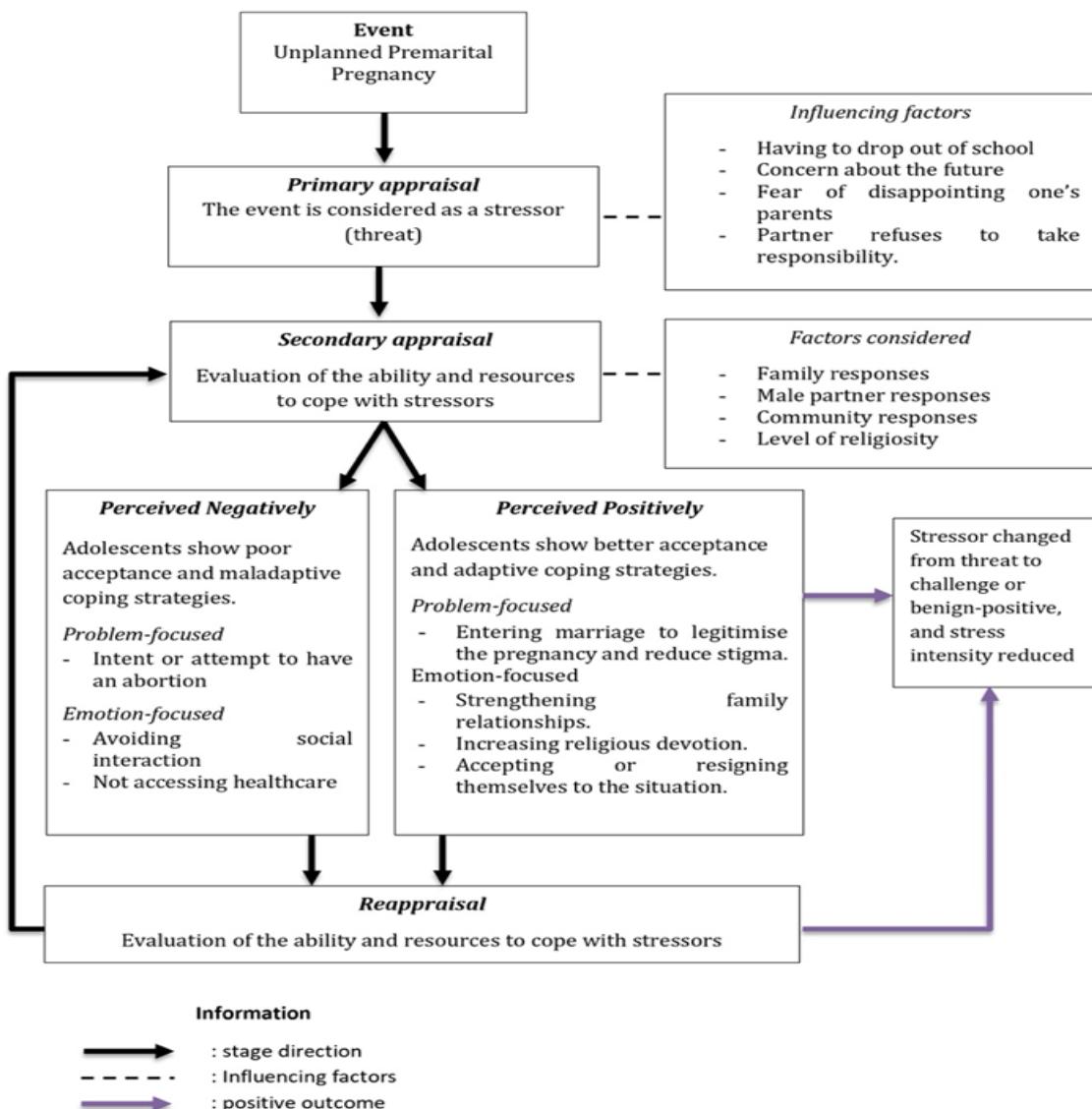
Another factor shaping adolescents' reappraisal is the development of a sense of responsibility, compassion, and emotional bond with the unborn baby (Istiqomah, 2022; Liputo et al., 2021; Nor et al., 2019; Sumarsih et al., 2023; Wulandari et al., 2019). As adolescents approach childbirth and motherhood, the impending transition and assumption of maternal responsibility further influence how they reframe and ultimately accept their pregnancy experiences.

For adolescents with adequate social support and effective coping

strategies, stressors initially perceived as threats may be reinterpreted as challenges, with the child from the pregnancy regarded as a source of strength and inspiration for building a better future (Istiqomah, 2022). Conversely, adolescents who continue to experience insufficient social support

report lower satisfaction and persist in viewing their pregnancy negatively (Liputo et al., 2021; Ntshayintshayi et al., 2022; Prasetyaningati et al., 2022).

The synthesis of the literature review is illustrated in the following chart:



Picture 1. Perceived Stress and Coping Behavior of Adolescents with Maintained Premarital Pregnancy Based on Lazarus & Folkman Transactional Theory.

CONCLUSIONS AND RECOMMENDATIONS

Adolescents generally perceive premarital pregnancy as a threatening stressor due to multiple factors, including fear of response from partners, families, and communities, as well as concerns about their future, such as the

AND

risk of dropping out of school and how to take care of their children. To cope with these stressors, adolescents evaluate the resources available to them, such as social support, financial stability, and levels of religiosity, to maintain their pregnancy and accept their condition.

The appraisal of these resources influences the coping strategies

adolescents employ and their subsequent acceptance of pregnancy. Based on the findings of this literature review, coping strategies at this stage are often less adaptive, as initial family reactions tend to be negative, partners may refuse to take accountability, and social stigma is prevalent. Consequently, adolescents could consider terminating their pregnancies or withdrawing from their social community altogether. Over time, however, changes may occur, including the development of an emotional bond with the unborn baby and the emergence of family support. At this point, a process of reappraisal takes place, in which adolescents reassess both their coping strategies and the resources available to them. Adolescents who experience positive changes, particularly in family support, are more likely to accept their pregnancy, find meaning in their experiences, transition into motherhood, and adopt more adaptive coping strategies. However, those who do not perceive such changes often continue to experience stress regarding their condition.

While this literature review highlights important insights into how transactional theory explains adolescents' perceptions of stress, coping strategies, and reappraisal in the context of premarital pregnancy, it is restricted to published articles indexed in PubMed and Google Scholar between 2019 and 2023, which may exclude relevant studies available in other databases or unpublished works that could provide additional perspectives. Furthermore, the included studies were largely qualitative and context-specific, with relatively small sample sizes and a predominance of research conducted in Indonesia, limiting the generalisability of the findings to broader populations. The conclusions drawn also rely heavily on the quality and reporting of the primary

studies, which may introduce potential bias.

Future research may explore more deeply the experiences of adolescents with premarital pregnancies who maintain their pregnancy using transactional theory, especially with broader and more diverse participants. Health services and counselling programmes also need to be strengthened to provide adolescents with adequate support, both preventive and curative, particularly from families and communities, in order to reduce stigma and help them cope adaptively. Collaboration between health workers, educators, and religious or community leaders is recommended so that adolescents can receive guidance that is culturally and socially acceptable.

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