

From Crisis to Resilience: How Female Adolescents Cope with Early Marriage Resulting from Unplanned Pregnancy

Eli Nuzul Wahyuni¹, Abdul Haris Fitri Anto², Nova Lusiana³

^{1,2,3}Fakultas Psikologi dan Kesehatan, UIN Sunan Ampel Surabaya

11020122067@uinsa.ac.id abdul.haris.fitri.anto@uinsa.ac.id novalusiana@uinsa.ac.id

Keywords: *Coping Stress, Early Marriage, Married by Accident*

Abstract: Early marriage due to “Married by Accident” is a phenomenon that creates various emotional, social, and financial challenges for adolescents, which may affect their psychological well-being and prospects. This study aims to explore the experiences and coping strategies employed by young women who entered early marriage as a result of unplanned pregnancy. A qualitative method with a case study approach was applied, involving three participants who met the inclusion criteria. Data were collected through semi-structured interviews and analysed using thematic analysis. The findings indicate that all three participants adopted two forms of coping strategies: problem-focused coping and emotion-focused coping. Problem-focused coping was reflected in efforts to seek medical information, prioritise plans for continuing education, and take practical steps to meet family needs. Meanwhile, emotion-focused coping appeared in their ability to accept circumstances, find positive meaning in the experience, and obtain emotional support from family and spouses. These results highlight that the combination of effective coping strategies and social support plays an essential role in helping adolescents deal with psychosocial pressures arising from early marriage due to unplanned pregnancy.

1 INTRODUCTION

The issue of unplanned pregnancy, or Married by Accident (MBA), among adolescents in Indonesia has reached an alarming level (Melati, 2021). According to UNICEF data, Indonesia ranks 8th globally and 2nd in ASEAN for cases of unplanned pregnancy among adolescents, with nearly 1.5 million recorded cases (Andina, 2021). This high number is largely attributed to the prevalence of premarital sexual activity among teenagers (Sari et al., 2020). The National Population and Family Planning Board (BKKBN) reported that in 2024, 59% of females aged 15–19 and 74% of males in the same age group had engaged in sexual intercourse (Kautsar, 2024). Among those who have engaged in

sexual activity, 12% of girls experienced out-of-wedlock pregnancy (Ansari et al., 2020).

Unplanned pregnancy, commonly referred to as Married by Accident (MBA), refers to a condition in which couples engage in intimate relationships outside of marriage, leading to unintended pregnancy (Yuwanda et al., 2024). Such pregnancies often drive early marriage among adolescents. Teenagers who marry due to MBA are generally unprepared to face the responsibilities of marriage, both physically and psychologically (Alifah et al., 2021). This situation is closely related to limited knowledge of reproductive health and restricted access to contraception. Socioeconomic factors also contribute to increasing the risk of MBA among adolescents (Audina &

Rojanah, 2023). In addition, social stigma often pressures adolescents to marry as a perceived solution, even when they are not fully prepared.

MBA has serious implications for adolescents, including physical, social, and psychological consequences (Sutarto, 2020). Physically, teenage mothers face a higher risk of complications such as eclampsia (seizures during pregnancy) and maternal mortality compared to older mothers (Husna et al., 2019). Socially, adolescents who become pregnant outside of marriage often encounter stigma, rejection, and even exclusion from their communities (Handayani et al., 2024). These social pressures further worsen their psychological condition, making them vulnerable to stress and depression (Triadhari et al., 2023). For this reason, it is important to understand how adolescents cope with the pressures they experience.

Previous studies have shown that adolescents with MBA adopt various strategies to deal with these pressures. Some seek support from family, partners, or close friends (Winata et al., 2022). However, many also adopt less adaptive strategies, such as withdrawing from their social environment or blaming themselves (Tadung et al., 2023). This situation highlights the need to better understand effective coping strategies for adolescents. According to Lazarus and Folkman (Anto, 2025) and Nurasyikin and Suprabowo (2021), coping is a continuous effort to modify one's thoughts and behaviours in order to manage internal and external demands perceived as stressful or exceeding one's resources.

Lazarus and Folkman classified coping into two types: problem-focused coping and emotion-focused coping (Islamy et al., 2022). Choosing an appropriate coping strategy can help individuals deal

with stress more effectively, thereby enhancing their well-being (Palintan, 2021). Adolescents who marry early due to MBA face complex emotional and social pressures. In such circumstances, understanding the coping strategies they employ becomes essential (Ipetu et al., 2023). Therefore, this study aims to examine the experiences and coping strategies of young women who marry early as a result of unplanned pregnancy.

2 METHOD

This study employed a qualitative method with a case study design. A case study is a method that focuses on providing in-depth explanation and analysis of specific individuals, groups, or events. Data were collected through semi-structured interviews. To ensure the validity of the data, the researcher applied the strategy of thick description, namely presenting detailed accounts when reporting interview results (Creswell & Creswell, 2022; Hidayah & Pratiwi, 2021). The study involved three participants selected through purposive sampling, which is the deliberate selection of subjects based on predefined inclusion and exclusion criteria (Subhaktiyasa, 2024). The inclusion criteria consisted of: (1) adolescent females who entered early marriage due to MBA, (2) aged below 20 years, and (3) willing to participate in the study by providing written informed consent. Of the three participants, two were interviewed directly (face-to-face), while one was interviewed online via Zoom Meeting due to being out of town. The researcher and the respondents had prior acquaintance, which facilitated the approach and communication process during the study.

The research procedure began with the participants signing an informed consent form as an indication of their willingness to participate. Afterwards, the three participants took part in interviews lasting approximately two hours. In addition to the interviews, the researcher also conducted observations throughout the process. These observations aimed to complement the data obtained from the interviews. Following the interviews, the researcher transcribed the recordings verbatim. Data analysis in this study was carried out using a thematic analysis approach. During the

analytical process, the researcher reflected on the key themes emerging from the data in order to capture the deeper meaning of the participants' experiences. This reflection aimed to highlight essential aspects that directly support the understanding of the phenomenon under investigation.

3 RESULT

3.1 PROBLEM FOCUSED-COPING

Table 1. Research Participants' Findings on Problem-Focused Coping

Theme	Subtheme	P1	P2	P3
Seeking Informational Support	Seeking information and advice	Consultation with a doctor	Searching on the internet	Counselling with the school counsellor
		Discussion with others	Discussion with boyfriend	Trying to find solutions independently
		Counselling	Counselling with the school counsellor	None
Confrontive Coping	Facing the problem	Considered abortion	Thought about abortion	Facing negative comments
		Immediate action	Being honest with family and friends	Discussion with partner
		Proactive	Stress due to negative comments	Accepting the pregnancy
Planful Problem Solving	Planful Problem Solving	Understanding the cause	Unplanned pregnancy	Realising mistakes and consequences
		Priority plan	Continuing education after giving birth	Continuing education after giving birth
		Finding solution strategies	Receiving family support	Family support

THEME: SEEKING INFORMATIONAL SUPPORT

Participants demonstrated various ways of seeking informational support regarding their pregnancy condition. Some chose to consult medical professionals to gain certainty, others frequently searched for information on the internet, while some turned to the school counsellor. In addition, support

was also sought from close individuals, such as partners or family members, although a few preferred to keep the issue to themselves. Counselling with the school counsellor was another step taken, although the level of openness and perceived benefits varied among individuals.

“Aku sempetin buat USG” (PS1.12), “Aku lebih sering cari-cari di Google” (PS2.8), “Aku malah cerita ke keluarga biar dapet masukan” (PS3.16), dan “Guru BK itu lumayan ngebantu, tapi tetep

aja aku masih takut buat ngomong langsung” (PS2.13).

[“I made time for an ultrasound” (PS1.12), “I often searched on Google” (PS2.8), “I decided to tell my family so I could get some advice” (PS3.16), and “The school counsellor was quite helpful, but I was still afraid to talk directly” (PS2.13).]

THEME: CONFRONTIVE COPING

Participants faced pressures in diverse ways, ranging from directly confronting the problem, taking immediate action, to attempting more proactive solutions. Some considered terminating the pregnancy due to fear about the future, while others struggled to cope with negative comments from their surroundings. Several chose to act quickly by being honest with their parents or involving their partners in discussion, while others strived to continue schooling despite the challenges. In addition, efforts to accept the situation and plan for the future were also evident, such as focusing on the responsibility of caring for their child.

“Aku dulu sempet kepikiran buat gugurin” (PS1.26), “Aku bilang ke dia, kita harus ngomong berdua biar jelas” (PS2.19), “Walau hamil aku tetep lanjutin sekolah” (PS3.22), dan “Aku mikirin gimana caranya bisa tetep rawat anakku, walau banyak tekanan” (PS3.25).

[“I once thought about having an abortion” (PS1.26), “I told him, we need to talk together so things are clear” (PS2.19), “Even though I was pregnant, I still continued school” (PS3.22), and “I kept thinking about how I could continue to take care of my child despite the pressure” (PS3.25).]

THEME: PLANFUL PROBLEM SOLVING

Participants sought to cope with unplanned pregnancy by taking more structured steps. They began with understanding the cause of the problem, then set priorities for their future, and searched for solution strategies they considered most realistic. Awareness of their situation became the starting point of the coping process, which then developed into more targeted plans related to education, employment, and motherhood. Support from partners and family also played an essential role in strengthening the steps they took. Thus, the strategies that emerged tended to be well-considered, as they involved self-awareness, priority planning, and social support.

“Aku sadar ini kehamilan yang nggak direncanain, jadinya bingung harus gimana” (PS1.34); “Aku tetep pengen sekolah lagi setelah lahiran, biar masa depanku nggak berhenti di sini” (PS1.36); “Aku sama pasangan bikin rencana kecil-kecilan, setidaknya bisa lanjut kuliah atau kerja” (PS2.31); “Untungnya keluargaku masih mau nerima, jadi aku ada harapan buat lanjut” (PS1.38); “Aku lebih mikirin caranya merawat anak, walau capek tapi itu tanggung jawabku” (PS3.36).

[“I realised this pregnancy was unplanned, and I felt confused about what to do” (PS1.34); “I still wanted to go back to school after giving birth, so my future would not stop here” (PS1.36); “My partner and I made small plans, at least to continue university or work” (PS2.31); “Fortunately, my family was still willing to accept me, so I had hope to move forward” (PS1.38); “I thought more about how to take care of my child, even though it was tiring, because that is my responsibility” (PS3.36).]

3.2 EMOTIONAL FOCUSED-COPING

Tabel 2. Research Participants' Findings on Emotion-Focused Coping

Theme	Subtheme	P1	P2	P3
Seeking Social Emotional Support	Sharing feelings	Telling stories to friends	Confiding in partner	Talking to family
	Support from others	Receiving support from family	Support from partner and family	Family support
Distancing	Spending time alone	Gathering with friends & family	Finding simple entertainment	Being alone
	Diverting attention	Seeking entertainment	Working part-time	Joining social activities
Escape Avoidance	Using alcohol	Trying alcohol consumption	Not wanting to harm oneself	Refusing friends' invitation
	Oversleeping	Sleeping for long hours	Sleeping as usual	Rarely oversleeps
Self-Control	Managing emotions and self-control	Listening to positive encouragement	Sometimes getting emotional with partner	Being patient in facing problems
	Avoiding impulsive actions	Being open about feelings	Not showing emotions in front of others	Regulating speech patterns
Accepting Responsibility	Admitting mistakes	Acknowledging mistakes	Self-reflection	Realising negligence
	Accepting consequences	Taking good care of the child	Accepting responsibility	Trying to accept the situation
	Learning from mistakes	Focusing on new experiences	Being cautious in social interactions	Avoiding repeating the same mistakes
Positive Reappraisal	Seeking the positive side	Making peace with oneself	Seeing the child as a blessing	Learning to be stronger
	Focusing on good things	Providing a good life for the child	Being grateful for support	Being grateful for support
	Spiritual approach	Obedient because being a role model	Worshipping when possible	Trying to get closer to God

THEME: SEEKING SOCIAL EMOTIONAL SUPPORT

Participants demonstrated their efforts to seek emotional support as a way of coping with stress. This support was obtained through sharing their feelings with trusted individuals or by receiving encouragement from their families. Each participant chose different figures (friends, partners, siblings, or immediate family), showing that emotional support was sought according to the relationships perceived as the safest and most comforting. This finding illustrates that social-emotional support is one of the

primary strategies participants use to maintain psychological balance.

"Aku sering cerita sama temen, biar lega aja rasanya" (PS1.40); "Aku cerita ke pasangan, soalnya aku butuh orang yang ngerti kondisiku" (PS2.37); "Aku biasanya ngomong ke kakak, karena dia lebih paham aku" (PS3.35); "Keluargaku ngasih support biar aku nggak drop banget" (PS1.42); "Pas aku bingung, keluargaku yang bikin aku kuat" (PS2.38).

[*"I often tell my friends, just to feel relieved" (PS1.40); "I share with my partner because I need someone who understands my situation" (PS2.37); "I usually talk to my older sibling because they understand me better" (PS3.35); "My family gives me support so I don't fall apart" (PS1.42); "Whenever I feel lost, it is my family who gives me strength" (PS2.38).*]

THEME: DISTANCING

In this theme, participants were found to employ strategies of distancing themselves from their social environment or diverting their attention to other activities. They tended to withdraw out of fear of being judged or receiving negative comments, while at the same time seeking calmness by spending time alone. Moreover, distractions such as watching entertainment, engaging in light activities, or sleeping were used as means of easing emotional tension. This strategy functioned as a temporary relief, allowing them to pause their thoughts and emotions when facing difficult circumstances. Distancing, therefore, can be understood as a protective mechanism to shield themselves from social judgement.

“Takut salah ngomong, takut menyinggung perasaan orang lain” (PS1.38); “Aku lebih milih diem dulu, nggak banyak ketemu orang” (PS2.40); “Aku jarang keluar rumah, takut ketemu orang yang ngomongin aku” (PS3.33); “Aku biasanya nonton atau denger musik biar nggak kepikiran terus” (PS1.39); “Aku lebih sering baca atau main HP biar nggak fokus ke masalah” (PS2.41).

[“I am afraid of saying something wrong and offending others” (PS1.38); “I prefer to stay quiet for a while and avoid meeting too many people” (PS2.40); “I rarely go out because I am afraid of meeting people who talk about me” (PS3.33); “I usually watch or listen to music so I don’t overthink” (PS1.39); “I often read or play on my phone to avoid focusing on the problem” (PS2.41).]

THEME: ESCAPE AVOIDANCE

Participants also displayed tendencies to escape or avoid problems in various ways. Some admitted having thoughts about or even trying alcohol, although most eventually rejected such actions to avoid harming themselves. Sleeping was

another common strategy, either to calm themselves or to escape from overwhelming thoughts. However, certain participants experienced the opposite, finding it hard to sleep due to the heavy mental burden they carried. These variations show that escape-avoidance strategies were expressed in different forms and with varying intensity across individuals.

“Aku pernah nyoba minum alkohol, soalnya kepikiran itu bisa bikin tenang” (PS1.45); “Aku nggak mau ngerusak diri sendiri, jadi aku milih nggak ikut-ikutan” (PS2.46); “Aku sering ditawarkan sama temen, tapi aku tolak” (PS3.40); “Aku kalo lagi stres biasanya tidur lama, biar nggak mikirin apa-apa” (PS1.46); “Aku malah jarang bisa tidur lama, kepikiran terus jadinya susah tidur” (PS3.41).

[“I once tried drinking alcohol because I thought it could make me calm” (PS1.45); “I don’t want to destroy myself, so I choose not to follow my friends” (PS2.46); “My friends often offered me, but I refused” (PS3.40); “When I am stressed, I usually sleep for long hours so I don’t have to think about anything” (PS1.46); “On the contrary, I can hardly sleep because my mind keeps racing” (PS3.41).]

THEME: SELF-CONTROL

When facing pressure, participants also sought to practise self-control. They attempted to regulate their emotions in order not to worsen the situation, even though moments of emotional outbursts still occurred. Their awareness of the importance of emotion regulation made them more cautious in their behaviour. They further tried to avoid impulsive actions by managing how they expressed themselves and by carefully choosing their words before speaking. This reflects an active effort to preserve social relationships, even under stressful circumstances.

“Aku biasanya dengerin dukungan positif dari orang sekitar biar pikiranku lebih tenang” (PS1.50); “Kadang aku suka emosi ke pasangan, tapi setelah itu aku nyesel” (PS2.51); “Aku

berusaha sabar aja menghadapi masalah” (PS3.46); “Aku berusaha terbuka sama perasaan, tapi tetap aku jaga supaya nggak nyakitin orang lain” (PS1.52); “Aku ngatur cara ngomong biar nggak menyinggung orang lain” (PS3.47).

[“I usually listen to positive encouragement from others to calm my mind” (PS1.50); “Sometimes I lose my temper with my partner, but I regret it afterwards” (PS2.51); “I try to stay patient when dealing with problems” (PS3.46); “I try to be open with my feelings, but still make sure not to hurt others” (PS1.52); “I manage my way of speaking so I don’t offend anyone” (PS3.47).]

THEME: ACCEPTING RESPONSIBILITY

Participants revealed attitudes of accepting responsibility for the situations they were facing. This awareness began with admitting mistakes, continued with taking responsibility for the consequences, and developed into efforts to learn from their experiences. Acknowledging mistakes reflected self-reflection, which served as the basis for improvement. Responsibility was mainly related to their role as mothers, along with the determination to continue life despite the challenges. Over time, such experiences were reinterpreted as valuable lessons that contributed to their personal growth and maturity.

“Aku sadar kok ada kesalahan yang aku buat, dan itu jadi pelajaran buat aku” (PS1.60); “Aku sering introspeksi diri, biar nggak ngulang kesalahan yang sama” (PS2.61); “Aku menyadari kalau ada kelalaian dari aku sendiri” (PS3.55); “Aku berusaha ngerawat anak dengan baik, itu kan tanggung jawabku sekarang” (PS1.62); “Aku coba terima semua tanggung jawabku, walaupun berat” (PS2.63); “Aku nggak mau ngulang kesalahan yang sama, jadi lebih mikir panjang sebelum ambil keputusan” (PS3.57).

[“I realise there were mistakes I made, and they became lessons for me” (PS1.60); “I often reflect on myself so I won’t repeat the same mistakes” (PS2.61); “I am aware that some negligence came from myself” (PS3.55); “I try to take good care of my child, because that is my responsibility now” (PS1.62); “I am trying to accept all my

responsibilities, even though it is heavy” (PS2.63); “I don’t want to repeat the same mistakes, so I think more carefully before making decisions” (PS3.57).]

THEME: POSITIVE REAPPRAISAL

Participants showed the ability to reframe their difficult experiences in a more positive way. They attempted to find the good side of the situation, focus on supportive aspects, and strengthen themselves through spiritual practices. Such efforts helped them reduce feelings of guilt while also finding new meaning in what they went through. Emotional and spiritual support thus became key sources of resilience. Through positive reappraisal, participants were able to face their challenging conditions with a more optimistic outlook.

“Aku sekarang berusaha berdamai dengan diri sendiri” (PS1.70); “Aku lihat anakku sebagai anugerah, meskipun awalnya aku takut banget” (PS2.71); “Dari semua ini aku belajar jadi lebih kuat” (PS3.66); “Aku pengen kasih kehidupan yang baik buat anakku, itu jadi motivasi aku sekarang” (PS1.72); “Aku bersyukur banget masih ada dukungan dari orang-orang dekat” (PS2.73); “Aku mencoba lebih mendekatkan diri sama Tuhan biar lebih tenang” (PS3.68).

[“I now try to make peace with myself” (PS1.70); “I see my child as a blessing, even though at first I was very afraid” (PS2.71); “From all of this I have learned to be stronger” (PS3.66); “I want to give my child a good life, and that has become my motivation now” (PS1.72); “I feel very grateful that I still have support from my loved ones” (PS2.73); “I am trying to get closer to God so I can feel calmer” (PS3.68).]

4 DISCUSSION

This study demonstrates that early marriage due to unplanned pregnancy, commonly referred to as Married by Accident (MBA), presents significant physical and psychosocial challenges. Participants, as

adolescents assuming new roles as wives and prospective mothers, experienced substantial changes in their lives. The pressures they faced were not solely due to the physical changes of pregnancy but also emerged from new responsibilities that arrived without adequate preparation. This aligns with prior findings indicating that adolescent pregnancies often induce stress due to unpreparedness for parenthood and limited economic resources (Ntshayintshayi et al., 2021). Furthermore, in the Indonesian context, the high prevalence of premarital sexual activity among teenagers (Sari et al., 2020) and the social pressures to marry early (Audina & Rojanah, 2023) exacerbate these challenges.

The findings reveal that participants predominantly employed emotion-focused coping, though with varying emphases. Participant 1 relied on distancing and escape-avoidance, withdrawing and diverting attention through entertainment or excessive sleep. Participant 2 used a combination of distancing and self-control, avoiding social interactions while regulating emotions to prevent harming others. In contrast, Participant 3 emphasised seeking social emotional support and positive reappraisal, openly sharing with family, seeking emotional reinforcement, and trying to perceive the pregnancy positively. These results corroborate previous evidence that social support plays a crucial role in alleviating psychological stress among pregnant adolescents (Anto, 2024; Wainaina et al., 2021).

Beyond emotional strategies, the study also identified problem-focused coping, albeit less dominant. Participants actively sought informational and practical solutions by consulting partners, family, or school counsellors, and by planning education after

childbirth. For example, one participant stated, “*I made time for an ultrasound*” (PS1.12), while another shared, “*I often searched on Google*” (PS2.8). Others discussed strategies with family or partners, reflecting rational attempts to manage the situation despite limitations: “*My partner and I made small plans, at least to continue university or work*” (PS2.31) and “*Fortunately, my family was still willing to accept me, so I had hope to move forward*” (PS1.38). These findings resonate with prior work highlighting that seeking information, professional support, and future planning assists individuals in coping with stress (Phiri et al., 2021). Therefore, although emotion-focused coping dominated, problem-focused strategies were significant in guiding adaptive actions among adolescents facing MBA.

Importantly, the study indicates that the availability of social support significantly influences coping strategies. Participants with family support demonstrated greater openness, future planning, and healthy emotional expression. Conversely, those with minimal support tended to adopt avoidance strategies, which may carry long-term psychological risks. This aligns with Fertisia et al. (2024), who emphasized that social support is a critical determinant of the effectiveness of coping strategies in pregnant adolescents. For instance, Participant 3 expressed, “*Whenever I feel lost, it is my family who gives me strength*” (PS2.38), illustrating the centrality of familial encouragement in sustaining psychological resilience.

In addition, participants’ coping behaviours can be linked to Lazarus and Folkman’s theoretical framework of stress and coping, which distinguishes problem-focused and emotion-focused coping (Anto, 2025). Seeking informational support and planning

future education exemplify problem-focused coping, aiming to change the stress-inducing situation. Conversely, strategies such as distancing, seeking emotional support, and positive reappraisal represent emotion-focused coping, aimed at regulating emotional responses to the stressor. Integrating these findings with the theoretical framework underscores that adaptive coping is multifaceted and context-dependent, influenced by both the individual's appraisal of the situation and the availability of social resources.

Finally, the study highlights diversity in coping strategies, reflecting individual differences in personality, social environment, and perceived support. Some participants briefly considered terminating the pregnancy, demonstrating the severity of psychological pressure "*I once thought about having an abortion*" (PS1.26). Others focused on continuing education and fulfilling parental responsibilities. "*Even though I was pregnant, I still continued school*" (PS3.22); "*I thought more about how to take care of my child, even though it was tiring, because that is my responsibility*" (PS3.36). These variations suggest that interventions supporting adolescents with MBA must consider both emotional and practical dimensions, emphasizing social support, emotional regulation, and structured problem-solving guidance.

In conclusion, the findings indicate that adolescents facing MBA employ a combination of emotion-focused and problem-focused coping strategies, shaped strongly by the availability of social support. Emotional strategies, such as seeking social-emotional support and positive reappraisal, were essential for maintaining psychological balance, while problem-focused strategies, including

information-seeking and structured planning, guided practical adaptation. Integrating these insights with Lazarus and Folkman's coping framework reinforces the importance of context-sensitive psychosocial interventions, which strengthen both individual resilience and support networks for adolescents navigating the complex challenges of early marriage due to unplanned pregnancy.

5 CONCLUSIONS AND SUGGESTIONS

Early marriage due to unplanned pregnancy presents substantial physical, emotional, and social challenges for adolescents, who must quickly adapt to their new roles as wives and prospective mothers. Participants in this study predominantly relied on emotion-focused coping strategies, including seeking social support, self-regulation, and positive reappraisal, while problem-focused strategies, such as planning for education and seeking information, were also evident. The availability of supportive social networks strongly influenced the effectiveness of these coping mechanisms, highlighting the crucial role of family, partners, and close relationships in helping adolescents navigate this challenging period and maintain psychological balance.

To support adolescents facing unplanned pregnancy, psychosocial interventions should emphasize the strengthening of family and partner support and the provision of both informational and emotional guidance through school counsellors and healthcare professionals. Programs that enhance reproductive health knowledge and preparedness can help prevent future unplanned pregnancies and equip adolescents with the skills to cope more effectively.

Further research is needed to examine coping strategies across larger and more diverse populations, to explore how these strategies affect long-term psychological and social outcomes, and to identify which elements of social support networks most effectively promote adaptive coping and resilience.

6 REFERENCES

- Alifah, A. P., Apsari, N. C., & Taftazani, B. M. (2021) 'Faktor yang Mempengaruhi Remaja Hamil di Luar Nikah', *Jurnal Penelitian Dan Pengabdian Kepada Masyarakat (JPPM)*, 2(3), pp. 529–537. <https://doi.org/10.24198/jppm.v2i3.38077>
- Andina, R. (2021) [Data UNICEF on child pregnancy in Indonesia]
- Ansari, R., Suwarni, L., Selviana, R., Rochmawati, & Mawardi, (2020) 'Media Komik Sebagai Alternatif Media Promosi Kesehatan Seksualitas Remaja', *Jurnal Ilmiah Kesehatan*, 19, pp. 1. <https://doi.org/10.33221/jikes.v19i01.431>
- Audina, R., & Rojanah, N. (2023) 'Coping Strategy pada Teen Mother yang Mengalami Kehamilan Tidak Direncanakan dalam Menghadapi Dampak Traumatis (Studi Kasus Di Sentra Paramita Mataram)', *Altruism: The Indonesian Journal of Community Engagement*, 2(1), pp. 9–21. <https://ejournal.uin-suka.ac.id/dakwah/aijce/article/view/3044>
- Anto, A.H.F. (2024) 'Living a Post-Disaster Life: The role of cultural adaptability, coping strategies, and spiritual support on resilience among families affected by the Semeru eruption,' *IJIP Indonesian Journal of Islamic Psychology*, 6(2), pp. 108–136. <https://doi.org/10.18326/ijip.v6i2.2431>.
- Anto, A.H.F. (2025) 'Pengantar Psikologi Keluarga: Teori, Penelitian, Tadabbur, Terapan.' Surabaya: CV Dimar Jaya
- Creswell, J.W. & Creswell, J.D., 2022. *Research Design: Qualitative, Quantitative, and Mixed Methods Approaches*. 5th ed. Los Angeles: Sage Publications.
- Fertisia, N., Yusri, F., Santosa, B., & Syam, H. (2024) 'Coping Stres Pasangan Remaja Menikah Dini di Nagari Tanjung Beringin Kecamatan Lubuk Sikaping Kabupaten Pasaman', *Observasi: Jurnal Publikasi Ilmu Psikologi*, 2(4), pp. 146–156. <https://doi.org/10.61132/observasi.v2i4.661>
- Handayani, L., Rahayu, H. S., Olivia, C. N., D. W., & Meirini, I. (2024) 'Upaya Peningkatan Kesehatan Remaja Dalam Menghindari Kehamilan Diluar Nikah', *Jurnal Pengabdian Masyarakat Dan Riset Pendidikan*, 2(4), pp. 338–342. <https://doi.org/10.31004/jerkin.v2i4.273>
- Husna, F., Akbar, A., & Amalia, R. B. (2019) 'Complication of Pregnancy and Childbirth in Adolescence Pregnancy', *Indonesian Midwifery and Health Sciences Journal*, 3(2), pp. 138–147. <https://doi.org/10.20473/imhsj.v3i2.2019.138-147>
- Ipetu, A. S., Thalib, M. C., & Abdussamad, Z. (2023) 'Peran Kepala Desa Dalam Pencegahan Pernikahan Usia Dini Di Desa Botungobungo Kecamatan Kwandang Kabupaten Gorontalo Utara', *Jurnal Ilmu Sosial, Humaniora Dan*

- Seni (JISHS), 1(4), pp. 894–904.
<http://jurnal.minartis.com/index.php/jishs>
- Islamy, G. H., Khumas, A., & Zainuddin, K. (2022) 'Strategi Coping Pada Remaja Yang Stress Karena Kehamilan Pranikah', PESHUM: Jurnal Pendidikan, Sosial Dan Humaniora, 2(1), pp. 61–69.
https://www.researchgate.net/publication/375076562_Strategi_Coping_Pada_Remaja_Yang_Stress_Karena_Kehamilan_Pranikah
- Kautsar, A. (2024) 'BKKBN Ungkap Makin Banyak Remaja RI yang Lakukan Hubungan Seks Pranikah', DetikHealth.
<https://health.detik.com/berita-detikhealth/d-7236180/bkkbn-ungkap-makin-banyak-remaja-ri-yang-lakukan-hubungan-seks-pranikah>
- Melati, N. S. (2021) 'Perkawinan Usia Muda di Indonesia dalam Perspektif Negara dan Agama serta Permasalahannya', Nomos: Jurnal Penelitian Ilmu Hukum, 1(3), pp. 106–114.
- Palintan, T. A. (2021) 'Analisis Faktor Psikologis dan Strategi Coping Stres Mahasiswa Menikah pada Masa Pandemi Covid 19', JIVA: Journal of Behavior and Mental Health, 2(2), pp. 190–199.
- Sari, L. Y., Umami, D. A., & Darmawansyah. (2020) 'Dampak Pernikahan Dini Pada Kesehatan Reproduksi Dan Mental Perempuan (Studi Kasus Di Kecamatan Ilir Talo Kabupaten Seluma Provinsi Bengkulu)', Jurnal Bidang Ilmu Kesehatan, 10(1), pp. 53–65.
<https://ejournal.urindo.ac.id/index.php/kesehatan/article/view/735/648>
- Sutarto, Y. (2020) 'Gambaran pengetahuan remaja tentang resiko pernikahan dini di desa jatisari kecamatan kutawaringin kabupaten bandung', Jurnal Ilmiah Magister Ilmu Administrasi, 13, pp. 1.
<https://jurnal.unnur.ac.id/index.php/jimia/article/view/276>
- Triadhari, I., Afridah, M., & Salsabila, H. H. (2023) 'Dampak Psikologis Pernikahan Dini (Studi Kasus di KUA Kecamatan Kejaksan Kota Cirebon)', Spiritualita: Journal of Ethics and Spirituality, 7(2), pp. 89–100.
- Tadung, F., Lakumani, D., & Rotikan, G. (2023) 'Suatu Kajian Deskriptif Bimbingan Konseling Terhadap Perilaku Kecanduan Menonton Video Porno dan Seks Bebas pada Remaja Masa Kini (Sex Before Marriage)', POIMEN: Jurnal Pastoral Konseling, 4(1), pp. 43–56.
- Winata, E. Y., Mustafa, K., Luh, N., & Ningsih, S. (2022) 'Kualitas Pernikahan Wanita dengan Status Married By Accident (MBA) serta Melakukan Konversi Agama', Jurnal Pendidikan Dan Konseling, 4(4), pp. 4942–4945.
- Yuwanda, R., Halimah, N., & Adri, Z. (2024) 'Studi Kasus Mengenai Coping Stress pada Remaja yang Nikah Muda akibat Married by Accident', Jurnal Riset Psikologi, 7(1), pp. 42–50.
<https://doi.org/10.24036/jrp.v7i1.15633>