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Teachers' Perceptions, Attitudes, And Subjective Norms On Teenage Pregnancy Prevention In Jambi High Schools

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Abstract

Teenage pregnancy is a health and social issue that impacts adolescents' education and future. The involvement of schools and teachers in prevention efforts is influenced by their perceptions, attitudes, and subjective norms regarding teenage pregnancy. This study aims to explore in depth the perceptions, attitudes, and subjective norms of high school teachers regarding efforts to prevent teenage pregnancy in Jambi City. This study employs a qualitative approach with a phenomenological study design. The informants consisted of 18 individuals, including school principals, vice principals for student affairs, biology teachers, religion teachers, guidance counselors, and homeroom teachers from three public high schools in Jambi City. Data were collected through in-depth interviews, observations, and documentation, then analyzed inductively through coding, categorization, and theme identification. The results of the study indicate that teachers view teenage pregnancy as a serious issue and support prevention through guidance, education, counseling, student monitoring, and collaboration with parents and external parties. Strengthening school-based reproductive health education, teacher capacity, parental involvement, and cross-sectoral collaboration are necessary to optimize prevention.

Keywords: ***Teenage Pregnancy, Teachers, Perceptions, Attitudes, Subjective Norms***

INTRODUCTION

Teenage pregnancy is a health and social issue that remains a concern because it can impact adolescents' education, psychological well-being, social life, and future. Adolescents who become pregnant while still in school are at risk of facing obstacles in continuing their education, psychological stress, social stigma, and limitations in planning for their future. This situation indicates that teenage pregnancy is not merely an individual issue, but is also linked to the family, school, and community environments.

Globally, the World Health Organization reports that in 2019 there were approximately 21 million pregnancies among adolescent girls aged 15–19 in low- and middle-income countries. Of that number, about 50% were unplanned pregnancies, and approximately 12 million resulted in live births (WHO, 2019). In Indonesia, reducing the adolescent birth rate is part of a national development goal: to lower the Age-Specific Fertility Rate (ASFR) for 15–19-year-olds to 21 births per 1,000 women. However, in 2022, the adolescent ASFR remained at around 27 births per 1,000 women, meaning the set target has not yet been achieved (BKKBN, 2022).

According to 2024 data from the Central Statistics Agency, the proportion of ever-married women aged 15–49 who gave birth to their first live child at an age of less than 20 in Indonesia was recorded at 0.248. At the regional level, Jambi Province recorded a rate of 0.3, while Jambi City recorded a rate of 0.102. Over the past five years, the proportion of first-time births before age 20 in Jambi City has shown a fluctuating trend: 0.163 in 2020, 0.081 in 2021, 0.134 in 2022, 0.080 in 2023, and an increase to 0.102 in 2024 (BPS, 2024). These data indicate that first births to women under the age of 20 still occur in Jambi City, so efforts to prevent teenage pregnancy must continue to be strengthened.

High school is one of the key settings for preventing teenage pregnancy, as students are in the adolescent phase, which is characterized by physical, emotional, and social changes, as well as the emergence of interest in the opposite sex. Schools serve not only as places for academic learning but also as spaces for fostering students' values, attitudes, and behavior. Within the school environment,

teachers have close relationships with students through the learning process, guidance, supervision, and non-academic support. Therefore, teachers can play a role in providing direction, advice, and education, as well as helping to identify risky behaviors among students.

However, teachers' involvement in preventing teen pregnancy is not solely determined by their formal role as educators. The way teachers view the issue of teen pregnancy, their attitudes toward the importance of prevention, and the subjective norms that develop within the school environment and the community can influence how teachers carry out their roles. The issues of teen pregnancy and reproductive health are often considered sensitive, so teachers need to consider how they convey messages, religious and cultural values, parental acceptance, and the limits of the school's authority in addressing these issues.

Most research on teenage pregnancy still focuses on adolescents as the primary subjects, while studies exploring the perceptions, attitudes, and subjective norms of teachers as actors within the school environment remain limited. In fact, teachers possess experiences and perspectives that are crucial for understanding how efforts to prevent teenage pregnancy can be carried out in a manner more suited to the school context. Based on this, this study aims to thoroughly explore the perceptions, attitudes, and subjective norms of high school teachers regarding efforts to prevent teenage pregnancy in the city of Jambi.

RESEARCH METHODS

This study is a qualitative research project with a phenomenological design that aims to explore teachers' experiences, perceptions, attitudes, and subjective norms regarding efforts to prevent teenage pregnancy. The study was conducted from July 2025 until its completion at three public high schools in the city of Jambi. To protect the confidentiality of the institutions and informants, the identities of the schools in this article are disguised as SMA-01, SMA-02, and SMA-03.

There were 18 research informants, consisting of 3 school principals, 3 vice principals for student affairs, 3 biology teachers, 3 religion teachers, 3 guidance and counseling teachers, and 3 homeroom teachers. Based on their roles in the study, biology and religious education teachers were designated as primary informants because they are directly involved in delivering instructional content, fostering values, and providing education related to reproductive health, morality, and student behavior. School principals and vice principals for student affairs were designated as key informants because they possess an understanding of school policies, regulations, and programs related to student guidance. Meanwhile, guidance counselors and homeroom teachers were designated as supporting informants because they play a role in mentoring, monitoring, counseling, and communicating with both students and parents.

Informants were selected using purposive sampling based on their involvement in the learning process, mentoring, supervision, and guidance of students at school. Data were collected through in-depth interviews, observations, and documentation. Interviews were conducted using a semi-structured approach with an interview guide to explore the informants' perspectives on teenage pregnancy, attitudes toward prevention efforts, subjective norms that influence teachers' roles, and factors that support or hinder prevention at school.

The data were analyzed inductively through the stages of transcription, data reduction, coding, categorization, theme identification, data presentation, and drawing conclusions. Data validity was ensured through source triangulation, methodological triangulation, and discussions with the supervisor. Research ethics principles were applied by obtaining consent from informants, maintaining the confidentiality of informants' identities, and using informant codes in the presentation of research results.

RESULTS AND DISCUSSION

There were 18 informants in this study, drawn from three public high schools in the city of Jambi. The informants consisted of school principals, vice principals for student affairs, biology teachers, religious education teachers, guidance and counseling teachers, and homeroom teachers. All informants were selected because of their involvement in the learning process, guidance, supervision, mentoring, and policy-making related to students within the school environment. In this research paper, the informants consist of school administrators from three public high schools in Jambi City, and the data collected covers attitudes, subjective norms, and perceptions of teachers' behavioral control in the prevention of teenage pregnancy.

Table 1. Characteristics of Informants

Informant Code	Gender	Age	Position	Years of Teaching Experience
G01	Male	36	Vice principals for student affairs	12
G02	Woman	56	Biology teachers	32
G03	Male	30	Religious education teachers	9
G04	Woman	52	Homeroom teachers	35
G05	Woman	59	Guidance and counseling teachers	35
G06	Male	56	School principals	33
G07	Woman	41	Guidance and counseling teachers	12
G08	Woman	51	Biology teachers	23
G09	Woman	34	Homeroom teachers	13
G10	Woman	52	Vice principals for student affairs	29
G11	Woman	41	Guidance and counseling teachers	16
G12	Woman	53	Homeroom teachers	22
G13	Male	30	Religious education teachers	7
G14	Woman	58	Biology teachers	23
G15	Woman	52	Vice principals for student affairs	28
G16	Woman	46	Religious education teachers	15
G17	Woman	55	School principals	30
G18	Male	56	School principals	33

Teachers' Perceptions of Teen Pregnancy

The research findings indicate that teachers view teenage pregnancy as a serious issue that can have far-reaching impacts on students' lives. Teenage pregnancy is understood not only as a reproductive health issue but also as an educational, psychological, social, family, and school-related problem. Informants believe that pregnancy during school years can hinder the learning process, disrupt aspirations, cause feelings of shame and mental strain, lead to social stigma, and affect students' futures. Findings from the informant matrix also indicate that teenage pregnancy is viewed as a serious problem linked to individual, family, and environmental factors, religious values, and exposure to inappropriate information or content.

Several informants stated that teenage pregnancy has a major impact on students' education and future. One informant remarked:

"It's very serious. Because the impact is enormous… it ruins their future."
(G03, Religious Studies Teacher)

A similar perspective was expressed by another informant who emphasized that early pregnancy and marriage can hinder students' aspirations.

"If they're forced to get pregnant and marry early… some of their aspirations get derailed… they don't turn out the way they planned."
(G04, Homeroom Teacher)

In addition to affecting education, teenage pregnancy is also seen as causing psychological and social burdens. Informants noted that students who become pregnant while still in school may feel ashamed, withdraw from their social circles, and face negative judgment from the community. One informant explained:

"She'll feel like she'll carry a mental burden for the rest of her life… the community… will talk about it forever."
(G04, Homeroom Teacher)

Teenage pregnancy is also seen as having an impact on the school's reputation. Some informants noted that if such a case occurs among students, it is not only a personal issue for the student and her family but can also become a matter of concern within the school community. Thus, teachers' perceptions of teenage pregnancy indicate that this issue is understood as a multidimensional problem requiring early prevention.

The research findings show that teachers view teenage pregnancy as a serious problem with far-reaching impacts on students' lives. This perception is not limited to reproductive health aspects but also encompasses educational, psychological, social, and family impacts, as well as the students' future and the school's reputation. This perspective indicates that teachers understand teenage pregnancy as a multidimensional issue that cannot be viewed solely as a student's personal matter.

Teachers' views align with previous research in Jambi Province, which showed that pregnancy during the school years can cause adolescents to drop out of school and face barriers to continuing their education due to child-rearing responsibilities, economic constraints, parental consent, and decreased motivation to learn (Fitri et al., 2023). Thus, the teachers' perceptions in this study reinforce the notion that teenage pregnancy is closely linked to educational continuity and the quality of adolescents' futures.

In the context of prevention, teachers' perceptions of the magnitude of the impact of teen pregnancy can serve as the foundation for developing a sense of concern and motivation to engage in student guidance. Teachers who view teen pregnancy as a serious issue tend to believe that prevention must begin early through strengthening students' understanding, moral values, and self-control, as well as providing them with guidance.

Teachers' Attitudes Toward Teen Pregnancy Prevention Efforts

Teachers expressed support for efforts to prevent teenage pregnancy within the school environment. This support is evident in the teachers' view that prevention must be carried out through values education, strengthening moral and religious values, reproductive health education, counseling, and monitoring student behavior. Teachers believe that students need guidance to understand appropriate social boundaries, avoid risky behaviors, and focus more on their education.

One informant emphasized that teacher involvement in prevention is necessary because teachers play a role in guiding students at school.

"It's necessary—absolutely necessary—especially as a homeroom teacher… the first person… to act as a parent to them."
(G04, Homeroom Teacher)

Among the biology teacher informants, a supportive attitude toward prevention was evident through their willingness to explain reproductive topics within the context of learning. Discussions about reproduction were seen as a way to open up dialogue with students, provided they remained within academic boundaries and were presented in an appropriate manner. In informant G02's matrix,

the biology teacher noted that reproductive topics spark students' curiosity to ask questions and provide an opportunity to foster understanding of the body and reproductive health.

Religion teachers emphasized the importance of instilling religious values, moral character, and self-control. According to the informants, prevention is not sufficient if it relies solely on prohibitions; it is also necessary to raise students' awareness of the impact of risky behaviors on their future. One informant stated:

"It's very important. A teacher's duty is to instill religious educational values—in other words, good moral character."

(G03, Religious Education Teacher)

Although teachers support prevention, the research findings also indicate a cautious approach when conveying messages related to teenage pregnancy and reproductive health. Teachers adapt their language and approach to ensure that prevention messages remain acceptable to students, parents, and the school community. The issue of teenage pregnancy is considered necessary to discuss, but it must still take into account norms of propriety, religion, culture, as well as the students' age and readiness.

Teachers in this study demonstrated a supportive attitude toward efforts to prevent teenage pregnancy in schools. This support was evident in teachers' recognition of the importance of character building, providing guidance, reproductive health education, reinforcing moral and religious values, and monitoring student behavior. Within the framework of the Theory of Planned Behavior, a positive attitude forms when an individual perceives that a behavior has benefits or positive consequences (Ajzen, 1991; Ajzen, 2005). Therefore, teachers' support for prevention indicates that they view the prevention of teenage pregnancy as a crucial measure for the continuity of students' education and their future.

However, this supportive attitude is not always expressed through open and explicit discussions of reproductive health. Teachers tend to choose approaches considered more in line with school and community norms, such as moral guidance, religious reinforcement, providing advice, and embedding messages within lessons. This situation indicates that teachers' positive attitudes are still accompanied by caution, as the issues of teenage pregnancy and sexuality are still viewed as sensitive.

Teachers' caution in addressing reproductive health issues is also linked to the need to deliver sexuality education that is age-appropriate, culturally relevant, and aligned with the values prevailing in the school environment. Reproductive health education conducted in schools must be delivered appropriately so that it helps students understand risks, protect themselves, and make responsible decisions without provoking rejection from their social environment (UNESCO, 2018).

Subjective Norms Influencing Teachers

The subjective norms that influence teachers in preventing teenage pregnancy stem from the school environment, fellow teachers, parents, religious values, culture, and society. Support from the school is evident through school regulations, guidance and counseling services, the role of homeroom teachers, religious activities, parenting programs, and collaboration with external parties. In the informant matrix, support from the school and fellow teachers manifests in the form of religious literacy programs, the Rohis club, policies for handling serious violations, outreach activities by external parties, and collaboration with the KUA, Puskesmas, the Department of Education, and other relevant parties.

One informant described support for activities from external parties related to the prevention of teenage marriage and sex education.

"Yesterday, representatives from the Jelutung KUA visited the school… to discuss the prevention of teenage marriage… and provide information on sex education."

(G03, Religious Studies Teacher)

Support for school norms is also evident in religious activities conducted on a regular basis. Informants noted that religious activities serve as one of the forms of guidance the school uses to strengthen students' moral values.

"Every Friday there's religious literacy… a spiritual talk, you might say."

(G03, Religious Studies Teacher)

In addition to the school, parents are also seen as playing a crucial role. Teachers believe that preventing teenage pregnancy cannot be the sole responsibility of the school, as students' behavior is also heavily influenced by their family environment and social circles outside of school. For some informants, parental involvement is viewed as supportive, particularly when parents are open to understanding their teenagers' developmental stages and are willing to collaborate with the school. One informant stated:

"Parents… need to be open-minded about change and progress… different times call for different attitudes or behaviors from children."

(G04, Homeroom Teacher)

However, subjective norms can also act as barriers. The issues of teenage pregnancy and reproductive health are still considered sensitive by some social circles, so teachers need to be careful in choosing their language and approach. Teachers strive to convey prevention messages in more acceptable forms, such as character building, counseling, religious reinforcement, and education tailored to the context of the subject matter. Thus, subjective norms in this study act as both a driving force and a constraint on how teachers implement prevention efforts.

Subjective norms in this study play a crucial role in shaping how teachers implement teen pregnancy prevention. Support from the principal, the vice principal for student affairs, guidance counselors, homeroom teachers, fellow teachers, and the existence of school regulations can strengthen teachers' engagement. Such support helps teachers feel that teen pregnancy prevention is part of a shared responsibility within the school environment. In the Theory of Planned Behavior, subjective norms relate to an individual's perception of social support or pressure from their surroundings to engage in or refrain from a particular behavior (Ajzen, 1991).

In this study, subjective norms were evident in the influence of school administrators, fellow teachers, parents, religious values, culture, and society on how teachers conveyed prevention messages. Thus, teacher involvement is influenced not only by personal views but also by the expectations and values prevalent in their social environment.

These findings align with a study in Jambi City showing that parental attitudes, normative expectations, and reference group practices are associated with parents' intentions to marry off their daughters at an early age (Fitri et al., 2024). These results indicate that social norms have a significant influence on decision-making related to adolescents. In the context of this study, social norms also influence how teachers interpret the boundaries of their role in discussing teenage pregnancy and reproductive health at school.

On the other hand, religious norms, cultural norms of propriety, parental views, and community sensitivity toward the issue of teenage pregnancy can limit how teachers convey prevention messages. Teachers need to choose language that is considered appropriate, does not lead to misinterpretation, and remains consistent with the values prevailing in both the school and the community. Thus, subjective norms play a dual role—as both a supporting factor and a limiting factor—in efforts to prevent teenage pregnancy.

Teachers' Perceptions of Behavioral Control in Prevention

The research findings indicate that teachers feel they have the ability to play a role in preventing teenage pregnancy in accordance with their respective fields and capacities. Biology teachers feel capable of providing an understanding of reproductive health, the functions of reproductive organs, and the biological impacts of risky behaviors. Religious education teachers feel they play a role in reinforcing moral, religious, and ethical values. Guidance counselors and homeroom teachers play a role in counseling, monitoring, communicating with students, and coordinating with parents.

One biology teacher stated that the ability to play a role in prevention is based on the knowledge they possess.

"Yes, hopefully with the knowledge I have. At the very least, I can explain the functions of the organs in the body."

(G02, Biology Teacher)

Teachers also adapt their communication style within the bounds of appropriateness. In their lessons, biology teachers place greater emphasis on health aspects and biological impacts to ensure discussions remain within an academic context.

"I focus more on the health aspects and the biological impacts."

(G02, Biology Teacher)

Another informant noted that teachers need the ability to address behavioral and social issues in the classroom. In the G04 matrix, teachers felt that they must be able to address matters related to student behavior and social interactions, and that school support is available through school regulations, in-house training, guidance and counseling services, collaboration with community health centers, and school policy documents.

Nevertheless, there are several barriers that affect teachers' ability to carry out prevention efforts. These barriers include time constraints, students who are not very open, dating behavior that takes place in secret, limited school supervision outside of class hours, and suboptimal cooperation from some parents. For biology teachers, obstacles also arise because not all students take biology, thus limiting the reach of reproductive education through the curriculum. According to informant G03, the main obstacle does not stem from teachers or the community, but from students who continue to date in secret despite having been given advice.

One informant noted that the obstacles stemmed more from the students' attitudes.

"Obstacles from my own perspective… there aren't any, really… the obstacles come back to the students themselves."

(G03, Religion Teacher)

These findings indicate that teachers are confident in their role in prevention, but its implementation remains influenced by student circumstances, family support, school facilities, and the limits of teachers' supervision outside the school environment.

Teachers' perceptions of behavioral control are evident in their belief that they have the ability to play a role in prevention according to their respective fields and capacities. Biology teachers feel they can provide an understanding of reproductive health, the functions of reproductive organs, and the biological impacts of risky behaviors. Religion teachers play a role in reinforcing moral, religious, and ethical values. Meanwhile, guidance counselors and homeroom teachers play a role in counseling, monitoring, communicating with students, and coordinating with parents.

In the Theory of Planned Behavior, perceived behavioral control refers to the extent to which an individual feels they possess the ability, opportunity, resources, and control to perform a specific action (Ajzen, 1991; Ajzen, 2005). In this study, teachers felt they had the ability to implement prevention measures, but their implementation was still hindered by several obstacles. These obstacles included time constraints, students' reluctance to open up, risky behaviors occurring outside of school, limited supervision, and suboptimal cooperation from some parents.

These conditions indicate that preventing teenage pregnancy cannot rely solely on the willingness of individual teachers. Support from the school system, safe spaces for communication, and collaboration with families and external parties are needed so that teachers have greater control in carrying out their roles. This is also in line with sexuality education guidelines that emphasize the importance of a supportive school environment, trained teachers, and the involvement of parents and the community in adolescent reproductive health education (UNESCO, 2018).

CONCLUSION

This study shows that high school teachers in Jambi City view teenage pregnancy as a serious problem that impacts students' education, psychological well being, social life, family, future, and the school's reputation. Teachers at the Jambi City High School for the Deaf have a supportive attitude toward efforts to prevent teenage pregnancy through character building, strengthening moral and religious values, reproductive health education, providing advice, monitoring students, and counseling. Teachers' involvement is influenced by subjective norms stemming from the school environment, fellow teachers, parents, religious values, culture, and society.

Teachers' perceptions of behavioral control indicate that they feel capable of playing a role according to their respective fields and capacities; however, implementation is still influenced by time constraints, students' openness, the sensitivity of the issue, limited supervision outside of school, and parental involvement. Therefore, the prevention of teenage pregnancy in schools needs to be strengthened through reproductive health education tailored to the school context, capacity building for teachers, optimization of guidance and counseling services, parental involvement, and collaboration with relevant parties.

REFERENCES

Ajzen, I (1991). The theory of planned behavior. Organizational Behavior and Human Decision Processes. 50(2): 179–211. doi:10.1016/0749-5978(91)90020-T.

Ajzen, I (2005). Attitudes, Personality, and Behavior. 2nd ed. New York: Open University Press.

Creswell, JW (2014). Research Design: Qualitative, Quantitative, and Mixed Methods Approaches. 3rd ed. Yogyakarta: Pustaka Pelajar. Directorate of Population Impact Analysis (2023). Indonesia Population Report 2023. Jakarta: BKKBN.

Fitri, A., Hubaybah, Putri, F.E., & Putra, A.N. (2023). Adolescent Pregnancy in Jambi Province from Health and Education Perspectives. Jambi Medical Journal: Journal of Medicine and Health. JAMHESIC Special Edition, June 2023: 147 161.

Fitri, A., Putri, F.E., Hubaybah, Putra, A.N. (2024). Parents' Attitudes Toward Early Marriage of Their Daughters in Jambi City: A Cross-Sectional Study from the Perspective of Social Norms. Jurnal Bidan Cerdas. 6(3): 160–167. doi:10.33860/jbc.v6i3.3736.

Lenaini, I (2021). Purposive and snowball sampling techniques. Historis: Journal of Historical Education Studies, Research, and Development. 6(1): 33–39. doi:10.31764/historis.vXiY.4075.

Miles, M., Huberman, A. (1994). Qualitative Data Analysis. Vol. 1304. CEUR Workshop Proceedings.

National Central Statistics Agency (BPS) (2025). Proportion of Married Women Aged 15–49 Who Gave Birth to Their First Live-Born Child Before the Age of 20, by Regency/City, 2024. Jakarta: National Central Statistics Agency.

Pahleviannur, M.R., Grave, A. De, Saputra, D.N., et al. (2022). Qualitative Research Methodology. Edited by Sukmawati, S. Pradina Pustaka Group.

Rismayati, R., Ermiati, E., Napisah, P. (2023). The Relationship Between Teachers' Knowledge and Attitudes Toward Unwanted Teenage Pregnancy. Jurnal Sehat Masada. 17(1): 127–132.

UNESCO (2018). International Technical Guidance on Sexuality Education: An Evidence-Informed Approach. Revised edition. Paris: UNESCO.

World Health Organization (WHO) (2021). Adolescent Health. Geneva: World Health Organization.

World Health Organization (WHO) (2024). Adolescent Pregnancy. Geneva: World Health Organization.