

Original Research Article

Contemporary factors of teenage pregnancy in rural communities of Abia state, Nigeria

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ABSTRACT

Background: Teenage pregnancy (TP) is a serious health problem world-wide which has grievous after effect on health of females. The study aims at identifying factors influencing TP in rural communities of Abia State – Nigeria. It also seeks to determine the current prevalence of TP.

Methods: A household survey of 10 randomly selected communities was carried out using a multi-stage sampling method. A sample of 400 girls aged 11-19 years, was calculated from a population of 2505 girls enumerated from the 10 communities, using Lutz's formula $n = Z^2pq/d^2$ as stated by Ejemot- Nwadiaro. Data were collected using a pre-tested structured questionnaire that was interviewer administered. Data were analyzed quantitatively using SPSS V20. Chi-Square statistic was used in determining statistical significance.

Results: The prevalence of TP in this study was 49%. Factors identified to influence TP were broadly categorized into four: socio-demographic factors of teenage age $P < 0.05$, marital status $P < 0.05$, education $P < 0.05$, employment $P < 0.05$. Others were awareness factors $P < 0.05$, parental factors $P < 0.05$, teenage life style and societal factors $P < 0.05$.

Conclusions: Efforts to mitigate teenage pregnancy and its attendant public health and socio-economic problems should begin by proffering lasting and sustainable solutions to these identified factors.

Keywords: Factors, Nigeria, Rural communities, Teenage pregnancy

INTRODUCTION

Teenage pregnancy (TP) constitutes major socio-medical and economic problems in both developed and developing nations with increasing prevalent rate in contemporary times.¹⁻³ TP is defined as gestation in females before reaching the full somatic development.³ According to WHO, teenagers or adolescence are those between the ages of 10-19 years.⁴ Teenage pregnancy has been a matter of great concern in Nigeria because of the added risk of STD and HIV/AIDs infections, to the underage mother.² Studies on the prevalence of TP suggest that it is on the increase.⁴⁻⁷

The unfortunate out-come of TP include poor obstetric outcome, decline in socio-demographic development of

pregnant teen, poor maternal and child indices which culminated into slow pace of attainment of the related Millennium Development Goals (MDGs) in Sub-Sahara Africa.^{2,5,6} Prevalence of TP varies across the globe ranging from 2.9 per 1000 in South Korea to 143 per 1000 in Sub- Saharan Africa.^{6,7} Previous research on TP shows that teenage mothers are more likely to be poor, unemployed, and less likely to proceed to higher education.⁷ Documented social consequences of TP are forced marriage, social stigma especially if the pregnancy is out of wedlock.⁶⁻⁸ TP is currently a burden in Nigeria with its confounding population explosion, high mortality and morbidity rates, exacerbated by youths unemployment, restiveness, child trafficking, kidnapping and gun carrying in the midst of dwindling economy.^{2,9-12} It is against this background that the study is aimed at

identifying contemporary factors of teenage pregnancy in this part of Nigeria. It also seeks to determine the current prevalence of TP and factors that influence it. Such information and knowledge are crucial in planning for TP eradication.

METHODS

A multi-stage sampling method was used in selecting 10 rural communities in Obingwa Local Government Area of Abia State, Nigeria for the study. This study area was chosen as a result of the reports from many researchers including UNESCO that “baby factory” phenomenon was very rampant in the area.^{13,14} “Baby factory” is a hide out for pregnant women or teenagers until the outcome of their pregnancy, without their parents or husbands knowing about the pregnancy and its outcome. Study population of 2505 pregnant teenagers was enumerated from the selected 10 rural communities. Sample size of 400 teenagers was determined using Lutz’s formula $n = Z^2pq/d^2$ of 1982 as stated by Ejemot-Nwadior, where: N = desired sample size, Z = Value at 95% Confidence level = 1.96 approximately 2, p = estimated population proportion = 50% = 0.5, $q = 1 - p = (1 - 0.5) = 0.5$, d = precision taken as 5% = 0.05. Substituting values in the formula $n = Z^2pq/d^2$ $n = (2)^2 \times (0.5)(0.5)/(0.05)^2 = 400$ which now is the sample size used for this work.¹⁵ Data were collected using a pretested structured questionnaire that was interviewer administered. The questionnaire was divided into sections. Section A sought information on socio-demographic factors that significant influence teenage pregnancy. Section B sought information on awareness of protective measures against pregnancy. Section C sought information on parental

factors influencing teenage pregnancy and teenage life style and societal factors influencing teenage pregnancy.

Data collected were analyzed quantitatively using SPSS V20. Chi-square statistic was used in determining statistical significance at alpha level of 0.05.

Ethical consideration: Approval to conduct the study was sought and obtained from the community leaders before embarking upon the project. Personal consent of the individuals interviewed were sought and obtained before administering the questionnaire on them. Data collected were held in strict confidence.

RESULTS

Identified socio-demographic factors of teenage pregnancy (TP) included: age ($P < 0.05$), marital status ($P < 0.05$), education ($P < 0.05$) and employment ($P < 0.05$) (Table 1). TP increases with increased in teenage age. Teens within the age bracket of 17-19 years had the highest percentage of TP (58%). Single teens were less likely to become pregnant than married teens, 41% and 75% respectively. A critical look at marital status of the respondents showed that 304 (76%) were single while 96 (24%) were married which is suggestive that early marriage was insignificant in the area. Drop outs from school and illiterates had highest percentage of TP (68%) followed by teens in secondary schools (45%). Teenagers without employment (students, apprentice, applicants etc) had highest percentage of TP (54%) while those on paid employment (civil and public servants) had least percentage of TP (29%).

Table 1: Socio-demographic factors of teenage pregnancy.

Description	Have you experienced pregnancy			X ² value
	Yes	No	Total	
Age (years)				
11 - 13	10 (29%)	25 (71%)	35	10.33 P<0.05
14 - 16	108 (47%)	123 (53%)	231	
17 - 19	78 (58%)	56 (42%)	134	
Marital status				
Single	125 (41%)	179 (59%)	304	31.6 P<0.05
Married	71 (74%)	25 (26%)	96	
Education				
No Education/ Drop Outs	77 (68%)	37 (32%)	114	27.39 P<0.05
Primary	9 (27%)	24 (73%)	33	
Secondary	107 (45%)	131 (55%)	238	
Tertiary	3 (20%)	12 (80%)	15	
Employment				
No employment (Student, Apprentice, Applicant)	164 (54%)	139 (46%)	303	12.95 P<0.05
Paid employment (Civil and Public Servants etc.)	9 (29%)	22 (71%)	31	
Private Employment (office receptionist, domestic servant, hawkers, vendors etc.)	23 (35%)	43 (65%)	66	
Total	196 (49%)	204 (51%)	400 (100%)	

A larger proportion 97 (24.25%) of respondents were aware of protective measures against pregnancy while 303 (75.75%) were not aware. Those who were aware of protective measures against pregnancy had least percentage of TP (15%) while those not aware had highest percentage (60%).

Identified parental factors influencing TP in descending order of magnitude were parents living in penury (no skilled employment, and of low level or no formal education (72%); parents addicted to alcohol, drugs and promiscuous life (59%); single parentage without formal marriage 97%; and the least were teens from parents living happily together (30%) (Table 3).

Identified teenage life style and societal factors influencing TP in descending order of magnitude were teens that have patronized “baby factories” 93 (100%); the contemporary issue of a suitor demanding for pregnancy before marriage so as to ensure that the girl he was going to marry was fertile whereas the girl wants to be sure her suitor was capable of impregnating her 42 (44%). Others are teenagers that are morally debased, having 2 or more sexual partners at a time 10 (43%); teenagers having unprotected sex 41 (31%); teens rapped 2 (25%), teens peer group influence 20% and economic recession effects 6 (17%) (Table 4).

Table 2: Awareness of protective measures against pregnancy.

Awareness factor	Have you experienced pregnancy			X ² Value
	Yes	No	Total	
Aware	15 (15%)	82 (85%)	97	59.3 P<0.05
Not Aware	181 (60%)	122 (40%)	303	
Total	196 (49%)	204 (51%)	400 (100%)	

Table 3: Identified parental factors influencing teenage pregnancy.

Parental Factors	Have you experienced pregnancy			X ² Value
	Yes	No	Total	
Parents living in penury (no employment, no education)	95 (72%)	37 (28%)	132	52.43 P<0.05
Parent addicted to alcohol, drugs and promiscuous	10 (59%)	7 (41%)	17	
Single Parentage no formal marriage	12 (57%)	9 (43%)	21	
Parents not living together (divorced, separated, Widowed, widower etc.)	36 (42%)	50 (58%)	86	
Parents live happily together	43 (30%)	101 (70%)	144	
Total	196 (49%)	204 (51%)	400 (100%)	

Table 4: Identified teen life style and societal factors influencing teenage pregnancy.

Factors	Have you experienced pregnancy			X ² value
	Yes	No	Total	
Teen patronizes baby factory	93 (100%)	0 (0%)	93	136.49 P<0.05
Demand for pregnancy before marriage	42 (44%)	54 (56%)	96	
Teen morally debased (having 2 or more sexual partners at a time)	10 (43%)	13 (57%)	23	
Teen have unprotected sexual intercourse	41 (31%)	93 (69%)	134	
Teen rapped	2 (25%)	6 (75%)	8	
Peer group influence	2 (20%)	8 (80%)	10	
Economic recession effects (poverty, high cost of living, non-payment of workers salary as at when due)	6 (17%)	30 (83%)	36	
Total	196 (49%)	204 (51%)	400 (100%)	

DISCUSSION

The findings in Table 1, that 49% of teenagers in this part of Nigeria have experienced pregnancy are indicative of current increase in prevalence rate of teenage pregnancy (TP) despite series of campaigns against it in Nigeria.

This finding is in keeping with findings from other researchers.^{5,10,15,17,18} The finding that teenage pregnancy increased with increase in teenage age corroborates with the findings of previous research works.^{5,8,19,20} The findings that single teenagers are less likely to have experienced pregnancy than the married teens, could be because custom demands that the essence of marriage is

to procreate. If a couple fails to procreate after marriage the lady can be sent packing back home and the man marries another. Therefore girls insist on making sure their suitors are capable of impregnating them before marriage. This situation has increased the prevalence of TP from 45.4% in the past to current 49%.⁵ The finding that TP decreased with increase in education level is in agreement with the reports of other researchers elsewhere in Nigeria who opined that TP decreases with increase in level of education.^{5,6,8,10} The finding that teenagers without formal education and those who dropped out of school had the highest percentage 68% of TP is indicative of the need for government to make education and skill acquisition compulsory and free at all levels for teenagers and also provides vocation jobs for the teaming youths.⁸

The finding that high level of teenage unemployment (75.75%), accounted for the high percentage (54%) of TP is in keeping with the account of many researchers.^{16,19,20}

The finding in Table 2 that awareness of protective measures against pregnancy reduces the chances of getting pregnant by teenagers while unawareness increases the chance of getting pregnant is similar to other documented reports.^{5,18} It could be that the use of condom has more than 95% efficacy in protecting against pregnancy when properly used.

The finding in Table 3, that parents living in penury, addicted to drugs, alcohol, promiscuous life and teenagers from single parentage without formal marriage had higher percentage of TP while those from parents living happily together had least percentage of TP, is in keeping with the finding of earlier researchers. This is because parents living in penury without good education and good job security are likely not to gain control over their teenage girl's lifestyle and may not be able to give them quality education hence they dropout easily without completing their educational career. Similarly teenagers from single parentage without formal marriage and those from divorced homes may not get complete parental care and moral up-bring that both parents would have given if they were living happily together.

The finding in Table 4 that 100% of teenagers that patronized "baby factory" had experienced pregnancy is well document elsewhere in Nigeria. Alichie opined that the reason for teenagers patronizing "Baby factory" was because of its protection against people knowing about their pregnancy and the enormous wealth generated from the shady enterprise.²² Media reports further showed that teenage girls and young women are brought by traffickers to a "baby factory" with false promises of jobs or safe abortion. But contrarily, they are confined and forced to give birth. Some of the victims are trafficked while being pregnant; others are later impregnated by men specifically hired for such purposes. Their babies are sold to prospective buyers at exorbitant prices ranging from \$135.14 - \$162 for international or domestic adoptions, or for rituals, slave labour or for sexual exploitation.²¹⁻²⁶

The finding that demand for pregnancy before marriage has helped to raise the prevalence of TP, tallied with the findings of Mchunu in South Africa that men wanting pregnancy before marriage is associated with adolescent pregnancy.¹⁸ The reason could be to avoid barrenness in the family and ensure marriage security.

The findings that teenagers who are morally debased and those having unprotected sexual intercourse were likely to get pregnant by 43% and 31% respectively agreed with earlier assertion that unprotected sex and having many sexual partners attracts STD and the dreaded HIV/AIDs and teenage pregnancy.² The finding that peer group influence, rapping of teenagers and economic recession influence, chances of a teen getting pregnant is in conformity with the reports of some researchers.^{2,16,24}

CONCLUSION

The prevalence of teenage pregnancy (TP) was found to be very high (49%) in the study area as a result of contemporary issues of baby factory phenomenon and demand for pregnancy before marriage. Multiple factors contributing to teenage pregnancy in Nigeria have been identified to include socio-demographic characteristic of teenagers such as age, marital status, educational level, employment status; awareness of protective measures against pregnancy; parental factors; teenage life style and societal factors. These factors are salient in the planning and implementation of programmes that could help reduce the high prevalence of TP to the barest minimum. The study recommends the abolition of "baby factory" whenever it exists, carrying out health promotion intervention activities about implications of TP, in the study area.

Youths empowerment, through free and compulsory education at all levels, skill acquisition, and provision of vocation jobs to teenagers in order to reduce the prevalence of TP and its unpalatable consequences.

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