

# THE STUDY OF FACTORS INFLUENCING TEENAGERS PREGNANCY IN AFRICA

Dr. Callixte Yadufashije<sup>1</sup>, George Bahati Sangano<sup>2</sup>, Rebero Samuel<sup>3</sup>

<sup>1</sup> Senior lecturer, department of public health, Jomo Kenyatta University of Agriculture and Technology, Kigali campus, Eastern province, Rwanda

<sup>2</sup> George Bahati Sangano, Department of nursing, University of Rwanda, Kigali, Rwanda

<sup>3</sup> Rebero Samuel, Registered nurse, Eastern province, Rwanda

## ABSTRACT

*The study of factors influencing teenagers' pregnancy is a topic of importance for this review, among different studies done I read, four of them were chosen for making this review. On first study tilted gender and sexuality notions as determinants of school pregnancies in Tanzania where the researcher wanted to measure perceptions of girls and boys on sexuality, It is a very good study that showed difference between girls and boys by sex and responsibilities and showed that due to decision making capacity, girls fall under boys and influence pregnancy to them, he said that adolescent themselves must take measures of preventing this issue, i argue saying that critical thinking of adolescents is low meaning that schools should take measures of protecting them while at school. I continue to the study on factors contributing to teenage pregnancy in the Capricorn district of the Limpopo Province, by Tebogo M. Mothiba, Maria S. Maputle, this also enjoyable work despite few arguments in problem statement where there is no explanation of existing problem, there is no statistics showing number of pregnant teenagers, and as he was in the community he was to have data from community members for clarification, in results also, it was better to mention percentages of each factor to influence teen pregnancy, on the factors associated with adolescent pregnancies among secondary school students. A study from tanga-tanzania by Nyakubega Peter, this is also important work, the researcher mentioned some of factors contributing to adolescents pregnancy in high schools include poverty which is the main factor that contribute up 57.1%, I made argument in recommendation where he recommended parents to teach their children about reproductive health, I argue saying that we are not sure if parents knows about reproductive health and recommendations can be firstly based on important findings, he was to recommend firstly on how to support adolescents from poor families. Concerning The Effects of Teenage Pregnancy on the Educational Attainment of Girls at Chorkor by Charles Gyan, this study also is important, his first objective was to identify factors contributing to teenagers pregnancy then after this he came to effects, he missed an objective, I argued saying that there is no objective showing an intervention on solving existing problem.*

**Keywords:** Factors, Schools, Teenagers, and Pregnancy

## 1. INTRODUCTION

### 1.1 Background

Teenage pregnancy occurs in all societies, with considerable variation in magnitude and consequences among different countries and regions. In each case, a variety of complex socioeconomic factors are involved including poverty, communities and families acceptance of child marriage, culture behaviors, gender inequality, sexual violence, lack of education and information among others.

In 2014, a total of 249,078 babies were born to women aged 15–19 years, for a birth rate of 24.2 per 1,000

women in this age group. This is another historic low for U. S. teens and a drop of 9% from 2013. Birth rates fell 11% for women aged 15–17 years and 7% for women aged 18–19 years. Although reasons for the declines are not clear, more teens may be delaying or reducing sexual activity, and more of the teens who are sexually active may be using birth control than in previous years [20]. Teen pregnancy and parenting are significant contributors to high school drop-out rates among teen girls. Thirty percent of teenage girls who drop out of high school cite pregnancy or parenthood as a primary reason. This rate is even higher for Hispanic and African American teens, at 36 and 38 percent, respectively [19].

The pregnancy rate for women ages 18 and 19 is three times higher than that of younger teens, and the birth rate for older adolescents is nearly four times that of their younger peers. Older teens account for 68 percent of pregnancies and 72 percent of births. With almost 70 percent of 18- and 19-year-olds attending either high school or college, unplanned pregnancies can disrupt or derail educational achievement. Sixty-one percent of women who have children after enrolling in college fail to complete their degree, a rate which is 65 percent higher than that for students who did not have children [10][11][13].

In addition, surveys indicate that close to half of all community college students have been pregnant or gotten someone pregnant at some point [21]. Based on this background explain situation of teen pregnancy, this article review will contribute to the measurement of level of preventing teen pregnancy through analysis of previous studies. It will also help to identify existing gaps so that we think on what to do to solve existing problem.

I choose to do a critical evaluation on this topic by means of my experiences in supervising different researches and also my daily observation in schools. Among 4 researches I supervised talked to teen pregnancy, they recommended but the problem is increasing, once you enter secondary schools you meet with dropout of teen girls, then this review will identify and recommend methods to use for succeeding this difficulty problem. This review composed analysis of 4 researches done where analysis of methodology, problem, results and conclusions are critically analyzed, and my contributions are mentioned

## **1.2. Problem situation**

Pregnancy for high school girls has been a problem of girl's education in the world. When a girl get pregnant while studying she drops out. In 2014 the department of basic education in South Africa reported 20000 pregnant girls in schools among them 223 were from primary schools, the other big number was from high schools. The same year in Zambia recorded 2,428 high school girls who were. In 2007, the report on the website WLURL website in Tanzania about 400 schoolgirls became pregnant and in Rukwa region, southwest of Tanzania, 200 schoolgirls dropped out of school because of pregnancy. The empower girls in East Africa website, www.lenana. Net presents a graph of number of girls who dropped out of secondary schools as a result of pregnancy in 2009 that is 429 (form one); 1,588 (form two); 2,177 (form three); 747 (form four); 21 (form five) and 3 (form six) making a total of 4,965 pregnancy related secondary school drop outs in 2009 alone. According to UNICEF statistics Adolescent population (10-18yrs) comprised 23% of total population of Tanzania, and 18% of adolescents are currently married or living with a partner. Moreover, 28% of women gave births before the age of 18 years. Referring to UNICEF website in Tanzania, adolescents 15-19 have higher birth rate of 116 per 1000 twice world's average of 65 births per 1000 adolescents. Teen pregnancies mostly end up contributing to so many other public problems both socio-economically and health wise.

In Rwanda; according to RDHS 2010 six percent of students girls aged between 15 and 19 years old have started bearing children. Having this high number, the Government uncovers a big challenge to Rwanda's education in the family. Similarly, 2011 figures from the Education Ministry indicate that Western Province had the highest number of adolescent pregnancies, with 177 cases recorded. It was followed by Northern Province with 141 cases, Southern Province 130, Eastern Province 110 and Kigali with 56. Based on this statistics if nothing is done the future of education to women will be difficulty. This will affect also gender balance and promotion.

## **2. Critical Review**

The study done on gender and sexuality notions as determinants of school pregnancies in Tanzania: a case of iringa rural district by Fatina Sunny Kiluvia, 2011 he mentioned that the perception of adolescents to sexuality may be the main cause of teenage girls' pregnancy. In his problem statement he said that pregnancy itself is not a problem and mentioned that the problem is that it affect girls only this good it affect girls actually, my short argument here may say that the problem is pregnant because before he conduct this study he saw may be statistics

showing number of pregnant teenagers in his area, and I can contribute saying that if he was studying effects of teenagers' pregnancy in secondary schools; we can measure the effect to the girl who is pregnant and the boy who impregnated her.

By entering his methodology, he tried interviewing two girls aged 17 years and 19 years, who got pregnancy and expelled from school, he asked them where they met the situation but this is not explaining gender inequality, he was to ask them their understanding to sexuality and gender inequality at the same time then interpret their experiences to sexuality and gender inequality. According respondents' answers. Coming to gender inequality again, he did not explain well the type of equality and how it influence schoolgirls pregnancy because no statistics showing the number of boys in schools and that of girls to show well gender inequality. According results on Perceptions and expectations of masculinity and femininity, and of male and female sexuality of young boys, girls and adult men, they showed that sex determine the responsibilities of some one. They continue saying that the responsibilities of women is to become pregnant and for men to impregnate.

They continue showing the difference the responsibilities to young boys and adults and compare sexual desires, results indicates that it is the schoolgirls themselves who have the answer to this problem through a change of attitude of mind. They should know that education must come first above all other things, This claim seem not to recognize that men and boys are the partners of these girls and that they too should know better not to meddle with schoolgirls'. Normally boys and men are left out from the discourses of teenage pregnancy, which brings the connotation that only girls are the duty bearers of this problem and continue to reproduce sexual discourses of restriction and separations. My argument comes based on the age and critical low critical thinking of adolescents which allow the school to pay attentions for protecting these adolescents while at schools and influence parents to always advice and teach them when in holidays. The results continue saying that adolescents have few information on sexuality. These adolescents responded saying that there is a limit to sexuality education depending on religions and culture, parents who are not able to discuss with their children on reproductive health influence insufficient knowledge on sexuality among adolescents. Here I do not see the real designed model in eradicating those factors, the designed framework must explain the model of solving the problem, I have never seen it, this model may be recommended to future researchers.

According to the study on factors contributing to teenage pregnancy in the Capricorn district of the Limpopo Province, by Tebogo M. Mothiba.Maria S. Maputle, department of nursing, University of Limpopo 2012, published in journal of democratic nursing organization of South Africa. The overall objective was to identify factors that contribute to teenage pregnancy in one village of the Capricorn District in the Limpopo Province. In his problem statement background he mentioned that teenagers' pregnancy is problem which is very important but there is no statistics showing pregnant teenagers in the region. His second objective is recommending strengthening pregnancy prevention strategies that are relevant to the needs of the community of this village in the Capricorn District of the Limpopo Province, here my argument may come saying that you cannot recommend before you reach on findings, because recommendation depend on findings. Entering the background of methodology, the studied universe is 103 teenagers attended antenatal care, as you know some of them may stay home up to delivery and there are different means that can be used to know the real statics that can help also in strong procedures of sampling, for instance you can approach newborn registration agencies.

I may say that some information could not be clarified because these teenagers cannot be ready to respond all factors influencing pregnancy thus some information must come from parent in the community with their experience they can be ready to give clear information, and looking to second research question [Are there any pregnancy prevention strategies available within the community at this village of the Capricorn District in Limpopo Province?] this research question can be replied well by entering other members of the community, those members must be authorities in charge of social affairs or in charge of community health and public health. The results of were to clarify the real factors to cause teenagers pregnancy, these are some of factors influencing teen pregnancy: lack of knowledge about sex and how to use contraceptives methods; barriers to access contraceptives including negative attitudes of health staff; peer pressure; sexual coercion; low self-esteem; low educational expectations; poverty; family breakdown; and heightened sex-based messages in the media, as I saw the results for example on the use of contraceptive, about 88% of respondents knew about contraception, so this factor is minor and I did not see the results showing the percentage of each factor in influencing teen pregnancies and was very important for other researchers to know which factor that is dangerous and start find an intervention.

Another study entitled factors associated with adolescent pregnancies among secondary school students. A study from tanga-tanzania by *Nyakubega Peter*, the researcher main objective was to assess the factors associated with adolescent pregnancies among secondary students at Tanga municipality. He sampled 200 schools randomly nevertheless no information showing from whom the information came from within schools. In his introduction he showed some of factors contributing to adolescents' pregnancy, some of those factors are poverty, areas with

low practice of human rights. His result showed that economic status contributed to adolescents pregnancy up to 57.1% and other factors contribute up to 43%, the conclusion for this study said that parents must be the source of reproductive health education, then my argument may say that some most of parent do not have enough knowledge to train their children, thus they need enough training about reproductive health. His recommendation is asking parents to educate their children on reproductive issues, and to increase access to education for girls, which is of paramount importance in preventing adolescent pregnancies. This important but remember that economic status contribute to adolescents pregnancy up to 57.1%, then recommendations must be based on findings and this factor is challenge? Then how are we going to build economic status of poor families who have teen girls in schools? This question to future researchers, future researchers can conduct a study on proposed solutions to adolescents' girls from poor families at school.

The study on *The Effects of Teenage Pregnancy on the Educational Attainment of Girls at Chorkor*, published in journal of educational and social research, Vol 03, No 03, September, 2013 with DOI Doi: 10.5901/jesr.2013.v4n3p53 by Charles Gyan *Department of Social Work, University of Ghana*. The objectives of the study were to identify the factors that lead to teenage pregnancy and determine the effects of teenage pregnancy on educational opportunities for teenage girls. I agree with this two objectives, the first objective is the base of discovering independent variables, the second one is showing dependent variable that can help in constructing the conceptual framework of this study, but also there is a missed objective, one you find causes and effects you must show an intervention for existing problem,. The researcher used both purposive and snowball sampling, I agree with this methodology, due to the nature of the study. The results shows that poor parenting is a major factor influencing teen pregnancy then poverty is the second his recommendation said that training parents is essential, guiding policy decisions that would help reduce the incidence of teenage pregnancy. Comparing all authors, they all wanted to find solutions to eradicate teen pregnancies, the fourth has clarified that parent must be trained about reproductive health so that they train their children in early age and also guiding policy must be planned these are important in preventing teen pregnancy.

#### **4. Conclusion**

Teen pregnancy in high schools is influenced by different factors. In this article many of these factors have mentioned. All societies must put their effort together to fight against this problem. We need to build the future of our children, teenagers are not ready to support their babies, they are young intellectually and economically, this can affect children from them that will affect late the future of nations. Once a girl is pregnant while at school, the only solution is dropping out in many countries especially in Africa; it shows that it will affect the future of women if nothing is done. Strategies of fighting against this problem have put in place but we need too much effort to reduce this issue at high level. Teachers in schools have to be the agent of solving this issue, reproductive health is a subject of importance to detail at secondary school level. Traditional beliefs about reproduction and sexuality for parent have to be changed; parents need to advice their children in holidays and also visiting them at schools is essentials. Teaching children about their future will help them looking far, our contribution is the key of fighting against this huge problem.

#### **5. Recommendations**

Based on this article review, the recommendations are:

- To build strategies of supporting adolescents (Girls) from poor families because poverty has been among major factors influencing teenagers pregnancy.
- To build centers of reproductive health training for both parent and teenagers.
- To build a model of preventing teenagers pregnancy in schools
- To put budget of fighting teen pregnancy and its consequences in government's annual budget

#### **6. Acknowledgement**

This article has written through enormous support of different people. Firstly I want to thank the second Author (co-Author) Georges BAHATI Sangano, RN (MCCTN) for his sacrifice and support to delivery important literature and reference in the whole period of writing this article. I deeply thank Mr Maurice MUGABOWINDEKWE; his habitual of giving guidance of producing a good research review, May God bless him.

## 7. References

- [1] Achoka, JS & Njery, FM. (2012). De-stigmatizing teenage motherhood: Towards achievement of universal education achievement in Kenya. *Journal of Emerging Trends in Educational Research and Policy Studies*, 3(6):887-892.
- [2] Ayalew, M, Mengistie, B & Semahegn, A. 2014. Adolescent - parent communication on sexual and reproductive health issues among high school students in Dire Dawa, Eastern Ethiopia: a cross sectional study. *Reproductive Health*, 11:77. <http://doi.org/10.1186/1742-4755-11-77>.
- [3] Barnett, J, Vasileiou, K, Djemil, F, Brooks, L & Young, T. 2011. Understanding innovators' experiences of barriers and facilitators in implementation and diffusion of healthcare innovations: a qualitative study. *BMC Health Services Research*, 11:342.
- [4] Basch, CE. 2011. Teen pregnancy and the achievement gap among urban minority youth. *Journal of School Health*, 81(10):614-618.
- [5] Cooper, D., Morroni, C., Orner, P., Moodley, J., Harries, J., Cullingworth, L. & Hoffman, M., 2004, 'Ten years of Democracy in South Africa: Documenting Transformation in Reproductive Health Policy and Status', *Reproductive Health Matters Journal* 12(24), 70–85. [http://dx.doi.org/10.1016/S0968-8080\(04\)24143-X](http://dx.doi.org/10.1016/S0968-8080(04)24143-X)
- [6] Davies, S.L., DiClemente, R.J., Wingood, G.M., Person, S.D., Dix, D.P., Harrington, K., Crosby, R.A. & Oh, K., 2006, 'Predictors of inconsistent contraceptive use among adolescent girls: Findings from prospective study', *Journal of Adolescent Health* 38(1), 43–49. <http://dx.doi.org/10.1016/j.jadohealth.2005.10.011>, PMID:16781960
- [7] Democratic Nurses Organization of South Africa (DENOSA), 1998, *Ethical Standards for Nurse Researchers*, DENOSA, Pretoria.
- [8] Department of Health, 2009, *Family Planning Method and Practice*, Government Printers Africa, Pretoria.
- [9] De Vos, A.S., Strydom, H., Fouché, C.B., & Delport, C.S.L., 2006, *Research at Grass roots for the Social Sciences and Human Service Professions*, 3rd edn., J.L. van Schaik Academic, Pretoria.
- [10] Kaufman, C.E., De Wet, T. & Stadler, J., 2001, *Adolescent pregnancy and parenthood in Limpopo Department of Health 2011. Factors associated with Teenage Pregnancy in Limpopo Province*, Government Printer, Polokwane.
- [11] Klitsch, M. (1990) 'Hispanic fertility rate 40 percent higher than rate of Non-Hispanics', *Family Planning Perspectives*, 22(3), p. 136. doi: 10.2307/2135648.
- [12] Manlove, J., Terry, E., Gitelson, L., Pappilo, A.R. & Russel, S., 2000, 'Explaining demographic trends in teenage fertility', *Family Planning Perspective* 32(4), 166–175. <http://dx.doi.org/10.2307/2648233>, PMID:10942352
- [13] Medalen, J.I. (1975) 'Women in engineering-1 percent to 10 percent in four years', *IEEE Transactions on Education*, 18(1), pp. 38–40. doi: 10.1109/te.1975.4320944.
- [14] Mestad, R., Secura, G., Allsworth, J.E., Madden, T., Zhao, Q. & Pelpert, J.F., 2011, *Acceptance of long-acting reversible contraceptive methods by adolescents participants in the contraceptive CHOICE Project*, *Contraception* 84(5), 493–498.
- [15] Mkhwanazi, N., 2006, 'Teenage pregnancy and gender identities in the making in a post apartheid South African township', PhD dissertation, Department of Anthropology, University of Cambridge.
- [16] Morake, A., 2011, *Factors associated with Teenage Pregnancy in Limpopo Province*. Government Printers, Polokwane.
- [17] Mwaba, K., 2000, 'Perceptions of teenage pregnancy among South African adolescents', *Health SA Gesondheid* 5(3), 30–35.
- [18] Nash, E.S., 1990, 'Teenage pregnancy – need a child bear a child?', *South African Medical Journal* 77, 147–51, PMID:2406956
- [19] Patterson, R. (no date) 'Neighborhood effects on high-school drop-out rates and teenage childbearing', *SSRN Electronic Journal*, . doi: 10.2139/ssrn.1134940.
- [20]. Romero, L., Pazol, K., Warner, L., Cox, S., Kroelinger, C., Besera, G., Brittain, A., Fuller, T.R., Koumans, E. and Barfield, W. (2016) 'Reduced disparities in birth rates among teens aged 15–19 years — United States, 2006–2007 and 2013–2014', *MMWR. Morbidity and Mortality Weekly Report*, 65(16), pp. 409–414. doi: 10.15585/mmwr.mm6516a1.

[21] *Urinary Incontinence in women who have never been pregnant* (2012) *Annals of Internal Medicine*, 157(2), p. I. doi: 10.7326/0003-4819-157-2-201207170-00001.