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Knowledge of teenage pregnancy and factors influencing it among female students in a selected secondary school in Ilishan Ogun State

*Aina, F. O¹.; Chinyere, F.A¹.; Dada, S.O².; Aina, D.A³. and Adegbite, O.S⁴.

¹ *Department of Maternal and Child Health, School of Nursing, Babcock University*

² *Office of Research, Innovation and International Cooperation, Babcock University*

³ *Department of Microbiology, School of Science and Technology, Babcock University*

⁴ *Department of Social Work, Veronika Adeleke School of Social Sciences, Babcock University*

Department of Ilishan-Remo Ogun State Nigeria

Corresponding author <ainaf@babcock.edu.ng>

Abstract

Teenage pregnancy has remained a major public and social health concern in Nigeria with increasing maternal and child morbidity and mortality. Knowledge of teenage pregnancy and its influencing factors have been found to be true in keeping teenagers aware in other to making informed decisions about this social issue. This study therefore investigates the knowledge of causes of teenage pregnancy and its influencing factors among selected secondary school girls in Ilishan-Remo, Ogun State, Nigeria.

The study employed a descriptive cross-sectional study design, using a validated self-administered questionnaire. Multi-stages sampling procedure was used to randomly select 168 senior secondary school girls in Ilishan High school. Descriptive statistics were used to determine the knowledge level as well as to identify the factors influencing teenage pregnancy among school girls.

Results show that majority had good knowledge of the causes of teenage pregnancy. Family/parental background as well as peer-influence was identified as factors influencing teenage pregnancy

Good knowledge on the causes of teenage pregnancy has been documented in this study as well as factors influencing it. This study can therefore be a baseline for further intervention study on teenage pregnancy.

Keywords: Teenage pregnancy, factors, knowledge, school girls

Introduction

The World Health Organization (WHO) defines teenager as a period covering ages between 10 and 19 years (WHO, 2016). This

is a period of transition from childhood to adulthood and a distinct and important biological and social stage of development.

Usually, the teenage pregnancy occurs at this teenage stage and these pregnancies are unplanned and/or unwanted and the girls are immature both physically and psychologically. The most worrying scenario is the large number of teenagers who having terminated their pregnancies or given birth, becomes pregnant again in the next 12 months (Derek, 2015). Teenage pregnancy has remained a major public and social health concern in Nigeria because of its association with likely higher maternal morbidity and mortality as well as child morbidity and mortality (NPC and ICF Macro 2014). Teenage pregnancy places limits on the mother and child's educational achievement and economic stability, predisposing them to single parenthood and marital instability in the future (National Campaign to Prevent Teen Pregnancy, 2016). It has been adjudged to be a major medical and socio economic burden in both the developed and developing countries and is becoming prevalent in recent times (Okonofua, 2013). This increasing trend is attributed to early marriage and social permissiveness favouring early exposure to casual sexual activity, unmet need for contraceptives, maternal deprivation and pre-existing psychosocial problems in the family. The NDHS (2013) report revealed that 80% of Nigerian patients with abortion-related complications occur in adolescents and these complications which usually result in illegally induced abortion includes haemorrhage, septicaemia, perforated uterus, secondary sterility and in many cases death has been described as a school girl's problem in Nigeria (Okonofua, Otoide & Oronsaye, 2016).

According to Senderowitz (2017), teenagers are learning new information about their emerging sexuality and development and

their friends are the source of information. Thus, they tend to remain poorly informed or even misinformed about reproductive health matters. In Rural villages in Nigeria especially, talking about sex is a taboo. Parents do not discuss sex education with their children. Wang, Wang & Hsul, (2014) stated that lack of parental guidance and appropriate sex education and knowledge about sex contributes to unplanned teenage pregnancy. Health educators have argued that comprehensive sex education would effectively reduce the number of teenage pregnancies, although there were opposing views that argue such education can encourages more and earlier sexual activities (Social Exclusion Unit, 2014). It is important to note however, that teenage pregnancy has a long lasting repercussion for the parents, child and the society in general. The teenage parent risks being stigmatized, isolated from their peers and sentenced to a life of poor income of parent (Ajala, 2013). Perhaps however, the most important consideration of teenage pregnancy is the impact it has on the unplanned child. Teen parents are known to start a vicious cycle that is hard to break once it gets started and where teen pregnancy is high, it can be argued that a high number of children are then now beginning their lives from disadvantaged points.

- 1.0 There is no available evidence on the knowledge of teenage pregnancy among the study population in other to guide any appropriate reproductive health intervention. This study therefore seeks to fill that gap by assessing the knowledge of causes and factors influencing teenage pregnancy among secondary school girls of Ilishan high school, Ogun State Nigeria.

Methodology

Study design

A descriptive study design was employed using structured interviewer-administered questionnaire to assess the knowledge of causes and factors influencing teenage pregnancy among secondary school girls of Ilishan High school, Ogun State.

Study population

The population for this study included female senior secondary school students in Ilishan High School, Ikenne Local Government, Ogun State. The population for the female senior secondary school students from the school record was 245.

Sample size determination

The sample size was calculated using Taro Yamane's formula of single proportion, and a total of 168 samples were estimated with the addition of 10% non-response rate.

Inclusion and exclusion criteria

Consented female senior secondary school students in Ilishan high school were included in the study. Those who did not give consent were excluded. Also, students that either cross or in the school for visitation or of lower classes were excluded from the study.

Sampling procedure

A multi-stage sampling procedure was adopted.

Stage 1: The Senior School (SS) classes were stratified into SS.1, SS.2 and SS.3.

Stage 2: Proportionate sampling method was used to select the numbers of participants per class. When this was

calculated, 50 female students were selected in SS.1, 64 were selected in SS2 while 54 female students were selected in SS. 3.

Stage 3: Simple random sampling using ballot without replacement was used to select actual participants per stratum.

Reliability and validity of study instrument

Face, content and construct validity was ensured by subjecting the instrument to peer and experts review to ascertain that the variables in the instrument could significantly measure the objectives of interest. Reliability was ensured by pre-testing the study instrument on 20 senior secondary school female students at Remo Methodist High School and a Cronbach Alpha measure of 0.75 was gotten which was accepted to be reliable.

Data Collection and Analysis

Data were collected at the various classes during the break time. Respondents filled in the questionnaire with the help of two trained research assistants. The completely filled questionnaire was coded and IBM SPSS Statistics Version 22 was used to run the data analysis. Descriptive statistics (frequency, mean, percentages, and standard deviation) was used to describe the variables of interest.

Results

Table 1 shows the socio-demographic characteristics of the respondents. Majority (46.0%) were aged 19years and above, while 27.0% were between ages 14 and 16 and 27.0% were between ages 17 and 18years. All the respondents (100%) were female with 51.0% being Christian and 45.0% were Muslim, 4.0% were Traditionalist. Also, 76.0% majority were from monogamous

family and 34.0% reported their parents' occupation is trading.

Knowledge of causes of teenage pregnancy among secondary school female students is presented in table 2. Most (95.0%) of the respondent reported mingling with bad reported that having close relationship with opposite sex can lead to teenage pregnancy. Based on the results, it can be concluded that majority of the respondents have good knowledge on the causes of teenage pregnancy.

The factors influencing teenage pregnancy were presented in table 3. These factors as identified were family influence and peer pressure. Majority (88.0%) disagreed that their parent monitors their sexual behaviors in school, 48.0% reported that their parent poor education is a problem for them and it therefore adversely affects their skill to mix with peers. Also, 67.0% of the respondents reported they have friends that watch pornographies and 65.0% reported that their friends encourage them to experiment sex.

Discussion

This study has documented the knowledge of the causes of teenage pregnancy among female secondary school students. Overall results show that the female students were knowledgeable about the causes of teenage pregnancy. This was supported by a study at Guttmacher Institute, where Rosen (2014) found that respondents have good knowledge and that 60% of female students with the mean age of 18years had sex before they were 15years and they did so through coercion by male that was averagely 6years older than them which resulted into unwanted teenage pregnancy. This good knowledge can be a result of increase sexual health awareness programmes and

friends can cause teenage pregnancy and the entire respondent reported not having enough information about sex education can cause teenage pregnancy. Also, Majority (78.0%) of the respondent reported that online information on sexual arousal can cause teenage pregnancy while 33.0% education. Seitz and Apfel, (2009) found that the environment in which the child grows up is considered to be a factor that contributes to teenage pregnancy. Girls that are often expose to abuse, domestic violence and family strife are most likely to become pregnant as teenagers, and the risk of getting pregnant as a teenager increases with several adverse childhood experiences.

Respondents highlighted that poor sex education of parents can contribute to teenage pregnancy as poor information is passed across to the female child on sex and pregnancy. This is corroborated by the study by Chau-Kuang, (2013) who found a significant negative impact of family instability on the emergence of teenage pregnancy in developing countries without well-structured family support systems and education. Similar report was made by Osakunle and Tayo-Olajubutu (2012), that family stability and parent education improves prevention programme on teenage pregnancy in the country as a stable family system and educated parent will be able to monitor their female children and adequately give them sex education for improved life skills. Other factors that can influence teenage pregnancy as highlighted in the study include influence of peer pressure.

Good knowledge on the causes of teenage pregnancy has been documented in this study as well as factors influencing it. This study can therefore be a baseline for intervention study on teenage pregnancy.

Table 1: Socio-demographic profile of respondents

Variables	Responses	2.0 N=168	
		Frequency	%
<i>Age of respondents (in years)</i>	14-16 years	46	27.0
	17-18 years	46	27.0
	19 years and above	76	46.0
<i>Gender</i>	Male	0	0.0
	Female	168	100.0
<i>Religion</i>	Christianity	87	51.0
	Islam	75	45.0
	Traditional	6	4.0
<i>Family settings</i>	Monogamy	128	76.0
	Polygamy	40	24.0
<i>Parent's marital status</i>	Married	157	93.4
	Separated	3	1.8
	Divorced	2	1.2
	Widowed	6	3.6
<i>Parents' occupation</i>	Farmer	33	20.0
	Trading/Business	58	34.0
	Civil Servant	43	26.0
	Self-Employed	34	20.0

Table 2: Knowledge of causes of teenage pregnancy among secondary school female students

3.0 N=168

Knowledge items	Responses	
	Yes (%)	No (%)
Mingling with bad friends can cause teenage pregnancy	159 (95.0)	9 (5.0)
Not having enough information about sex education can cause teenage pregnancy	168 (100.0)	0 (0.0)
Online information on sexual arousal can cause teenage pregnancy	130 (78.0)	38 (22.0)
I never knew having sex without protection can make one pregnant	129 (77.0)	29 (23.0)
I don't have access to contraceptive, that makes me at risk of pregnancy	75 (45.0)	93 (55.0)
Correct and consistent use of condom will prevent unwanted pregnancy	168 (100.0)	0 (0.0)
Close relationship with opposite sex	55 (33.0)	113(67.0)
Lack of sex education can cause teenage pregnancy	151 (90.0)	17 (10.0)

Table 3: Factors influencing teenage pregnancy

FACTORS	4.0 N=168	
	RESPONSES	
	Agree (%)	Disagree (%)
<u>Influence of family background</u>		
My parents do not have good education to know about sex education	22 (13.0)	146 (87.0)
My parent reads often at home; hence I emulate them which kept me busy with my books	145 (87.0)	23 (13.0)
My parent poor education is a problem to me, therefore it adversely affects my learning skill to mix with peers	80 (48.0)	88 (52.0)
My parent monitors my sexual behavior in school	20 (12.0)	148 (88.0)
<u>Influence of peer pressure</u>		
I have friends who don't come to school but engages in sex talks	54 (33.0)	114 (67.0)
I have friends that have multiple sexual partners	75 (45.0)	93 (55.0)
I have friends that watch pornographies	113 (67.0)	55 (33.0)
I have boyfriends that mostly demand for sex at every meeting	18 (11.0)	150 (89.0)
My friends encourage me to engage in experimenting sex	79 (65.0)	59 (35.0)

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