



Factors associated with Teenage Pregnancy among Secondary School Adolescents in Ogba/Egbema/Ndoni Local Government Area of Rivers State

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ABSTRACT

This study investigated the factors associated with teenage pregnancy among school adolescents in Ogba/Egbema/Ndoni Local Government Area of Rivers State. The design for this study was a cross-sectional survey with a sample size of 400 respondents. The instrument for this study was a questionnaire tagged “Factors Associated with Teenage Pregnancy among School Adolescents (QFATPSA). The result obtained was correlated using the Cronbach Alpha and reliability co-efficient of (0.80). Data collected was coded using Statistical Package for Social Science (SPSS) and analyzed using the Pearson Product Moment Correlation. The result revealed that there was a significant relationship between early sexual initiation ($p < 0.05$), unsafe sexual behavior ($p < 0.05$), parents’ socio-economic status ($p < 0.05$), peer pressure, parents’ level of education ($p < 0.05$) and teenage pregnancy among school adolescents in ONELGA. It was concluded that the following significant factors were found as determinants of teenage pregnancy including early sexual debut, unsafe sexual behaviours, parent’s socioeconomic background, parent’s educational level and peer pressure among others. It was recommended amongst others that the Government through the ministry of social welfare and rehabilitation should organize a programme to educate parents and guardians on the protection of the girl child against sexual abuse and provide social packages to improve the well-being of females who are victims of unplanned pregnancy to receive education interventions.

Keywords: Teenage pregnancy, school adolescents, associated factors

INTRODUCTION

Pregnancy in a female adolescent under the age of twenty is referred to as teenage pregnancy, or adolescent pregnancy. It has been discovered that the issues surrounding teenage pregnancy have irreversible effects on the general development of certain school-aged teenagers. In Nigeria, teenage pregnancy—defined as pregnancy occurring in a young person between the ages of thirteen and twenty—has recently emerged as a serious social and health issue (Alika, 2019). Teenage pregnancy causes low birth weight babies, unsafe abortions, obstructed and extended labour, high rate of operational births because of the physical immaturity of the teenage moms’ pelvis, and even preterm labour and death (Henry et al., 2020). This is due to its link to increased rates of illness and mortality in both the mother

the child. Teenage pregnancy has been linked to an increase in pregnancy problems, according to several research (Ikeako & Ogbuefi, 2020). Due to the potentially fatal effects of teenage pregnancy on adolescent sexual and reproductive health as well as the significant financial burden it places on the families involved and the nation as a whole, researchers have advised against young pregnancy. Teenage pregnancy should be avoided among adolescents in order to reduce the risks of low birth weight, premature labour, anaemia, and pre-eclampsia, which can still arise during childbirth even when risk factors like lack of access to and availability of health care services are controlled. According to studies, social factors rather than biological factors tend to be the main risk factor for adolescent girls aged 13 to 19 years. Worldwide, approximately 11% of adolescent pregnancies result in major difficulties, particularly for those between the ages of 13 and 19. According to research, 12 million of the approximately 21 million girls between the ages of 15 and 19 who become pregnant in underdeveloped nations experience various difficulties during childbirth (World Health Organisation, 2021). According to the World Health Organisation (2021), 47% of Nigerian women who married between the ages of 15 and 18 and gave birth to children before the age of 18 experienced difficulties. Thus, among adolescent girls aged 15 to 19, the most common causes of death are problems like puerperal endometritis and systemic infections, which are common during pregnancy, childbirth, and the postpartum phase.

Adolescent pregnancies have a variety of social repercussions, including as cases of school desertion, abortion, and loss of skills and employment possibilities due to low or no education (Federal Ministry of Health, 2017). According to Gilda et al. (2015), Sweden has the lowest frequency of teenage pregnancy at 3%. The incidence of teenage pregnancy is rapidly dropping in wealthy nations. But in other developing nations, especially those in Africa, the prevalence varied from 3.7% to 22.9% of all pregnancies. Numerous research have connected teenage pregnancy with African traditional society in order to better understand the causes of teenage pregnancy and childbearing in Nigeria and other areas of the world. This is due to the fact that pregnancy occurs early in marriage and women frequently marry at a very young age (Henry et al., 2012). Adolescent females are becoming pregnant at a higher rate in Nigeria, where premarital adolescent pregnancies have grown.

Numerous research studies have connected the age at first menstruation (menarche), age at marriage, age at first sexual encounter, age at cohabitation, and educational levels with declining or ineffective use of contraception as risk factors for teenage pregnancy and childbearing (Ajala, 2019; Chau-Kuang, et al., 2018). In addition, the breakdown of the extended family unit, societal acceptance of adolescent relationships and premarital pregnancy as a sign of fertility before marriage, poverty, sexual abuse, rape, and the impact of modernization, urbanisation, globalisation, and education on sexuality are all contributing factors to Nigeria's high rate of teenage pregnancy (Bamiwuye, 2014). Ajala (2014) also mentioned ignorance and religious convictions as contributing factors to Nigeria's high rate of adolescent pregnancies. Adolescent pregnancies have severe repercussions that are detrimental to both overall development and the health and welfare of Nigeria's teenage population. In terms of education, it leads to school dropout. Statistics show that adolescent pregnancies definitely cut short the time that teenagers spend getting ready for college. Teenage pregnancy has become a significant issue for many school-age teenagers in this day and age, when governments, particularly those that have ratified the Convention on the Rights of the Child, are placing a high priority on issues related to children's and youth's wellbeing. This is because teenage pregnancy is seen as detrimental to the growth and development of young people. Research on adolescent pregnancy among Nigerian teenagers is worthwhile because the country is developing and a signatory to the Convention on the Rights of the Child. The statistics on adolescent pregnancy are striking despite all the efforts made by the government and stakeholders. For this reason, the government, non-governmental organisations, and civil society organisations must scale up their awareness-raising campaigns until the numbers start to fall noticeably. Hence, this study unravels the factors associated with teenage pregnancy among school adolescents in Ogba/Egbema/Ndoni Local Government Area of Rivers State.

MATERIALS AND METHODS

Research Design: The design for this study was a cross-sectional survey research designed.

Area of the Study: The study was carried out in Ogba/Egbema/Ndoni Local Government Area of Rivers State, Nigeria

Population of the Study: The population of the study comprised of all female school adolescents in Ogba/Egbema/Ndoni Local Government Area of Rivers State.

Sample and Sampling Procedure

Due to the large size of the target population, the Taro Yamani formula was used to arrive at a sample size of 400 for the study.

Simple Sampling random sampling technique was used to select 13 public secondary schools across Ogba/Egbema/Ndoni Local Government Area respectively, 30 students were selected from each schools.

Instrument for Data Collection: The major research instrument used is a questionnaire. The questionnaire tagged “Factors Associated with Teenage Pregnancy among School Adolescents (QFATPSA)” was designed to obtain sufficient and relevant information from the respondents. The primary data contained information extracted from the questionnaires in which the respondents were required to give specific answers to a question by ticking in front of an appropriate answer and administered the same on staff of the two organizations: The questionnaires contained structured questions which were divided into sections A and B. The respondents' personal information is included in Section A, while the research questions and 15 items are found in Section B. These items were generated using a four-point Likert scale, with the choices Very High Extent (VHE), High Extent (HE), Very Low Extent (VLE), and Low Extent (LE).

Validation/Reliability of the Instrument

A scoop of the instrument alongside with objectives and hypotheses were given to experts in public health and reproductive health for face and content validity. Cronbach Alpha was used to test the reliability co-efficient and a reliability co-efficient of 0.80 was obtained using Split half method. Hence, the instrument was considered reliable.

Method of Data Analysis

Data collection was coded using Standard package for Social Science (SPSS) and analyzed using the Pearson Product Moment Correlation.

RESULTS

Hypothesis 1: There is no significant relationship between early sexual initiation and teenage pregnancy among school adolescents in Ogba/Egbema/Ndoni Local Government Area?

Table 1: Point biserial Correlation showing relationship between early sexual initiation and teenage pregnancy among school adolescents in ONELGA

Variables		Teenage pregnancy	Early sex initiation	Decision
Teenage pregnancy	Correlation Coefficient	1	0.55	H ₀ Rejected
	Sig.		0.00*	
	N	400	400	
Early sex initiation	Correlation Coefficient	0.55	1	
	Sig.	0.00*		
	N	400	400	

*Significant; $p < 0.05$

Table 1 showed the Point biserial Correlation between early sexual initiation and teenage pregnancy among school adolescents in ONELGA. The result revealed there was a significant relationship ($N = 400$, $r = 0.55$, $p < 0.05$). Thus, the null hypothesis which stated that there is no significant relationship between early sexual initiation and teenage pregnancy among school adolescents in ONELGA was rejected.

Hypothesis 2: There is no significant relationship between unsafe sexual behaviour and teenage pregnancy among school adolescents in Ogba/Egbema/Ndoni Local Government Area?

Table 2: Point biserial Correlation showing significant relationship between unsafe sexual behaviour and teenage pregnancy among school adolescents in ONELGA

Variables		Teenage pregnancy	Unsafe sex behaviour	Decision
Teenage pregnancy	Correlation Coefficient	1	0.75	H ₀ Rejected
	Sig.		0.00*	
	N	400	400	
Unsafe sex behaviour	Correlation Coefficient	0.75	1	
	Sig.	0.00*		
	N	400	400	

*Significant; $p < 0.05$

Table 2 showed the Point biserial Correlation between unsafe sexual behaviour and teenage pregnancy among school adolescents in ONELGA. The result revealed there was a significant relationship ($N = 400$, $r = 0.75$, $p < 0.05$). Thus, the null hypothesis which stated that there is no significant relationship between unsafe sexual behaviour and teenage pregnancy among school adolescents in ONELGA was rejected.

Hypothesis 3: There is no significant relationship between parents' socio-economic status and teenage pregnancy among school adolescents in Ogba/Egbema/Ndoni Local Government Area?

Table 3: Point biserial Correlation showing significant relationship between parents' socio-economic status and teenage pregnancy among school adolescents in ONELGA

Variables		Teenage pregnancy	Socio-economic status	Decision
Teenage pregnancy	Correlation Coefficient	1	0.48	H ₀ Rejected
	Sig.		0.00*	
	N	400	400	
Socio-economic status	Correlation Coefficient	0.48	1	
	Sig.	0.00*		
	N	400	400	

*Significant; $p < 0.05$

Table 3 showed the Point biserial Correlation between parents' socio-economic status and teenage pregnancy among school adolescents in ONELGA. The result revealed there was a significant relationship ($N = 400$, $r = 0.48$, $p < 0.05$). Thus, the null hypothesis which stated that there is no significant relationship between parents' socio-economic status and teenage pregnancy among school adolescents in ONELGA was rejected.

Hypothesis 4: There is no significant relationship between peer pressure and teenage pregnancy among school adolescents in Ogba/Egbema/Ndoni Local Government Area?

Table 4: Point biserial Correlation showing significant relationship between peer pressure and teenage pregnancy among school adolescents in ONELGA

Variables		Teenage pregnancy	Peer pressure	Decision
Teenage pregnancy	Correlation Coefficient	1	0.62	H ₀ Rejected
	Sig.		0.00*	
	N	400	400	
Peer pressure	Correlation Coefficient	0.62	1	
	Sig.	0.00*		
	N	400	400	

*Significant; $p < 0.05$

Table 4 showed the Point biserial Correlation between peer pressure and teenage pregnancy among school adolescents in ONELGA. The result revealed there was a significant relationship (N = 400, r = 0.62, p<0.05). Thus, the null hypothesis which stated that there is no significant relationship between peer pressure and teenage pregnancy among school adolescents in ONELGA was rejected.

Hypothesis 5: There is no significant relationship between parents' level of education and teenage pregnancy among school adolescents in Ogba/Egbema/Ndoni Local Government Area?

Table 5: Point biserial Correlation showing significant relationship between parents' level of education and teenage pregnancy among school adolescents in ONELGA

Variables		Teenage pregnancy	Education	Decision
Teenage pregnancy	Correlation Coefficient	1	0.64	H ₀ Rejected
	Sig.		0.00*	
	N	400	400	
Education	Correlation Coefficient	0.64	1	
	Sig.	0.00*		
	N	400	400	

*Significant; p<0.05

Table 5 showed the Point biserial correlation between parents' level of education and teenage pregnancy among school adolescents in ONELGA. The result revealed there was a significant relationship (N = 400, r = 0.64, p<0.05). Thus, the null hypothesis which stated that there is no significant relationship between parents' level of education and teenage pregnancy among school adolescents in ONELGA was rejected.

DISCUSSION

The result revealed there was a significant relationship (p<0.05) between early sexual initiation and teenage pregnancy among school adolescents in ONELGA. The result of this study is expected because early sexual debuts are always unprotected and may lead to an unplanned pregnancy. The result of this study is in tandem with the findings of Okoli et al. (2022), which illustrated that early sexual debuts before the age 15 are 4.30 times more likely to significantly predict the occurrence of pregnancy in teenagers. Bolarinwa et al. (2022) indicated that the likelihood of adolescent pregnancy in Nigeria was high among those who had sexual debuts between the ages of 15 and 19. Phiri (2023) recently indicated delay in sexual debut was significantly associated with a decreased rate of teenage pregnancy. Studies by Akombi-Inyang et al. (2022) reported that the prevalence of early pregnancy was found to be high among adolescents (22.9%) who had their sexual debut before the age 15 years. Bolarinwa et al. (2022) added that 63.9% of adolescents who are sexually active reported unplanned pregnancy between the ages 15 and 19.. Prior studies by Okereke (2010) indicated that more than half (78.9%) of adolescents had reported recurrent pregnancies due to the involvement of early sexual debut. Ochen et al. (2019) depicted that frequent or early sexual activity was found to be a significant predictor of teenage pregnancy (p<0.05). It is plausible because adolescent experimentation with sexual intercourse is always unprotected, and the tendency to have a pregnancy is high due to an increased level of fertility. As of the time of this study, there were no contrary findings against the outcome of this study. Hence, early sexual debut was found to be a factor predicting teenage pregnancy.

The result of this study illustrated the point biserial Correlation between unsafe sexual behaviour and teenage pregnancy among school adolescents in ONELGA. The result revealed there was a significant relationship (p<0.05). The result of this study is required because having unprotected sexual intercourse can give more chance of getting pregnant. The result of this study is in credence with studies of Okoli et al. (2022) and Bolarinwa et al. (2022) who indicated that females who exhibit risky unsafe sexually behaviours reported 87.5% unwanted pregnancy. Ochen et al. (2019) agreed that teenage who lack control over sexual activities were observed to have increased likelihood of teenage pregnancy Okereke (2010) affirmed that adolescent who reported different indecent sexual lifestyles or behaviours are 31.6 times

more likely to have unintended pregnancy and recurrent pregnancies. It is plausible because unprotected sexual intercourse is unsafe sexual act that increase the risk of unplanned pregnancy. As at the time of this study, there was prior studies that contradict with the outcome of the present study. Hence, unsafe sexual behaviours is a predictor of teenage pregnancy.

The result revealed there was a significant relationship ($p < 0.05$) between parents' socio-economic status and teenage pregnancy among school adolescents in ONELGA. The result of this study is expected because most adolescents from poor or low income status or background are likely to get involved in negative sexual behaviours that may lead to teenage pregnancy. Most of the adolescents are likely to have sexual intercourse in exchange of money which is risky. Okoli *et al.* (2022) reported that teenagers born into families with high wealth index are less exposed to risky sexual behaviour and are at low tendency to getting pregnancy. Akombi-Inyang *et al.* (2022) buttressed that the main socioeconomic predictors are poor household level and low income status were found to be 2.45 times more likely to expose adolescents to teenage pregnancy as compared with high socioeconomic background. Bolarinwa *et al.* (2022) indicated that the likelihood of adolescent pregnancy in Nigeria was low among those who are from non-working class parents (AOR=0.69). Prior study of Okereke (2010) buttressed that adolescents from poor or low socioeconomic background are likely to get involved in commercial sex for the purpose of money to assist the family. It is plausible because adolescents or teenagers from poverty stricken homes may be forced to do what other females are doing such as going out with male counterpart for the purpose of making money to financially assist their families. As at the time of this study, no prior studies were found to be in contrary with the outcome of this current study. Parent's socioeconomic background was a significant predictor of teenage pregnancy.

The result revealed that there was a significant relationship ($p < 0.05$) between peer pressure and teenage pregnancy among school adolescents in ONELGA. Hence, most teenagers are likely to be influenced by friends and peers to get involved in sexual activities which are a risky sexual behaviour. The result of this study is in agreement with the findings of Ayuba and Gani (2012) which indicated that negative peer groups was found to be 2.10 times more likely to determine risky sexual behaviours which is significantly associated with adolescent pregnancy. Okoli *et al.* (2022) affirmed that peer influence was found to be a significant predictor of risky behaviour practices to determine the chances of pregnancy. Ochen, *et al.* (2019) indicated that peer pressure was found to be one the most perpetrators of teenage or adolescent pregnancy among sexually active girls aged 13-19 years. It is pertinent to note that teenagers may be forced to having sex with a male which increases the risk of pregnancy. These studies found that peer influence was a significant factor of teenage pregnancy.

The result revealed that there was a significant relationship ($p < 0.05$) between parents' level of education and teenage pregnancy among school adolescents in ONELGA. The result of this study is expected because parents that are not educated may not have the ideas of negative sexual activities. The result of this study is in consonance with the finding of Ayuba and Gani (2012) which reported that teenagers who are born from less educated parents are more likely to lack knowledge of the consequences of premarital sex and was significantly associated with it ($p < 0.05$). Watcharaseranee *et al.* (2006) reported that 99.5% proportion of teenage mothers are not educated and are born from uneducated parents. Bolarinwa *et al.* (2022) in their study illustrated that adolescent pregnancy in Nigeria was significantly high among teenagers from low educational background. Akombi-Inyang *et al.* (2022) affirmed that low education of parents have inclined rate of exposure to risky sexual activities and 22.9 times more likely to predict teenage pregnancy. It is plausible because educated parents will understand sexual behaviours and know when their teens are exhibiting negative sexual act and correct them unlike the less or uneducated parent who do not understand or know about different risky sexual behaviours. As at the time of this study, there were no contrary findings against the outcome of the present study. Hence, parent's educational level is a factor that determine teenage pregnancy.

CONCLUSION

In regards to this study, it was concluded that the following significant factors were found associated with teenage pregnancy are early sexual debut, unsafe sexual behaviours, parent's socioeconomic background,

parent's educational level and peer pressure among others. There is need to implement reproductive health education into the school system to educate the girl child against risky sexual behaviours and teenage pregnancy.

RECOMMENDATIONS

Based on the findings of this study, it was recommended that the:

1. Government through the ministry of social welfare and rehabilitation should organize a programme to educate parents and guardians on the protection of the girl child against sexual abuse and provide social package to improve the well-being females who are victims of unplanned pregnancy through education interventions.
2. Government should organize social welfare programmes and loans for families with low socioeconomic background to enable them get involved in small and medium scale businesses in order to provide the financial needs of their families.
3. Relevant stake holders should ensure that girl child education is tailored towards prevention of early marriage and unplanned pregnancy and create empowerment programmes to promote good health and social well-being of adolescents.
4. Non- governmental organizations should make every effort to educate children and their parents on various ways to reduce child sexual abuse and its consequences.
5. Adolescent/youths should attend youth friendly clinics for counselling and other required service to promote, maintain and improved good health status.

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