



A Profile of Teenage Pregnancies in a Rural Area of Belgaum, Karnataka

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Financial Support: None declared

Conflict of Interest: None declared

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How to cite this article:

Doddihal C, Katti S, Mallapur M. A Profile of Teenage Pregnancies in a Rural Area of Belgaum, Karnataka. Ntl J Community Med 2016; 7(12):940-942.

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Date of Submission: 06-11-16

Date of Acceptance: 29-12-16

Date of Publication: 31-12-16

ABSTRACT

Introduction: Teenage pregnancy is dangerous for the mother, child and the community and they are twice as likely to die of pregnancy and childbirth related complications as opposed to older women. This study was conducted to study the socio-demographic profile of teenage pregnancies and to record the reasons for early marriage and early pregnancy among them.

Methodology: 144 teenage pregnant women, residing in rural field practice area of Jawaharlal Nehru Medical College, Belgaum were selected and information on their socio-demographic variables was recorded between January-December 2012. It was a descriptive study.

Results: In the current study, 66.0% participants were of 18-19 years age, 90.3% housewives and 53.5% studied up to high school. The mean age of marriage was 16 years and 79.2% of them were primigravidae. Traditional practice (68.8%) was the commonest reason for early marriage and family pressure (46.5%) was the often cited reason for early pregnancy.

Conclusion: The mean age of participants was 17.8 years and that of marriage was 16 years and this occurrence of pregnancy in teenage leads to adverse outcomes. Thus, periodic IEC activities have to be held and child marriage act has to be strictly enforced to improve their health.

Keywords: Teenage pregnancy, Profile, Rural Belgaum.

INTRODUCTION

'Teenage' or 'Adolescence' is the transition from childhood to adulthood. It is defined by the World Health Organisation (WHO) as period between 10-19 years of age. Adolescence represents a key stage in development and a critical opportunity for ensuring successful transition to adulthood.¹

In recent decades adolescent pregnancy has become an important health issue in a great number of countries, both developed and developing. Most teenage marriages lead to the teenage motherhood. Ironically, half of all adolescent births occur in just seven countries: Bangladesh, Brazil, the Democratic Republic of the Congo, Ethiopia, India, Nigeria

and the United States.² Adolescent pregnancy is on the rise, emerging as a serious problem all over the world and more so in developing countries like India where early marriages and early pregnancies are long established and well accepted customs.³ This is more pronounced in states of Bihar, Uttar Pradesh and West Bengal. In India, 16.0% of adolescent girls had started the process of childbearing and that in Karnataka were 20.9%, suggesting that adolescent fertility is quite high in India.^{4,5} Teenage pregnancy is dangerous for the mother, child and the community. Medical complications such as pre term labour, pregnancy induced hypertension, anaemia and low birth weight babies are strongly associated with adolescent pregnancy⁶ and extrin-

sic factors like illiteracy, poor socio economic status and inadequate antenatal care also affect the outcome of pregnancy.⁷

While there is growing recognition of the need for action to promote adolescent reproductive health, work done in this regard is often piecemeal. In this background, as no study about teenage pregnancy was done in this area, a study to know the socio demographic factors and reasons of early marriage and pregnancy was taken up.

METHODS

A descriptive study was carried out in a rural PHC area comprising of 5 sub centers, which is the field practice area of J. N. M.C, Belgaum. A total of 144 adolescent pregnant women, aged between 15-19 years were selected for the study and the duration of the study was for one year from 1st January 2012 to 31st December 2012. After obtaining informed consent, women were interviewed with a pre-designed, pretested questionnaire to know about their socio demographic details. Ethical clearance for the study was obtained from institutional ethical committee. Numerical socio-demographic variables were analyzed by means and standard deviations and categorical data were summarized using percentages.

RESULTS

In the current study majority, 95(66.0%) participants were between 18-19 years age, with their mean age being 17.8±1.1 years, and 127(88.2%) were Hindus by religion. As many as 130(90.3%) teens were housewives and 48(33.3%) of their husbands were factory workers. A large number of teenagers and their husbands had studied up to high school and above (53.5% and 50.7% respectively). Most, 65(45.1%) of the teens belonged to class IV socio-economic status as per modified B G Prasad classification^{8,9} and 110(76.4%) were living in a joint family (Table 1).

A great number of study participants, 90.9% had married in the age group of 15-19 years and the mean age of marriage was 16 years. A total of 34.0% had consanguineous marriage and traditional practices (68.8%) were the commonest reason for early marriage (Table 2). About 79.2% of them were primigravidae and 81.9% of the participants had registered their pregnancy within 12 weeks of gestation. A total of 79.2% had taken adequate ANC visits and all of the teenagers in the study had taken iron and folic acid and TT injections as necessary and family pressure (46.5%) was the often cited reason for early pregnancy (Table 3).

Table 1: Socio-demographic profile of teenage mothers (N=144)

Characteristics	Participants (%)
Age:	
15-17	49 (34.0)
18-19	96 (66.0)
Religion:	
Hindu	127 (88.2)
Non Hindus	17 (11.8)
Participants' Occupation:	
Homemaker	130 (90.3)
Employed	14 (9.7)
Husbands' Occupation:	
Agriculturist	42 (29.2)
Laborer	39 (27.1)
Factory Worker	48 (33.3)
Others	15 (10.4)
Education:	
Illiterate	29 (20.1)
Primary School	38 (26.4)
High School and above	77 (53.5)
Husbands' Education:	
Illiterate	34 (23.6)
Primary School	37 (25.7)
High School and above	73 (50.7)
Family Type:	
Joint Family	110 (76.4)
Nuclear Family	34 (23.6)
Socio-economic Status⁶	
Class I	0 (0.0)
Class II	15 (10.4)
Class III	38 (26.4)
Class IV	65 (45.1)
Class V	26 (18.1)

Table 2: Distribution of participants according to marriage related events (N=144).

Characteristics	Participants (%)
Age at marriage (years)	
<10	6 (4.2)
10-14	7 (4.9)
15-19	131 (90.0)
Consanguineous Marriage:	
Yes	49 (34.0)
No	95 (66.0)
Reasons for early marriage:	
Consanguineous	23 (16.0)
Traditional Practices	99 (68.8)
Unable to pay for education	3 (2.1)
Other siblings to be married	19 (13.1)

DISCUSSION

In the present study, the mean age among the study population was 17.8 ± 1.1 years, 88.2% were Hindus by religion, a majority, 90.3% were housewives and 33.3% of husbands' of participants were factory workers. A major number of teenagers and their husbands had studied up to high school and beyond (53.5%) and most of them belonged to Class IV socio-economic status. These findings were in consistence with the studies conducted at

Table 3: Distribution of participants according to pregnancy related events (N=144).

Characteristics	Participants(%)
Previous Pregnancies:	
0 (Primigravidae)	114 (79.2)
1	28 (19.4)
2	2 (1.4)
Pregnancy Registration:	
<12 weeks	118 (81.9)
>12 weeks	26 (18.1)
ANC Visits:	
Adequate	114 (79.2)
Inadequate	30 (20.8)
Reasons for early pregnancy:	
Family Pressure	67 (46.5)
Tradition	47 (32.6)
Lack of awareness about contraception	30 (20.9)

Bangalore³ Delhi¹⁰ Nagpur¹¹ and Kolkata.^{12,13} As the girls belonged to lower socio-economic class, they were married early and probably because they were not working, the need to postpone pregnancy did not arise.

In this study, 90.9% girls got married between 18-19 years and the mean age of marriage was 16±2 years and 79.2% adolescents were primigravidae while 19.4% had previous 1 pregnancy similar to the findings of a study done at Jabalpur.¹⁴ As a consequence of early marriage, there was early pregnancy and lower educational level and accordingly low socio-economic status among the teens. The most common reason for early marriage in this study was its traditional practice which was seen in 68.8% participants and the commonest reason for early pregnancy was family pressure (46.5%) followed by tradition (32.6%). As the area in which study was conducted was a resettlement area consisting of people of lower educational status, traditional practices and family pressure to have grandchildren early among the elders could have resulted in early pregnancies. Probably, good education and knowledge about the hazards of adolescent pregnancy in the community would have resulted in alteration in traditional practices and thereby decreasing early marriages and by this means early pregnancies. However, pregnancy registration and antenatal care taken was high possibly owing to the free health services and various incentives¹⁵ provided by the government agencies.¹⁶

CONCLUSION

The current study revealed that teen pregnant women were more between 18-19 years of age, were housewives, married early due to traditional practices and got pregnant early due to family pressure. Hence, the present study recommends that in order to improve the health of the adoles-

cents, periodic IEC activities have to be held at villages and people, principally elders, need to be told about complications and ill effects of teenage pregnancy. Child marriage act must be stringently imposed to restrain child marriages.

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