



RESEARCH ARTICLE

FACTORS ASSOCIATED WITH TEENAGE PREGNANCY AMONG FEMALE STUDENTS IN OGBE UKWU COMMUNITY SECONDARY SCHOOL, NDONI, RIVERS STATE

Robinson-Bassey, G. C., *Frank, Maureen, D. and Enuma, Nwachukwu, E.

¹Department of Nursing, University of Port Harcourt, Rivers State

²Faculty of Nursing, Niger Delta University, Bayelsa State

³Department of Nursing, University of Port Harcourt, Rivers State

ARTICLE INFO

Article History:

Received 05th January, 2016

Received in revised form

24th February, 2016

Accepted 08th March, 2016

Published online 26th April, 2016

Key words:

Teenage,
Pregnancy,
Knowledge,
Factors,
Preventive.

ABSTRACT

This is a descriptive study to determine the factors associated with teenage pregnancy in Ogbekwu Community in Ndoni Town of Rivers State. A sample of 300 students drawn from the target population of over 1197 female students attending the community secondary school, using sampling technique. Data was collected with a self structured questionnaire. Validity and reliability of the instrument were ensured. Data was analyzed using descriptive and inferential statistics. Findings revealed that peer pressure, early marriage, low economic status, poor sex education among others were all factors influencing the incidence of teenage pregnancy; the respondents have a good knowledge of the consequences but poor knowledge of preventive measures against teenage pregnancy. Chi-square test of hypothesis revealed a significant relationship between the age of the respondents and their knowledge of preventive measures against teenage pregnancy with a calculated chi square value (X^2_{cal}) of 22.098 at a degree of freedom of 2, therefore the null hypothesis was accepted. It has been recommended that more enlightenment campaigns be carried out via the mass media, youth groups and counseling sessions should be created in order to create more awareness, thus reducing teenage pregnancy.

Copyright © 2016, Robinson-Bassey et al. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Citation: Robinson-Bassey, G. C., Frank, Maureen, D. and Enuma, Nwachukwu, E. 2016. "Factors associated with teenage pregnancy among female students in Ogbekwu community secondary school, Ndoni, Rivers State", *International Journal of Current Research*, 8, (04), 29638-29642.

INTRODUCTION

Teenage pregnancy has attracted a great attention for its prevention with the introduction of educational campaigns, yet globally, 15 million women under the age of 20 give birth, representing up to one-fifth of all births (Acharya Dev Raj, 2007). Teenage pregnancy is a public health concern in both developed and developing world, (Johnson et al., 2001 and Chedraui et al., 2004). In the developing countries, one-third to one-half become mothers before the age of 20 and pregnancy related complications have become the leading causes of death among them (<http://www.un.org/ecosocdev/geninfo/women/womrepro.htm>, Accessed 04/07/2012). In Nigeria, the incidence of teenage pregnancy ranges from 1.7% to 11.8% (Akingba, 2004 and Ojo, 2012). Compared to the urban, areas, the incidence of teenage pregnancy, abortion and childbirth is significantly higher in rural areas (Ojo, 2012 and Bradley, 2008).

There is therefore a growing concern about the multiple consequences of teenage pregnancy, particularly in the rural areas where teenage pregnancy rates are the highest in the world (Alvareze, 2004). In developing countries, the increase in teenage pregnancy rates has been attributed to early age of marriage, cultural permissiveness, low socio-economic status of parents, lack of knowledge of sexuality education, peer group influence, lack of knowledge and or the ineffective use of contraceptives and family instability and disorganization which may be caused by poverty (Acharya Dev Raj, 2007), also, nearly 60% of all girls are married by the age of 18 years and one-fourth are married by the age of 15 years in South Asia (Mehra and Agrawal, 2004). The concern about teenage pregnancy stems from the fact that it has obvious negative health and socio-economic consequences, several studies have reported an increase in pregnancy complications associated with teenage pregnancy. These complications occur due to the physical immaturity of the mothers, the adverse social and economic factors which accompany pregnancy at an early age and inadequate or non-utilization of antenatal care. The researchers sought to identify the various factors associated with teenage pregnancy as well as determine the knowledge of

*Corresponding author: Frank, Maureen, D.

Faculty of Nursing, Niger Delta University, Bayelsa State

the consequences and preventive measures among the studied population.

Purpose

The study aims at determining the factors associated with teenage pregnancy among female students in Ogbe Ukwu Community Secondary School, Ndoni, Rivers State.

Specific Objectives

- To identify factors that influence the occurrence of teenage pregnancy among female students in Ogbe Ukwu Community.
- To determine knowledge of the consequences of teenage pregnancy among the female students.
- To determine the level of knowledge of preventive measures against teenage pregnancy among the female students.

Hypothesis

Null Hypothesis, Ho: There is no significant relationship between age of the respondents, and their knowledge of preventive measures against teenage pregnancy.

MATERIALS AND METHODS

Research Design

This is a descriptive survey determining the factors associated with teenage pregnancy among teenage girls aged 12-19 years, attending the Ogbeukwu Community Secondary School in Ndoni town of Rivers State.

Research Setting

The research setting is Ogbe Ukwu community secondary school in Ndoni town of Rivers State. Ndoni town is one of the ancient communities in Rivers State with a population of about 350,000 people. It is made up of several villages (sub communities), Ogbe Ukwu is one of these communities. It is located in the coast of Rivers State. The community is surrounded by rivers and mangrove forest. It is bounded by Rivers Niger at the south, Orashi River at the East, Onitte Creek at the north and Imo River in the west. The community is not thickly populated and their main occupation is fishing due to the geographical location of the area, although, some carry out small scale farming, oil palm processing and also petty trading. The people of the community are peace loving and hospitable. Their major religion is Christianity but they are still some pagans in the area.

Research Population

The target population consisted of teenage girls aged 12-19 years, attending the Ogbe Ukwu Community Secondary School during the period of the study.

Sample Population

A sample size of 300 teenage participants from JSS 1 — SS3 was drawn for the study using the Yaro Yamene formular, as shown below:

$$n = \frac{N}{1 + (e)^2}$$

Where n = sample size; N = No of Target Population; e = 0.05 (margin of error)

Using N= 1197

$$\text{Sample size, } n = \frac{N}{1 + N(e)^2}$$

$$\frac{1197}{1 + 1197(0.05)^2}$$

$$\frac{1197}{1 + 1197(0.0025)}$$

$$\frac{1197}{1 + 2.9925}$$

299.8, which is approximately 300 students

Sampling Technique

The sample was drawn from the total population, using a multi-stage sampling technique. First, stratified random sampling technique was used;

JSS 1: 200

JSS 2: 195

JSS 3: 142

SSS 1: 176

SSS2: 184

SSS3: 211

And then using simple random sampling technique, 50 students were drawn from each class, thus getting the sample of 300 students.

Instrument for Data Collection

A self—structured questionnaire comprising of four sections was developed for the study. Section A consisted of two items on respondents' socio-demographic data; Section B had seven items on factors influencing teenage pregnancy; Section C had four items on the knowledge of consequences of teenage pregnancy and Section D consisted of six items on the knowledge of preventive measures against teenage pregnancy.

Validity of the Instrument

The questionnaire was developed after a thorough review of the literature and further perusal by experts in the field of study who assessed the suitability of the items. Their observations and comments were used to make necessary corrections. They thereafter affirmed the content and face validity of the instrument before administering them.

Reliability of the Instrument

The reliability of the instrument (questionnaires) was determined through a test-retest method. Ten (10) Copies of the questionnaire were first given to ten (10) teenage girls attending Olobo Premier College, Choba, Rivers State and a repeated administration of the same instrument was made to the same teenagers after 2 weeks. On analysis, the correlation coefficient was determined to be 0.83 which was adjudged adequate.

Procedure for Data Collection

Three hundred (300) copies of the questionnaire were self-administered to the respondents by the researchers, with the aid of four research assistants drawn from among the teaching staff of the school. All the questionnaires were retrieved from

the respondents on completion, reflecting a return rate of 100%.

Method of data analysis

Data collected were entered into a spread sheet and analysed using descriptive statistics of frequency and percentages. Data was presented using bar charts and the Pearson Chi-Square to determine relationship between variables in the hypothesis. Likert’s four point scale was used with the decision cut-off point of 2.5. Any item in which the respondents have a mean score of 2.5 and above are regarded as positive or favorable (influencing factors; consequences; preventive measures and good) respectively; while those less than 2.5 is regarded as unfavorable or negative (does not influence; not a consequence, not a preventive measure and poor) respectively.

Ethical Consideration

Consent was obtained from the ethical committee of the institution used for the study. The purpose of the study was explained to the respondents who were also assured of the confidentiality of all information provided and respondent’s anonymity maintained.

Data Presentation and Analysis

Table1 above shows the demographic distribution of the respondents. Out of the 300 respondents, 108(36%) where aged 11-13 years while 192(64%) where aged 14-18 years. 50(16.7%) where in JSS 1, 50(16.7%) in JSS 2, 50(16.7%) in JSS 3, 50(16.7%) in SS 1, 50(16.7%) in SS 2, and 50(17.7%) in SS 3.

Table 1. Socio-Demographic Data of Respondents, (n= 300)

| S/N | Demographic Variable | Characteristics | Frequency | Percentage |
|-----|----------------------|-----------------|-----------|------------|
| 1 | AGE | 11-13year | 108 | 36% |
| | | 14-18years | 192 | 64% |
| 2 | CLASS LEVEL | JSS 1 | 50 | 16.67% |
| | | JSS2 | 50 | 16.67% |
| | | JSS3 | 50 | 16.67% |
| | | SS1 | 50 | 16.67% |
| | | SS2 | 50 | 16.67% |
| | | SS3 | 50 | 16.67% |

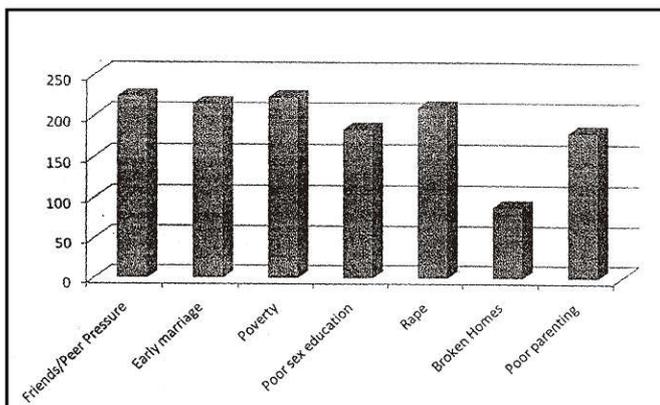


Figure 1. Factors Influencing the Occurrence of Teenage Pregnancy (n=300)

Figure 1 above showed that, 224(74.7%) of the respondents agreed that friends can influence the occurrence of teenage pregnancy; 215(71.7%) agreed that early marriage can

influence occurrence of teenage pregnancy; 223(74.3%) agreed that poverty could lead to the occurrence of teenage pregnancy; 10 (70%) agreed that rape could lead to the occurrence of teenage pregnancy; 89(29.7%) agreed that broken homes have an influence on the occurrence of teenage pregnancy, while 211(70.3%) disagreed; 180(60%) of the respondents agreed that poor parental upbringing could influence the occurrence of teenage pregnancy while 120(40%) disagreed and 123(41%) agreed that love and care from a boyfriend could influence, the occurrence of teenage pregnancy.

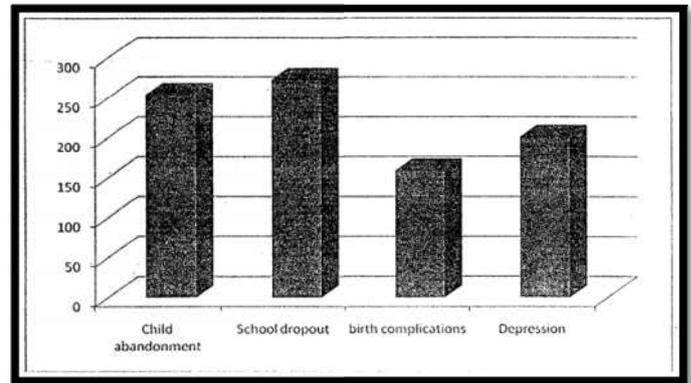


Figure 2. knowledge of Consequences of teenage pregnancy, (n=300)

Figure 2 showed that, 254(84.7%) agreed that teenage pregnancy could increase the risk of child abandonment in the society; 273(91%) agreed that teenage pregnancy can make one drop out of school either temporarily or permanently; 159(53%) agreed that pregnant teenagers can have pregnancy-related problems during child birth; 201(67%) agreed that teenage pregnancy could lead to depression which may eventually affect the unborn child.

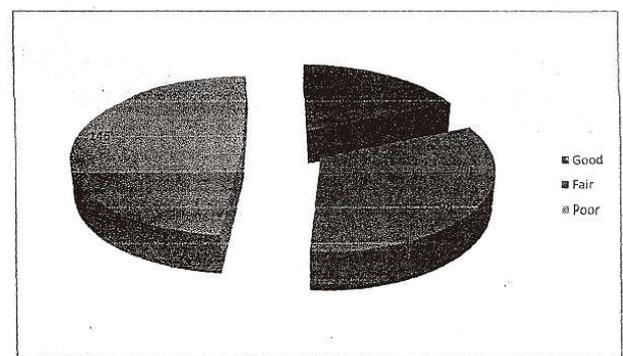


Figure 3. Knowledge of Preventive Measures for Teenage Pregnancy, (n=300)

Figure 3 above shows that 56(18.7%) of the respondents had good knowledge of preventive measures for teenage pregnancy, 98(32.7%) had fair knowledge, while 146(48.7%) had poor knowledge.

Test of Hypothesis

Null Hypothesis, Ho: There is no significant relationship between the age of the respondents, and their knowledge of preventive measures for teenage pregnancy.

Table 2. Chi-square analysis of the relationship between age of respondents and their knowledge of preventive measures against teenage pregnancy, (n=300)

| AGE | Knowledge of preventive measures | | | X ² Value | Decision |
|-------------|----------------------------------|----------------|----------------|----------------------|------------------------|
| | Good Knowledge | Fair Knowledge | Poor Knowledge | | |
| 11-13 Years | 13 | 48 | 47 | 22.098 | Reject Null Hypothesis |
| 14-18 Years | 43 | 50 | 99 | | |
| Total | 56 | 98 | 146 | | |

$X_{cal}=22.098 > X_{tab}^2=5.991$ at $df=2$ and $P=0.050$

Using the SPSS statistical software, the Pearson chi-squared value for the hypothesis was calculated to be 22.098. This value of 5.991 at $df=2$ is greater than the tabulated chi-square value and is therefore significant. In the light of the above, the null hypothesis stated above was accepted.

DISCUSSION OF RESULT

Factors influencing the occurrence of teenage pregnancy

Results from the study showed that various factors such as peer pressure (74.7%); early marriage (71%); poverty (74.3%); rape (70%); broken homes (29%); poor parental upbringing (60%); poor sex education (40%). This finding reflects that the majority of the respondents have good knowledge of the factors which influence teenage pregnancy. The result also is in consonance with other findings: Akingba & Reinhardt (2004) in their studies identified the above factors as being associated with the incidence of teenage pregnancy in most Nigerian communities; In the years after 1996, 76 percent of adolescent mothers between the ages of 15 and 17 lived with a parent. Acs and Koball, (2003). Mari *et al.* (2007) from their review observed low socio economic factor as the most consistent risk factor for teenage pregnancy and that there is a higher likelihood of pregnancy among teenagers who did not live with both parents. Also, of the five UK studies which investigated the link between pregnancy and area deprivation all found a strong association, the areas with higher levels of deprivation were found to have higher conception rates (Viegas *et al.*, 1992; Bradshaw *et al.*, 2005 and Paton *et al.*, 2002).

Knowledge of the consequences of teenage pregnancy

Findings revealed that the majority of the respondents have good knowledge of the consequences of teenage pregnancy: 254(84.7%) agreed with increased risk of child abandonment, 273(91%) dropping out of school, 249 (83%) complications during childbirth and 201(67%) depression.

However, this observation is in contrast with that of Acharya *et al.* (2007), which reported from their review that teenagers are not very familiar with the consequences of teenage pregnancy, they further stated that the teenagers would have delayed the index pregnancy if they had known about its consequences; in another study, it was observed that majority of the teenage girls are unaware of dangers of unplanned pregnancy (Goonewardena *et al.*, 2005).

Knowledge of the preventive measures against teenage pregnancy

Result from the study showed that majority of the respondents 146(48.7%) had poor knowledge of the preventive measures; 98(32.7%) had fair knowledge and only 56(18.7%) had good knowledge. This is in consonance with other findings which observed that most teenagers did not know of models such as contraceptives and the use of condoms also very few teenagers had ever used any contraception (Acharya Dev Raj *et al.*, 2007), as a result considerable numbers of teenage mothers reported unplanned and undesired pregnancies (Weerasekera *et al.*, 1997) which occurred due to being unaware of the process of contraception (Goonewardena *et al.*, 2005).

Hypothesis

Chi-square test of hypothesis revealed a significant relationship between the age of the respondents and their knowledge of preventive measures for teenage pregnancy with a calculated chi square value (X^2_{cal}) of 22.098.

Summary

The purpose of this study was to determine the factors associated with teenage pregnancy in Ogbe Ukwu Community in Ndoni Town of Rivers State. A descriptive study design was employed. Using the multi stage sampling technique, a sample size of 300 students was drawn from the target population of 1197 female students attending the community secondary school. Data was collected with a self structured questionnaire administered to the respondents by the researchers and through the assistance of teaching staff in the school. Data was analyzed using descriptive and inferential statistics. Findings revealed that peer pressure, early marriage, low economic status, poor sex education, rape, poor parental upbringing and broken homes were all factors influencing the incidence of teenage pregnancy, with means scores of 3.82, 3.38, 3.78, 2.43, 3.68, 2.66, 3.48, 3.23, respectively (all of them are greater than the criterion mean of 2.5), with the most prominent factor being peer pressure which had a mean score of 3.82. Test of hypothesis revealed a significant relationship between the age of the respondents and their knowledge of preventive measures for teenage pregnancy, with a chi-square value of 29.098 at a degree of freedom of 2. It has been recommended that more enlightenment campaigns be carried out via the mass media, youth groups and counseling sessions should be created in order to create more awareness, thus reducing teenage pregnancy.

Conclusion

The increase in the number of teenage pregnancies is causing great concern and becoming a critical issue. The situation requires the urgent attention of every section of the society in order to prevent further damage this ugly situation is causing the individuals involved, the family and community at large.

Implications for nursing

Nurses have critical roles to play in reducing the rate of teenage pregnancy, especially in the rural areas. These roles include:

- Education and counseling of the youth on sexuality, reproduction, sexually transmitted diseases and contraception.
- Working with children before they become sexually active; and developing, implementing and evaluating community - based adolescent pregnancy prevention programmes.
- Promotion of sex education programs that improve adolescents' sexual decision making and general living skills.
- Active participation in school parent-teacher associations, religious and youth organisations and national and local teenage pregnancy prevention programmes.

Recommendations

The factors influencing teenage pregnancy are complex and varied and therefore require multifaceted intervention strategies which must include sex education programmes, family planning services, school-based health centres, youth-friendly clinics and youth development programmes. Based on the findings of this study, the following recommendations have been made:

- Pregnancy prevention programmes with specific guidelines should be made available and utilised appropriately in rural areas and secondary schools.
- Teenagers should be offered information on how to use contraceptives (especially condoms). Contraceptive use should be promoted through education and service provision in order to reduce the incidence of teenage pregnancy.
- Public clinics should be made "youth friendly" through existing support programmes set up by non-Governmental organisations. These programmes have been proven to improve the quality of care and expand access to contraceptives, support and counseling.
- There should be facilitation of adult-teenage communication programmes, with guidelines to give adults information and skills to communicate effectively with young people about risky sexual behaviour
- There should be facilitation of male involvement programmes for prevention efforts that specifically target boys and young men which would provide sex education to the male folks.

REFERENCES

Acharya Dev Raj, Bhattarai Rabi, Poobalan Amudha, van Teijlingen Edwin R and Chapman Glyn, 2007. Factors associated with teenage pregnancy in south Asia: A systematic review. *Health Science Journal*.

- Acs, G., and Koball, H. 2003. TANF and the status of teen mothers under age 18 (Series A No. A-62). Washington, DC: The Urban Institute. Retrieved from <http://www.urban.org/publications/310796.html>
- Akingba, J.B. 2004. Some Aspects of Teenage Pregnancy and Abortion in some Nigerian communities. Geneva. 19(196);95-499.
- Alvarez, A. and Reinhardt, S, 2004. Socio-cultural Characteristics of Pregnant and Non-pregnant Adolescent of Low Socio-economic Status: England. 22(85);149- 156.
- Bradley, F. 2008. Community Health for student Nurses. 1st Edition. Chaucer Press. England.
- Bradshaw, J. Finch, N. and Miles, J., 2005. Deprivation and variations in teenage conceptions and abortions in England. *J Fam Plan Reprod Health Care*, 31:15-9.
- Chedraui, P., Hidalgo, L., Chavez, M., Glenda, S.M. 2004. Determinant factors in Ecuador related to pregnancy among adolescents aged 15 or less. *Journal of Perinatal Medicine*, 32: 337-341.
- Goonewardena, I., Deeyagaha Waduge, R. 2005. Adverse effects of teenage pregnancy. *Ceylon Medical Journal*, 50:116-120.
- Johnson, M., Myers, K., Langdon, R. 2001. Coping styles of pregnant adolescents. *Public Health Nursing*, 18: 24-32.
- Mari, I., Janet, T., Phil, H., Miguel, O., Margaret, A., Laura, W., Kitty, W., Albrecht, J., Helle, K, Jørn, O. and Marleen T. 2007. Factors associated with teenage pregnancy in the European Union countries: a systematic review. DOI: <http://dx.doi.org/10.1093/eurpub/ckm014> 630-636.
- Mehra, S., Agrawal, D. Adolescent health determinants for pregnancy and child health outcomes among the urban poor. *Indian Pediatrics*, 2004;41:137-45.
- Ojo, A. and Briggs, 2012. A textbook for midwives in the tropics. Ghana, Gibrere Publishing Company.
- Paton, D. 2002. The economics of family planning and underage conceptions. *J Health Eco.*, 21:207-25. CrossRef MedlineWeb of Science
- UN. The right to reproductive and sexual health. United Nations Department of Public Information (DPI/1877). 1997; Available from: <http://www.un.org/ecosocdev/geninfo/women/womrepro.htm>, Accessed 04/07/2012.
- Viegas, O.A., Wiknsosastro, G., Sahagun, G.H., Chaturachinda K., Ratnam, SS. 1992. Safe childbirth needs more than medical services. *World Health Forum*, 13: 59-65.
- Weerasekera, D. 1997. Adolescent pregnancies-is the outcome different *Ceylon Medical Journal*, 1997;42:16-17.
