



Alcohol Use, Drug Abuse, Clubbing and Access To Abortion Identified as Predictors Of Teenage Pregnancy Among Girls Aged 12–19 Years in Sierra Leone

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Abstract

Introduction: Peer pressure, confusion, youthful exuberance, and experimentation—especially in romantic partnerships—are all hallmarks of the adolescent years. Adolescents are particularly vulnerable to the risks of sexually transmitted diseases, unwanted pregnancies, and other negative outcomes that can be avoided if we focus on improving their reproductive health. The purpose of this research was to identify and eliminate the causes of teen pregnancy among Sierra Leonean students.

Materials and Methods: This research employed a descriptive cross-sectional design. Researchers looked at the data from 4,000 12-19-year-olds who were selected at random. The information was gathered through the use of a self-administered, structured questionnaire. The data were analyzed using descriptive statistics such as frequency, percentage, and mean.

Results: Girls are more likely than boys to list alcohol use, drug abuse, and clubbing as causes of teen pregnancies, but girls are more likely to list all of the other causes than boys are. When asked to rank the factors that contribute to adolescent pregnancies, girls ranked access to abortion services as the most important (73 per cent; R.R. = 2.6), followed by constitutional rights (70 per cent; R.R. = 2.3) and parental and institutional failure to educate their children about sexuality (67 per cent; R.R. = 2.0). Teenage pregnancy has far more negative effects on girls than boys, possibly because girls are more directly affected when they are neither financially nor emotionally prepared to give birth.

Conclusion: Thus, more sex education must be provided to school-aged adolescents to highlight the consequences of adolescent pregnancy.

Keywords: Teenage pregnancy, Adolescent, Sierra Leone.

Introduction

Nigeria is one of many developing countries where teen pregnancy is a major public health concern. Unwanted or unplanned pregnancies among girls under 18 have been identified as a major problem in many developing countries, including Nigeria ([1-4]). Some adolescents' personal growth is permanently damaged by the difficulties associated with unplanned pregnancies. Preventing adolescent pregnancies has been advocated for by researchers [5-8] due to the potentially

fatal effects on adolescent sexual and reproductive health and the substantial financial costs incurred by affected families and the nation. Adolescent pregnancy should be prevented to reduce the risks of complications during childbirth, such as those associated with the mother's biological age, including but not limited to low birth weight, premature labour, anaemia, and pre-eclampsia [9,10].

Researchers have found that girls' socioeconomic status is a more significant risk factor than their biology regarding teen pregnancy [11,12]. Adolescent births, especially those between the ages of 13 and 19, account for about 11 per cent of all births ending in serious complications worldwide. According to studies [13-15], approximately 21 million teenage girls in developing countries become pregnant yearly, and about 12 million of those girls face multiple complications during childbirth. Only 47% of Nigerian women who marry between 15 and 18 and have children before 18 have a problem-free delivery [16, 17]. Thus, puerperal endometritis and other systemic infections prevalent during pregnancy, delivery, and postpartum are leading causes of death among adolescent girls [18-20].

Problems involving peer pressure, confusion, exuberance, and experimentation, especially with sexual activities, and the desire

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to make quick money by selling unwanted newborn babies are now serious concerns in healthcare practice. They should attract the attention of healthcare workers. Child prostitution, in which teenagers produce offspring who are then sold to financially strait adults, has been widely condemned by researchers. Many countries, including Sierra Leone, are adopting this method. Most operators of “motherless babies’ homes” promote this by actively seeking out and providing a haven to pregnant teenagers who did not intend to have children and keeping them there until they give birth. At this point, the infants are sold to eager parents for a nominal fee. Adolescents who engage in this behaviour put themselves at risk for several negative outcomes [21–23], including sexually transmitted diseases, premature death, and more.

This research examined the causes and contexts of teen pregnancy among Sierra Leonean students.

Materials and Methods

Secondary schools in Sierra Leone were randomly chosen to participate in the study. Every student in the selected elementary, middle, and high schools were analyzed. The number of participants was set at 4000. Using a cross-sectional descriptive design, this study aimed to examine the causes and contexts of teen pregnancies in the population under study. An online, self-administered, structured questionnaire was used to gather participant data. The analysis of the data involved the use of descriptive statistics like frequencies, percentages, and means. This research analyzed its data with SPSS version 22.

Results

Based on the data presented above, it is clear that most participants were female (65%, $n=2599$), while only 35% were male. The ages were all over the place, from 12-19, but the average was 16 (St.d. = 2.0). The largest demographic represented was 15-year-olds ($n=900$), with 45.5% female participation. One of the women had obviously given birth, suggesting an increased pregnancy risk with advancing age.

When asked what they thought contributed to teen pregnancies, more girls than boys cited drinking, drugs, and clubbing as causes (RR=1.0); this finding was not statistically significant. Asked what factors contribute to teen pregnancies, girls cite a lack of access to abortion services as the most important (73%; R.R. = 2.6), followed by constitutional rights (69%; R.R. = 2.3) and a lack of sex education in schools (67%; R.R. = 2.0), while boys cite substance abuse and partying as most influential (52 per cent). Almost certainly contributing factors, though less significantly, are peer pressure, television, and pornographic films.

Teenage pregnancy has far more negative effects on girls than boys, possibly because girls are more directly affected when they are neither financially nor emotionally prepared to give birth. Except dropping out of school (RR=1.1), the data shows that teen pregnancies carry a significant risk of the consequences

above. Over three-quarters of the study’s participants ($n=2900$; RR=12.36) agreed that teen mothers face an increased risk of contracting HIV and other STIs.

While many participants suggested strategies for reducing this problem, the overwhelming majority (RR=19.0) highlighted increasing girls’ access to contraception as the most important and effective measure. The fact that 95% of those who responded this way are female suggests that they know the importance of using birth control. Similarly, the majority of girls (74.3% believe) that sex education programs should be implemented in schools, communities, and national broadcast media (RR=2.89); however, students ranked government regulation of abortion clinics as the most important action point, albeit with a low relative risk (RR=1.14).

Discussion

Many teenage girls in school drop out because they become pregnant, leading to forced child marriages and/or infant mortality. Among the many factors that contributed to adolescent pregnancy in this study were the lack of abortion services, the lack of parental support, the pressure from peers, and the inability to afford child care. Evidence like this demonstrates the devastating impact that negative peer pressure has on young people’s sexual behaviours. This result is consistent with the work of Nwosu and Okereke [15, 16]. Schools must incorporate sex education programmes due to the influence of peer pressure on adolescents’ sexual behaviour. Safe sexual practices among adolescents can be encouraged through the widespread implementation of sex education across all classes in secondary schools. By teaching them about the positive outcomes of waiting until marriage to start having sexual relations, adolescent sexual education programs can also help. The fact that one of the pregnant girls was under 15 indicates widespread sexual activity amongst community school girls, which can lead to unwanted pregnancies, sexually transmitted diseases, complications during childbirth, and even maternal mortality. In addition, this was echoed by other authors [19,20].

Findings from this study indicate that social grants/child support may be a factor in the high occurrence of teen pregnancies, with 5% of participants attributing this belief to the phenomenon. These results are consistent with those reported by the Ministry of Health and Sanitation in Sierra Leone [24], which found that most affected people live in low-income neighbourhoods where the problem is concentrated. It’s common for girls living in extreme poverty to have an unplanned pregnancy to qualify for the federal child support grant and for children who are the primary breadwinners in their families to do whatever they have to to feed their siblings. Only 2.5% of people polled agreed that drug and alcohol abuse among adolescents leads to increased sexual activity, supporting the [25] statement that said as much. Teenage boys who have used these substances have reported being less cautious about contraception and taking other risks they normally would not take. Adolescent pregnancy is increased by drug use because drug use promotes sexual activity, most



Table 1. A distribution of teenagers participating in the study (n=4000) .

Age	Girls	Boys	Total	Per cent	Parity
12	110	90	200	5	0
13	48	52	100	2.5	0
14	203	97	300	7.5	0
15	455	445	900	22.5	0
16	660	140	800	20	0
17	360	240	600	15	0
18	463	37	500	12.5	0
19	300	300	600	15	1
Total	2599	1401	4000	100	
Per cent	65.0	35.0			

Mean age = 16
Standard Deviation = 2.0
Minimum age = 12
Maximum age = 19
Highest age participation = 15 (22.5%; n=900)
Minimum age participation = 12 (5.0%; n=200)
(Source: Field data, 2018)

Table 2. Analysis of participants' perceived reasons for teenage pregnancy.

Response	Girls	Boys	Total	Rgirls	Rboys	RR
Social grants	110 (55%)	90 (45%)	200	0.55	0.45	1.2
Alcohol, drugs and clubbing	48 (48%)	52 (52%)	100	0.48	0.52	1
Parents and schools not teaching children about sex education	603 (67%)	297 (33%)	900	0.67	0.33	2.0
Peer pressure	555 (62%)	345 (38%)	900	0.6	0.4	1.6
Constitutional rights	560 (70%)	240 (30%)	800	0.7	0.3	2.3
Television and porn movies	360 (60%)	240 (40%)	600	0.6	0.4	1.5
Available abortion services	363 (73%)	137 (27%)	500	0.726	0.274	2.6
	2599	1401	4000			

(Source: Field data, 2018)

Table 3. Participants expressed the effects of teenage pregnancy on girls (multiple responses).

Response	Girls (%)	Boys (%)	Total (n)	R.R.	95% C.I.
Drop out	52.5 (n=1313)	47.5 (n=1187)	2500	1.11	1.5-9.2
Loss of Future hope	96.75 (n=3677)	3.25 (n=123)	3800	29.9	1.5-6.0
Emotional, physical, and emotional effects	82.5 (n=2640)	17.5 (n=560)	3200	4.71	2.2-5.5
The likelihood of HIV/STIs infection	92.5 (n=2683)	7.5 (217)	2900	12.36	4.0-6.6
Parents disown their children	89.5 (n=3043)	10.5 (n=357)	3400	8.52	2.4-6.6
Lots of responsibilities	92.5 (n=1832)	7.5 (n=148)	1980	12.38	1.2-7.5
Lack of access to lucrative job	93.75 (n=1406)	6.25 (n=94)	1500	14.96	2.3-8.6

of which is risky. Teenage pregnancies are common among teenagers who frequent nightclubs, as noted in [25].

Girls are more likely to report negative effects of teen pregnancy than boys because they are more likely to be directly affected (RR=4.17) when they are neither financially nor emotionally prepared to give birth. This agrees with the [26] findings that physiological and psychological immaturity, a lack of adequate antenatal care, and unsafe delivery all increase the health risks associated with adolescent pregnancy and childbearing. Except dropping out of school (RR=1.1), the data shows that teen pregnancies carry a significant risk of the

consequences above. However, teen pregnancy is a factor when examining school dropout rates among girls, as shown by study [25].

Girls under 20 are often denied unrestricted access to sexual and reproductive health care services in developing countries like Sierra Leone. Moreover, adolescent girls may lack the confidence to request family planning services due to cultural norms that discourage contraception from unmarried women. This is in accord with the beliefs expressed in [2,18], which state that adolescent girls would rather get pregnant than ask their parents for permission to use family planning services. Health



Table 4. A table presenting the solutions that the participants came up with to curb the escalating rate of teenage pregnancy.

Response	Girls %	Boys %	Total N (%)	R.R.	95% C.I.
Removal of girl child support	7.14 (n=50)	92.86 (n=650)	700 (17.5)	0.08	0.2-4.8
Government to curb illegal abortion services	53.33 (n=480)	46.67 (n=420)	900 (22.5)	1.14	1.2-7.4
Increase the proper use of contraceptives	95 (n=380)	5 (n=20)	400 (10)	19.0	3.5-6.5
Implementation of sex programs in schools, communities and television	74.3 (n=520)	25.7 (180)	700 (17.5)	2.89	3.4-7.3
Girls should be discouraged by parents from dating when they are still young	40 (n=200)	60 (n=300)	500 (12.5)	0.67	0.3-0.9
Social media be monitored for playing porn movies and sex-related movies	36.67 (n=220)	63.33 (n=380)	600 (15)	0.58	0.1-1.0
Not encouraging teenage mothers in educational institutions	85 (n=30)	15 (n=170)	200 (5)	0.18	-0.9-1.2
TOTAL			4000		

workers and other stakeholders need to work together to ensure that teenagers receive the right messages and services that will enable them to make informed choices in their reproductive life because many of them either do not think about the consequences of engaging in premarital sexual activity or are unaware that they can become pregnant from unprotected sexual activities. This study's high rate of unintended pregnancy suggests that participants lacked the sex education necessary to make healthy decisions regarding their sexual behaviours.

Conclusion

According to the results of this study, a sizable percentage of the adolescents sampled engaged in sexual activity. As a result, they may be at risk for a wide range of reproductive health issues, including sexually transmitted infections, child marriage, complications during childbirth, and more.

The study's results suggest that sex education and increased information on access to and use of contraceptive methods should be encouraged to reduce the number of unintended pregnancies among adolescents. This will aid in empowering young people with the knowledge and tools they need to reduce the prevalence of and respond effectively to the consequences of teen pregnancy. Therefore, both government and non-government organizations must immediately launch an intensive campaign to increase access to sex education and counsel for young people.

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