

**SOCIEODEMOGRAPHIC FACTOR AFFECTING ADOLESCENT PREGNANCY****Dr. Ruchi Patel**

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**ABSTRACT**

**Background:** Teenage pregnancy is worldwide major health problem. It is associated with many obstetrics problems which is responsible for maternal death. Adolescent pregnancy more prevalent in rural area and lower socioeconomics. Our objective was to study the sociodemographic factors affecting adolescent pregnancy. **Method:** A Prospective observational study was conducted collecting data from medical records of around 100 consecutive consenting Adolescent subjects admitted in labour-room of a tertiary health care center of south Gujarat over a period of 1 year after HREC approval. **Results:** Approximately 9.08% teenage pregnancy rate in our institute during study period. It was observed that mean age group was 18 to 19 year, 65% had marriage at age of 18 to 19 year, 100% subject were married, 95% were un-booked, 86% belonged to low socioeconomic status, 61% from tribal population, 72% were from rural area, 92% were primigravida, 57% subject's parent's desire for early marriage, 43% subject's desire for early marriage. No use of contraception (33%) and couple's desire (34%) were main reason for early pregnancy. **Conclusion:-** Increase female, family and community education reduces the teenage pregnancy. Awareness about early ANC registration and good antenatal care with effective intrapartum & postpartum monitoring along with contraceptive advice help to reduce maternal and neonatal morbidity & mortality associated with teenage pregnancy.

**KEYWORDS :** Adolescent pregnancy, socioeconomic outcome.**INTRODUCTION**

Adolescence is defined by WHO as a period from 10-19 years. This age represents an important stage for ensuring a successful transition to adulthood. During this period the structural, functional and psychosocial development occurs in a girl and prepares her for motherhood.

WHO defined teenage pregnancy as any pregnancy from a girl who is 10 to 19 years of age, age being defined as her age at the time of delivery.<sup>1</sup> Teenage pregnancy represents a high-risk group in reproductive terms because of the double burden of reproduction and growth.

Teenage pregnancy is a worldwide health problem. Teenage pregnancy accounts for 11% of births worldwide.<sup>2</sup> In India, although the legal age at marriage is 18 for females and 21 for males, early marriage continues to be the norm by age 15 as many as 26% of females are married, by the age of 18, this figure rises to 54%.<sup>3</sup>

According to national family health survey India has successfully reduced the proportion of teenage pregnancy this is possible because increase in female literacy rate.

National family health survey	Teenage pregnancy rate in India
NFHS-5	6.8%
NFHS-4	7.9%
NFHS-3	16%

Teenage mother are at high risk of anemia, pre-eclampsia, eclampsia, CPD, increase rate of operative delivery, abortion, IUGR, SB, STI, puerperal sepsis, psychiatric illness and maternal death. Teenage pregnancies have shown associations with preterm birth, low birth weight, RDS, perinatal asphyxia and death, and high NICU admission.

Teenage mothers aged 10-19 years have a Maternal Mortality Rate (MMR) which is about 5 times higher than the MMR for the mothers aged 20-24 years.<sup>2</sup> We carried out this study to know the socio-demography profile of adolescent pregnancy and various reason of early pregnancy.

**Aims And Objectives Of The Study:**

To study Sociodemographic factor in adolescent pregnancy.

**MATERIALS AND METHODOLOGY:**

This study was conducted at Obstetrics and Gynecology department of tertiary care center of South Gujarat for period of 1 year from march 2019 to April 2020 after official approval from ethical committee.

**Study Design:-** Prospective Observational Study.**Study Population:-**

Consecutive 100 (taking account of statistics of 2019 in our department) consenting adolescent mothers admitted in Obstetrics and Gynecology department based on inclusion criteria.

**Inclusion Criteria:**

All consenting intranatal and postnatal adolescent women admitted in Obstetrics department of tertiary care hospital.

**Exclusion Criteria:**

- 1) Mother with age > 19 years
- 2) Teenage subject not in labour.
- 3) Non consenting subjects.

**RESULTS**

After applying inclusion and exclusion criteria of study, total 100 adolescent pregnant mother were taken into consideration and sociodemographic outcomes assessed.

**Table: 1 Total Adolescent Pregnancy Rate In Present Study**

Duration of study	Total no. of delivery during study period	No. of subject adolescent mother delivery	Percentage accounted for adolescent delivery
	4579	416	9.08%

This study shows that adolescent delivery accounted for 9.08% of all delivery at our institute. We include 100 consecutive subjects fulfilling inclusion criteria out of them. (TABLE:1)

**Table: 2 Baseline characteristics of study participants**

Variables	Percentage (%)
AGE	
11 TO 14	00
15 TO 17	11
18 TO 19	89

AGE AT MARRIAGE	
11 TO 14	00
15 TO 17	35
18 TO 19	65
MARITAL STATUS	
1-MARRIED	100
2-UNMARRIED	00
REGISTRATIONSTATUS	
BOOKED	05
UN-BOOKED	95
SOCIOECONOMICSTATUS	
1-UPPER	00
2-UPPER MIDDLE	14
3-LOWER MIDDLE	45
4-UPPER LOWER	36
5-LOWER	05
CAST	
TRIBLE	61
NON-TRIBLE	39
RESIDENCE	
RURAL	72
URBAN	28
PARITY	
PRIMIPARA	92
MULTIPARA	08
EDUCATIONSTATUS	
1- ILLETRATE	46
2- PRIMARY	31
3- SECONDARY	14
4- HIGHER SECONDARY	9
5 - GRADUATE	00

Table 2 describes the baseline characteristics of the study participants. It was observed that mean age group was 18 to 19 year, 65 % had marriage at age of 18 to 19 year , 100% subject were married,95% were un-booked, 86% belonged to low socioeconomic status, 61% from tribble population, 72% were from rural area, , 92% were primigravida .

**Table: 3 Reason Of Adolscent Pregnancy.**

REASON FOR EARLY MARRIAGE	
REASON	Percentage(%)
1-PARENT'S DESIRE	57
2-PATIENT'S DESIRE	43
REASON FOR EARLY PREGNANCY	
1-NO KNOWLEDGE OF CONTRACEPTION	20
2- NO USE OF CONTRACEPTION	33
3-COUPLE'S DESIRE	34
4-FAMILY PRESSURE	13
5-OTHER	00

Table: 3 shows that 57% subject's parent's desire for early marriage 43% subject's desire for early marriage. No use of contraception (33%) and couple 's desire (34%) were main reason for early pregnancy.

**DISSCUTION:**

In our study out of 100 women , 89% were belong to 18 to 19 year which was compared to marimuthu K et al. study at gov. medical college, Tamil Nadu<sup>2</sup>were 88% belong to these age group. The outcomes adolescent pregnancy are more adverse in the lower teenage group of 13-15 years than in the higher teenage group of 16 to 19 years<sup>5</sup>.

In our study majority of subject (95%) were prior booked before delivery and taken ANC care. Only 5% subjects were un-booked, 3% Were uneducated and no knowledge of requirement of early and regular ANC care.

Majority of subject (45%) were belongs to lower middle class, 36% were from upper lower class. Girls and women from low

socioeconomic class are at approximately 10 times at risk of becoming adolescent mother as compared with high socioeconomic class.<sup>10</sup>In low and middle income countries over 30% of girls marry before they are 18 years of age: around 14% before the age of 15.<sup>5</sup>

In our study 61% belong to tribal population , they were illiterate and not aware of family planning methods and even if they are aware they don't have easy access to family planning services or fail to utilize them due to inhibition or pressure to attain motherhood to satisfy their mothers in law or husbands.

In our study 72% subject were from rural area, which was comparable with Nepak A et al<sup>65</sup> study at MKCG Medical college 2021 were 67.2% from rural area. According to NFHS-5 6.8% of women aged 15-19 years were already mother or pregnant at the time of survey, with the prevalence higher in rural areas (7.9%) compared to urban areas (3.8%).

In our study 46% were illetrateand 31% had only primary education. Increase in female literacy rate will delaye the age of marriage and conception so, decrease in adolescent pregnancy rate. According to national family health survey, India has successfully reduced the proportion of teenage pregnancy. These 1% reduction is due to education.

In our study 100% subject were married ,witch was comparable Nair A et al at gov. medical college, kozhikode, kerala 2015 were 99.65% was married.

In our study were married at age of 18 orl 19 because,The legal age of marriage in India is 18 year so most of subject are from 18 to 19 year age group.

Most reproduction in India occurs within marriage, so the low age at marriage automatically links to early onset of sexual activity, and thereby fertility<sup>3</sup>

In our analysis majority subject (57%) had reason for early marriage is parent's desire, were 43% subject themselves want's early marriage. Most of the Indian parent's belief that with the age there will reduce the chances of good match for marriage, so they belief in old custom of early marriage

So we need to do community awareness projects about risk of teenage pregnancy.Increase education, freedom, lack of education about proper contraceptive during the adolescent period when the hormonal changes are at peak level there is increase in rate of adolescent pregnancy in higher community. in our study 43 % patient desire for early marriage witch reflect adolescent education about proper age of marriage, hormonal changes during this period, sexually transmitted disease and proper sex education with proper contraception use will reduce the adolescent pregnancy.

In our study, the reason for early pregnancy is couple's desire were 34%, So we have to focus in adolescent sex education and proper contraceptive education for decrease adolescent pregnancy.In our study 33 % subject had knowledge about contraception but they were not using it because of other reason like stigma to bye it, no knowledge of how to use and how to dispose it , which reflect government required proper counselling scheme for these group of people

**CONCLUSION**

Teenage Pregnancy and It's complication are matter of concern in our country, it account's for 6.8% pregnancy in India according to NFHS-5.

To decrease teenage pregnancy , Government shall focus  
a) To improve female literacy rate .

- b) To conduct awareness program for teenage pregnancy and its complications in rural area, tribal population, Muslim community and low socioeconomic class.
- c) To conduct community awareness for marriage at least at 21 year of age, contraceptive counselling , and safe sex practice.

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