



TEENAGE PREGNANCY – ANALYSE THE DETERMINANTS AND SOCIODEMOGRAPHIC FACTORS

Obstetrics & Gynecology

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ABSTRACT

Background: “Teenage” or “Adolescence” is the transition phase from childhood to adulthood. Teenage pregnancy has emerged as one of the major social & financial issue in recent years with great impact on fetomaternal health & become challenge to obstetrician.

Objectives: The aim of this study is to analyse determinants, risk factors, sociodemographic factors in the teenage pregnancies & its adverse consequences.

Materials & Methods: This observational Study was conducted at Dr DY Patil Medical College, Hospital and Research Institute, Pimpri, Pune. Data collected from teenage pregnant females (age more than 18 years and less than 20 years) who are willing to participate in this study.

Results: The current study evaluated the adverse impact of teenage pregnancies on maternal and neonatal health outcomes with emphasis on socioeconomic factors, risk factors and complications of such pregnancies. Among the total 205 cases of teenage pregnancy, 71.22% cases were between 19-20 years and 28.78% were between 18-19 years. Most of the mothers around 42.93% studied only up to primary school whereas 31.17% were uneducated.

Most of the mothers were in the upper lower and the lower scale of socio-economic status based on the Kuppuswami Classification. Many were from rural areas due to lack of awareness and minimal education about teenage pregnancies. Anaemia (16.58%) was commonest risk factor for complications in teenage pregnancies.

Conclusion: Teenage pregnancies are associated with increased health care expenditure and adversely affect the socio-economic status as most of the subjects belong to lower socio-economic strata and were uneducated. Hence, it is vital to prevent teenage pregnancies as far as possible by good education, creating awareness about it and as well through government regulations.

KEYWORDS

Teenage pregnancy, Anaemia, Socio-economic status

INTRODUCTION

“Teenage” or “Adolescence” is the transition phase from childhood to adulthood. It is the juncture in the development and ensuring a successful progression to adulthood. Adolescent pregnancy has emerged as one of the major social issues in recent years. This has led to a huge impact on life of the teenage mother and the child. Teenage pregnancy is a big social problem that calls for more education and support to encourage girls to delay motherhood until they are ready.

Teenage pregnancy also known as adolescent pregnancy is defined by WHO as a pregnant female less than 20 years of age^[1]. In the developing countries like India, 47.4% of women were married by the age of 18 years^[2]. Teenage pregnancies in the recent times have raised various human right issues.

Teenage pregnancies are coming up as one of the major social and public health problems. Across the country women have been victims to social pressure and denied to regulate their pregnancies or make decision regarding its outcome. This puts the young mothers at high risks to many health related problems and poor birth outcomes in newborn infants. In the Indian subcontinent, early marriage and pregnancy is more common in traditional rural communities than in cities.^[3]

The teenage mother is at a high risk of suffering from various medical complications like anaemia, recurrent abortions pregnancy, induced hypertension, preterm labour, recurrent abortions and also postpartum complications like puerperal sepsis and depression. Such teenage pregnancies have substantial effect on the fetal well being - Low birth weight babies, Prematurity, IUGR and Neonatal asphyxia^[2,4].

Teenage pregnancies less than 20 years amount for 11% of all births worldwide.^[5] The key events which have greatly influenced this rising

trend are changing age at menarche with median age varying all over the world, lack of information about reproduction and education, drugs and alcohol addiction, influence of social media and lower socioeconomic status. All these factors lead to blind following of old culture and customs and child marriages^[6]. Along with these problems, obtaining contraception is one serious problem confronting a new adolescent mother and caregivers.

It has become the need of the hour to discourage adolescent pregnancy in order to reduce the population crisis, family size and its socioeconomic and educational consequences which in turn will improve the maternal and perinatal outcome. This can only be achieved by propagation of awareness in the community regarding teenage pregnancy hazards, proper education about reproductive health, nutritional support, family planning and the importance of delaying marriage. This will definitely help in transforming today's adolescent girls into healthy and responsible women, giving birth to a healthy future generation.

Thus to improve maternal and perinatal outcome of teenage pregnancies, this study will emphasize on sociodemographic factors, risks, complications and outcomes of these pregnancies.

AIMS AND OBJECTIVES

To study the determinants and etiological factors in teenage pregnancy.

- To study the proportion of teenage pregnancy in a tertiary health care setup.
- To study the sociodemographic factors in teenage pregnancy.

MATERIALS AND METHODS

This observational Study (Cross sectional and cohort study) was conducted at Dr DY Patil Medical College, Hospital and Research Institute, Pimpri, Pune

Period of study: Sept 2018 to Aug 2020

INCLUSION CRITERIA:

- Teenage pregnant females (age more than 18 years and less than 20 years) who are willing to participate in this study

EXCLUSION CRITERIA:

- Teenage pregnant females not willing to participate in the study or unable to give consent for the study (Minor patients less than 18 years and mentally ill patients).

Detailed history and necessary investigations will be undertaken.

Ethics and consent: Approval will be taken from the Institutional Ethical Committee before commencing the study. Written and informed consent shall be obtained from all patients.

Source of Funding: The cost of investigations for ANC patients is nil and free of cost in the institute.

OBSERVATIONS AND RESULTS

The observations were as follows:

Table 1: Age of Mothers

Age Group	No. of Patients	Percentage of Patients
18-19 years	59	28.78%
19-20 years	146	71.22%

Among the total 205 cases of teenage pregnancy, 71.22% cases were between 19-20 years. 28.78% patients were in the age group of 18-19 years. (Table 1)

Table 2: Gravidity

Sr. No.	Gravidity	No. of cases (n=205)	Percentage
1.	Primigravida	154	75.12%
2.	Multigravida	51	25.87%

Out of 205 patients, 75.12% were primigravida whereas 25.87% were multigravida. (Table:2)

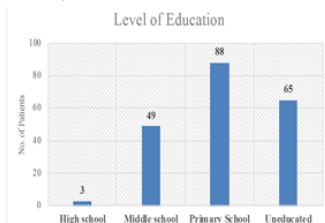


Fig 1: Level of Education

Most of the mothers around 42.93% studied upto primary school whereas 31.17% were uneducated.

Table 3: Occupational Status

Occupational Status	No. of Patients	Percentage of Patients
Semi-skilled	39	19.02%
Unemployed	82	40.00%
Unskilled	84	40.98%

Most of the mothers were unskilled and unemployed.

Table 4: Per Capital Income (Rs)

Per Capita Income (Rs)	No. of Patients	Percentage of Patients
Less than 400	61	29.76%
401 to 800	103	50.24%
801 to 1200	39	19.02%
Above 1200	2	0.98%

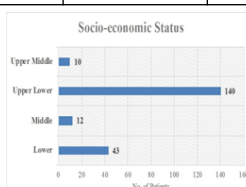


Fig 2 : Socio-economic Status

Most of the mothers were in the upper lower and the lower scale of socio-economic status based on the Kuppuswami Classification.

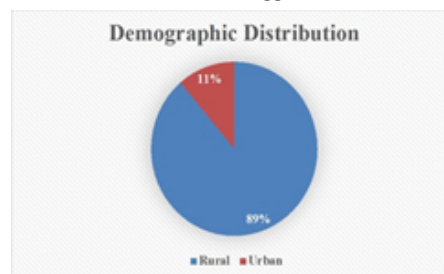


Fig 3 : Demographic Distribution

Most of the women were from rural areas due to lack of awareness and minimal education about teenage pregnancies.

Table 5: Religion

Religion	No. of Patients	Percentage of Patients
Hindu	165	80.48%
Muslim	25	12.19%
Christian	5	2.43%
Others	10	4.87%

As per the study it was observed that maximum patients in the labour room were Hindus and thus maximum teenage pregnancies were observed in this group.

Table 6: Antepartum Risk Factors

Antepartum Risk Factors	No. of Patients	Percentage of Patients
Anemia	34	16.58%
Gestational DM	2	0.98%
Hypothyroidism	1	0.49%
Previous LSCS	8	3.90%
Twin Gestation	1	0.49%

According to the observations it was concluded that Anemia was the most common antepartum risk factor which was around 16.58% in our study.

DISCUSSION

The current study evaluated the adverse impact of teenage pregnancies on maternal and neonatal health outcomes with emphasis on socio-economic factors, risk factors and complications of such pregnancies. Adolescent fertility rate (births per 1,000 women aged from 15 to 19 years) in India was reported at 12.07 % in 2018^[7]. Worldwide, more than 700 million women are married before 18 years of age, and child brides are common in low-income countries like India.^[8] Research indicates that pregnant teens are less likely to receive prenatal care, often seeking it only in the third trimester. There is an emerging need for delaying and spacing pregnancies.

In a study regarding reproductive health care conducted in Ahmednagar, Maharashtra showed the importance of limiting the number of children in each family.^[9] In our study of 205 cases of teenage pregnancy, 71.22% cases were between 19-20 years and 28.78% were between 18-19 years.

Most of the mothers around 42.93% studied up to primary school whereas 31.17% were uneducated, whereas only 1.46% had attended high school. Most of the patients were unskilled at 40.98% and 40% of them were unemployed. Most of the mothers were in the upper lower and the lower scale of socio-economic status based on the Kuppuswami Classification. Similar findings related to under nutrition in children through poor maternal nutritional status, lower education, less health service access, poor complementary feeding practices and poor living conditions were reported by few well known studies.^[9,10,11]

Kumar C et al stated that due to various socioeconomic disparities in developing countries like India, adolescent/teenage pregnancies are also a major concern for less than optimum immunisation of rural, illiterate and poor children [10].

Mazuera-Arias R et al^[11] was observed that unwanted pregnancies are the main cause of school dropouts for 62 % of adolescents. It was noted in various studies like Origange C. et al that adverse socio-

economic factors are associated with teenage pregnancy which was also reflected in present conducted study.^[12-14]

Most of the women in our study were from rural areas due to lack of awareness and minimal education about teenage pregnancies. Similar results were noted by recent studies.^[14,15]

RCH program has been adapted by Govt of India in improving mother and child health care which had led to improvements in ante-natal checkups, institutionalized deliveries, imparting knowledge regarding child spacing, contraception, maternal and child nutrition and immunization coverage.^[14-16]

CONCLUSION

Teenage pregnancies are associated with high degree of fetal-maternal complications. Teenage pregnancies are associated with increased health care expenditure and adversely affect the socio-economic status as most of the subjects belong to lower socio-economic strata. Also, a trend was noted where a high number of patients belonged to lower socio-economic strata, were uneducated and hailed from rural areas.

It is the need of the hour to educate every family regarding the devastating effects of teenage pregnancy on both the mother and the child.. It is a very tough experience where a teenager gets pregnant and has to face this situation only because of early marriage, low socioeconomic status, lack of knowledge and absolutely no awareness about the same. Thus, it is important to prevent teenage pregnancies as far as possible by good education , creating awareness about it and as well through regulations.

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