

Assessment of Unwanted Pregnancy and Associated Factors among Female Regular Students in Selected Governmental Preparatory High Schools (Grade 11th & 12th), in Bahir Dar City, North West Ethiopia, 2018

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Abstract

Introduction: Unintended pregnancies are pregnancies that are mistimed, unplanned or unwanted at the time of conception. Many adolescent girls become pregnant and have children before they are physically, emotionally, and socially mature enough to be mothers. Therefore, the aim of this study was to assess unintended pregnancy and associated factors among high school students in Bahir dar town.

Objective of the study: This study was aimed at Assessment of unwanted pregnancy and associated factors among female regular students in selected governmental preparatory high schools (grade 11th & 12th), in Bahir dar city, North West Ethiopia in 2018.

Methodology: An institutional based cross-sectional study was conducted in 3 randomly selected governmental preparatory high schools using simple Random sampling between Dec. 01_30, 2018. Structured, self-administered questionnaire was used to collect data. The collected data were coded, entered and analyzed using SPSS software version 20. Frequencies and mean were used to describe the study participants in relation to their relevant variables and X2 test was computed to look associated factors.

Results: The proportion of pregnancy from total of (273) studied students was 39 (14.3%). The proportion of unwanted pregnancy from total of 39 pregnancies, were 26(66.7%). In this study, age of students, place of residence, branch of study, income, grade, family planning, marital status and age 1st menses seen were significantly associated with unwanted pregnancy (p-value<0.05).

Conclusion and Recommendations: proportion of unintended pregnancy was high and age of students, place of residence, branch of study, income, grade, family planning, marital status and age 1st menses seen were significantly associated with unwanted pregnancy. It would be better if the responsible bodies focus on to open and give youth friendly service, to address sexual and reproductive health problems specifically to prevent unintended pregnancy.

Keywords: Unwanted/unintended pregnancy; Bahir dar preparatory high school; Associated factors; Ethiopia

Introduction

Unintended pregnancy is a pregnancy that is either unintended, such as the pregnancy occurred when no children or no more children were desired. Alternatively, the pregnancy is mistimed, such as the pregnancy occurred earlier than desired. The concept of unintended pregnancy helps in understanding the fertility of populations and the unmet need for contraception also known as birth control, and family planning. Most unintended pregnancies result from not using contraception or from not using it consistently or correctly [1]. Many adolescent girls become pregnant and have children before they are physically, emotionally, and socially mature enough to be mothers. Adolescent girls become pregnant for different reasons. For some, pregnancy is accidental and the results of experimenting with sexuality or of lack of knowledge about how to prevent conception. Others seek pregnancy and motherhood to achieve adult status or fill an emotional void. However, most adolescent pregnancies have little to do with choice or mistake. Globally, the majority of adolescent girls who become pregnant are married and pressured to have a child. For others, pregnancy often results from abusive, forced, or coerced sex [2]. Globally it is estimated that there are 87 million cases of unintended pregnancies annually of which 46 million cases resort to induced abortion. Not all cases have access to safe abortion facilities and 18 million cases end up with unsafe abortion services [3]. A study conducted in Soweto, South Africa, found that 23% of pregnancies carried by 13–16 year old young women and 14.9% in the 17–19 year age range ended in abortion [4]. Even though the rate of adolescent pregnancy is increasing and become the major health problem, developing countries especially Africa, the rate of adolescences pregnancy in South Africa dropped from 7.8% in 15 to 19-year-olds in 1996, to 6.5% in 2001 [4]. However, it is still a high number when it compare with those developed counties USA (5.3%), Brazil (4.5%), Australia (1.6%), Japan (0.4%) or Italy (0.6%) [5]. Knowledge and use of contraceptive among adolescents showed very wide variation among regions of Sub-Saharan Africa than other regions of the world. In conformation with this study,

among adolescent aged 15-19 in Nigeria revealed that 85% knows at least one modern method of contraception while only 11% of sexually active adolescent used modern contraceptive the rate for any methods was 27% [6]. A nationally representative survey conducted in Ethiopia in 2005 revealed that an estimated 8382,000 induced abortions were performed and 52,600 women were treated for complications of abortion. About 42% of pregnancies were unintended, and the unintended pregnancy rate was 101 per 1,000 women [7]. Several studies have identified the predictors of unsafe sexual practices during the early adolescent years, such as individual, socio-demographic, familial, and relational characteristics, poverty, cultural and family patterns of early sexual experience and lack of school or career goals [8]. Another study stated that nonuse and/or failure of contraceptives is the primary cause of unintended pregnancy. If contraceptives used properly and consistently there will not be unintended pregnancy. In preparatory, most of the students are at the age of youth and adolescents and they are risk for many sexual related health problems. Unintended pregnancy is most common sexual health problems of preparatory students. There is no study conducted about unintended pregnancy in preparatory high school students, particularly in Bahir Dar city preparatory high schools. Our interest is to show the magnitude of the problems and to call attention of collaborative organizations and the schools to the problem.

Methods and Materials

Study design, subjects, and setting

An institutional based cross-sectional study was conducted in 3 randomly selected governmental preparatory high schools using simple Random sampling technique between Dec. 01_30, 2018 in Bahir dar city. Bahir Dar city is one of Ethiopian metropolis city, the capital city of Amhara region, located at North West Ethiopia 565 k.ms away from Addis Ababa. According to 2017 E.C Bahir Dar city educational department report, it has many governmental and private high schools. However, there are only seven governmental high schools with preparatory including Bahir dar city's satellite towns with total students of 12008. In the city, there were 1674 female grade 11th & 12th students in the year.

Data collection procedure

A pre-tested, structured, self-administered questionnaire was used for data collection. The questionnaire was prepared in the English language then translated to the Amharic language, and back to English by language experts to check for its consistency. Three data collectors who had a diploma in nursing and two supervisors who had first-degree health officers were recruited to participate in data collection based on set criteria and trained for data collection and supervision.

Data quality assurance

The questioners were developed in English and translated to Amharic language and then translate back to English to maintain

consistency. The questionnaire was pretested on 5% Of non-selected governmental preparatory high schools and modification of questionnaire was implemented based on the result of pretest. One day training was given for data collectors & supervisors about the purpose of the study & how to collect the data. The supervisor checked the completeness of the questionnaire daily.

Data processing and analysis

The data were analyzed manually; descriptive analysis was done with Frequencies, percentages by using tables and figures. Chi square test were used to identify relevant variables associated with unintended pregnancy.

Ethical consideration

Ethical clearance was obtained from research and publication office of Rift Valley University. The committee reviewed the aforementioned project proposal with especial emphasis on all ethical principles considered (respect for persons, beneficence and justice), the objective of study ethically achievable, and method ethically sound. Then permission letter was obtained from zonal and district health offices. The questions from the questionnaire were proved not to affect the morale and personality of study participants. Informed verbal consent was obtained from each study subject after an explanation of why they take part in the research. They were also informed participation is volunteer-based. Confidentiality shall be ensured from all the data collectors, supervisors, and investigators side using code numbers than names and keeping questionnaires locked. Each respondent was assured that the information provided by them were confidential and use only for research. Moreover, there would be no risk or harm that was anticipated from the participation of the study.

Results

Socio demographic characteristics of respondents

A total of 273 students were participated with response rate of 97.5%. From this, 144 (52.7%) students were from natural science college and the rest 130 (47.3%) were from branch of social science. More than half respondents age 143 (52.6%) were 18 and above years and the rest were below 18 years with mean age 18.9 years SD \pm 2.2 years. In this study, religion distribution of respondents were 208 (76.2%) orthodox, 37 (13.6%) Muslims, 12 (4.4%) protestants, 12 (4.4%) catholic and four (1.5. %) were different religion followers. About 169 (61.9%) students came from urban and 104 (38.1%) were from rural area. The marital status distribution showed that, 260 (95.2%) unmarried and the rest were married (**Table 1**).

Variables	Category	Frequency	Percentage (%)
Residence	Rural	169	61.9
	Urban	104	38.1
Age(Mean=18.9 , SD(\pm)=2.2,	<18	130	47.6
	18 & above	143	52.4

Max=24, Min=16)			
Religion	Orthodox	208	76.2
	Muslim	37	13.6
	Protestant	12	4.4
	Catholic	12	4.4
	Others	4	1.5
Branch of study	Natural	144	52.7
	Social	129	47.3
Grade	11 th	143	52.4
	12 th	130	47.6
Relationship status	Unmarried	260	95.2
	Married	13	4.8
Family income (Mean=2085.7, Max=3400, Min=900)	<1500birrs	117	42.9
	1501-2000birrs	26	9.5
	2001-2500birrs	26	9.5
	>2500 birrs	104	38.1

Table 1: Socio demographic characteristics of female regular students in selected governmental preparatory high schools (grade 11th&12th), in bahir dar city, north west ethiopia in 2018.

Respondents' reproductive health status and unintended pregnancy

In this study, all respondents had seen menstruation cycle. Majority of the respondents, 182(66.7%) were seen their menses after the age of 12 years and the rest were below 12 years. From total of 273, 39 (14.3%) students had faced pregnancy of those 39 of faced pregnancies, 26 (66.7%) of them were unintended pregnancies. Among who had faced unintended pregnancy, half of them were for the first time. Ninety-one of respondents had sexual intercourse from those, 61 (67.0%) respondents had used family planning.

Problems associated with unintended pregnancy

All of respondents who had faced unwanted pregnancy told first time about their pregnancy for their closely friends. Similarly, all respondents with unintended pregnancy had terminated their pregnancy at private clinic (induced abortion). Among who had unintended pregnancy, half 13 (50%) had faced complication after induced abortion and the rest were not faced. These complications were hemorrhage 5 (38.5%), infection 4(30.5%), and four (30.5%) different complication had faced.

Factors associated with unwanted pregnancy of respondents

In this study, age of students, place of residence, branch of study, income, grade, age 1st menses seen, marital status and

use family planning were significantly associated with unwanted pregnancy with p-value<0.05.

Discussion

Sexual and reproductive health is deeply rooted in cultural and social values, besides, unintended pregnancy is a complex socio-cultural phenomenon that is difficult to appraise easily by standardized questionnaires. The proportion of unintended pregnancy in the current study was 66.7%. This figure was high when we compare in south Africa 6.5%, in USA 5.3%, in Brazil 4.5 %, in Australia 1.6 %, Italy 0.6% and Japan 0.4 %. It was also high when it compares study conducted in Ethiopia that showed about 42% of pregnancies was unintended, and the unintended pregnancy rate was 101 per 1,000 women. This variation might be due to methodological, time, socio-demographic, economic and cultural differences across areas. In this study, age of students, place of residence, branch of study, income, grade, family planning, marital status and age 1st menses seen were significantly associated with unwanted pregnancy. This is comparable other study conducted in Mpumalanga which stated that the predictors of unwanted pregnancy were such as individual, socio-demographic, familial, and relational characteristics, poverty, cultural and family patterns of early sexual experience and lack of school or career goals. A study conducted in Nekemte also consisted with our study, which stated that nonuse, and/or failure of contraceptives is the primary cause of unintended pregnancy. Similarly, a study conducted by Habte et al., which stated that the socio-demographic factors that were included younger age, less level of education, unmarried, rural residence, and lower income, distance from the nearest health facility, higher parity, previous history of unintended pregnancy, unmet need for family planning, family planning method failure, early sexual initiation, partner's desire for child, domestic violence and less autonomy were among the predictors of unintended pregnancy.

Conclusion

In this study, proportion of unintended pregnancy was high. A high proportion of students reported that their pregnancy was unintended and among all unintended pregnancies, all had induced abortions and from this half of them encountered abortion related complications. Variables such age of students, place of residence, branch of study, income, grade, family planning, marital status and age 1st menses seen were significantly associated with unwanted pregnancy. It would better if the responsible bodies focus on to open and give youth friendly service, to address sexual and reproductive health problems specifically to prevent unintended pregnancy.

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