

(RESEARCH ARTICLE)



## Characterization of adolescent pregnancy in the community

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### Abstract

Adolescent fertility constitutes a challenge of sexual and reproductive health at the international level. Teenage pregnancy becomes a complex public health problem. The objective of the authors is to characterize the pregnant adolescents of the Jatibonico II polyclinic in their urban area in order to design actions and activities that make up a strategy for the proper management of pregnant women in an active and proactive way. Descriptive study for the characterization of pregnant adolescents according to sociodemographic variables, biopsychosocial variables and the clinical variable. Research methods of the theoretical level, the empirical level and the mathematical statistical level were used. The percentage calculation was carried out. 53 pregnant adolescents were included. The data with the highest percentage were adolescents from 17 to 19 years old for 41, 51 %, secondary school finished with 49, 1 %. 56, 60 % of those studied maintained a stable relationship with a low level of information about the pregnancy in 77, 36 %. Family rejection was one of the biopsychosocial complications that most affected those studied, 81, 13 %. The school dropout exhibited low figures and the state of health was good in 54, 72 %. The importance of the characterization of pregnant adolescents is exposed, to implement actions and activities that allow the proper management of pregnant women at this stage of life, improving their health status.

**Keywords:** Characterization; Adolescent; Pregnancy; Prevention

### 1. Introduction

The world population of adolescents is over 100 million and in developing countries, one in four people are in their teens, compared to one in seven in developed countries. Pregnancy, at increasingly early ages, is emerging as a global social and public health problem <sup>(1)</sup>. Among the most relevant problems that occur in adolescence, we can mention pregnancy.

Teenage pregnancies represent one of the main risks of preterm delivery, low birth weight, hypertensive disease of pregnancy, maternal and fetal deaths, spontaneous abortion, genital hemorrhage, urinary or vaginal infections, among others. It also supposes a negative impact on the educational, economic and social condition of the young women, who, most of the time, are forced to drop out of school and remain financially at the expense of the family, or, on the contrary,

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have to insert themselves prematurely in the workplace in order to satisfy basic needs, which limits opportunities for improvement and future work <sup>(2)</sup>.

High adolescent fertility constitutes a true challenge for sexual and reproductive health at the international level <sup>(3)</sup>. Numerous studies agree that the incidence of adolescent pregnancy varies, depending on the region and the degree of development of the country studied <sup>(4)</sup>. Worldwide, it is reported that 11.00% of births occur during adolescence, of which 95.00% occur in low- and middle-income countries <sup>(5)</sup>. Approximately 16 million adolescents between the ages of 15 and 19 and close to 1 million girls under the age of 15 give birth each year <sup>(6)</sup>.

In Cuba, during 2017, the adolescent pregnancy rate was 52, which represents around 16% of total fertility <sup>(7)</sup>. In 2018, the adolescent fertility rate was 54.6 x 1000 women, the highest since 1995 <sup>(8)</sup>. The province of Sancti Spíritus also presents high rates of adolescent pregnancy, in 2019 it was 26.46 per 1000 adolescent women and the trend is increasing <sup>(9)</sup>.

Adolescent pregnancy becomes a complex public health problem due to its sociocultural configuration in each context in which the adolescent develops his life, where economic and cultural aspects, social and community networks, influence the ways of understanding and acting in the adolescent before, during and after pregnancy. It is a priority as health professionals to educate to contribute to reducing the number of adolescent pregnancies.

According to the statistical report of the "Arcelio Suárez Bernal" Polyclinic (Polyclinic II) in the municipality of Jatibonico, a high incidence of adolescent pregnancy has been detected with rates higher than those planned for the province and the nation; in 2019 the rate was 29.98 per 1,000 adolescent women. The documentary review on the incidence of adolescent pregnancy-prevention relationship detects deficiencies in the ways to achieve prevention that integrates its reactive and proactive components, which constitutes a theoretical gap in the approach to the health problem that is presented. It is the objective of the authors to characterize the pregnant adolescents of the aforementioned polyclinic in their urban area in order to design actions and activities that make up a strategy for the proper management of pregnant women in an active and proactive way.

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## 2. Material and methods

The study carried out is conceptualized as a descriptive study for the characterization of pregnant adolescents at Polyclinic II. Sociodemographic variables (age, education, marital status and level of information on adolescent pregnancy), biopsychosocial variables (biopsychosocial complications, school dropout) and the clinical variable: health status were taken into account.

Research methods of the theoretical level, the empirical level and the mathematical statistical level were used. The theoretical methods made possible the foundation of the research in relation to the system of concepts used, the interpretation of the empirical results, the deepening of the essential relationships and fundamental qualities of the processes that are not directly observable.

The percentage calculation was carried out for the analysis of the discrete, finite and countable quantitative data collected in the diagnosis stage; likewise, express the results in tables for a better interpretation and to reach conclusions about the pre-experiment. Documentary reviews were carried out that contributed to know the current state of the research topic.

Fifty-three pregnant adolescents from Polyclinic II, in its urban area, were included. They met the following characteristics: being in the 12-19 age group, living in the area belonging to Jatibonico Polyclinic II, possessing adequate mental capacity for the study, staying within the study area for more than six months and that they agreed to participate in the study.

The adolescent pregnant women studied were characterized according to variables

- Sociodemographic: age range (12-13, 14-15, 16-17, 18-19), schooling (Elementary not finished, Elementary finished, Secondary not finished, Secondary finished, Pre-university not finished, Pre-university finished), marital status (Single: without a stable partner, Married: with a stable partner) and level of information on adolescent pregnancy (High: with knowledge about the risks and forms of prevention, Medium: with some knowledge about prevention but not about risks, Low: little knowledge about prevention and risks).

- Biopsychosocial: biopsychosocial complications (anemia, urinary tract infection, gestational diabetes, gravid hypertensive disease, partner rejection, family rejection), school dropout (Yes: dropout, No: continuity of studies); clinical variable: state of health (Good: without biopsychosocial obstetric risks, Fair: with biological or social risks but not both, Bad: with biopsychosocial risks).

The study was approved by the Ethics Commission of the Scientific Council of the Dr. Faustino Pérez Hernández Faculty of the Sancti Spíritus University of Medical Sciences and by the Jatibonico Municipal Health Department. The primary data, as well as the research results, are used by the basic health team that cares for pregnant adolescents, in the strictest confidence, maintaining the absolute obligation not to disclose personal data of those studied. This study does not imply physical or psychological affectations of pregnant adolescents. There is no experimentation through special interventions with human beings, complying with the Helsinki protocol for this type of research <sup>(10)</sup>.

### 3. Results and discussion

The investigated population was characterized, which served as a basis for the design of reactive and proactive prevention actions in the prevention of adolescent pregnancy. The predominant characteristics are shown in table one. (Table 1)

**Table 1** Characterization of the pregnant adolescents studied. Polyclinic II Arcelio Suárez Bernal. Jatibonico 2019

Variable	Predominant	Number	%
Age range	16-17	22	41.51
Scholarship	Finished high school	26	49.1
Civil status	Married	30	56.60
Biopsychosocial complications	Family rejection	43	81.13
School dropout	No	45	84.91
State of health	Good	29	54.72
Level of information on adolescent pregnancy	Low	41	77.36

Source: Clinical history

The data with the highest percentage were found among the age groups of pregnancies in adolescents from 17 to 19 years for 41, 51 %. This could be subject to factors that promote unplanned pregnancy in adolescence <sup>(11)</sup>. The results achieved do not differ from other studies consulted where the range between 17 and 19 years was the majority among the pregnant women included in their study samples <sup>(12, 13, 14)</sup>.

It is pertinent to point out that in this age range, biological and psychological immaturity in pregnant adolescents make follow-up more complex, while at the same time threatening a healthy product. In the opinion of the authors, these results are due to the tendency to initiate sexual relations early, as well as the growing social perception that initiating sexual relations before the age of 15 is normal.

In relation to the schooling variable, the highest figures were located in completed secondary school with 49, 1 %. In adolescents with low education there is a higher incidence of pregnancies, due to a lower perception of the risk of adolescent pregnancy, causes and consequences, non-use of contraceptive methods for family planning and a tendency to associate stable sexual relations and, often started early <sup>(15, 16, 17)</sup>. Researchers believe that educational improvement in women postpones maternity, due to the increase in the ability to obtain, analyze, and understand information about pregnancy, thus guaranteeing appropriate family planning.

56,60 % of those studied maintained a stable relationship, so married women prevailed in this study. These results coincided with those carried out by Vindell et al. <sup>(18)</sup>, where more than 60 % of the studied women maintained a stable relationship. Researchers such as Salvat et al. <sup>(19)</sup> found 73 % of those studied that did not maintain a stable marital union. It is considered that the largest proportion of adolescents live with their partners in a stable common-law union, which does not guarantee emotional stability and paternal and maternal responsibility for their children <sup>(20)</sup>.

In the author's opinion, the adolescents decided to accompany each other at an early age to start a family, encouraged by the possibility of economic independence from their parents, especially in rural communities. This generates a greater upward trend in pregnancies, which reveals failures in family planning.

Once the survey used to find out the level of information of adolescents about pregnancy at that age was applied, it was found that 77, 36 % had a low level of information. The lack of information about sexuality stands out among the causes of pregnancy in adolescence <sup>(21)</sup>. It should be noted that a majority of those studied do know how to prevent pregnancy at an early age, but they do not take into account the guidelines given.

These results are largely due to the insufficient link between the adolescent, family, school and community, when addressing health education on the subject of adolescent pregnancy and its reactive and proactive prevention. Health education at this stage of life plays a key role.

Family rejection was one of the biopsychosocial complications that most affected those studied in 81, 13 %. Other scholars point to biological factors as the most preponderant in their studies <sup>(22,23)</sup>. Biopsychosocial complications are mediated by biological, social, community and personal factors.

Family rejection generates an unfavorable psycho-emotional situation, which manifests itself more evidently in unplanned or unwanted pregnancies. This attitude causes rejection of the pregnancy and psychosomatic manifestations such as loss of appetite, sleep disturbances, indifferent attitude towards the well-being of the fetus, which places the family in a vulnerable situation.

School dropout exhibited low figures in the pregnant adolescents studied. In Ecuador, teenage pregnancies are the fourth cause of school dropout <sup>(24)</sup>. In the opinion of the author, school dropout among pregnant adolescents in Cuba is controlled in relation to the continuity of studies, as well as admissions to Maternity Homes and Hospitals.

In the pregnant women studied, the state of health was good in 29 of them, which represents 54, 72 %. To reach this result, they underwent an obstetric physical examination that included the following parameters: blood pressure, heart and respiratory rate, examination of each of the organ systems and apparatus, including speculum examination and nutritional assessment. All this information was recorded in her obstetric card or individual clinical history.

Although in the results obtained the state of health was good, it is considered necessary to address the possible complications that frequently appear during the development of the gestational period in an adolescent. Maternal mortality is 2 to 5 times higher at this stage of the life cycle than among women between the ages of 20 and 29, according to Castillo's findings <sup>(25)</sup>. There is a greater risk of caesarean section and puerperal infection in adolescents under 15 years of age, as well as a greater risk of episiotomy in adolescents, which demonstrates the vulnerability of adolescents in terms of obstetric and perinatal complications, such as such as preeclampsia, hemorrhage, and preterm labor <sup>(14)</sup>.

In addition to the maternal-perinatal complications associated with biological immaturity, having a child before the age of 20 can have a negative socioeconomic impact, and even last a lifetime. The consequences of a teenage pregnancy not only involve health problems, both for the mother and the child, it also entails economic difficulties that are usually the common denominator in many cases.

In the author's opinion, the good state of health of pregnant adolescents was due to the comprehensive care that they receive, guaranteed by the different health programs that have been developed in the country for decades. However, the growing increase in adolescent pregnancies is contradictory, which indicates that it is still necessary to implement educational strategies that lead to a planned pregnancy and with the least risk for the mother and the fruit of conception.

Despite the existence of programs aimed at managing adolescents such as Teen Circle, Family Planning Consultation and Preconceptional Risk Program, the issue of adolescent pregnancy prevention does not occupy a space of majority approach with this type of population, which was demonstrated when investigating the level of information of the study group on pregnancy in adolescence.

In the opinion of the authors, today's adolescents grow up surrounded by a culture where friends, television, movies, music, and magazines frequently transmit messages in which sexual relations are common, accepted, and sometimes expected, and generally offered in home, school or community, poor education on responsible sexual behavior and specific clear information on its consequences. Many times the responsibility of the pregnancy is directed to the females, this has to be seen from different points of view and also to direct the educational strategies to raise the knowledge in the males, giving them the participation they have in it.

It is necessary to review public health actions regarding the prevention of adolescent pregnancies and adopt health education programs that involve adolescents, the family, the school, and the community. These actions must have a reactive and proactive approach.

By way of conclusion, the proper characterization of pregnant adolescents at Jatibonico II Polyclinic facilitates the work aimed at promoting actions that improve their health status. The application of actions to prevent pregnancy in adolescence, where reactive and proactive types are included, will be able to achieve a pregnancy at the right time, taking into account biopsychosocial factors, which would guarantee optimal development for the future mother and her child.

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#### 4. Conclusion

The present investigation exposes the importance of the characterization of pregnant adolescents of the Polyclinic II of Jatibonico, to implement actions and activities that allow the proper management of pregnant women at this stage of life, improving their state of health.

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#### Compliance with ethical standards

##### *Author's contribution*

González Pérez RB and Mirabal Requena JC. : Conception or design of the work. Data collection. Data analysis and interpretation. Drafting the article. Final approval of the version to be published.

Rodríguez Mateo M, Alvarez Escobar B and Pacheco Concepcion JA. : Data analysis and interpretation. Critical revision of the article. Final approval of the version to be published.

##### *Disclosure of conflict of interest*

The authors declare that there are no conflicts of interest.

##### *Statement of informed consent*

Informed consent was obtained from all individual participants included in the study.

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