

Module 4: Adolescent pregnancy - Adolescent health and development with a particular focus on sexual and reproductive health - Assignment

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Is adolescent pregnancy a public health priority in Burkina Faso?

Adolescent pregnancy is a public health priority in Burkina Faso due to the following:

- Very high level of maternal mortality ratio of 700 per 100 000 live births (UNICEF, 2005) and perinatal mortality rate of 34 per 1000 live births. In 1998, the contribution of adolescent maternal mortality was 23.4%.
- Adolescents in Burkina Faso represent 24% of reproductive age women. According to the latest Demographic and Health Survey (DHS), almost one fourth (23%) of women aged 15-19 had already started their fertility life: 17% of girls at the age of 15-19 were already pregnant with at least their first child and the frequency of early pregnancy is highest between 15 and 17 years.
- Consequences of unwanted pregnancy among young women in school are clandestine abortions, refusal of young men to recognize their paternity, family problems and abandonment of school and/or the baby.
- There is higher rate of teenage pregnancy in the rural areas of the country and among illiterate girls. Although only 10% of Burkina Faso's population lives in its two largest cities, Ouagadougou and Bobo-Dioulasso, more than half of doctors, of midwives, and of pharmacists are located there, leaving the rest of the country severely underserved, this negatively impacting on the maternal and neonatal mortality rates. It is calculated that among mothers aged less than 20 years old about 38% did not consult anyone for prenatal care during their pregnancy.

References

- Burkina Faso. Enquête Démographique et de Santé 2003. Ministère de l'Économie et du Développement, Institut National de la Statistique et de la Démographie, ORC Macro; 2004.
- Weil O, Munz M, Tapsoba L. Addressing the reproductive health needs and rights of young people since ICPD: The contribution of UNFPA and IPPF. Burkina Faso country evaluation report; 2003.
- Countdown to 2015 decade report (2000–2010): taking stock of maternal, newborn and child survival. WHO, UNICEF; 2010.

Assignment story from: WHO, Teenage pregnancies cause many health, social problems

What are the three main factors that contributed to this?

Assuming that “this” in the question above refers to unwanted adolescent pregnancy in the case of a girl enrolled in school, the main reasons are:

- Little power of women/girls in their sexual relationships with men.
- Difficult access to quality reproductive health and sexual education and consequently very low level of knowledge of modern contraceptive methods among the youth population.
- Social pressures (the topic of sexuality is still taboo) in many communities and families.

What can be done by families and communities to prevent this happening to other girls?

- Eradicate the “shame” linked to sexuality and start talking openly about it in order to be able to prevent unwanted pregnancies.
- Empower women in their life and especially in their relationship with men in order to be able to prevent unwanted pregnancies.
- Support female primary and secondary education to empower women.
- Empower women against domestic sexual violence.

What can the Ministry of Health do to reorient the health care system to meet the needs of girls such as the one who story you have heard?

- Provide quality and easy to access reproductive health and sexual education.
- Provide norms and laws to protect women.
- Provide quality and easy to access ECPs and safe abortion services.
- Appropriately fight sexual violence.

Assignment document

1. [Camacho AV, Chandra-Mouli V. Adolescent pregnancy: a global perspective. Paper presented at: Training Course in Sexual and Reproductive Health Research; 2010 Sep 18; Geneva.](#)