PAA Abstract Submission

Title: Trends in adolescent sexual behaviors and reproductive outcomes in Central America between the 1990s and the turn of the century

Background and Purpose:

Despite recent global declines in early childbearing, adolescent fertility is a phenomenon that persists across populations. Early motherhood is widely recognized as having negative consequences both to the health of the young woman and her baby, as well as to their future economic, educational and social prospects. This risk is particularly salient in vulnerable regions, such as Central America, that has high levels of poverty and low access to resources.

Regionally, adolescent fertility is high among Central American countries, particularly Honduras, Guatemala, El Salvador and Nicaragua. The latest national health surveys from 2002-2005 indicate that birth rates among women ages 15-19 are119, 114, 104 and 102 per 1,000 women in Nicaragua, Guatemala El Salvador and Honduras, respectively, rates that are greater than regional averages for Latin America. Although many of these countries have seen declines in general fertility rates over time, the rate of childbearing among adolescents remains alarmingly high. The already low levels of socioeconomic status and health care among these populations are only further compounded by early childbearing, the burden of which warrants urgent attention.

The purpose of this study is to examine trends in sexual behavior and reproductive outcomes among adolescents within Honduras, Nicaragua, Guatemala and El Salvador from the early 1990s until the mid-2000s. First, we will provide a descriptive portrait of sexual and reproductive health in terms of specific factors such as age at sexual debut, prevalence of premarital sex, contraceptive use and childbearing (among others), for women ages 15-19 over multiple periods for each country. Sexual behavior and reproductive outcomes will then be examined statistically to identify a) which demographic variables are related to sexual behavior and reproductive outcomes, b) what changes in sexual behavior and reproductive outcomes have been significant over time, and c) what demographic and socioeconomic factors have contributed to trends in sexual and reproductive health.

Methods:

Three nationally representative health surveys from Honduras (ENSEF, 1991, 1996, 2001), Nicaragua (ENDESA 1992, 1998, 2001), Guatemala (ENSMI 1995, 1998, 2002) and El Salvador (ENSF 1993, 1998, 2002/03) during the decade spanning the early1990s until 2001/2002 were used for this study. Bivariate analyses were used to examine the relationships between reproductive health outcomes such as childbearing, contraceptive use and sexual timing and demographic characteristics (such as education, rural/urban status, marital status and socioeconomic status) for each country at each time point. Multivariate analyses were used to determine whether rates of childbearing, contraceptive use and sexual debut have changed over time, controlling for key demographic factors that represent differences in the population over time. One set of analyses treated contraceptive use and sexual timing as dependent variables, while another included them in the model as control variables, to examine the changes in childbearing for these proximate determinants. Intendedness of pregnancies and unmet need for family planning among adolescents were also examined.

Results:

Preliminary results indicate that rates of adolescent childbearing in the four Central American countries have seen modest declines over time, yet remain unusually high for the region (Table1). The average age at first marital union has also declined, while knowledge of contraceptives and use of contraceptives at first sexual contact have increased. Despite a decline in births to adolescents and improvements in certain adolescent sexual behaviors, the timing of first births remains virtually unchanged over time; nearly one fifth of women ages 15-19 reported having a birth before age 20 at the first and last time points for each survey. Although, as expected, the average age at first birth is consistently higher among more rural and impoverished adolescents, the rate of adolescent first births has persisted despite general improvements in education and increased urbanization across the populations over time. Concomitantly, the rate of mistimed/unwanted pregnancies among adolescents has increased in three of the four countries, which suggests a growing failure to meet family planning needs within these groups. Further analyses will examine the significance of the changes in sexual behavior and reproductive outcomes over time, as well as the specific factors associated with these trends. In particular, factors associated with age at first birth will be examined to help understand the stagnation in rates of adolescent first births.

Conclusions:

Sexual behavior and reproductive outcomes for adolescents ages15-19 in Central America are of considerable concern. Trends have shown that over the most recently studied decade, fertility among this group has declined in modest amounts and remains disconcertingly high. Although some changes in sexual behavior, such as age at first marriage and contraceptive knowledge have improved, the enduring high rates of early childbearing merit more rigorous and targeted study to identify strategies for interventions aimed at improving reproductive outcomes for this vulnerable population.

Table 1: Births per 1,000 women ages 15-19 by year and country

Country	Early 1990's	Mid 1990's	Early 2000s
El Salvador	124	116	104
Guatemala	126	117	114
Honduras	136	137	102
Nicaragua	158	130	119
Regional average*		85	80

* From the United Nations Population Division providing the average for the Latin American region.