Demographic and Behavioral Factors Associated With Adolescent Pregnancy in Cameroon

SUMMARY

Cameroon has one of the upper adolescent fertility rates in West and Central Africa. According to data collected in 2004 as part of the DHS, 22, 7% of adolescents (15-19-year-old) were mother of at least one child. 5, 7 % t of these women had not yet terminated their pregnancy. Adolescents who had ever been pregnant did not differ significantly from those who had not by demographic characteristics. Multiple logistic regression analysis identified seven factors associated with pregnancy: having had four or more sexual partners; not having used contraceptives at first intercourse; ever use of less-effective contraceptive methods; having used illicit drugs during the last 30 days; living apart from one's parents; recently experiencing stress; and perceiving a lack of future prospects.

TEXT

The debate over adolescent pregnancy in less developed countries has evolved continuously over the past 60 years. Widespread premarital sexual activity among adolescents has led to the development of contraceptive education and services tailored to their needs. More recently, AIDS prevention has given impetus to condom use, adding disease prevention to pregnancy, prevention and modifying young people's contraceptive responsibilities.

In the Developing countries, adolescent fertility and pregnancy rates have been consistently high. This finding suggested that the availability of contraceptives and of sexual and contraceptive education were more decisive factors than the rate of sexual exposure. Although many studies have focused on the psychosocial and behavioral correlates of adolescent pregnancy in developed countries, relatively few have been conducted in African countries.

Fertility and pregnancy rates among African adolescents continue to be far high than comparable rates among U.S. adolescents. In 1990, for example, the adolescent fertility rate was 53.6 births per 1,000 15-19-year-olds in the United States, 33.1 per 1,000 in the United Kingdom, 14.1 in Sweden, 9.2 in France and 6.4 in the Netherlands.[4] The adolescent pregnancy rate--the rate of live births, miscarriages and stillbirths plus induced abortions--was 92 pregnancies per 1,000 15-19-year-old women in the United States, 65 per 1,000 in England and Wales, 43 per 1,000 in France and 14 per 1,000 in the Netherlands.[5]

Cameroon's adolescent fertility rate of 138 births per 1,000 women aged 15-19 is the higher in Central Africa The country's adolescent pregnancy rate, however, is difficult to assess accurately; uniform national statistics on legal abortion are unreliable because of wide variations in the local application of the law and in public health data among the regions of Cameroon.

Since age at first intercourse is no different in Cameroon than in the rest of Africa, the factors that might explain Cameroon adolescents' exceptionally high fertility include the

lack of school-based sex education, and a national AIDS campaign promoting condom us in scholl; the broad availability of contraceptives, including postcoital methods, through general practitioners offices and family planning clinics; and access to abortion services.[7]

Cameroonian adolescents who give birth before age 20 are more likely than other adolescents to be married and not attending school.[8] In Cameroon, schooling is mandatory until age 15, but most adolescents are enrolled in high school or a trade or vocational school until they are 20 years old. Among 15-19-year olds, about 15% choose not to attend post mandatory school. According to the 1987 census, the proportion of 15-19-year-old women who had leave out school was much higher among (27% vs. 14%). The total proportion of Cameroonian adolescents who have married is quite low--just 1.4%, mostly in the northern regions of the country who marry at ages 15 or 16..

In this study, we seek to describe the general characteristics of 15-20-year-old women who have began their sexual activity. We then analyze the relationships between social, demographic and lifestyle variables, sexual behavior characteristics and pregnancy history.

Methods

This article is based on data DHS 2004. The bivariate analysis used the chi-square test to yield relative risks with 95% confidence intervals. We used a standard statistical software package (SPSS) to perform a forward stepwise logistic regression, which included the background and situational variables that were significantly associated with the respondent's pregnancy history. Because the number of adolescents who had ever been pregnant was quite small (N=85), we reduced the number of parameters to the minimum for the best-fitted model. As a result, we excluded the region variable, because it was mediated by the age at first intercourse variable.

Results

Fifty-six percent of these young women had ever had sexual intercourse (N=2,684), and this proportion increased from 27% at age 15 to 74% at age 20. Among the 1,726 sexually experienced women for whom pregnancy data are available, 85 had ever been pregnant (4.8%, confidence interval of 3.8-5.8); and 80% of these adolescents said they had terminated the pregnancy. The proportion of sexually experienced adolescents who had ever been pregnant did not differ significantly by age-group (4.2% of 15-17-year-olds vs. 5.4% of 18-19-year-olds), by type of residence (4.7% of rural or semi-rural vs. 5.0% of urban) or by nationality (4.4% of adolescents vs. 6.7% of adolescents).

BivariateAnalysis

Among sexually experienced women, the social and demographic characteristics of young women who had been pregnant were similar to those of women who had not There were no important differences between the two groups by age distribution, socioeconomic status (measured by the father's educational attainment), parents' marital status or type of school. However, a significantly higher proportion of ever-pregnant adolescents than never-pregnant adolescents lived without their parents (17% vs. 8%, p=.005). Moreover, ever-pregnant adolescents were significantly more likely to live in big cities than were the never-pregnant adolescents (67% vs. 39%, p<.005).