FIGO XXII • RIO WORLD CONGRESS OF GYNECOLOGY AND OBSTETRICS

Challenges and opportunities in preventing first-pregnancies among adolescents: social determinants of contraceptive behavior.

Session: The challenge of preventing unintended pregnancies: sharing best practices

Dr. Raffaela Schiavon E.
Independent Consultant
Mexico

FIGO XXII · RIO WORLD CONGRESS OF GYNECOLOGY AND OBSTETRICS

14-19 OCTUBRE 2018
RIOCENTRO | RIO DE JANEIRO | BRASIL
www.figo2018.org

Declaration of Good Standing and Conflict of Interest Disclosure

My presentation complies with FIGO's policy for declaration of good standing and conflict of interest disclosure;
I do not have a financial interest in any product for service related to my presentation;

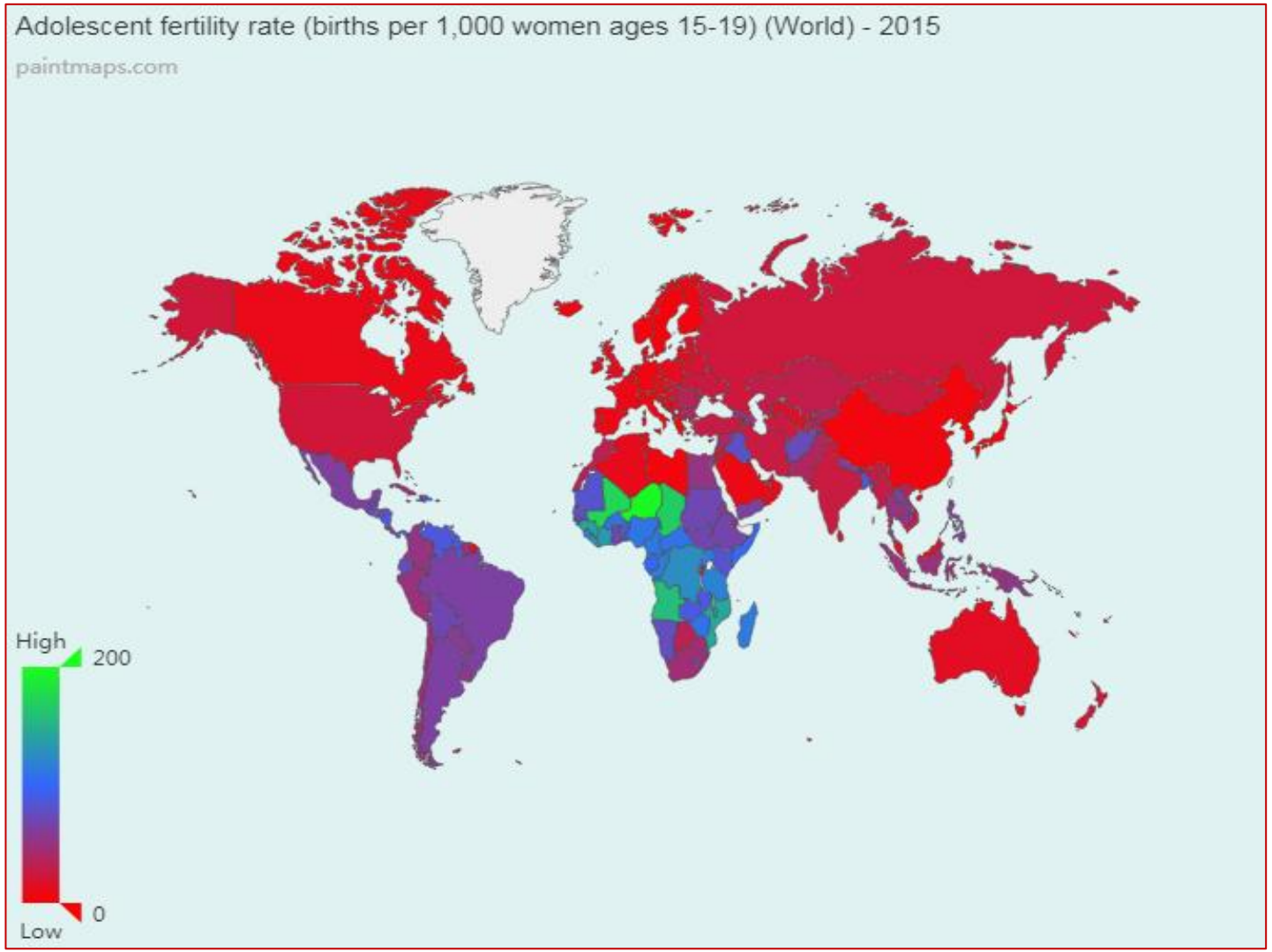
My participation at this Congress
has been supported by: Merck Sharp & Dohme (MSD)

Learning objectives

1) To review the situation of Early Unintended Pregnancy (EUnP) and its social determinants
2) To review best evidence-based practices to reduce EUnP
3) To analyze implementation strategies and public policies in sexual and reproductive health.

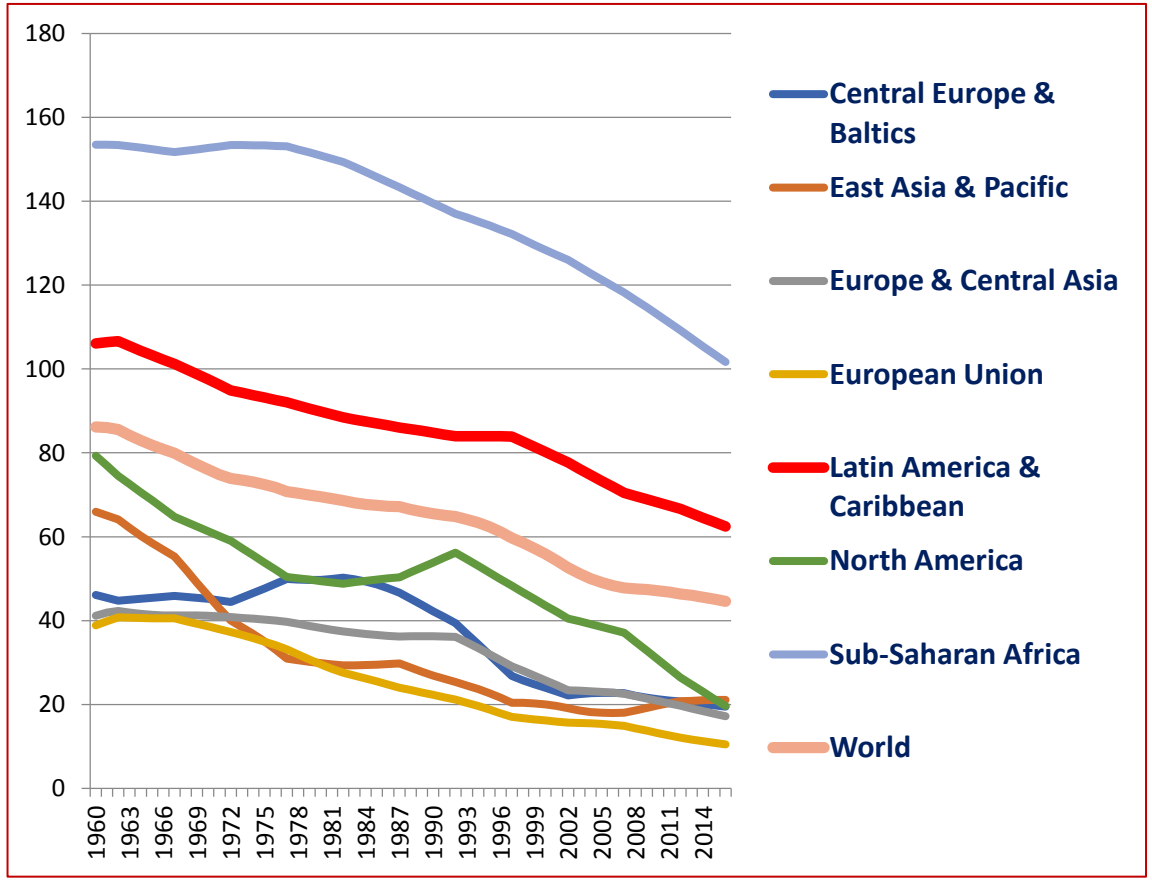
Adolescent Fertility Rate, 2015

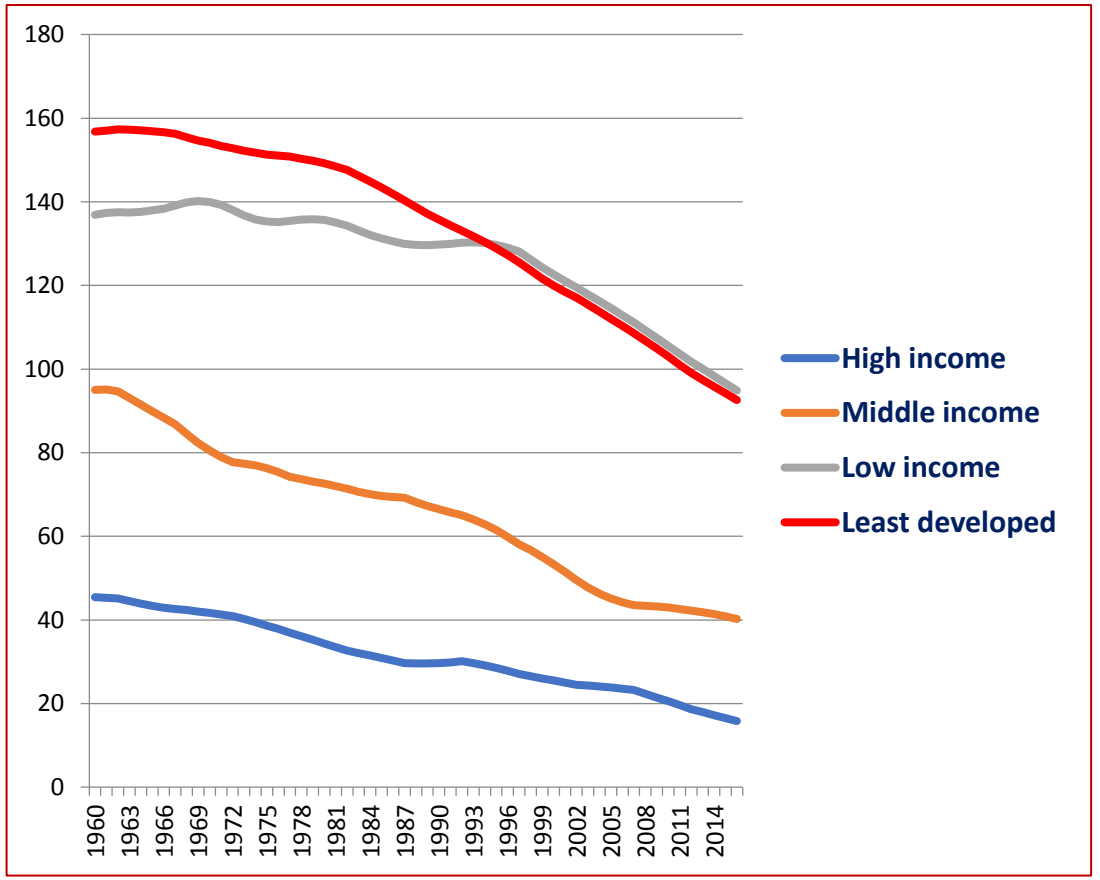
Annually, approximately **16 million** adolescent girls (15 to 19 years) and **2.5 million** girls under 15 years give birth in developing regions.



Darroch J, et al. Adding it up: Costs and benefits of meeting the contraceptive needs of adolescents. New York: Guttmacher Institute; 2016.
UNFPA. Girlhood, not motherhood: Preventing adolescent pregnancy. New York: UNFPA; 2015.

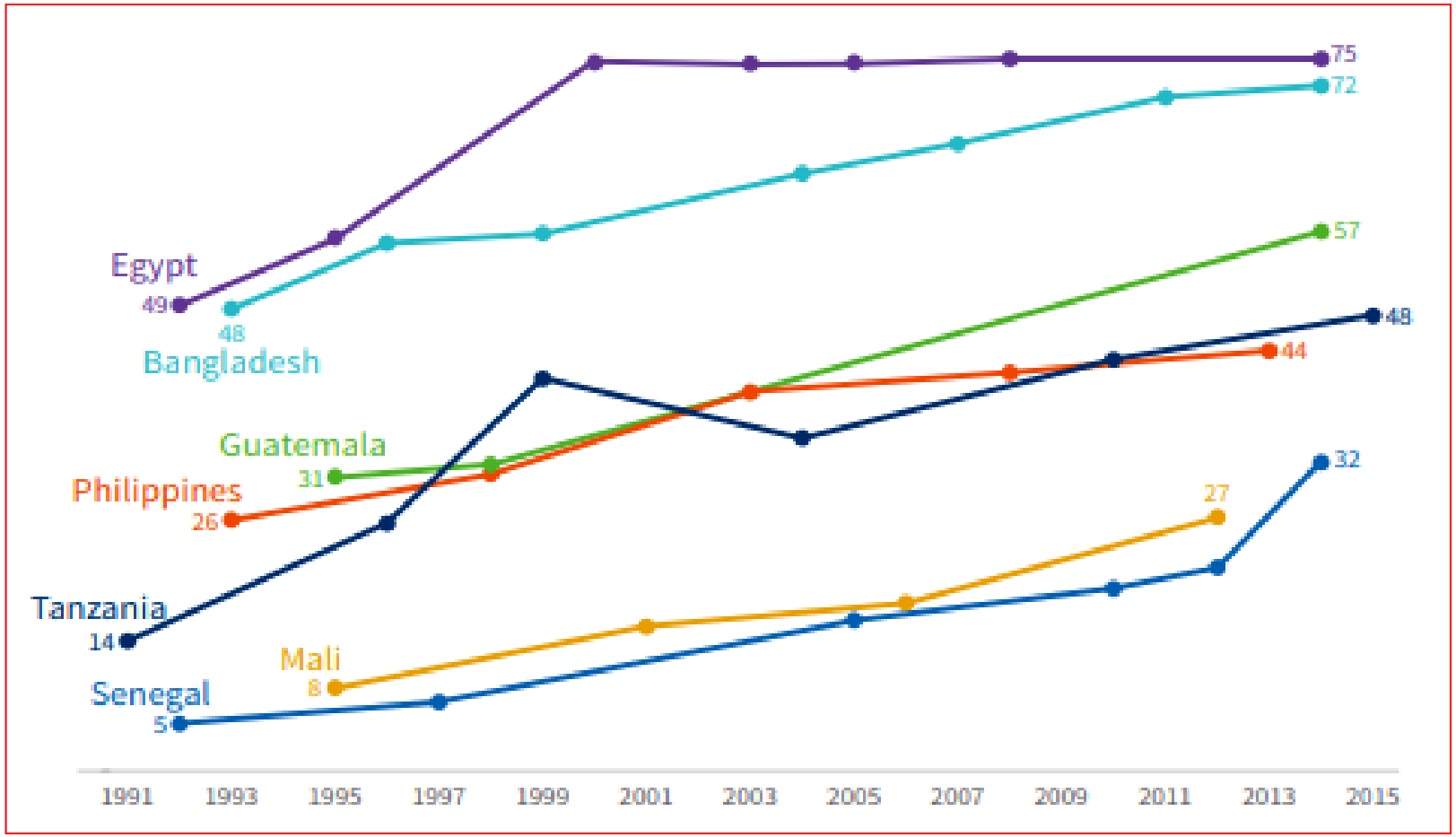
Adolescent Fertility Rate by regions and economic development, 2000-2016





15-19 ys. Source: Personal elaboration, World Development Indicators, 28/8/2018

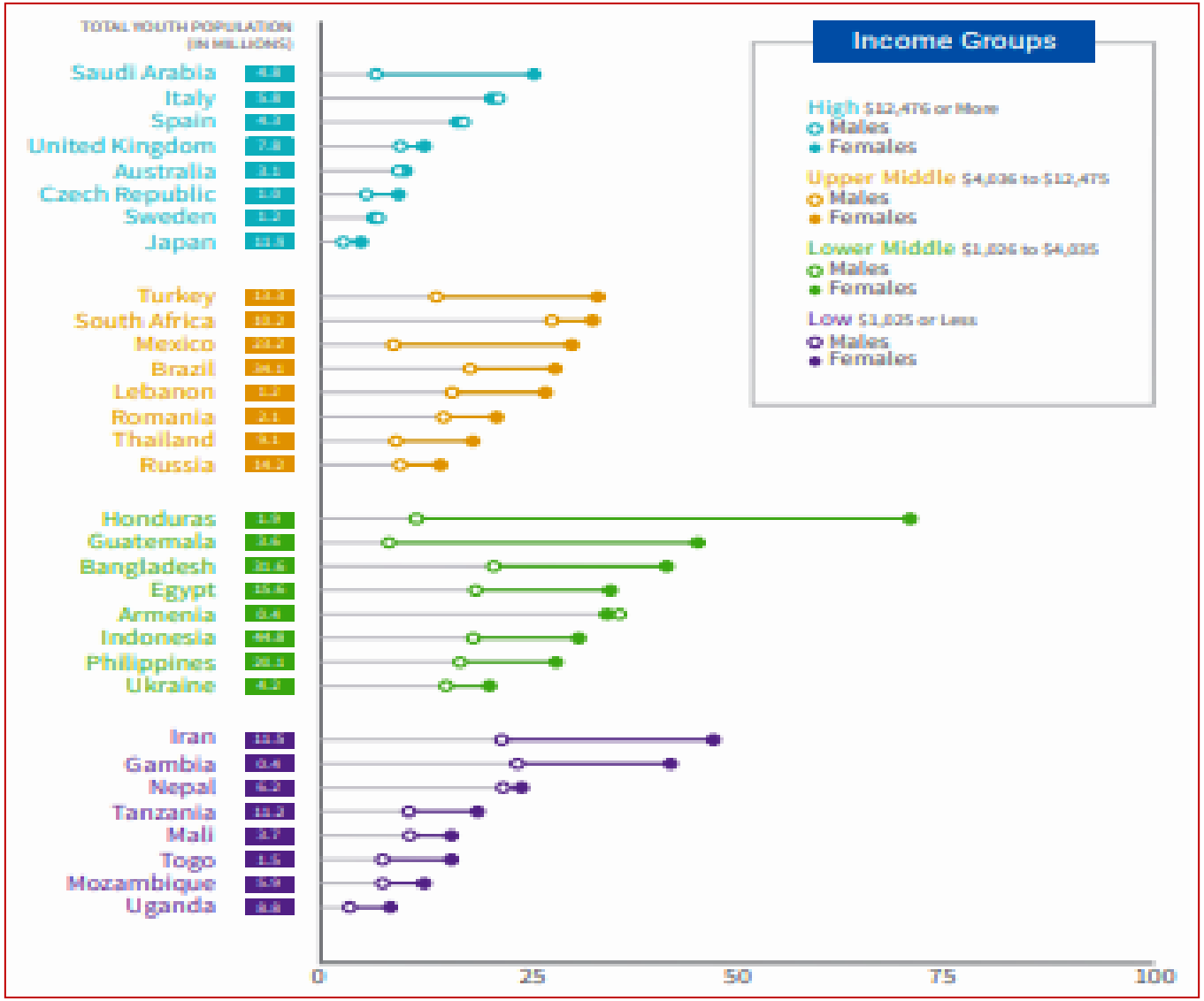
Unmet contraceptive needs among 15-24 ys. Women by countries, 2017



2017 World Population Data Sheet

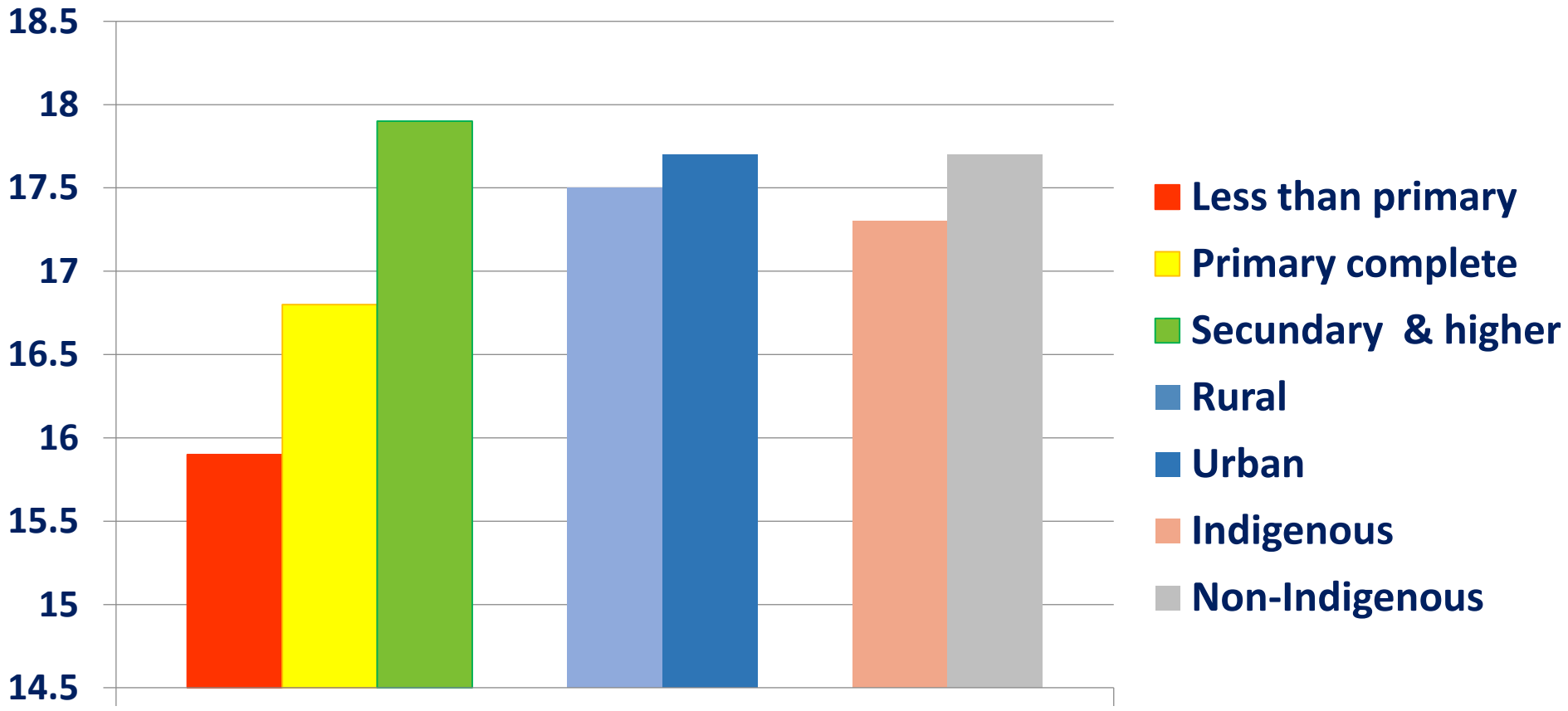
Good or Bad News?

Percent of Youth Ages 15-24 NEET -Not in Education, Employment, or Training- by Gender and Income Group



2017 World Population Data Sheet

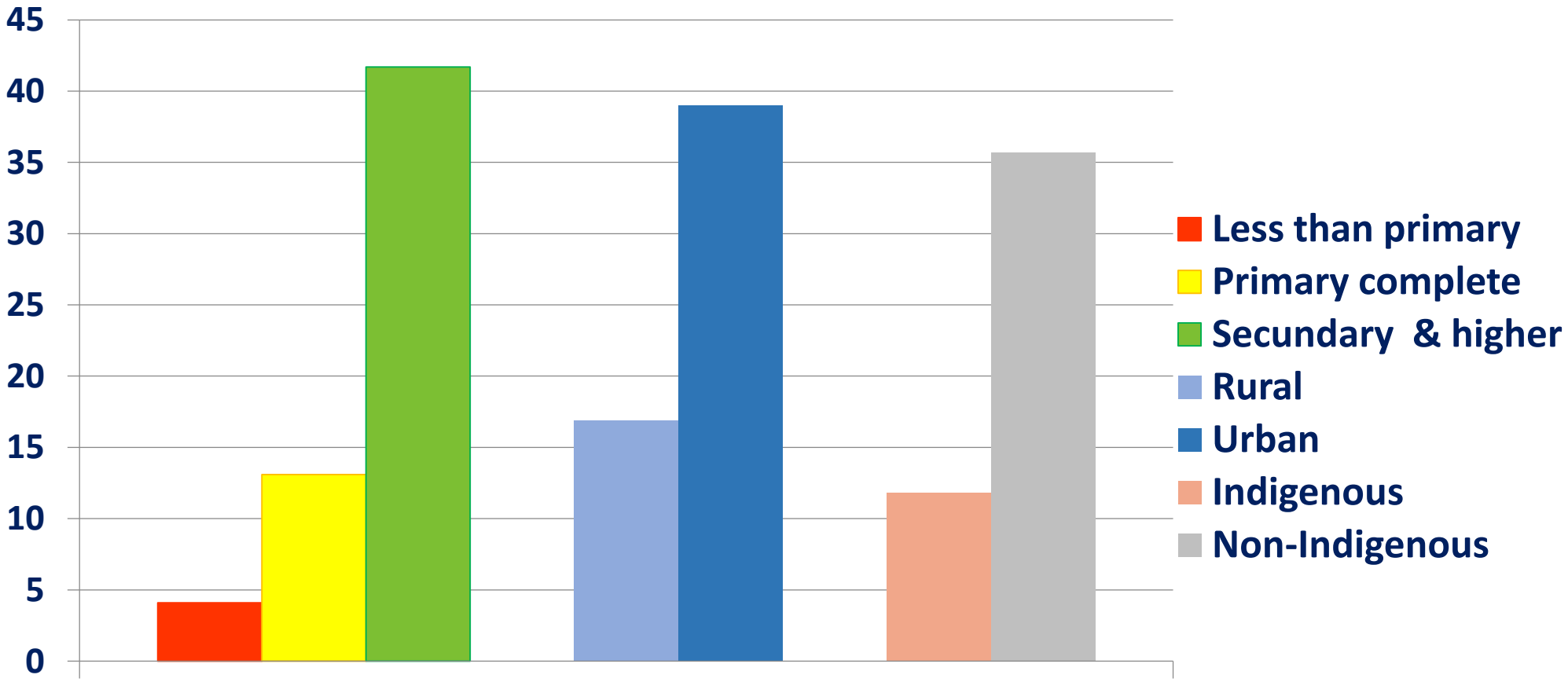
The situation of Early Unintended Pregnancy (EUnP): the case of Mexico



Age at first Sex (ys)

Source: Personal elaboration, Based of ENADID 2014

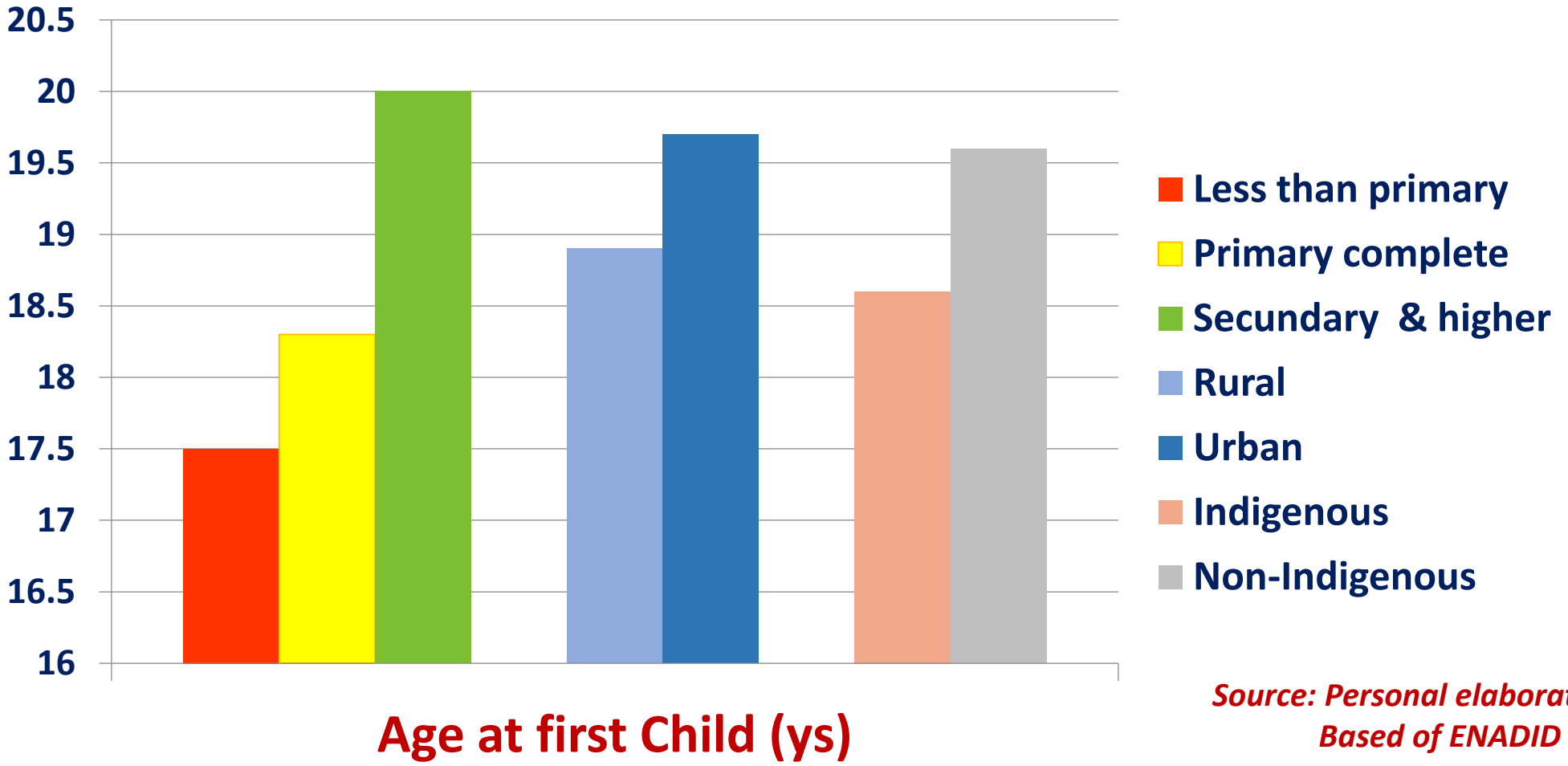
The situation of Early Unintended Pregnancy (EUnP): the case of Mexico



Contraceptives use at 1st Sex (%)

Source: Personal elaboration, Based of ENADID 2014

The situation of Early Unintended Pregnancy (EUnP): the case of Mexico



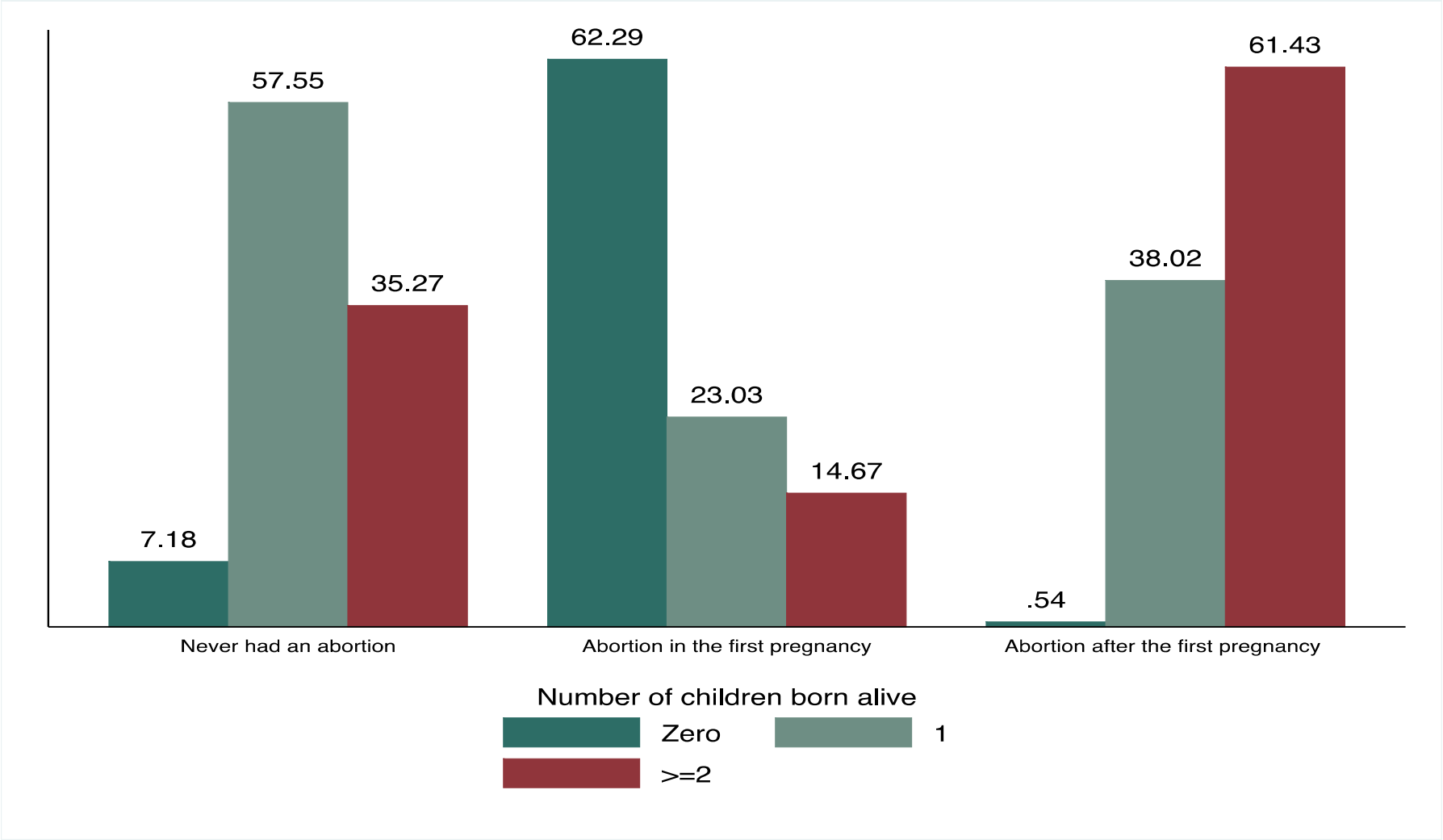
Source: Personal elaboration, Based of ENADID 2014

The situation of Early Unintended Pregnancy (EUnP)

Classical social determinants of health (socio-economic status, schooling, residence, ethnicity) ”regulate” adolescents sexual and reproductive transitions.

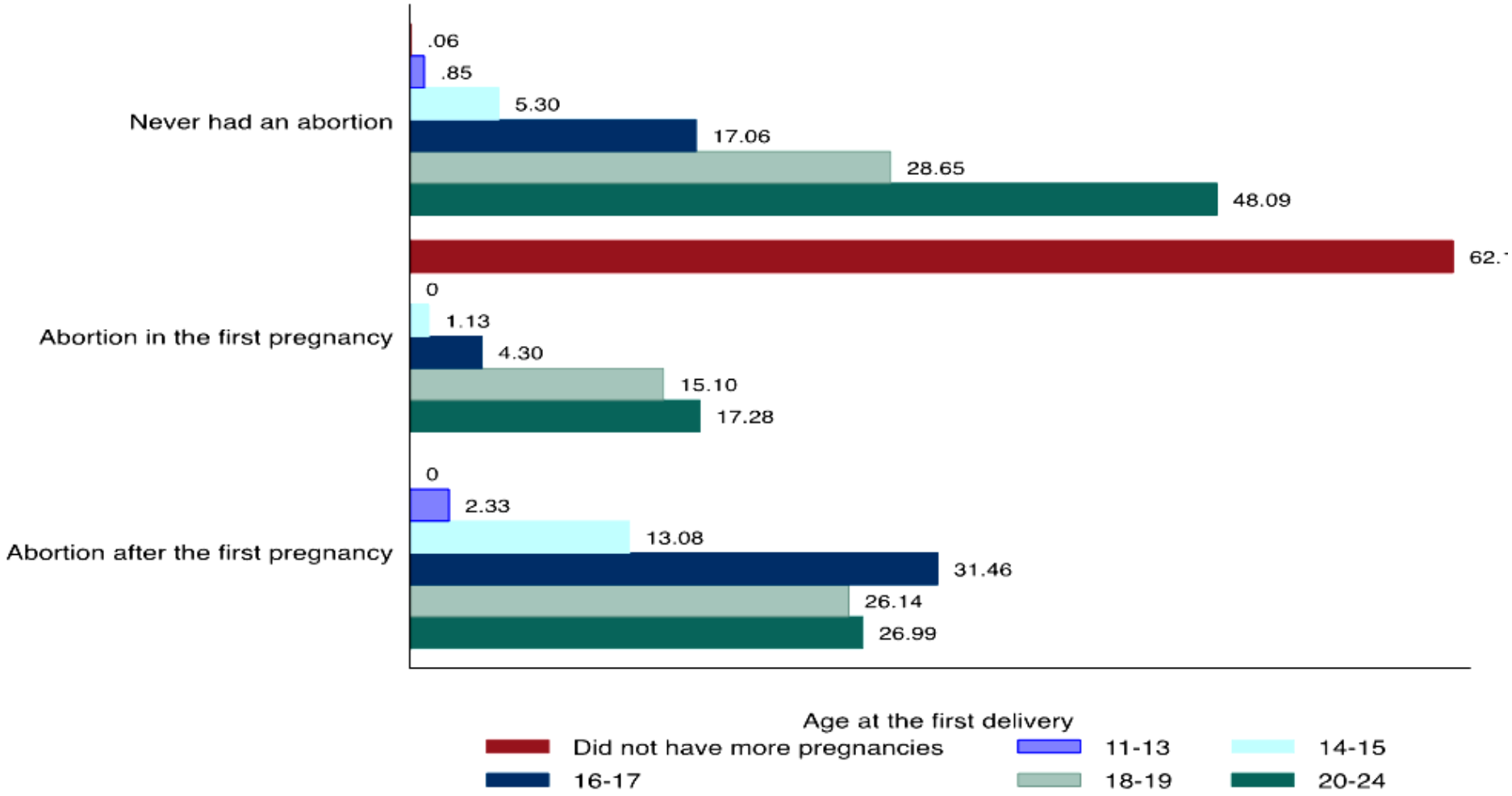
What else are we missing?

The missing factors in EUnP: The role of abortion



Number of children born alive disaggregated by abortion experience, among women who ever had a pregnancy (n=1,992 N= 2,682,286)

The missing factors in EUnP: The role of abortion



Age of the women at the first delivery, among women who ever had a pregnancy (n=1,992 N= 2,682,286)

The missing factors in EUnP: The role of abortion

Abortion of a first teen pregnancy is associated with delayed age at first child and lower number of children by 20-24 ys. of age.

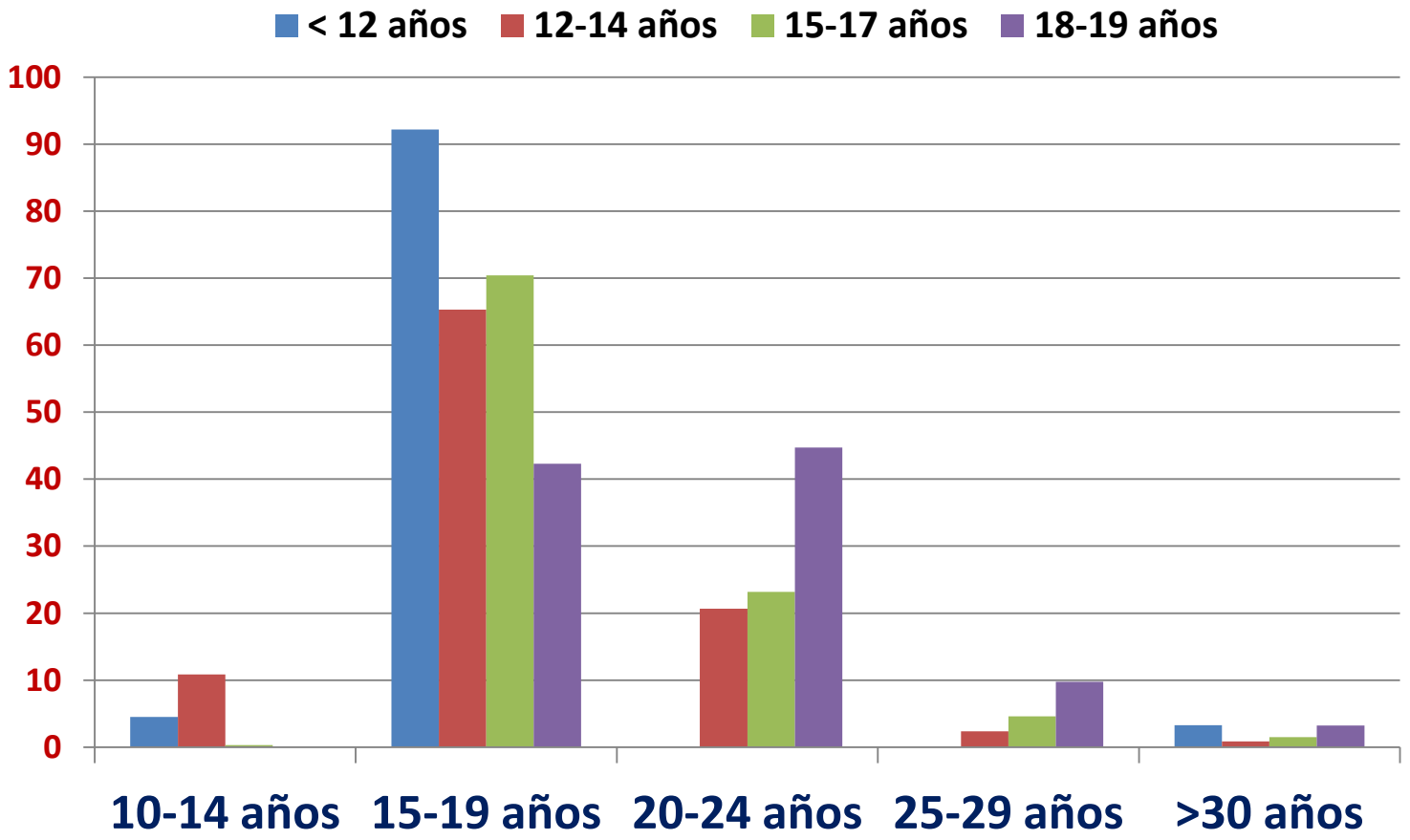
Abortion appears to be an important mean to limit early fertility, especially when it ends a first reproductive experience among adolescents and young women.

Around the world, the proportion of teen pregnancies that end in abortion range from 17% in Slovakia to 69% in Sweden; they are higher were teen pregnancy rates are highest.

ENFaDEA 2017, Preliminary analysis, Saavedra Avendaño B, Schiavon R, Darney B.G. Paper presented at PAA 2019.
Adolescent Pregnancy, Birth, and Abortion Rates Across Countries: Levels and Recent Trends Sedgh G. et al. Guttmacher Institute. J Adolesc. Health 2015, 56 .

The missing factors in EUnP: The Age of partner

The missing factors in EUnP: The Age of partner at first sex

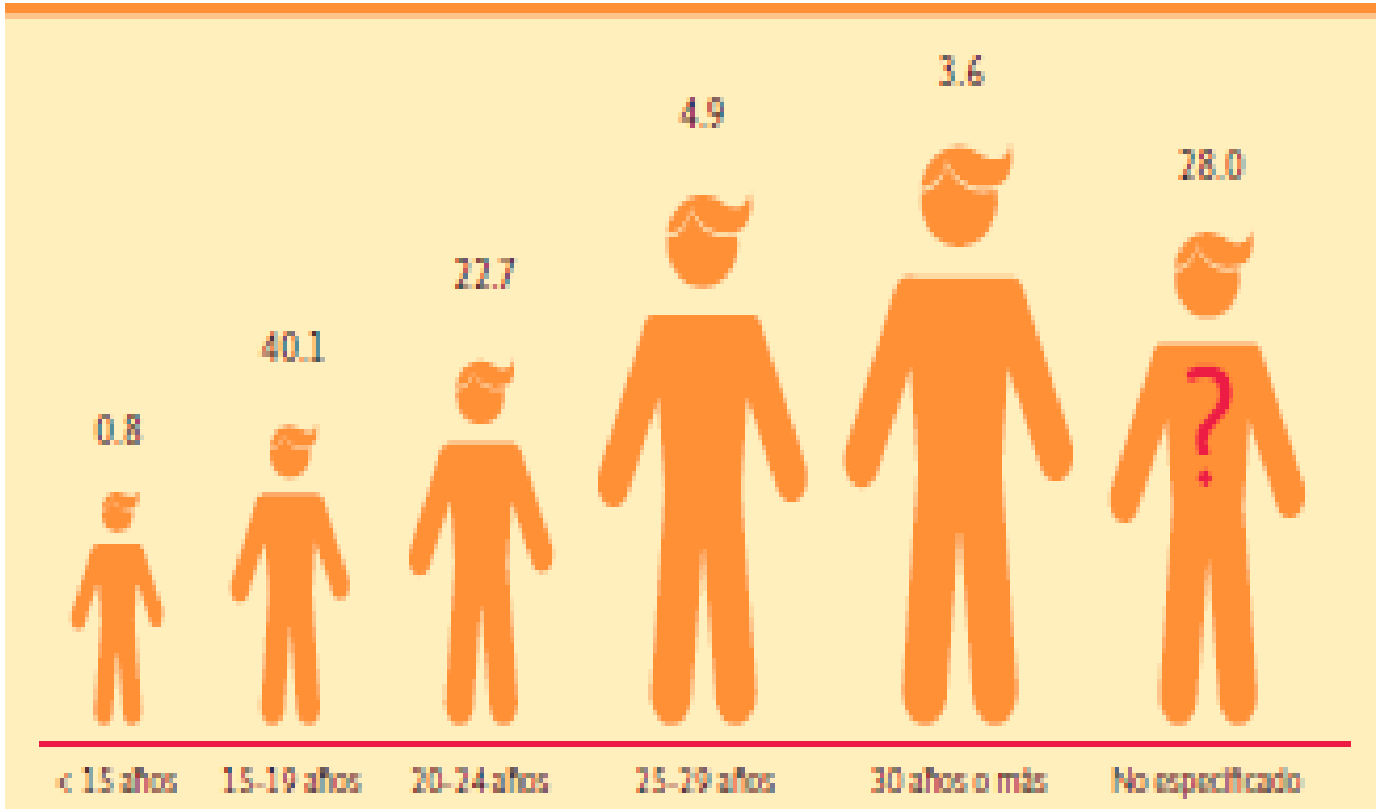


In 2012, in Mexico:

- 92% of sex partners to teens <12 ys. were 15-19 ys; 3.3% were >30 ys.
- 65% of sex partners to teens 12-14 ys. were 15-19 ys; 24% were >20 ys.

Source: ENSANUT 2012, Analysis by Ipas Mexico, 2015

The missing factors in EUnP: The Age of partner at first child



In 2016, in Mexico:

- 0.8% of fathers to <15 ys. mothers were their same age
- 41% were teens
- 22.7% were 20-29 ys.
- 3.6% were > 30 ys.
- 28% were unknown.

Source: CONAPO 2018

The missing factors in EUnP: The role of sexual violence

SEXUA L VIOLENCE IN CHILDREN AND ADOLESCENTS

17 million in 38 low-middle income countries reported forced intercourse during their childhood.

2.5 million in 28 European countries reported sexual abuse before 15 ys. of age.

15 million 15-19 ys. old in the world have been victims of forced sex sometimes in their lives; 9 million of them in the previous year.

9 out of 10 adolescents who reported forced sex were victims of a relative, neighbour or somebody known to them.

Only 1% of them searched professional health.

Source: UNICEF 2015

The missing factors in EUnP: The role of sexual violence

Sexual and physical abuse are associated with increased risk of adolescent pregnancy; association with emotional abuse and neglect is weaker.

Sexual Abuse:	OR : 2.06
Physical Abuse:	OR : 1.48
Sexual AND Physical Abuse:	OR : **3.83**

Association Between Abuse History and Adolescent Pregnancy: A Meta-analysis. Madigan S et al. J. Adolesc. Health 2014, 55(2). DOI: https://doi.org/10.1016/j.jadohealth.2014.05.002

The missing factors in EUnP: The role of sexual violence

Sexual, as well as wider family and gender violence, is a common cause of early intercourse, early union and early pregnancy.

Existing socio-cultural norms, attitudes and practices continue to "normalize" sexual relationships, unions and pregnancies in children and adolescents due to significantly older male partners.

Such normalization is inscribed in societies, communities, families as well as girls and adolescents themselves, who are often unable to recognize the abuse.

Best evidence-based practices to reduce EUnP

Enabling Environment	Service Delivery	Social and Behavior Change
Enabling Environment HIPs address systemic barriers that affect an individual's ability to access family planning information and services.	Service Delivery HIPs improve the availability, accessibility, acceptability, and quality of family planning services.	Social and Behavior Change HIPs influence knowledge, beliefs, behaviors, and social norms associated with family planning.

HIP Enhancing practices and technologies, that can intensify the impact of HIP, include:

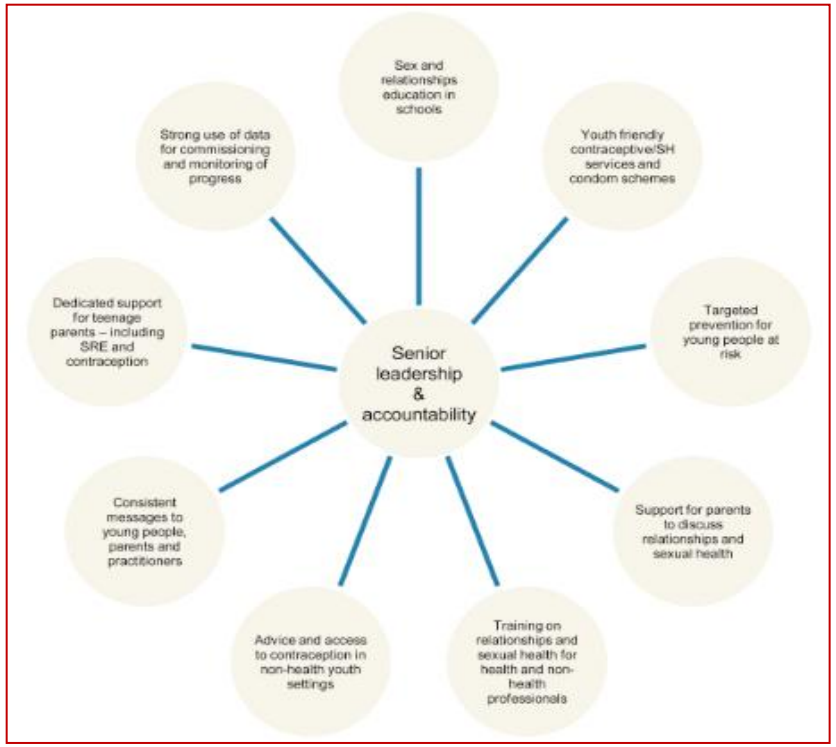
Adolescent-Friendly Contraceptive Services

Digital health technologies in FP

Best evidence-based practices to reduce EUnP: Lessons Learnt, UK 1999-2010

Key attributes (UK):

- Political leadership and champions
- Technical consensus about an appropriate public health approach
- Innovation available at an affordable price & delivered via effective delivery systems
- Good management in the field
- Predictable and adequate resources
- Strong partnerships
- Effective use of information

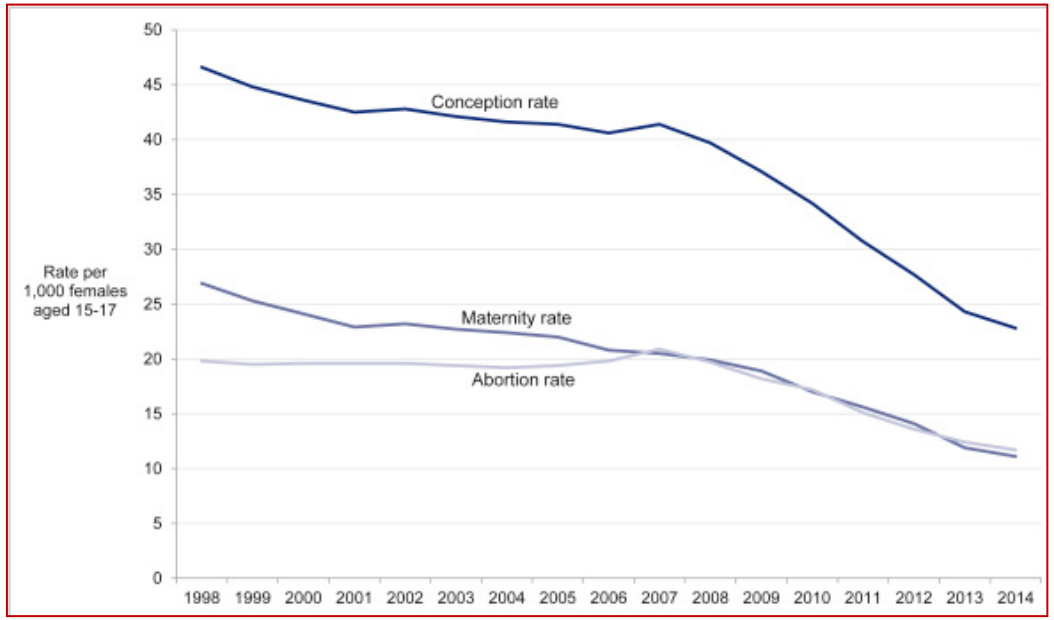


Hadley A et al. Implementing the United Kingdom Government's 10-Year Teenage Pregnancy Strategy for England (1999–2010): Applicable Lessons for Other Countries, J Adolesc. Health 2016 59 (1)

Best evidence-based practices to reduce EUnP: Lessons Learnt, UK 1999-2010

- During the initial intervention, **Abortion Rates** contributed substantially to the declining Maternity Rates.

- Abortion Rates subsequently plateaued; **Contraception Rates** increased and contributed to declining Conception AND Maternity Rates.



Hadley A et al. Implementing the United Kingdom Government's 10-Year Teenage Pregnancy Strategy for England (1999–2010): Applicable Lessons for Other Countries, J Adolesc. Health 2016 59 (1)

Implementation strategies in public policies in adolescents SRH

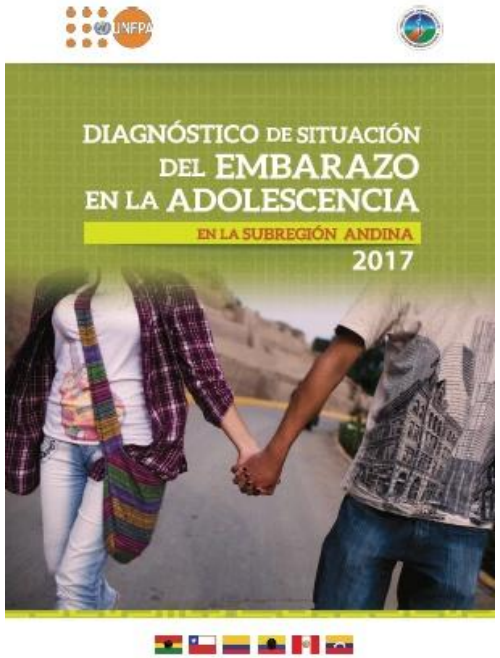
Success stories:

- Estonia
- Mozambique
- Colombia

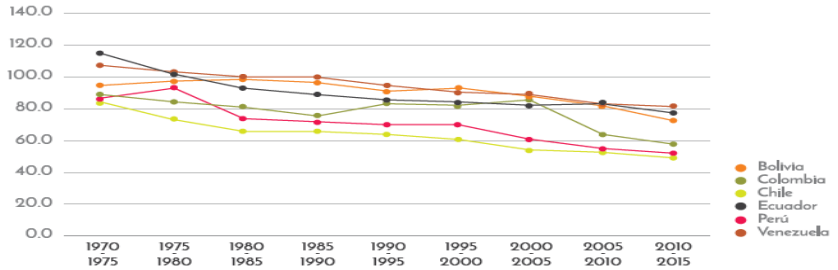
Ongoing Strategies:

- Argentina
- Andean Region:

Bolivia, Chile,
Ecuador, Peru, Venezuela

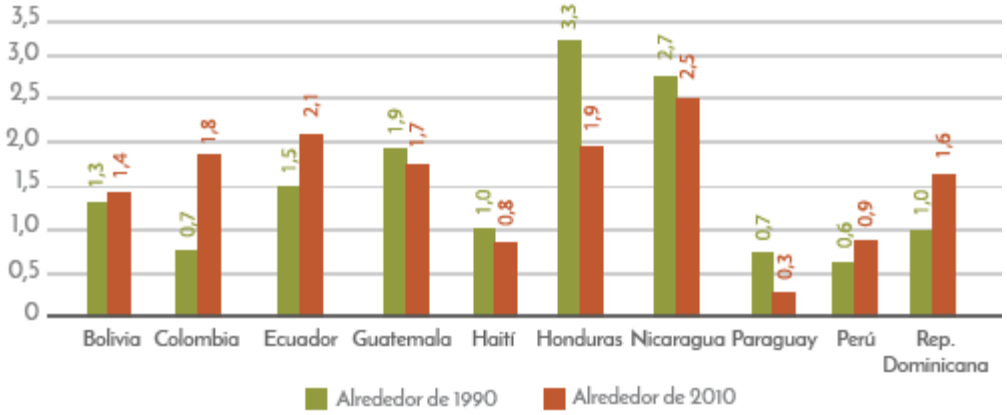


15-19 ys. Fertility Rates



Fuente: United Nations, Department of Economic and Social Affairs, Population Division (2015). World Population Prospects: The 2015 Revision, custom data acquired via website.

<15 ys. Fertility rates

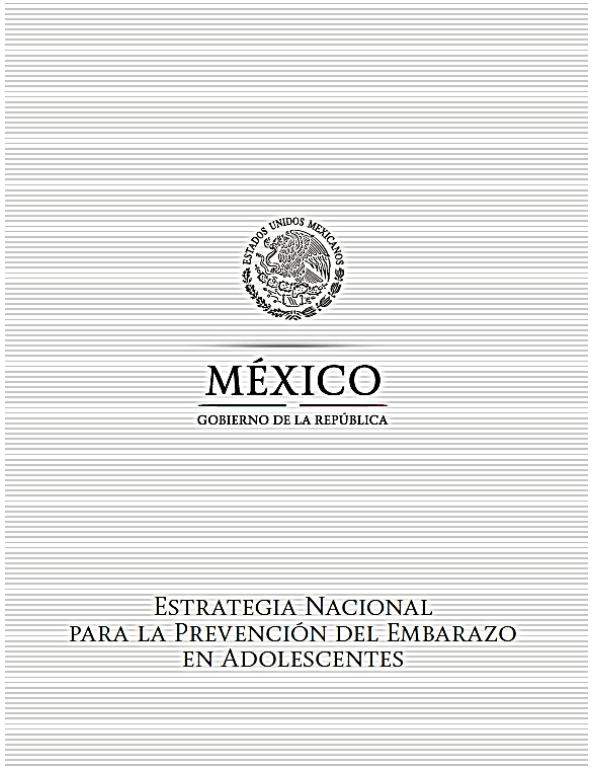


Implementation strategies in public policies in adolescents SRH

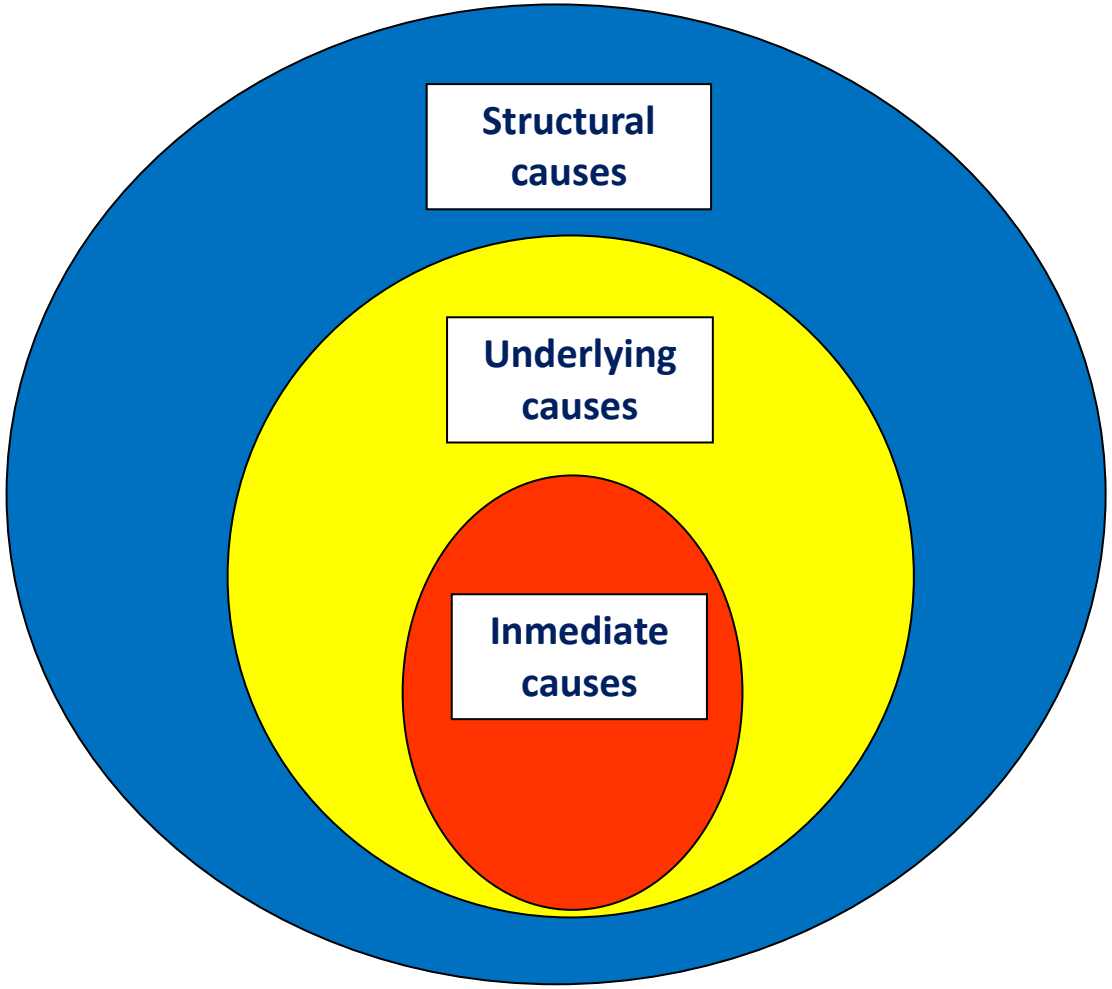
ENAPEA 2015-2030

National Public Policy:

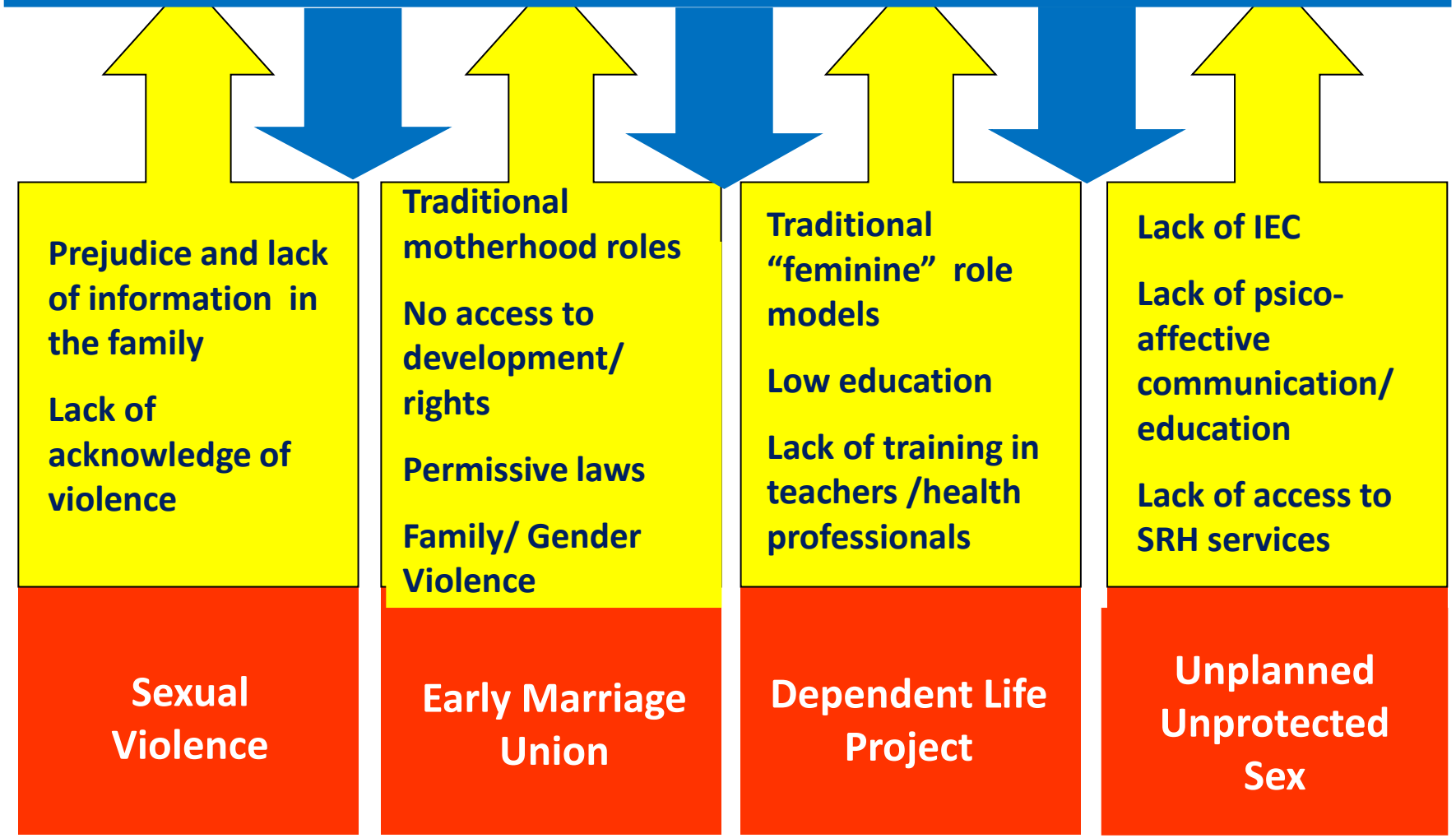
- trans-administrations
- intersectorial
- with median and long terms goals
- with differential strategies for specific age groups



Causes of VERY early unintended pregnancy (EUnP): ENAPEA, an ecological model



Socio-economic, gender and age inequalities
Ambiguous legal and normative framework ; Lack of respect for lay state
Impunity / lack of implementation of laws
Adult-centric culture/lack of child and adolescent rights culture
Fragmentation of health system/Lack of universal access



Key Messages

1) We need robust information systems on SRH Indicators, that include early adolescents (10-15 years), age at different transitions (1st Sex, 1st Marriage/Union, 1st Pregnancy and 1st Child) AND age of partners.
2) Public Policies must follow evidence-based best practices, with ALL the components, to address the multifactorial causes of EUnP.
3) National policies are key, but local implementation is essential (in provinces, municipalities and communities).
4) Public Policies and interventions must focus differently to the different causes of early/very early pregnancy: i.e. unplanned *vs*. forced sex.
5) In all cases, a wide range of effective contraceptives, including EC, and safe and legal abortion should be provided to all girls and adolescents in need.

FIGO
XXII • RIO
WORLD CONGRESS
OF GYNECOLOGY
AND OBSTETRICS

Challenges and opportunities in preventing first-pregnancies among adolescents: social determinants of contraceptive behavior.

Thank you!

schiavonraffaela1@gmail.com