

Adolescent pregnancy

fact sheet

Adolescence is a time of opportunity during which a range of actions can be taken to set the stage for healthy adulthood.



Key facts

- ▶ About 16 million adolescent girls give birth every year – most in low- and middle-income countries.
- ▶ An estimated three million girls aged 15–19 undergo unsafe abortions every year.
- ▶ In low- and middle-income countries, complications from pregnancy and childbirth are a leading cause of death among girls aged 15–19 years.
- ▶ Stillbirths and newborn deaths are 50% higher among infants of adolescent mothers than among infants of women aged 20–29 years.
- ▶ Infants of adolescent mothers are more likely to have low birth weight.

Overview

About 16 million girls aged 15 to 19 years and two million girls under the age of 15 give birth every year. Worldwide, one in five girls has given birth by the age of 18. In the poorest regions of the world, this figure rises to over one in three girls.

Almost all adolescent births – about 95% – occur in low- and middle-income countries. Within countries, adolescent births are more likely to occur among poor, less educated and rural populations.

The causes

Several factors contribute to adolescent births.

In many societies, girls may be under pressure to marry and bear children early, or they may have limited educational and employment prospects.

In low- and middle-income countries, over 30% of girls marry before they are 18 years of age; around 14% before the age of 15. Moreover, married adolescents are likely to become pregnant and give birth in accordance with social norms. Education, on the other hand, is a major protective factor for early pregnancy: the more years of schooling, the fewer early pregnancies. Birth rates among women with low education are higher than for those with secondary or tertiary education.

Some adolescents do not know how to avoid becoming pregnant, or are unable to obtain contraceptives. However, even where contraceptives are widely available, sexually active adolescents are less likely to use contraceptives

than adults. In Latin America, Europe and Asia only 42–68% of adolescents who are married or in partnerships use contraceptives. In Africa the rate ranges from 3–49%.

There is a lack of sexuality education in many countries. A global coverage measure related to sexuality education estimates that only 36% of young men and 24% of young women aged 15–24 in low- and middle-income countries have comprehensive and correct knowledge of how to prevent HIV.

In some situations, adolescent girls may be unable to refuse sex. Sexual violence is widespread and particularly affects adolescent girls. More than one third of girls in some countries report that their first sexual encounter was coerced.

The consequences

Pregnant adolescents are more likely than adults to have unsafe abortions. An estimated three million unsafe abortions occur globally every year among girls aged 15–19 years. Unsafe abortions contribute substantially to lasting health problems and maternal deaths.

Having babies during adolescence has serious consequences for the health of the girl and her infant, especially in areas with weak health systems. In some countries, adolescents are less likely than adults to obtain skilled care before, during and after childbirth.

Complications from pregnancy and childbirth are the leading cause of death among girls aged 15–19 years in many low- and middle-income countries. Stillbirths and newborn deaths are 50% higher among infants born to adolescent mothers than among those born to mothers aged 20–29 years. Infants of adolescent mothers are also more likely to have low birth weight, which can have a long-term impact on their health and development.

Global context

Adolescent pregnancy is a major contributor to maternal and child mortality, and to the vicious cycle of ill-health and poverty. *The Global Strategy for Women's and Children's health*, launched by the United Nations Secretary-General in 2010, stresses the importance of addressing the health and welfare of adolescent girls in order to achieve the fifth Millennium Development Goal on maternal mortality reduction.

WHO response

In May 2011, the World Health Assembly adopted a resolution urging Member States to accelerate actions to improve the health of young people. It included these specific measures:

- reviewing and revising policies to protect young people from early child-bearing;
- providing access to contraception and reproductive health care services; and
- promoting access to accurate information on sexual and reproductive health.

WHO published guidelines on *Preventing early pregnancy and poor reproductive outcomes among adolescents in developing countries*. Prepared in partnership with the United Nations Population Fund (UNFPA), the guidelines were based on a systematic review of the existing research as well as consultation with policy-makers, programme managers and front-line health workers. They contain evidence-based recommendations on actions that countries can take, targeting six key objectives:

- reducing marriage before the age of 18;
- creating understanding and support to reduce pregnancy before the age of 20;
- increasing the use of contraception by adolescents at risk of unintended pregnancy;
- reducing coerced sex among adolescents;
- reducing unsafe abortion among adolescents;
- increasing the use of skilled antenatal, childbirth and postnatal care among adolescents.

In addition to calling for action to prevent adolescent pregnancies, the guidelines and accompanying policy briefs call for further research and set out directions for this to take.

A report on *Early marriages, adolescent and young pregnancies* for the Sixty-fifth World Health Assembly held in May 2012 refers to the guidelines.



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