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

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

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


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

15-19 yrs. Source: Personal elaboration, World Development Indicators, 28/8/2018
Unmet contraceptive needs among 15-24 yrs. Women by countries, 2017

2017 World Population Data Sheet
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

Source: Personal elaboration, Based of ENADID 2014
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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.

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

SEXUAL 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

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

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

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.

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 yrs. Fertility Rates

<15 yrs. 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

Prejudice and lack of information in the family
Lack of acknowledge of violence

Traditional motherhood roles
No access to development/rights
Permissive laws
Family/Gender Violence

Traditional “feminine” role models
Low education
Lack of training in teachers/health professionals

Lack of IEC
Lack of psico-affective communication/education
Lack of access to SRH services

Sexual Violence
Early Marriage Union
Dependent Life Project
Unplanned Unprotected Sex
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.
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Thank you!

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