ABSTRACT

Adolescent pregnancies in Nicaragua: The importance of education.

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Early adolescent pregnancy implies increased social and medical risks. There is lack of understanding of the mechanisms behind early sexual debut and pregnancy. This contributes to the difficulties to meet the educational and health care needs of adolescents. In Nicaragua, few reproductive health interventions target adolescents and even fewer studies focus on sexual and reproductive health in this age group. Therefore, the aim of this thesis is to analyze the background of adolescent pregnancy in Nicaragua, for future interventions.

Focus group discussions and in-depth interviews were carried out with young and adult women and men from different social backgrounds in the city of León. Results were used in the planning of a cross-sectional household study carried out in 1993, covering a population of 43,765 in 50 randomly selected clusters in rural and urban León. Reproductive histories were obtained from all women aged 15 to 49 years (n=10,867), corresponding to 176281 person years of reproductive life. Random sub-samples of men (n=388) and women (n=413) were interviewed in privacy about their age at sexual debut, contraceptive use and reproductive history. The background to early adolescent pregnancy was further analyzed in a matched case-referent study of girls who got their first pregnancy before 17 years of age (146 cases, 242 randomly selected age-matched referents).

Economic deprivation and disturbed family relations with an unsatisfied craving for parental affection influence adolescent sexual behavior. Girls' romanticism, belief in virginity until marriage and the contrasting male *machismo* culture contribute to a lack of empowerment of adolescents.

At 15 years of age, 25% of boys and girls had had their sexual debut, and at 18 years this was the case for 85% of boys and 53% of girls. Among girls, the latency period from sexual debut to the end of first pregnancy was only 22 months, indicating very limited access to contraceptive counseling and services. At 17 years of age, one fourth had become pregnant. Contraceptive use was 54% among sexually active adolescents, aged 15-19 years, pills being the most common method. Among adults, female sterilization was the most common method, followed by Intra Uterine Device (IUD) and pill. Condom use was low as well as the use of traditional methods. Low educational attainment was a strong determinant for lack of contraception.

Age at sexual debut and age at first pregnancy had been increasing, and fertility rate had declined in Nicaragua from the 1970s to the 1990s. The increase in women's education was found to be the strongest explanatory factor behind this transition in fertility. Girls who had successfully completed at least 5 years of schooling had lower risk for early pregnancy. This protective effect of education was found for groups with high as well as low socioeconomic status.

The background of adolescent pregnancy consists of a complex interaction of socioeconomic, familial and cultural factors. Lack of political will to challenge current values, religious influence in sexual and educational issues, romanticism and lack of empowerment, especially among adolescent women, are also influencing elements. Contraceptive use is still low among sexually active teenagers in Nicaragua, and pregnancy follows soon after first intercourse. There is a strong need for family life education at schools and health services geared to adolescents. Non-use of contraception is associated with poverty and lack of education. The association between education and fertility decline, and the protective effect of education in preventing early pregnancies, even among poor families, indicates that education is a powerful tool in breaking the vicious cycles of poverty and early pregnancy.

Key words: adolescent, contraception, sexuality, pregnancy, gender, education, Nicaragua.