



## MATERNITY IN ADOLESCENCE: REASONS FOR PLANNING IT

### MATERNIDADE NA ADOLESCÊNCIA: MOTIVOS PARA PLANEJÁ-LA

### MATERNIDAD EN LA ADOLESCENCIA: RAZONES PARA PLANEARLA

Rita Fernanda Monteiro Fernandes<sup>1</sup>, Sonia Maria Konzgen Meincke<sup>2</sup>, Marilu Correa Soares<sup>3</sup>, Maria Emília Nunes Bueno<sup>4</sup>, Ana Cândida Lopes Corrêa<sup>5</sup>, Camila Neumaier Alves<sup>6</sup>

#### ABSTRACT

**Objective:** to know reasons that led adolescents to plan pregnancy, presenting their socio-demographic, economic and gynecological-obstetric profile. **Method:** descriptive, cross - sectional study with quantitative approach. A total of 181 adolescent postpartum women, whose births took place in the hospital, took part. The data were collected with a structured instrument and analyzed by EP-INFO software. **Results:** the desire to be a mother predominated as a motive for planning. The adolescents, between 15 and 19 years old, had companions, being white majority, of low education and socioeconomic conditions. They used contraceptive methods and started sexual activities after 15 years. **Conclusion:** labeling adolescent pregnancies as undesired is misleading, as data indicate that many adolescents plan it. The adolescent's discourse on the real motives of pregnancy should be valued by health professionals. **Descriptors:** Adolescents; Teenage Pregnancy; Family Planning.

#### RESUMO

**Objetivo:** conhecer motivos que levaram adolescentes a planejar gravidez, apresentando seu perfil sociodemográfico, econômico e ginecológico-obstétrico. **Método:** estudo descritivo, transversal, com abordagem quantitativa. Participaram 181 puérperas adolescentes, cujos partos ocorreram no hospital. Os dados foram coletados com instrumento estruturado e analisados por *software* EP-INFO. **Resultados:** predominou, como motivo do planejamento, o desejo de ser mãe. As adolescentes, entre 15 e 19 anos, possuíam companheiros, sendo maioria branca, de baixa escolaridade e condições socioeconômicas. Usavam métodos contraceptivos e iniciaram atividades sexuais a partir de 15 anos. **Conclusão:** rotular a gravidez na adolescência como indesejada é equivocado, pois os dados apontam que muitas adolescentes a planejam. O discurso da adolescente sobre os reais motivos da gravidez deve ser valorizado pelos profissionais de saúde. **Descritores:** Adolescente; Gravidez na Adolescência; Planejamento Familiar.

#### RESUMEN

**Objetivo:** conocer razones por las cuales llevaron adolescentes a planeación del embarazo, presentando su perfil sociodemográfico, económico y Ginecológico - Obstétrico. **Método:** estudio transversal descriptivo de abordaje cuantitativo. Han participado 181 madres adolescentes cuyos partos ocurrieron en el hospital. Los datos se recogieron usando un instrumento estructurado y se analizaron por *software* EP-INFO. **Resultados:** predominó, como la razón del planeamiento, el deseo de ser madre. Adolescentes entre 15 y 19 años, tenían compañeros, siendo en su mayoría blancos, bajo nivel de escolaridad y clase socioeconómico. Utilizaban métodos anticonceptivos e iniciaron la actividad sexual desde los 15 años. **Conclusión:** etiquetar el embarazo adolescente como siendo algo no deseado es un equívoco, ya que los datos muestran que muchas adolescentes han planeado. El discurso de los adolescentes acerca de los motivos reales de embarazo debe ser valorado por los profesionales de salud. **Descriptor:** Adolescentes; Embarazo en Adolescencia; Planificación Familiar.

<sup>1,3,4,5,6</sup>Nursed, Masters, Federal University of Pelotas, Pelotas (RS), Brazil. E-mails: feunipampa@hotmail.com; [enfmari@uol.com.br](mailto:enfmari@uol.com.br); [me\\_bueno@yahoo.com.br](mailto:me_bueno@yahoo.com.br); [analopescorreahotmail.com](mailto:analopescorreahotmail.com); [camilaenfer@gmail.com](mailto:camilaenfer@gmail.com); <sup>2</sup>Nurse, PhD, Federal University of Pelotas, Pelotas (RS), Brazil, e-mail: [meinckesmk@gmail.com](mailto:meinckesmk@gmail.com)

INTRODUCTION

Adolescence corresponds to the second decade of life, between ten and 19 years of age.<sup>1</sup> Adolescents are the individuals who are in a peculiar phase of biopsychosocial transition, a period characterized by biological transformations in search of a definition of their social role, determined by the cultural patterns of the environment.<sup>2</sup>

In this way, teenage pregnancy has great social visibility, especially when viewing data from the National System of Live Births (SINASC), when the decline in birth rates is identified, however, the relative increase in the births of mothers with less than 20 years. Data show that about 22% of newborns in the country are from adolescent mothers.<sup>3</sup>

Adolescence is a unique and diverse phenomenon, since each adolescent will present needs related to her socio-cultural, economic and psychological environment.<sup>4</sup> The transition to adulthood occurs and the awakening of sexuality arises, which can culminate in an early pregnancy. Adolescent pregnancy is seen as a major public health problem affecting both developing and developed countries, which also occurs in different social classes and at various socioeconomic levels.<sup>5</sup>

The high pregnancy rate in this age group can generate not only important consequences from the point of view of health, but also social aspects, since it can lead to school dropout or school delay.<sup>6</sup> In the meantime, the theme of pregnancy in the adolescence has become the target of numerous studies, arousing the interest of most health professionals and researchers.

The objective of this study was to know reasons that led adolescents to plan pregnancy, presenting their socio-demographic, economic and gynecological-obstetric profile..

METHOD

A descriptive, cross-sectional study with a quantitative approach, based on a multi-centric research study "Social Networks for Supporting Paternity in Adolescence" -RAPAD8 developed by educational institutions: Federal University of Pelotas (UFPel - general coordination of the project), University Federal University of Santa Catarina (UFSC) and Federal University of Paraíba (UFPB). The data presented in this article refer to those collected by UFPel.

The sample consisted of 181 adolescent postpartum women who attended the puerperium and performed their deliveries in an obstetric unit of a hospital located in a municipality in southern Brazil from December 2008 to December 2009. The following inclusion criteria were used: being hospitalized in the maternity ward; to be a puerperal patient under the age of nineteen, to perform their parturition process at the hospital participating in the study, during the research period. Exclusion criteria were: severe maternal pathologies that interfere with communication; fetal death and communication difficulties.

For the data collection, a structured instrument was applied relative to three research variables. The variables that focus on socio-demographic data refer to age, color, marital status and schooling; the economical ones to the work, to sources of income, to the monthly income and those that approached the gynecological-obstetric characteristics to the menarche, to the sexarca, to the use or not of contraceptive method and if there was or not planning of the pregnancy.

Data analysis was performed using EPI-INFO 6.04 software and these were presented in tabular form, in order to provide better visualization and understanding.

It should be noted that all the precepts of Resolution 196/96 governing research involving human beings at the time of the research were observed and respected. The research project was approved by the Research Ethics Committee under opinion no. 007/2008.

RESULTS

• Socio-demographic characteristics

The socio-demographic characteristics of the 181 adolescent postpartum women show that the largest number (95%) of adolescents is in the 15-19 age bracket. Regarding skin color, 60.8% of the adolescents declared themselves white. Regarding the marital situation, 76.8% of the adolescent puerperal women were married or had a partner at the time of the interview, while 23.2% were single (Table 1).

Table 1. Demographic data of adolescent puerperal women (n = 181). Pelotas (RS), Brazil, 2015.

| Variable                                | n   | %    |
|-----------------------------------------|-----|------|
| Age group                               |     |      |
| 10 to 14 years                          | 09  | 5.0  |
| 15 to 19 years                          | 172 | 95.0 |
| Skin color                              |     |      |
| White                                   | 110 | 60.8 |
| Not White                               | 71  | 39.2 |
| Marital status                          |     |      |
| Single                                  | 42  | 23.2 |
| Married or with someone                 | 139 | 76.8 |
| Study                                   |     |      |
| Yes                                     | 35  | 19.3 |
| No                                      | 146 | 80.7 |
| Education                               |     |      |
| Incomplete / complete elementary school | 138 | 76.3 |
| Incomplete / complete secondary school  | 43  | 23.7 |

It is noteworthy that 80.7% of postpartum adolescents did not study at the time of the research, against 19.3% who continued to study. Of the 146 adolescent puerperae who did not study, 40.0% (n = 58) dropped out of school motivated by gestation; 23.5% (n = 34) reported abandonment of their own volition; 13.7% (n = 20), for family reasons; 5.5% (n = 08) reported not studying because they finished elementary school; 4.8% (n = 07), due to the change of city, which made it difficult to adapt to the new school; poor performance in school corresponds to 2.7% (n = 04); 2.1% (n

= 03), for reasons related to work and 7.5% (n = 12) for other reasons.

Socioeconomic characteristics

The data in table 2 show that 55.8% (n = 101) of adolescent puerperal women had the main source of income, followed by 33.7% (n = 61) of family income and 6.1% (n = 11) of pensions. Of the total number of adolescents (n = 181), only 5.0% (n = 09) had some type of work, and 55.5% (n = 05) had informal employment, while 44, 5% (n = 04) were working formally.

Table 2. Socioeconomic data of puerperal adolescents (n = 181). Pelotas (RS), Brazil, 2015.

| Variable                 | n   | %    |
|--------------------------|-----|------|
| Main source of income    |     |      |
| Employment               | 03  | 1.7  |
| Spouse / partner         | 101 | 55.8 |
| Family                   | 61  | 33.7 |
| Pension                  | 11  | 6.1  |
| Another source of income | 05  | 2.7  |
| Monthly family income *  |     |      |
| Less than 1 minimum wage | 38  | 21.0 |
| 1 to 3 minimum salaries  | 121 | 66.8 |
| 4 to 5 minimum wages     | 06  | 3.3  |
| Plus 5 minimum wages     | 02  | 1.2  |
| Ignored                  | 14  | 7.7  |
| Job                      |     |      |
| Yes                      | 09  | 5.0  |
| No                       | 172 | 95.0 |

\* Value of the minimum salary in force in 2009 R \$ 465.00 (Law 11.944 / 2009 of May 29, 2009).

Another significant finding observed in this study is the low income of adolescents, with 21.0% (n = 38) of them living with a monthly income below a minimum wage, 66.8% (n = 121) one and three minimum wages and 4.5% (n = 8) had family income above three minimum wages (Table 2).

Obstetrical and gynecological characteristics

These data refer to menarche, gender, use of contraceptive methods, pregnancy planning and the reasons that led them to plan. It is inferred that the adolescent's own will was the main motive for planning (Table 3).

Table 3. Obstetric and gynecological data of adolescent postpartum women (n = 181). Pelotas (RS), Brazil, 2015.

| Variable                                      | N   | %    |
|-----------------------------------------------|-----|------|
| Menarch (years)                               |     |      |
| 08 to 10                                      | 17  | 9.5  |
| 11 to 13                                      | 131 | 72.3 |
| 14 to 15                                      | 27  | 14.9 |
| Ignored                                       | 06  | 3.3  |
| Sexarch (years)                               |     |      |
| 10 to 14                                      | 81  | 44.8 |
| 15 to 18                                      | 95  | 52.5 |
| Ignored                                       | 05  | 2.7  |
| Use of contraceptive methods                  |     |      |
| Yes                                           | 114 | 63.0 |
| No                                            | 67  | 37.0 |
| Teenagers who planned for pregnancy           |     |      |
| Yes                                           | 73  | 40.4 |
| No                                            | 108 | 59.6 |
| Reasons why adolescents Planned the pregnancy |     |      |
| Husband's will                                | 03  | 4.1  |
| Own will                                      | 58  | 79.4 |
| The couple's will                             | 10  | 13.7 |
| Family will                                   | 01  | 1.3  |
| Other reasons                                 | 01  | 1.3  |

It is observed that the first menstruation occurred from eight to 15 years of age, with a significant predominance from 11 to 13 years. The minimum age range of the sexarch was ten years and the maximum of 18 years, and a percentage of 2.7% did not know how to inform the age of onset of intercourse. The sexarch occurred more frequently in the age group of 13 to 16 years, and 74% of the adolescents who composed the sample of the present study had their first relation before the age of 15 years.

Concerning the use of contraceptive methods by adolescents, 37.02% (n = 67) did not use any contraceptive method and 62.98% (n = 114) used it.

It was found that 40.33% (n = 73) of the 181 adolescents interviewed in the present study planned pregnancy. The desire and willingness to experience motherhood appeared in 79.45% (n = 58) of the adolescents who planned the pregnancy, followed by the will of the couple referred to by 13.70% (n = 10). It is noteworthy that 2.74% (n = 02) of the adolescents who planned the pregnancy reported having more than one reason to plan it.

DISCUSSION

The socio-demographic characteristics of the 181 adolescents show that the largest number (95.0%) is in the 15-19 age group. A similar age group was found in a survey of pregnant adolescents in Ceará, in which 80% of the interviewees were in the same age range.

As part of the results of this study, the low educational level of the adolescents was highlighted, since 23.7% (n = 43) of the adolescents were attending or had finished high school. It is understood that this fact may be related to the life planning of adolescents, which values issues regarding a possible elevation of status, the recognition of society and the family arising through pregnancy as a teenager.<sup>8</sup>

In this way, teenage pregnancy can influence socioeconomic conditions, since it interrupts the adolescent mother's school education, reducing future opportunities in the labor market.<sup>9</sup> The low family income of pregnant adolescents, pointed out in this study, was also verified in research with 20 puerperal adolescents from a municipality of Ceará, 50% of whom had a family income below a minimum wage.<sup>7,10</sup> Therefore, the low income and the lack of future perspectives that these adolescents present, betting on maternity as unique Perspective of personal fulfillment.

The adolescents in this study presented menarche between 11 and 13 years of age. This fact may be related to the occurrence of pregnancy in adolescence, corroborated by another study that states that the gestational event seems to increase progressively and at an earlier age, which may be related to early menarche.<sup>5</sup>

In this context, some adolescents experience the sexarca soon after menstruation, which increases the probability of becoming pregnant in a short period of time.<sup>10</sup> At the beginning of the sexual activities, the question about the use or not of

contraceptive methods by adolescents emerges. According to this study, 141 adolescents reported using some contraceptive method. The other adolescents who did not use it showed a lack of concern about possible contamination by sexually transmitted diseases or the occurrence of an unplanned pregnancy.

However, regarding questioning about gestational planning, it was verified that 73 of the 181 adolescents interviewed planned the pregnancy. This index shows that teenage pregnancy does not always happen by accident. These findings resemble those already found in the literature.<sup>11,12</sup>

Thus, it is not possible to say that all adolescent pregnancy is undesired and occurs by chance, since many of the pregnancies are actually planned by adolescents.<sup>7,12</sup> Many groups of adolescents seek pregnancy to acquire social value and, for this reason, through it, firm their identity in their context.<sup>13</sup> Studies have found the dream of being a mother as a motivation for teenage pregnancy.<sup>13-4</sup>

Among the mothers who planned the pregnancy, the reasons for planning were the desire and desire to experience motherhood, with 79.4%, followed by the will of the couple, referred to by 13.7%. It corroborates the study by stating that some adolescents become pregnant because they desire pregnancy and want to experience the new social role of being a mother.<sup>7</sup> Some pregnant women plan pregnancy and, even when unplanned, consider it a choice, a solution in their lives, a way to gain power or status and recognition before the community in which they live, being for some the reaffirmation of their femininity and an escape for the lack of perspective in their life.<sup>15</sup>

The fact that adolescents wished and planned pregnancy is undoubtedly a fact that needs to be considered in order to advance in the construction and implementation of public policies that offer adequate support to this other face of reality. Women's health needs to be understood as the result of a broad spectrum of factors that, as well as the full exercise of their sexuality, are related to their quality of life.<sup>16</sup> In the meantime, health professionals need to promotion of adolescent sexual health, in order to enhance the dialogue in the school, family and health services.<sup>17</sup> In addition, professionals, when sensitized on this subject, will be able to provide adolescents with a healthy means for them enjoy their sexuality without prejudices or judgments.

CONCLUSION

The results obtained in this study indicate that the socioeconomic-demographic profile of the adolescents corresponds to the age group between 15 and 19 years, white color, low schooling and low socioeconomic levels. The family income was about one thousand and two hundred reais, which presented, as the main source, the work of the companion.

As for the gynecological-obstetric profile, it was obtained that the adolescents experienced the menarche between 11 and 13 years, as well as the sexarch between 15 and 18 years. The adolescents used contraceptive methods and wished to be mothers.

It is thought necessary to prepare these adolescents to face the difficulties and consequences that motherhood at this age can have an impact on their lives. Thus, it is a great challenge for health professionals to work with these adolescents on topics related to contraceptive methods, gestation and family planning, so that they consider the option of maternity as a conscious and autonomous choice made by adolescents.

It is hoped that this study may contribute to help health professionals, who are faced with pregnant adolescents, to become aware of the issue and to understand that many adolescents become pregnant through self-desire or through family disruption, lack of affection and attention, or for choosing to take on a new social status.

It is essential that health professionals be prepared and able to provide qualified care to this adolescent mother and, in addition, value the adolescent's discourse on the real reasons that pervade her pregnancy. Thus, it is important to emphasize studies in this subject in order to know the reasons that permeate pregnancy in adolescence, so that other scenarios are investigated and new perspectives are defined. It is reiterated that this study does not intend to generalize the data found, since it is limited to a specific region.

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**Corresponding Address**

Sonia Maria Könzgen Meincke  
Programa de Pós-Graduação em Enfermagem  
Faculdade de Enfermagem - Fen  
Universidade Federal de Pelotas  
Rua Gomes Carneiro, nº 01, Sala 201  
Bairro Porto  
CEP: 96010-610 – Pelotas (RS), Brazil