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An Assessment of Teenage Pregnancy and Single Parenthood among Female Adolescents in Selected Churches in Liberia

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Abstract:

The purpose of this study is to assess the teenage pregnancy and single parenthood among female adolescents in selected churches in North Paynesville, Liberia. Teenage pregnancy deters female adolescents not just from achieving their life educational goals and from maximizing their human capital, but equally prone them to single parenthood.

This study used a cross sectional design. Two hundred and fifty (250) respondents participated in the study from ten different denominations. Data were collected structured research questionnaire. Three research questions were raised to guide this study, while Analysis of data was done using both descriptive and inferential statistics.

This study found out that the 176 (70.4%) of the respondents had high knowledge level of teenage pregnancy, 50 (20.0%) of the moderate knowledge and the remaining 24 (9.6%) had low knowledge level. Also, two hundred and twenty-four (224) out of the 250 respondents consented to the prevalence of single parenthood among the female adolescents, which shows a very high prevalence of single parenthood among the female adolescents as a result of high incidence of premarital sex. Equally, a significant relationship between the teenage pregnancy and single parenthood among female adolescents in selected churches in North Paynesville, Liberia ($r = .719, p = .000$).

The study concluded that in order to improve sex life, marriage and education in Liberia, the realities of adolescent sexual behaviour must be accepted. It is imperative for their health and the health of the nation to build a sexuality education program with adolescents' best interests in mind.

Keywords: Female adolescents, teenage pregnancy, single parenthood, churches, North Paynesville, Liberia

1. Introduction

Globally, adolescents live in a society which has become multi-complex, thus making the roles of adolescents very diffuse and confusing. Adolescence is the critical transition period in human growth and development that occurs after childhood and before adulthood, from age 10 to 19 years (WHO, 2014). It is characterized by a remarkable pace in growth and change. Biological processes drive many aspects of this growth and development, with the onset of puberty marking the passage from childhood to adolescence (WHO, 2014).

However, several literatures have seen adolescence as a period ranging from ages 10 to 21 years (Ezeokoli & Ayodele, 2014). This is a period when young children are developing into adulthood, extending from puberty to independence. It has three stages namely; early adolescence from 10 to 14 years, middle adolescence from 15 to 17 years and late adolescence from 17 to 21 years (Beattie, Bhattacharjee, Isac, Davey, Javalker, Nair, & ...Heise, 2015). It is a period of the life cycle between childhood and adulthood with some unique characteristics connected with development and marked by dramatic challenges that require adjustment to changes in self, in the family and peer group (Ogunsanwo, 2017).

In terms of changes in self, the adolescent experiences physical growth, sexual maturation, intense emotional, social, cognitive and personal development. This developmental period is described as a time of storm and stress; conflict and crises of adjustment and a stage of alienation from adult society. Adolescents experience frustration, self-doubt, stress, pressure and feelings of rejection and failure as they go through the physical developmental stages and the search for self (Ogunsanwo, 2017).

However, the wastage of youth as potential resources is deeply lamented as majority of them are turning to self-destruction through immoral acts, unplanned pregnancy, STIs, and the likes. It has been observed that about 40 million people in the world are infected with sexual transmitted infections especially HIV/AIDS. Furthermore, some researchers found that increased incidence of adolescents' sexual behaviour as well as the decreased age of sexual debut is a function of several variables such as parents' socio-economic background and poverty (Kolawole, 2018), adoption of western culture (Ganchimeg, Ota, Morisaki, et al, 2014), a change in societal values (Ariyo, 2004); developmental increase in height, size and weight to the high libido (McDowell, 2002); adolescents' perception of sex symbol, values, risks and misconceptions (Mourtada, Schlect, & DeJong, 2017).

According to Marnach, Forrest and Goldman (2013), a teenage or underage girl (usually within the ages of 13-19) becoming pregnant is described as teenage pregnancy. The term in everyday speech usually refers to women who have not reached legal adulthood, which varies across the world, who become pregnant (Duncan 2011). In the same vein teenage

pregnancy is formally defined as a pregnancy in young woman who has not reached her 20th birthday when the pregnancy ends, regardless of whether the woman is married or is legally an adult age 14 to 21.

Every human individual has sexual feeling, attitudes, and beliefs, but adolescents' experiences of sexuality are unique because it is processed through an intensely personal perspective, which comes from private, personal experience, public and social sources. According to UNFPA (2016), Liberia has a very high teenage pregnancy rate. By the age of 19 years, 3 out of 5 girls are already mothers. This threatens the very core of the Liberian society as many of these adolescent girls often fail to complete their education. Also, this early sexual debut and pregnancy has equally prone the female adolescents to the problem of single parenthood.

Additionally, teenage pregnancy reduces many life opportunities for young girls, such as education, employment, and better family life. Teenagers who become pregnant are more likely to discontinue school or at least not reach the same educational levels as their peers who do not become pregnant (Ferre, Gerstenblüth, Rossi, & Triunfo, 2013). Teenage mothers who drop out of school and do not pursue higher education limit their life opportunities (Mesa & Torres, 2016). Furthermore, children of teenage mothers are more likely to grow up and repeat parents' teenage reproductive behaviors (Azevedo et al., 2012). Therefore, the teenage pregnancy cycle continues to the next generation, making positive youth development a challenge.

Teen mothers in Liberia experience various psychological and sociocultural factors that make motherhood a painful experience. Some of the challenges faced by teen mothers in underdeveloped communities include an inability to cope with increased responsibility of motherhood, lack of support from child's father and the wider society, coupled with lack of access to maternity care (Ngum Chi Watts et al. 2015; Okwaraji, Webb, & Edmond, 2015).

From the aforementioned, this study is focused on the assessment of teenage pregnancy and single parenthood among female adolescents in selected churches in North Paynesville, Liberia.

2. Research Hypotheses

- What is the respondents' knowledge level of teenage pregnancy in the church?
- Does the female adolescents in the churches in North Paynesville, Liberia experience single parenthood?
- Is there any relationship between teenage pregnancy and single parenthood among female adolescents in selected churches in North Paynesville, Liberia?

3. Methodology

3.1. Research Design

This study adopted a cross sectional research design. This survey design was preferred since the researcher cannot control the conditions experienced by the churches understudied.

3.2. Study Population

The target population covers all the confirmed members of the ten selected churches in North Paynesville, Liberia. These churches are Second Baptist Church, Prime Methodist Church, Assembly of God Church, the Redeemed Christian Church of God, Third Lutheran Church, New Generation Ministries Inc., Grace United Christian Church, Faith Apostolic Church International, New Samaritan Church, and Upper Seventh-day Adventist Church.

3.3. Sample and Sampling Techniques

Two hundred and fifty members were selected through purposive sampling techniques. Twenty-five members comprising ten (10) adolescents, ten members of the congregation, and five members of the clergymen were from each church respectively.

3.4. Research Instrument

Relevant information for this research was obtained majorly through structured questionnaire tagged "teenage pregnancy and single parenthood questionnaire (TPSPQ)". This is a 30 item questionnaire. Twenty (20) of the items assessed the respondents' knowledge on teenage pregnancy on a YES or NO measures. The maximum score for correct responses for knowledge is 20 marks. The remaining 10 items was assessed on a 5 scale ranged from strongly agree I, Agree = 2, undecided = 3, disagree = 4 to strongly disagree 5. The instrument was pilot tested using 20 people to attest to the reliability co-efficient of the instrument. Data collected were analyzed using Cronbach Alpha to obtain the internal consistency. After the analysis, the co-efficient alpha stood at 0.791 which the researcher considered well enough for the internal consistency and reliability of the instruments

3.5. Method of Data Analysis

The data collected in this study were quantitatively done and analyzed.

4. Results

Knowledge Level of Teenage Pregnancy in the Church	Category of Scores	Frequency	Percent (%)
Low	1-7	24	58.9
Average	8-14	50	24.4
High	15-20	176	16.7
Total		250	100
Mean		15.461	
Percentage (%)		77.305	
Standard dev.		6.266	

Table 1: Respondents' Knowledge Level of Teenage Pregnancy in the Church

The result presents respondents' knowledge level of teenage pregnancy in the church. Respondents' knowledge level of teenage pregnancy in the church was categorized as high (15-20), moderate/average (8-14) and low (1-7). Majority 176 (70.4%) of the respondents had high knowledge level of teenage pregnancy, 50 (20.0%) of the moderate knowledge and the remaining 24 (9.6%) had low knowledge level. Therefore, it could be said that the respondents' knowledge level of teenage pregnancy in the church is high (77.3%).

Prevalence of Single Parenthood Among Female Adolescents	Category of Scores	Frequency	Percent (%)
Agreed (True)	35-50	224	89.6
Disagreed (False)	18-34	26	10.4
Indifference	1-17	-	-
Total		250	100
Mean		46.013	
Percentage (%)		92.026	
Standard dev.		9.180	

Table 2: The Churches Experience of Single Parenthood among Female Adolescents

The research question that revealed if the female adolescents in the churches in North Paynesville, Liberia experience single parenthood showed that two hundred and twenty-four (224) out of the 250 respondents consented to the prevalence of single parenthood among the female adolescents. This shows a very high prevalence of single parenthood among the female adolescents, which is a reflection of high incidence of premarital sex. This is equally shown in Figure 1 below.

		Teenage Pregnancy	Single Parenthood
Teenage pregnancy	Pearson Correlation	1	.719**
	Sig. (2-tailed)		.000
	N	250	250
Single Parenthood	Pearson Correlation	.719**	1
	Sig. (2-tailed)	.000	
	N	250	250

Table 3: Relationship between Teenage Pregnancy and Single Parenthood among Female Adolescents

** Correlation Is Significant at the 0.00 Level (2-Tailed)

The results in Table 3 revealed a significant relationship between the teenage pregnancy and single parenthood among female adolescents in selected churches in North Paynesville, Liberia ($r = .719$, $p = .000$). This implies that the pregnancy observed among the teenagers is convergently related to single parenthood. This result could be as a result of the fact that the increased incidence of adolescents' sexual behaviour as well as the decreased age of sexual debut is a function of several variables such as parents' socio-economic background and poverty, adoption of western culture, a change in societal values, adolescents' perception of sex symbol, values, risks and misconceptions.

5. Discussion

The outcome of the first research questions revealed that more than two-third of the respondents were knowledgeable of the existence of teenage pregnancy in the church. The implication of this is that most youths are now engaging in premarital sexual activities by getting them impregnated, which hold back their potentials and also affect the future negatively. This result is in line with an alarming increase of teenage pregnancy in Liberia in recent times. This corroborates the findings of UNPFA (2017) that the prevalence of teenage pregnancy is on the increase in Liberia; and that about 80 per cent of these pregnant teenagers were totally unprepared for this situation in which they ignorantly found themselves. William (2020) equally noted that teens with unintended pregnancy may get incorrect information from

friends, videos, sitcoms and/or movies, and many times, do not have the knowledge needed to make informed and responsible decisions about whether or not to engage in sexual activity that can alter their life.

The outcome of the second research question revealed that the female adolescents in the churches in North Paynesville, Liberia experience single parenthood just like any other teenagers. This implies that when teenage girls involve in premarital sex and get pregnant, the likelihood of nursing the child all alone with their family is certain. This study to an extent helped in answering the question whether faith or religion actually plays a role in promoting single parenthood among teens in Africa. To an extent the answer is yes because no religion encourages abortion, and also premarital sex. When teenage pregnancy occurs in the church the parents swallow their pride and nurture both the mother and the child. Though, teenage pregnancy and single parenthood was found to be higher among people without a faith affiliation, as compared to Catholics and Protestants (Zuber, Moran, Chou, et al. 2018).

The outcome of the last research question shows that a significant relationship between the teenage pregnancy and single parenthood among female adolescents in selected churches in North Paynesville, Liberia. This result could be as a result of the fact that the high rate of teenage pregnancies can be attributed to the slow possibilities for young people to exercise independent sexual health decision making and access information, and thus leading to single parenthood. This justifies the importance of the educational intervention in exerting influence on the prevention of teenage pregnancy and single parenthood. The results lend credence on the findings of previous researchers that comprehensive education, when compared to abstinence only (Lindberg & Maddow-Zimet, 2012). It is believed that comprehensive education will result in a higher average of teens discussing sexual issues with their parents outside of the formal education program.

6. Conclusion

Just like the advanced country, school-based sexuality education is a contentious issue in contemporary Liberian society. At its most basic level, the debate centers on the division between abstinence only (as observed in churches) and comprehensive sexuality education. Abstinence-only advocates promote a sexuality education curriculum that presents refraining from all sexual activity outside of marriage as the only effective way to prevent unwanted pregnancy, sexually transmitted diseases, and single parenthood.

On the other hand, comprehensive advocates promote a sexuality education curriculum that presents multiple strategies beyond sexual abstinence - such as proper contraceptive use for preventing unwanted pregnancy and sexually transmitted diseases. Both sides harbor strong values and moral convictions that lead them to believe that their way is the best way and that their way should prevail when it comes to adolescents' wellness.

It was revealed from this study that teenage pregnancy and single parenthood exist in the within the church. Also, a relationship was found between teenage pregnancy and single parenthood. This study conclude therefore, that in order to improve sex life, marriage and education in Liberia, the realities of adolescent sexual behaviour must be accepted. It is imperative for their health and the health of the nation to build a sexuality education program with adolescents' best interests in mind.

7. Recommendations

Based on the conclusions of this study, the following recommendations are call for:

- There is need to enhance the teaching of sexual education in all churches in Liberia to improve on the existing mixed perceptions among teens to bring about positive change in behaviour.
- The Ministry of Education in conjunction with the stake holders in education should come up with a clear policy with regard to the teaching of sexual education. The study acknowledges the need for the various stakeholders in education namely, the Government, the Church, parents and teachers to jointly reinforce and support the teaching of sexual education in schools, thus reducing the increase of teenage pregnancy and single parenthood.
- There is need to review the curriculum content of the aspects that have been integrated in Christian Religious Education in order to develop one that is geared towards a comprehensive sexual education that encompasses the physical, biological, mental and spiritual development of the youth. Carefully constructed sexual education programs that address the needs of young people to gain their trust and overcome their fears would be more successful than the present situation of sexual education in schools.
- Young people require practical and useful information on sexual health. Individuals differ in regard to what mode of learning is active, influential and most effective for them. Therefore, church and schools should use a variety of participatory approach to deliver sexuality education such as group discussions, role-plays, quizzes and demonstrations. The details of these approaches should be described in the school curricula for sexuality education. Thus, irrespective of increasing academic standards the focus should be placed on the participatory approach to the quality of sexuality education.

8. References

- i. Ariyo, A.M. 2004. Poverty and female adolescent promiscuity in selected urban and rural secondary schools in Ibadan, Oyo State, Nigeria. *Nigerian Journal of Applied Psychology*, 8, 1, 181-194.
- ii. Ayodele KO, Ezeokoli RN. (2014). The relationship between campus social life and psychological wellbeing among Babcock University undergraduates. *Research on Humanities and Social Sciences*. 3(10):6-11
- iii. Azevedo, J. P., Favara, M., Haddock, S. E., Lopez-Calva, L. F., Muller, M., & Perova, E. (2012). *Teenage pregnancy and opportunities in Latin America and the Caribbean: On teenage fertility decisions, poverty and economic achievement*. Retrieved from <https://openknowledge.worldbank.org>

- iv. Beattie, T. S., Bhattacharjee, P., Isac, S., Davey, C., Javalker, P., Nair, S., & ...Heise, L, (2015). Supporting adolescent girls to stay in school, reduce child marriage and reduce entry into sex work as HIV risk prevention in north Karnataka, India: protocol for a cluster randomized controlled trial. *BMC Public Health*, 15292. doi:10.1186/s12889-015-1623-7
- v. Duncan, A. (2011). Teenage Parents and their Educational Attainment. TEXAS Comprehensive Centre.
- vi. Ferre, Z., Gerstenblüth, M., Rossi, M., & Triunfo, P. (2013). The impact of teenage childbearing on educational outcomes. *The Journal of Developing Areas*, 47, 159–174.
- vii. Ganchimeg T, Ota E, Morisaki N, et al. (2014). Pregnancy and childbirth outcomes among adolescent mothers: a World Health Organization Multicountry Survey on Maternal Newborn Health Research Network. http://www.bjog.org/details/issue/5980071/Volume_121_Issue_March_2014.html
- viii. Kolawole, O. A. (2018). Single mothers and the use of professionals for mental health care reasons. *Social Science and Medicine*, 59, 2535-2546
- ix. Mesa, A., & Torres, M. E. (2016). *The current state of young Hispanic children in South Carolina: Projections and implications for the future*. Greenville, SC: Institute for Child Success. Retrieved from <http://www.scpasos.org/>
- x. Mourtada, R., Schlect, J., & DeJong, J. (2017). A qualitative study exploring child marriage practices among Syrian conflict-affected populations in Lebanon. *Conflict and Health*, 11(Suppl1), 27. doi:101186/s13031-017-0131-z
- xi. Ngum Chi Watts, M. Liaputong, P., and Mcmichael, C., (2015). Early motherhood: a qualitative study exploring the experiences of African Australian teenage mothers in greater Melbourne, Australia. *BMC Public Health*, 15, 873. doi:10.1186/s12889-2215-2
- xii. Ogunsanya, (2007) Efevbera, Y., Bhabha, J., Farmer, P. and Fink, G. (2019). Girl child marriage, socioeconomic status, and under nutrition: evidence from 35 countries in Sub-Saharan Africa. *BMC Medicine*, 17, 55. doi.org/10.1186/s12916-019-1279-8
- xiii. Okwaraji, Y. B., Webb, E. L., & Edmond, K. M. (2015). Barriers to physical access to maternal health services in rural Ethiopia *BMC Health Services Research*, 1549 doi:10.1186/s12913-015-1161-0
- xiv. UNFPA (2016). Liberia Update. Edition-July to September 2016
- xv. WHO (2015). World Health Statistics. The health-related Millennium Development Goals. Retrieved from http://www.EN_WHS2015_Part1.pdf
- xvi. Williams, A. (2020). At-Risk Teenagers. "A Helpful Source of Parents with At-Risk Teenagers".At-risk.org©2020.
- xvii. Zuber PLF, Moran AC, Chou D, et al. (2018). Mapping the landscape of global programs to evaluate health interventions in pregnancy: the need for harmonized approaches, standards, and tools. *BMJ Glob Health* 3, e001053. doi:10.1136/bmjgh-2018-001053