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Premarital Pregnancy and Abortion among Adolescent

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ABSTRACT

Sexual relationship before marriage is one of adolescent social problems and becoming an epidemic in Malaysia. Consequently many female adolescent becoming pregnant out of marriage and involve in illegal abortion. This study explores the issue of premarital pregnancy among adolescent. Six female adolescent have been interviewed and were selected based on the purposive and snowball technique. Among the reasons of these premarital pregnancies were family problems, sexual relationship with peers and boyfriend, drug abuse and victims of rape cases. Meanwhile the reasons why some of them having abortion were due to their anxieties of being discovered by their parents, feeling embarrassed and their boyfriend's unwillingness to be responsible.

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INTRODUCTION

Premarital teenage pregnancy is defined as under age pregnant adolescent (usually between 13-19 years old). It is commonly refers to a female adolescent who have not yet reached-attained adulthood status, age wise (Hayward, 2011; UNICEF Malaysia, 2008). Statistics from WHO recorded between 14-15 million births among pregnant teenager. Most come from adolescents below the age of 15 and live in developing countries (Hayward, 2011). UNICEF Malaysia (2008) reported premarital adolescent pregnancies are closely related to low education status and high rate of poverty which are usually repeated by children of the adolescent parents. These premarital teenage pregnancy carry with it social stigmas in most communities and cultures (Hayward, 2011).

The instances of premarital teenage pregnancy are higher in develop countries rather than developing countries. The United States of America (USA) recorded number of unwanted teen pregnancies approaching one million annually, with 500,000 births, 125,000 miscarriages and 264,000 abortions (Darroch& Singh, 1999). England is said to be among the highest state with the highest cases of premarital teenage pregnancy in Europe with a recorded 24 births 1000 women. Meanwhile Malaysia recorded an average 13 births per 1000 women (WHO, 2008).

Studies in the west showed that exposure to family violence, separation or divorce of parents, problematic relationship with parents (Quinlivan *et al*., 2004); physical or sexual abuse, drug and alcohol abuse, parent's low education status (Hillis *et al*., 2004); single mother (Woodward *et al*., 2001); poverty, unemployment, and teenager under arrest cared for by the public system (Knight *et al*., 2006) are all known contributing factors towards adolescent pregnancies. Whereas the UNICEF Malaysia (2008) states that among the factors contributing to premarital teenage pregnancy are teenage sexual behavior under the influence of alcohol and drugs, peer pressures demanding in sexual activities, poverty and exposures to abuse, violence and family conflicts.

Data released by the National Registration Department of Malaysia from 2000 to July 2009, showed that 257 million births without the father's name were registered in this country. Frequently, 2500 cases of out of wedlock birth were recorded every month, or 83.3 case every day, and one out of wedlock birth for every 17 minutes. There are allegations that the numbers are actually greater than those recorded by the National Registration Department of Malaysia. They forwarded a ratio of 1:3 (of four births out of wedlock, only one is recorded). The failure of registration of the newborn was due to the victims or the family of the victims affected, unwilling to disclose the birth and remaining anonymous for shame. Premarital pregnancy is often linked with abandoning and dumping baby cases. Malaysian Royal Police (MRP) statistics showed that between 2005 to January 2011, a total of 517 baby dumping cases were recorded. The highest number recorded was in 2008 with

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102 cases, followed by 91 cases in 2010. Within the given period of 2005-January 2011, only 37 suspects were detained to assist investigation (Noor Mohamad Shakil Hameed, 2011).

Abortion is a sensitive issue in Malaysia. The Malaysian Penal Code, Article 312, strongly forbids abortion with the exception to save the life of the mother should she in danger (Penal Code, Act 574, 1998) (Section 312-316); Ahmad, Abdul Basir, Amir Husin, Hayatullah& Mohd Al Adib, 2013).

MATERIALS AND METHOD

Six female adolescent aged between 15 to 22 years old were interviewed for further information. Psychologist defined those aged between 18-22 years old as late adolescent (Arnett, 2007). Therefore, participants aged 18-22 years old were included in this study. Participants were selected according to purposive and snowball technique. Only pregnant adolescent who were willing to be interviewed were chosen as participants and they were also picked according to information from within themselves, which are identified and known. The venue for the interview was chosen by the participants for concerns that their behavior will be found out by their families. All were given pseudonyms to protect their identities and to preserve the ethics of confidentiality. They were each given a form of consent for interview (*inform consent*). Data was analyzed using the themes and categories based on the fieldwork.

RESULTS AND DISCUSSION

Participants background:

Ana (16 years old), was a second child of seven siblings, quit from schooling at the age of 15. Nor (21 years old), was also a second child of six. Aina (20 years old) was a second child of four. Rozi (22 years old) was a fourth child of five siblings. Dila (15 years old) was a fourth child of five. Nita (21 years old), was a second child from three siblings and the only girl in the family.

Family problems:

Various types of family problems like disagreement, dissatisfaction, irresponsible parents, poverty, broken family and divorces, contributes to the adolescent behavior. The lack of care and attention or even the excessive freedom gained from their family are among the reasons why the adolescent involved in sexual activities and premarital sexual relationship. For example, Ana's parents had a divorced when she was seven years old. Her mother worked as a cleaner after her youngest sister was born, but hard living circumstances forced her into prostituting the women. Her eldest sister ran from home and was involved in lewd sexual act video in "You Tube". She returned and worked in a spa to support her family. Another sister, Ros, was also wild and uncontrollable. One of Ana's brothers was active in many wrongdoings like vandalism, drug and alcohol abuse, involved in free sex and bullying. Ana regularly was forced to entertain her brother's friends. Ana then started to take psychotropic pills, began to mix freely and became a vagrant as early as 13 years old. At 15, Ana was gang raped by her brother's friends who grudged her for preferring to service others as opposed to them. They video recorded the incident on their hand phone and Ana lodge a police report. Her case went on the news in the local newspapers. She was later confirmed pregnant and left her baby at birth in the hospital on the advice of her sister, Ros. The baby was then adopted by the doctor who medicates her in the hospital.

Meanwhile, Nor's father remarried and was regularly not at home. Nor took advantage of this and followed her free living brother. She was pregnant when she was 17, after sexual intercourse with her 16 years old boyfriend. Rapid physical changes on her body causes her parents to suspect she was pregnant, and later got married with her boyfriend.

While Dila'swas stressed out upon over hearing her parent's conversation making her out as an adopted child. Her adopted father was temperamental and often hit her adopted mother. She then had sex at the age of 14 and was once pregnant. She was embarrassed and afraid to be found out by her family that made her having an abortion.

Excessive freedom and substance abuse:

All of the participants mingling around with their peers, boyfriends, playing truants, involved in substance abuse, and some were being raped. These factors lead to premarital pregnancy. All participants with the exception of Nor, were involved in free sex with multiple partners. Aina, Rozi and Dila had multiple abortions.

Abortions:

Dila aborted by traditional ways, while Aina and Rozi chose the private clinics. Dila had hers by swallowing medicines acquired at herbal medicine shop. Aina spent RM1000 (Malaysian Ringgit) at a private clinic for her abortion. She got pregnant again with 2 months of pregnancy and did her second abortion at a private clinic at RM1500. Rozi's first effort to abort failed when she try to drink pineapple juice mix with coca

cola and pepper. She drank Anchor Beer too. Her fiancée then gave her some pills to abort the fetus. Her second abortion was done in a private clinic with a total cost of RM3500. Her fiancée took out a bank loan to finance the illegal abortion and also to do their planned wedding six month thereon.

Their tender age and lack of preparation and knowledge of the unplanned pregnancies forced the adolescent to act rashly and often wrongly with the hope to solve their problems. All of them experienced psychological pressures due to their familial problems and unplanned pregnancy. This study also showed that divorce, single mother, family conflict, relationship with problematic parents and poverty are among the reasons of this female adolescent mix freely with the males and involve in premarital pregnancy. This is similar with the previous studies (Knight *et al*., 2006; Quinlivan *et al*., 2004; UNICEF Malaysia, 2008; Woodward *et al*., 2001). The sexual behavior that was influenced by drugs and alcohol, and peer pressure were in line with study by Hills *et al*. (2004) andUNICEF Malaysia (2008). The abortion was done due to their unwillingness to get married, too young, still schooling and their boyfriend doesn't want to have the baby which is parallel with previous studies (Abiodun *et al*., 2009; Aderibigbe *et al*., 2011), and their anxiety of being found out by their parents.

Conclusion:

Parents do have their roles and big responsibilities in their children's development. They should avoid distancing themselves from their children. The void, frustrations, perceived loss of freedom or too much of it might just lead adolescents especially to become disoriented and turn to their peers for support. Current reproductive education held in schools is looked upon to curb the premarital pregnancy and abortion and not be seen as promoting similar cases. Along the same line, familial education should be thought since it is apparent that many adolescent are not keen to choose marriage and family institution as safe and valid in the relationship known as connubial bliss.

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