EVALUATION OF PREGNANT ADOLESCENTS’ KNOWLEDGE ABOUT PREVENTIVE HEALTH BEHAVIORS DURING PREGNANCY IN AL-DIWANIYAH CITY

Fadia H. Ali 1, Hala S. Abdul Wahid 2, Ekhlas A. Hussein3

1Lecturer, M.Sc. Maternal and Neonatal Health, Nursing Department, College of Nursing, University of Al-Qadisiyah, Iraq. E-mail: Fadia.ali@qu.edu.iq

2Professor, PhD, Community Health Nursing Department, College of Nursing, University of Baghdad, Iraq. E-mail: Hala_63@conursing.uobaghdad.edu.iq

3Assistant Professor, PhD, Gynecologist and obstetrician, College of Medicine, Al-Iraqia University, Iraq. E-mail: ekhlasali15@yahoo.com

ABSTRACT:

Objective(s): The aim of the study is to evaluate the pregnant adolescents’ knowledge about preventive health behaviors during pregnancy, and to identify the relationship between the pregnant adolescents’ knowledge about preventive health behaviors during pregnancy and their socio-demographic characteristics.

Methodology: A quasi-experimental design, is carried out in order to achieve the objectives of the current study using the evaluation approach for the determination of pregnant adolescents’ knowledge about preventive health behaviors during pregnancy in Al-Diwaniyah city from the period 17th January 2020 to 1st June 2021. Non-probability, purposive sample of (35) adolescent pregnant are selected from those who visit Al-Diwanyiah Maternity and Pediatric Teaching Hospital. Data are collected through the use of the study instruments (questionnaire) in a form of Google format and through video calls as means of data collection. Test-retest reliability of instrument was determined through the use of Pearson correlation coefficient and content validity of the instrument determined through a panel of experts. Data were analyzed through the use of descriptive statistical data analysis approach and inferential statistical data analysis approach.

Results: Results of this study indicate that most of the pregnant are between (16-19) year old (57.1%), (34.3%) are primary school graduates, (71.4%) are housewives, (77.1%) are living in rural area and (80%) are earning an income of (300-600) thousands ID. The overall evaluation of pregnant adolescents’ have a lack of knowledge about preventive health behaviors during pregnancy without significant relationship between pregnant adolescents’ knowledge and their demographic characteristics.

Conclusions: The study's unique finding is that overall evaluation of pregnant adolescents’ have a lack of knowledge about preventive health behaviors during pregnancy that important behaviors would help them stay healthy during pregnancy and give birth to a healthy baby. This could be due to a variety of factors, including a lack of education, being young and poor, and a lack of exposure to health information.

Recommendations: Improving pregnant adolescents’ health literacy is the responsibility of healthcare systems and healthcare professionals through emphasis by the Ministry of Health role in obligate antenatal care units to take their significance role and dissemination of education about the preventive health behaviors among pregnant adolescents’ especially primigravida, and particularly with each specific trimester. Enhancing pregnant adolescents’ knowledge regarding preventive health behaviors during pregnancy through a health education program that cover this topic.

Key word: Evaluation, Pregnant Adolescents’, Knowledge, Preventive Health Behaviors
I. INTRODUCTION

Adolescent pregnancy is a public health concern that affects the adolescent mother, her child, and the broader community. Pregnancy and childbirth complications are the leading causes of mortality among adolescents aged 15–19 years worldwide; however, the majority of these complications are preventable (HadianT. et al., 2019).

For some adolescents, pregnancy and childbirth are planned and wanted. In some contexts, girls may face social pressure to marry and, once married, to have children. Each year, about 15 million girls are married before the age of 18 years, and 90% of births to girls aged 15 to 19 years occur within marriage (WHO, 2018).

Adolescents fertility rate in Iraq in 2012 was 69 per 1000 women aged 15-19 years compared to neighboring countries; Syria 42, Iran 32, Turkey 31, Jordan 26, Kuwait 14 and Saudi Arabia 10. While, adolescents fertility rate in Iraq in 2019 has increased to 72 per 1000 women aged 15-19 years (The World Bank, 2019).

A major problem for the pregnant teen relates to her own body, and degree of both physical and emotional development achieved during the pubertal process. The incomplete development of genital tract and the musculoskeletal system of pregnant adolescents predispose them to worse overall obstetrical outcomes (Papri F. et al., 2016).

The majority of pregnant teenagers engage in inappropriate pregnancy behaviors. They had more risky complications during pregnancy than pregnant adults. Teenage pregnancy health behaviors are important and necessary. If teenagers follow proper pregnancy behavior, both they and their babies will be healthy. The health behaviors of a primigravida adolescent refer to activities and daily life habits that would prevent pregnancy complications while also maintaining good health conditions throughout the pregnancy (Panthumas, S., 2012). Thus, The aim of the current study is to evaluate the pregnant adolescents’ knowledge about preventive health behaviors during pregnancy, and to identify the relationship between the pregnant adolescents’ knowledge about preventive behaviors during pregnancy and their socio-demographic characteristics.

Methodology:

A quasi-experimental design, is carried out in order to achieve the objectives of the current study using the evaluation approach for the determination of pregnant adolescents’ knowledge about preventive behaviors during pregnancy in Al-Diwaniyah city from the period 17th January 2020 to 1st June 2021. Non-probability, purposive sample of (35) pregnant adolescents has been selected for the present study. The data are collected through the utilization of a constructed questionnaire as a Google format and video calls as means of data collection (Arabic version).

The questionnaire is composed of two main parts as follows: Part I: Pregnant Adolescent Sociodemographic Characteristics: It is concerned with the identification of the socio demographic characteristics of the study group which include (age, education level for adolescent pregnant, occupation for adolescent pregnant, residency, and monthly family income). Part II: Pregnant Adolescent’s Knowledge about preventive Health Behaviors during pregnancy: This part consists of three domains and they are responded by answering the multiple choice questions (MCQ) with correct answer that represent of four answers (one of them is correct answer, scored 2 and the three others answers are incorrect answer, scored 1) This part is comprised of (50) item that measure pregnant adolescent’s knowledge about preventive health behaviors during pregnancy. It is measured as (50-66) = poor level of knowledge, (67-83) = fair level of knowledge and (84-100) = good level of knowledge. Content validity and Pearson correlation coefficient reliability are determined through a pilot study. The data of the present study are analyzed through the use of the Statistical Package of Social Sciences (SPSS) version 20. through descriptive statistics (frequency, percentage, mean, mean of scores, total of scores, range and standard deviation) and statistical inferential (T-test, multiple linear regressions, person correlation coefficient, Chi Square test and analysis of variance ANOVA). Results were determined as highly significant (P≤0.01) significant at (P≤0.05) and non-significant at (P>0.05)

Results: Table (1): Pregnant Adolescents’ Demographic Characteristics

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Pregnant Age (Years)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 - 15 Year</td>
<td>15</td>
<td>42.9</td>
</tr>
<tr>
<td>16 - 19 Year</td>
<td>20</td>
<td>57.1</td>
</tr>
<tr>
<td>Total</td>
<td>35</td>
<td>100.0</td>
</tr>
</tbody>
</table>

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Results out of this table indicate that most of the pregnant are (16-19) year old (57.1%), (34.3%) of them are primary school graduates, (71.4%) of them are housewives, living in rural area (77.1%) and earning an income of (300-600) thousands ID (80%).

Table (2): Overall Evaluation of Pregnant Adolescents’ Knowledge About Preventive Health Behaviors during Pregnancy

<table>
<thead>
<tr>
<th>Overall Evaluation</th>
<th>Poor (50-66)</th>
<th>Fair (67-83)</th>
<th>Good (84-100)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-test</td>
<td>31 (88.57%)</td>
<td>4 (11.43%)</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

Results out of this table depict that the of pregnant adolescents’ have a lack of knowledge about preventive health behaviors during pregnancy.

Table (3): The Relationship between Pregnant Adolescents’ Knowledge and Their Demographic Characteristics

<table>
<thead>
<tr>
<th>Model</th>
<th>Unstandardized Coefficients</th>
<th>Standardized Coefficients</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Beta</td>
<td>Standard Error</td>
</tr>
<tr>
<td>(Constant)</td>
<td>99.077</td>
<td>0.938</td>
</tr>
<tr>
<td>Pregnant Adolescent’s Age</td>
<td>0.069</td>
<td>0.084</td>
</tr>
<tr>
<td>Pregnant Education</td>
<td>0.017</td>
<td>0.042</td>
</tr>
<tr>
<td>Pregnant Occupation</td>
<td>0.028</td>
<td>0.074</td>
</tr>
<tr>
<td>Residency</td>
<td>-0.053</td>
<td>0.117</td>
</tr>
<tr>
<td>Family Monthly Income</td>
<td>-0.024</td>
<td>0.103</td>
</tr>
</tbody>
</table>

a. Dependent Variable: Pregnant Adolescents’ Knowledge

b. Independent Variables: Demographic Characteristics

Results out of this table reveal that there is no significant relationship between pregnant adolescents’ knowledge and their demographic characteristics.
II. DISCUSSION:

The distribution of the sociodemographic characteristics as shown in (Table - 1) revealed that the highest percentage (57.1%) percent of the study sample were within age 16-19 years old that age represent a between middle and late adolescence and consider a common age for marriage according to our culture in Al-Diwanyiah city. Al-Bassam A N, (2015) found that teenage mothers had significantly lower levels of education than adult mothers, this is agreed with our study. Regarding the education level of the participants the study revealed that(34.3%) of them are primary school graduates, which indicating that early marriage considering the main reason for leaving the school early. Which agree with study in Al-Basra Al-wahab (2011) found that teenage mothers had significantly lower levels of education than adult mothers, this is agreed with our study. Regarding the education level of the participants the study revealed that(34.3%) of them are primary school graduates, which indicating that early marriage considering the main reason for leaving the school early. Which agree with study in Al-Basra Al-wahab (2011)7. Regarding the occupation of the participants the study revealed that the highest percentage (71.4%) of them are housewives. This finding due to low education level of participants that leading to minimums their employment possibilities. This findings supported with the study that reported the highest percentages of all study groups were housewives. Teenage mothers more likely to be housewives maybe related to the low education degree which not helping if they want to have a job or an employment, it may be related to the society of their families, they like to be dependent member of family. On the opposite of the advanced maternal age more likely to be an employment or have their own job that is related to their independent personality ( Qasim, A.and Bahaaldeen,E.,2014)8. Regarding the residential area of the participants the study revealed that the highest percentage (77.1%) of them are living in rural area , which reflects the social and cultural factors in our country towards early marriage among rural population which may have adverse effects on maternal outcome. What is common to every region, however, is that girls who are poor, live in rural or remote areas and who are illiterate or have little education are more likely to become pregnant than their wealthier, urban, educated counterparts ( UNFPA,2013)9. Regarding the monthly family income of the participants the study revealed that the majority of the study sample (80%) is within considering to insufficient monthly family income as monthly earning (300-600) thousand ID that effect on their monthly income. Most of teenage mothers are not in a good socio economic condition so transition to motherhood becomes problematic for them (Leese M.,2016)10. The current study reveal that there is no significant relationship between pregnant adolescents’ knowledge and their demographic characteristics as shown in table (3). These findings provide useful evidence that these pregnant adolescents’ share almost the same level of knowledge and their knowledge in general isn’t effected by their demographic characteristics probably because majority of them share almost the same demographic characteristics. Analysis of data related the pregnant adolescents’ knowledge about preventive health behaviors during pregnancy reveals that at the time of pre-test, the majority of them have poor level of knowledge (Table 2). Knowledge is one of the predisposing factors for a risky pregnancy. Less of knowledge or limited knowledge about high-risk pregnancies and the dangers that will be experienced, will also increase the incidence of high-risk pregnancy, behavioral and socioeconomic also affect the risks in pregnancy (Ayu,s. etal.,2020)11. Education plays a vital role in the personal growth and the social development among all of us. It imparts us with all the power and necessities in making a noticeable mark in any of the field (Deivam, 2015)12.

III. CONCLUSIONS:

The study's unique finding is that overall evaluation of pregnant adolescents’ have a lack of knowledge about preventive health behaviors during pregnancy that helps staying healthy during pregnancy and gives birth to a healthy baby. This could be due to a variety of factors, including a lack of education, being young and poor, and a lack of acquaintance to health information.

Recommendations:

1- Improving pregnant adolescents' health literacy is the responsibility of healthcare systems and healthcare professionals through emphasis by the Ministry of Health role in obligate antenatal care units to take their significance role and dissemination of education about the preventive health behaviors among pregnant adolescents’ especially primigravida, and particularly with each specific trimester.

2- Enhancing pregnant adolescents’ knowledge regarding preventive health behaviors during pregnancy through a health education program that cover this topic.

REFERENCE