

Policy brief

Addressing Teenage Pregnancy
in **Bungoma County- 2023**



Introduction

Kenya is one of the countries burdened with teenage pregnancy cases. Adolescent girls' health is at risk due to maternal morbidity and mortality. As a result, achieving better health outcomes depends on preventing teenage pregnancy. Adolescent mothers between the ages of 10 and 19 are known to have a much higher risk of developing systemic infections and endometritis, low birth weight, preterm delivery and serious neonatal conditions.

According to 2015 national adolescent and youth survey, teenage pregnancy is cited as a key area of concern because of its effect on the health of young girls and their future education and employment prospects. Teenage pregnancy is the main reason for school dropout and early marriage among teenage girls.²

According to the most recent DHIS 2022 report, Bungoma County is at 19% and Kenya at 15%¹. This is a higher number with known causes and detrimental effects on health, society, and the economy.

Statement about the issue and justification of its importance

Bungoma County has been recording an increased number of teenage pregnancies that got the attention of national and county leaders. The Ministry of education in particular was concerned about the alarming rate of teenage pregnancies whereby several exam candidates gave birth during the examination period.

As a requirement, all children must be protected from all forms of sexual exploitation and abuse, including unlawful sexual activity, prostitution and in pornographic materials.³

According to recent information from the Ministry of Health, one in five adolescent girls, ages 15 to 19, are already mothers or expecting their first child. Teenage pregnancy is a social issue that affects relationships with family, partners, and peers, disrupting education and poor obstetric outcomes. Adolescent mothers are typically unable to return to school after giving birth because they must care for their children, which prevents them from doing so.

The overall result is that girls' chances of obtaining decent economic opportunities are severely harmed, jeopardizing the country's ability to benefit from the demographic dividend.



Factors Influencing Teen Pregnancies in Bungoma

Limited access to Sexual and Reproductive Health and Rights (SRHR) services:

Inadequate services of Sexual and Reproductive Health and Rights (SRHR) in Bungoma County is one of the major factors contributing to teenage pregnancies. Facilities run out of essential commodities and there are not enough service provision personnel to handle a huge number of young teenagers who need SRHR services.

Economic Status of the Parents:

Teenagers from poor households are highly susceptible to teenage pregnancies. Research shows that most teenage pregnancy cases are linked to poor households with financial constraints to providing education to their teenage girls.

Cultural Beliefs:

According to most society members of Bungoma county, a girl is believed to have the main function of childbearing as a way of giving back to society.

Lack of adequate reproductive and sexual information and knowledge:

Due to limited access to comprehensive SRHR education, social media remains the main platform that a good number of teenagers learn about sexuality. With smartphones, teenagers access pornographic materials and written literature on sexual scenes, which can entice them to engage in sexual activities without making informed decisions, greatly contributing to teenage pregnancy.

Recommendations

Accelerate the complete legislation of the SGBV policy :

The current SGBV draft policy should be completed to allow the county government and other stakeholders to effectively address the issue in a coordinated manner, the policy will also allow the government to allocate specific resources towards suggested implementation strategies.

Enhanced community awareness :

The county government should roll out community awareness programs about healthy ways of utilizing social media platforms, the awareness should also target the cyber businesses around.

Deployment of additional SRHR service providers :

This includes recruitment of more service providers to serve teenagers, especially in the rural setup who might not be able to visit the main health facilities.

Awareness creation to demystify the cultural aspect related to forms of SGBV:

Streamlining the judicial system to have victims get justice within the intended time and hence discourage out-of-court settlements where minors are involved. (Survivor & and witness protection is also key)

Conclusion

Teen pregnancy remains a persistent challenge in Kenya, with detrimental consequences on young girls' and their communities' health and well-being. With its effects persisting, we risk pregnancy-related mortality and morbidity.

Call to action

Y-ACT coalition Bungoma chapter calls for the county government of Bungoma to fast-track the legislation of county-specific SGBV policy that is currently pending complete legislation at the county assembly of Bungoma. As an urgent matter at hand, and as the right of teenage girls who deserve their rights⁴, we call upon the administration of Bungoma County to rapidly address the stockouts of SRHR commodities in the rural health facilities and come up with mechanisms for adding more personnel to those facilities. The community at large is willing to support the initiatives of the government through both national and local government agencies by for example reporting unwanted out-of-court settling of teenage pregnancy cases but still, the government must demonstrate its commitment to supporting community-based solutions to this issue.

References:

1. Kenya Demographic Health Survey, 2022.
2. 2015 National Adolescents and Youth Survey.
3. UN Convention on the Rights of the Child.
4. The Maputo Protocol of 2003 promotes women's rights in Africa.

