FACTORS DRIVING ADOLESCENT PREGNANCY in Bangladesh

Findings from a research study





Adolescent pregnancy in Bangladesh

- \cdot Bangladesh sees the highest rates of adolescent pregnancy in South Asia.
- The study explored the socio-cultural context influencing the reproductive outcomes, experiences and decision-making ability of young women (15-19 years) who were recently pregnant.
- Research areas: The study was conducted in Barisal, Chittagong, Cox's Bazar, Cumilla and Dhaka in Bangladesh.
- Methods: Data were collected through 51 interviews with (recently) pregnant female clients of health clinics, family members, health-care providers and managers.



I had taken methods
[pills]. But my
mother-in-law found
the pills and threw
them away. (Young
woman, 17 years old,
Dhaka)

Findings

- There is widespread awareness of government advice to delay childbearing until age 20.
- However, social norms around adolescent and female sexuality and related gender roles influence young people's sexual and reproductive health and rights (SRHR).
- There is an inter-generational gap between parents/ in-laws and young people that prevents them from discussing SRHR issues.
- would think I'd become promiscuous.
 That's why I didn't go to anyone.
 (Young woman, 17 years old,
 Cox's Bazar)

It is difficult to ask [about family

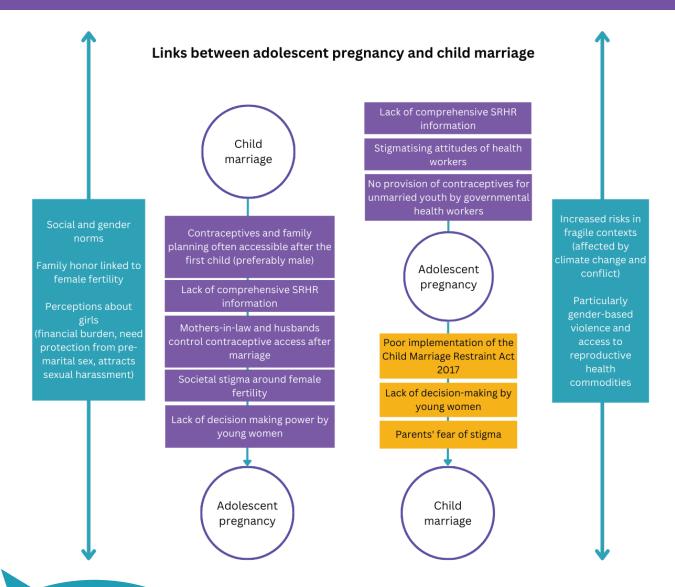
planning methods]. If I would ask anyone about it prior to my marriage,

it would be disgraceful for me. If I did

ask my cousins or sisters-in-law, they

- There is widespread stigma and fear of being infertile, which pressurises young women to reproduce soon after marriage.
- Young women lack decision-making power given the patriarchal set up and the dominant role of mothers-in-law.
- There is a lack of (accurate) knowledge of contraceptives among young women and their family members.
- There continues to be formal and informal barriers to accessing sexual and reproductive health (SRH) services.

Links between child marriage and adolescent pregnancy



It's all my fault [referring to an accidental pregnancy]. It happened only because I misunderstood the processes...In our time we didn't study anything...I don't know whether it is a part of the curriculum or not. But in our times, it wasn't. (Husband, 25 years old, Barisal)

Recommendations

- · Conduct community and intergenerational dialogues
- Promote delivery of quality SRHR education [offline and online] with teacher support groups
- · Conduct contraceptive counselling at family-level
- · Facilitate regular value clarification with health workers
- · Train health workers on adopting youth-friendly health services
- Incorporate follow-up systems in schools to check on students who have dropped out
- Champion and support the work of marriage registrars who are against child marriage
- Engage and sensitise boys and men via community-based activities

Chatterjee, O., Kakal, T., Hossain, B. M. [2022]. "My mother-in-law forbade me to take pills": Factors driving adolescent pregnancies among young women clients from health clinics in Bangladesh.

Amsterdam: KIT Royal Tropical Institute.

Read more at: https://www.kit.nl/publication/my-mother-in-law-forbade-me-to-take-pills/?alt_nav=5182

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