
Solving the Problem of Unplanned Pregnancy in Thai Teenagers

The situation on Thai teenagers' sexual risk behavior and pregnancy

1. Teenage pregnancy is currently among important problems in Thailand. Risky sexual behavior has the effect of magnifying the problem of teenage pregnancy. It was found that between 2004 and 2008, the birth rate for teenage mothers aged less than 20 years old had shown a tendency to increase, from 13.86% in 2004 to 16.05% in 2009. This data included also abortion and stillborn infants which often were not reported. Thus, the real figures on birth would be higher than the above. A study done on factors affecting teenagers' pregnancy states that most of the pregnancies arise due to inconsistent use of the birth control methods. Or, they do not practice birth control at all due to lack of knowledge, or have misunderstandings about sexual relations, that having sex one time only will not result in pregnancy. They also have the feeling that using condoms block sexual satisfaction. Plus, they do not know what the general conditions of getting pregnant are. In addition, teenagers are reluctant to access birth control services, and staff providing such services do not have a good attitude towards teenagers with sexual problems. At the same time, access to an efficient birth control service for teenagers, is still something that they themselves have to bear the burden of seeking it—and they do so armed with an incorrect attitude.

2. From a survey of the age in which Thai teenagers begin to engage in sexual relations, it was found that such age has been gradually declining. At present, teenagers have their first-time sexual relations at the age, on average, of 15-16 years old. It was further found that most first-time sexual relations were done without use of condoms; only less than 50% of first timers used condoms. The youngest mother was 9 years old. In addition, having unprotected sexual relations has resulted in the growing tendency for teenagers and youth aged 20-24 years old to get sexually transmitted diseases. It is reported that the incidence rate of such diseases has been rising from 43.6 cases per 100,000 population in 2005 to 78.6 cases per 100,000 population in 2009. This certainly leads to an increase in risk of getting HIV infection.

3. Influence of media on teenagers' behaviors, especially sexual behaviors, is very important. Thai youths nowadays spend most of their time with different types of media for not less than 8 hours a day. This is divided into 3.1 hours per day for internet, 5.7 hours per day for television, whereas only 39 minutes per day for reading. Comparing to internet, Thai youths spend their time 6 times less on reading. From a study, there are very few websites for education. Moreover, among 40 most popular websites in Thailand, 52.5 % has inappropriate information about issues related to sex, and 17.5 % is obscene, adulterated and violent. For television, only 5% is

education program. In addition, only 1% of total radio programs in Thailand is safe media specifically provided for youths.

4. The Media Monitor Project did a survey and reported that 88% of television programs during the family time (16.00-22.00 hours) is soap operas containing inappropriate language, aggressive behaviors, and inappropriate sexual relation behaviors. These could lead to mimic and aggressive behaviors in the youths.

Effects of teenage pregnancy

5. Teenage pregnancy is a risk factor, risky for the health of the mother and her yet unborn baby.

5.1 Problems of health of the mother: Teenagers who get pregnant during the first five years of her first menstruation will suffer from retarded physical growth and development. In particular, their height will be less than others because of much secretion of estrogen hormone, which results in the epiphysis of the bone closing earlier. Teenagers would have more complications due to pregnancy compared to women over 20 years old who get pregnant. For example, the incidence of anemia would be higher, blood pressure would be high during pregnancy, labour pains longer, and there are more incidences of premature birth. In addition, it was found that the mortality rate of mothers aged 15-19 years of age is three times higher than that of mothers aged 20-24 years old. Then there is the issue of complications resulting from abortion as the data shows undesired pregnancies among teenagers is a rate of 86.6%. The result is a higher rate of abortion among teenage mothers. There have been incidents of secret abortions performed by illegal abortion practitioners, which are harmful to the health of the mother. Even in countries where abortions are legal, a high incidence of complications in abortion are found, because the request for abortions would come at a very late stage of pregnancy, that is, at the second quarter. From a survey done in 1999 by the Department of Reproductive Health, Department of Health, for women who had abortions and suffered from complications to the extent of having to be admitted to hospitals, 29.3% of them were below 20 years of age. Teenage mothers tend to suffer from mental health problems, as they do not have enough mental development during their pregnancy. They lack emotional maturity and experiences, so they are unable to think properly and solve the myriad problems befalling them as a result of pregnancy at such an early age. Moreover, they do not receive acceptance and sympathy from the fathers and mothers of both parties, the latter tending to conceal such pregnancies from society. The teenagers would also be worried about schooling, about the attendant financial burdens. And they are unable to make the appropriate adjustments, and therefore become edgy, bad-tempered, easily irritable, and prone to committing suicide. A project surveying the situation of young mothers conducted by the Ministry of Social Development and Home Security found that young mothers who thought one or two times about suicide during pregnancy or after birth comprised 12%

5.2 Health problems found in infants are being underweight, being not strong, prone to death within a month after birth, especially if the mother gets pregnant within two years after her first period. In this latter case, infants who survived tend to weigh two times less than if he/she were born more than two years after the mother had her first period. And such underweight infants in turn would encounter neurological problems such as mental retardation, cerebral palsy, deafness or blindness, and could suffer from convulsions. Even though the infants are able to grow, they would be moody, their mental health deteriorating because the parents, being teenagers, could not understand the nature of children as regards for example why they cry, why they respond in the way they do. Teenage parents do not yet have a secure mind and emotion, are not adult enough. This leads to the children being abandoned and subject to various forms of cruelty.

6. A study project on problems of young mothers done in Thailand in 2010, using a sample of 823 teenagers who had children before they reached 18 years of age found that most of such teenage mothers or 37.9% finished only their lower secondary education (or junior high school). The rest, or 19%, 17.1%, and 11.8% respectively finished their upper secondary education, vocational educational education (receiving the certificate), and primary education. Moreover, 3.4% have not received any formal education. As to income from work, it was found that for these young mothers whose educational achievements were not that high and coupled with their young age, the majority or 33.3% have an income per month of between 2,501 – 5,000 Baht, and 31.6% of these mothers have an income of between 501 – 2,500 Baht. These low incomes have led to some living difficulties in this era.

7. Most children born from undesired pregnancies will be grown up with a tendency of having social problem because most of them are abandoned and tend to have family problems.

Policy movements

8. Movements for policies and strategies on reproductive health at the national level include:

8.1 The Department of Health through the Bureau of Reproductive Health of the Ministry of Public Health has drawn up a draft of the First National Policy and Strategy to Develop Work on Reproductive Health (covering 2010 – 2014).

8.2 Draft National Policy on Prevention and Problem Solving on Undesired Pregnancies composing 6 strategies: 1) prevention, 2) cure and rehabilitation, 3) strengthening roles and education of core youth leaders, 4) elimination of media influence, 5) policy development and advocacy, and 6) survey, monitoring and evaluation. This draft policy is developed under the National Commission on Children Protection.

8.3 Improving the draft Act on Protecting Reproductive Health B.E.... that covers reproductive health protection for all sexes and ages. A Health Assembly process organized by the Department of Health and the National Health Commission Office was used for public

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hearing on this draft Act on 16 October 2010. All representatives attended in the Health Assembly agreed in principle on the draft Act that since there are differences in opinions regarding the sexual health issue and there are some sensitive issues mentioned including the Thai culture, it was proposed that there should be a specific law to be enforced by all related sectors. However, more information and inputs from networks in various area are still needed for the law development.

8.4 The Bureau of Reproductive Health has collaborated with all related parties to create a Roadmap of Strategy to Develop Reproductive Health of Teenagers and Youth Aged 10-24 Years Old focusing on capability of teenagers and youths to prevent undesired pregnancies and sexual transmitted diseases with ultimate goals of delayed sexual relation, safe sexual relation, and prevention of teenage pregnancies. This Roadmap of Strategies has been pushed for further movement and implementation through having a committee and/or a strategic plan at the provincial level, and having a community plan, if needed, for the prevention and problem solving of undesired pregnancies among teenagers and youths.

9. Although with clear direction and policy, since the problems happened are related to different levels of the society (e.g. individual, family and community), therefore strong collaboration among all level and parties (e.g. private and civil society sectors) are very important for effective movement and implementation of the policy. The National Committee on Reproductive Health Development was established composing of representatives of organizations from government sector, professional/academic sector, private sector, and social sector for supporting collaboration among all related organizations and parties (including the National Commission on Children Protection) to implement integrated activities which are complied with the provincial and community strategic plans, as well as to the resolution from the First National Health Assembly – ‘Sexual Health: Sexual Violence, Unplanned Pregnancy and Sex issues relating to AIDS/ Sexually Transmitted Diseases’. Effective implementation of these integrated activities needs a key focal point and it was agreed by the government that the National Committee on Reproductive Health Development should be the key.

Sexual Education to Solve Problems

10. The Ministry of Education, through the Office of Vocational Education Commission, has arranged activities so that students can learn about the concept of mutual help. This is done by bringing in the curriculum of teaching and learning curriculum as developed by the PATH organization to be used to educate some students in certain institutions. The PATH organization in cooperation with the Ministries of Education and Public Health had worked together on the project “Forward with Understanding” which was part of the work plan on preventing contraction of AIDS among youth groups operational during 2003-2008. Lessons learned from this project led to development of a curriculum and a specific process of comprehensive sex education for educational institutions. The principle idea behind this is to build up understanding

on sexual orientation in general, on student-centered education and on development of youth that emphasizes positive aspects.

11. The Ministry of Education, through the Secretariat of the Basic Education Commission has organized a system to help students since 1999 on an individualized basis. This is done by getting to know each student, categorize him/her and help them on the individual problems found. Also, the system refers students to related service agencies for further help as needed. Such individualized-help system will be replicated in the so-called basic education expansion schools. There is also a project that was piloted for 6 months in 2006 with satisfactory results. This is a project to enhance life and human relations skills among lower secondary school students, so that they would be free from AIDS and other sexual problems including unplanned pregnancy. The project used computer based learning, with a curriculum built called “The world can turn by my own two hands”. Given the project’s satisfactory results, the Bangkok Metropolitan Authority put this curriculum in its strategy to protect children, and in 2009 the course was inserted in the hour-long guidance sessions that every junior high school student had to attend.

12. Education provided inside and outside educational institutes is considered successful attempts of the government and private sectors. However, to keep the curriculum and education context updated and could follow the fast-paced of situation is still considered a limitation. Therefore, family and parents need to also learn and be educated on the issues for appropriately teaching their children.

Roles of Media and Network Organizations

13. The Ministry of Culture, by the Culture Watching Group, has implemented various projects for boosting social and cultural immunity among Thai youths, as well as parents. The projects include ‘Youth leads, we support’, ‘Multi-sectoral strategic network’, and ‘Policy watching’ which have proposed many activities and mechanisms for supporting and strengthening sustainable cultural development in communities and the country such as ‘safe and creative media’, ‘youth volunteer for culture watch’, ‘cultural hot line at 1765’, ‘75 provincial cultural councils over the country’, and ‘cultural linkage in communities’.

14. The Population and Community Development Association is a private sector with 16 centers scattered in different regions in the country. The Association provides education on family planning and legally abortion clinics according to the Thailand’s Criminal Code, Section 305, which specifically mentioned about condition for legally stopping undesired pregnancies.

15. Thailand’s Family Planning Under the Royal Patronage has developed curriculum and activities related to reproductive health education for scouts to teach and disseminate to youths living in the Department of Juvenile Observation and Protection.

16. The work plan to enhance sexual wellbeing (of the Health Promotion Foundation) in cooperation with the Women's Health Advocacy Foundation and 48 other allied agencies are fully aware of the sexual wellbeing problem, and have worked together, for example to promote learning and knowledge about unsafe sexual relations. They have also enlisted new allies in order to mobilize efforts to solve the problem of teenage pregnancy.

17. On temporary emergency housing services, the Association for the Promotion of the Status of Women has operated such housing to help women and children who are in trouble or distressed. Health services are also offered to an extent. Consultation is given with the aim of rehabilitating the mind and body, and occupational training is offered to women and children with problems, mainly resulting from unplanned pregnancy. In 2006, a project covering the theme of increasing capital for very young mothers and their children was initiated, the aim being to help them build a life for themselves and foster a happy relationship between mother and child, to widen opportunities for the mothers' education while they are looking after the child. Full and complete support is given to them.

18. The Community Nurses Club of Thailand is pursuing a project to develop a model of health promotion work in the context of nursing. The problems of children and youth in Thailand in terms of sexual relations, drinking, and violence which could be further disaggregated into 18 problems occurring nationwide. And from a synthesis of research done both in terms of the current situation and in terms of problem solving efforts, it was found that problems arose from a sense of fun on the part of youth in what they are doing but adults are feeling unhappy about it all. Looking deeper, it was found that the problems arose out of changes in the nature of the family and the way of rearing children, in turn as a result of economic and social changes. The nature of sexual direction and of drinking among youth, all arose because of adults' behavior and thinking. This is a national level problem, deriving from parents, their lack of their knowledge on how society has changed, and a behind-the-times perspective in certain cultural and way of life aspects. The Community Nurses Club of Thailand has been doing work on projects to solve the problem of teenage pregnancy with high commitment for a long time now.

19. Since the activities on reproductive health, especially those related to teenage pregnancies, are focused by many sectors, it is not difficult to develop and strengthen network on certain issues to solve problems efficiently and effectively.

Summary of Progress and Public Hearing through the Health Assembly Process

20. From the public hearing on reproductive health protection issue through the health assembly process, there were 3 mechanisms proposed as key focal points for moving and implementing activities related: 1) the National Policy and Strategy to Develop Work on Reproductive Health, 2) the National Policy on Prevention and Problem Solving on Undesired Pregnancies, and 3) the Act on Protecting Reproductive Health B.E....

21. Other mechanisms proposed is the National Committee on Supporting Children and Youth Development, which was established by the Promotion of National Children and Youth Development Act, B.E.2550. This Committee is working with different levels of the children and youth councils in Thailand.

22. It is necessary to educate youths on sexual issues in all aspects through different types of curriculum, as well as to provide easy learning and accessible tools or media for the youth. Influence of unsafe media should be eliminated. Friendly clinics for youths and teenagers should be provided, and all sectors (e.g. local administrative organizations, police, social network, and private sectors) need to collaboratively work for sustainable reproductive health related problem prevention and solving in the society.

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