Influence of Community-Based Ecological Interventions on the Management of Teenage Pregnancy in Mombasa County

Joseph Theuri

joeoseph@gmail.com

https://orcid.org/0000-0001-6574-1780

Atlantic International University

ABSTRACT

The purpose of this study was to assess the contribution of ecological transformative social change strategies to the management of teenage pregnancy with reference to Mombasa County, Kenya. To this end, the study examined the influences of family-based interventions, school-based interventions, community-based interventions, faith-based interventions, and government measures on teenage pregnancy in the county. The findings show that the issue of teen pregnancy is of great concern in the county of Mombasa. This is evidenced by the high rate of school dropout among girls who got pregnant, early motherhood, transmission of venereal diseases, cases of abortion, and death after abortion in some cases. Community-based ecological interventions were found to be correlated with the management of teenage pregnancy (P<0.05) according to Pearson correlation. As a result, there is a need to put measures in place aimed at checking teenage pregnancies and their associated consequences, such as abortions, girls dropping out of school, and early marriages, among others. As a result, the contribution of civil society organizations, role models, and other targeted community-based interventions should be strengthened to advocate for changes that could lead to a reduction in teenage pregnancy among girls.

Keywords: Civil Society Advocacy, Ecological Transformative Social Change, Mombasa County, Community-Based Ecological Interventions, Teenage Pregnancy Management

I. INTRODUCTION

Teenage pregnancy is a pervasive issue worldwide, with far-reaching social and educational implications. The need for ecological transformative social change to address this challenge is evident, particularly in regions like Mombasa County, Kenya, where teenage pregnancy rates remain high. Personal experiences and the broader societal landscape underscore the urgency of shifting perspectives and interventions to effectively manage teenage pregnancies (Gunawardena et al., 2019).

In Kenya, teenage pregnancy has been a long-standing concern, often leading to school dropout and resorting to unsafe abortions (NCPD, 2017). Unsafe abortions, accounting for 35 percent of maternal deaths according to the 2014 Kenya Demographic Health Survey, highlight the severity of the issue (Gunawardena et al., 2019). Contributing factors include social stigma, limited understanding of safe abortion, and inadequate access to reproductive health services. Additionally, the unmet need for family planning contributes to unintended teen pregnancies, with the current figure standing at 18 percent of the eligible population (NCPD, 2017)).

Mombasa County faces unique challenges, including early sexual debut, child prostitution, and vibrant sex tourism, all contributing to the high prevalence of teenage pregnancies. The coastal region demands specific attention due to its distinct contextual factors. Existing studies have identified gaps in understanding how interventions in the ecology of teenage girls impact and mitigate teenage pregnancy in such regions (Awuor, 2018).

Globally, teenage pregnancy remains a significant concern, affecting developed and developing countries alike. The World Health Organization estimates that 16 million adolescent girls give birth annually, with a higher incidence in developing nations (WHO, 2018). Reports from the United Nations and various studies highlight the adverse outcomes of teenage pregnancy, emphasizing the need for ecological transformative social change to strengthen intervention strategies (UNESCO, 2017).

In countries like Vietnam, Ethiopia, and across Africa, studies underscore the prevalence of teenage pregnancy and associated adverse outcomes. Ecological transformative social change is proposed as a solution, emphasizing the importance of community, family, and community-based ecological interventions to address the root causes of teenage pregnancy (Habitu et al., 2018; Wado et al., 2019). Despite these proposals, the effectiveness of such strategies in specific regions like Mombasa County remains largely unexplored.
Current literature presents a range of ecological transformative social change strategies across different elements of the ecological system. Family, school, society, and government measures are identified as crucial components, each facing distinct challenges in implementation (Gunawardena, Fantaye, & Yaya, 2019; Yakubu & Salisu, 2018). For instance, family breakdown, communication conflicts, and societal value breakdowns are noted impediments (Kassa et al., 2018; Marseille et al., 2018).

School-based interventions, government policies, and community mobilization efforts are recognized as essential tools in preventing teenage pregnancies. However, the effectiveness of these strategies is contingent on various factors such as resource availability, policy implementation, and societal values (Svanemyr, 2019; World Bank, 2012). The proposed research aims to investigate the impact of these strategies, with a focus on Mombasa County, to provide nuanced insights for effective teenage pregnancy management.

Despite the global discourse on teenage pregnancy, studies focused on the coastal region, specifically Mombasa County, are notably lacking. Most documented studies in Kenya have centered on Nairobi and western regions, leaving the coastal areas underrepresented (Awuor, 2018). This research seeks to address this gap by assessing the ecological transformative social change strategies for managing teenage pregnancy in Mombasa County comprehensively.

The purpose of this study is to evaluate the efficacy of ecological transformative social change strategies in managing teenage pregnancy in Mombasa County, Kenya. By delving into the unique contextual challenges of the coastal region, the research aims to contribute valuable insights that can inform targeted interventions and policies to curb the high prevalence of teenage pregnancies in the area.

The gravity of the issue in Mombasa County is evident from statistics revealing high levels of teenage pregnancies, ranking among the highest in the country. The challenges are further compounded by issues such as sex tourism and reluctance toward safe sex practices among teenagers (Muturi, 2020). Comprehensive ecological transformative social change strategies that encompass family, school, community, and government levels are hypothesized to be key in addressing these challenges (Njoka, 2016).

In summary, this research proposal seeks to bridge the knowledge gap by conducting a systematic study on the impact of ecological transformative social change strategies in the management of teenage pregnancy in Mombasa County. The findings aim to inform evidence-based interventions and policies tailored to the unique context of the coastal region, ultimately contributing to the global discourse on teenage pregnancy prevention.

LITERATURE REVIEW

2.1 Theoretical Framework

The Problem Behavior Theory (PBT) was advanced by Jessor in 1977 (Jessor, 1977). The theory explains the adaptions to unconventional behaviour among adolescents (risk behaviours as in this study). The theory has been used to explain why students all over the world take to risk-taking behaviours such as substance use, fighting, alcohol and drug abuse among others (Ma & Shive, 2000). The theory assumes that behaviour is guided by the interaction of three systems: legal norms in the society; value system of the individual and; the relationships that one sustains in his or her environment.

The societal as well as governmental legal systems and how they are enforced will influence the problem behaviour of an individual. An individual will also act based on what he or she perceives as peer, societal and family expectations for achievements. Lastly, an individual will act based on the influence of the relationships they have. If the social relationships of an individual tolerate a particular behaviour, the individual is also likely to tolerate it and vice versa.

This theory relates to this current study since the legal framework in which adolescents live could influence how teenage pregnancy is managed and controlled. If adolescents are strongly guided to avoid some behaviour, they are likely to shun such behaviour. In addition, what the adolescents perceive as the expectations of the society will affect their behaviour patterns. The relationships of the adolescent and what they tolerate will also determine the extent to which they will engage in problem and how this could influence teenage pregnancy among others.

2.2 Empirical Review

Saunders (2016) studied ‘Mobilizing Communities in Support of Teen Pregnancy Prevention: “Communitywide Initiatives” Findings.’ In this study, it is established that there are continuous efforts of grant initiatives in the promotion of community mobilization model by the U.S Office of Adolescent Health in a bid to
support prevention of teen pregnancies, the most recent federal grant program being the Communitywide Initiatives (2010-2015). This grant promoted the prevention of pregnancy using three teams in nine targeted communities by seeking to promote evidence-based sexuality education programs and accessibility of contraceptives. The results in this study were from three key informant interviews in a 5-year period (2010-2015) when the grant was implemented which targeted the coordinators of these projects. The results involved including all the challenges and successes of community mobilization in the area of prevention of teenage pregnancies.

The study by Saunders (2016) is supported by Akella and Jordan (2015) in “the Impact of Social and Cultural Factors on Teen Pregnancy” who focused on the reasons leading to high pregnancy rates within the African American teenage population. The Social Learning Theory by Bandura (1977) forms a basis of this study and aided in deconstructing the factors which lead to teenagers to choose early motherhood over career and education. A phenomenological analysis which involved pregnant teenagers and a local non-profit NGO were used to ensure empirical data was collected. The study shows that interventions at community levels checked teenage pregnancy.

The importance of community-based interventions on mitigating teenage pregnancy was also studied by Yeboah-Asiamah et al. (2019) who investigated the Factors associated with adolescent pregnancy in the Sunyani Municipality of Ghana. The study followed an unmatched case in adolescents aged 15-19 years where the cases were pregnant and parenting adolescents and the controls were non-pregnant adolescents with no prior birth history. Data collection was through structured questionnaires in a sample of 245 participants, out of which 120 were cases and 125 were controls. Analysis was done using STATA version 12 using Pearson’s chi-square and logistic regression. Findings show that occupation, economic status and place of residence are some of the factors leading to pregnancy in adolescents. Through logistic regression, it was established that the adolescents in urban areas have low chances of getting pregnant compared to those in rural settings, those in apprenticeships, unemployed and from low economic backgrounds also had higher chances of getting pregnant. The environment where the teenage lived in was an important predictor of teenage pregnancy.

Another study by Svanemyr (2019) on “Adolescent pregnancy and social norms in Zambia: Culture, Health & Sexuality” focuses on improving the understanding of the contribution of gender sexual norms on early pregnancies in Zambia. Data collected was through a combination of individual interviews and focus group discussions in 13-18-year olds and their parents and peer interviews of 13-20 girls in 4 sites. The findings, in corroboration of the study by Yeboah-Asiamah et al. (2019) outline the factors that lead to early pregnancies in the young Zambian girls. These include lack of resources, insufficient knowledge about sexuality and reproduction and gender norms on contraceptive use and sexual behaviour.

As shown from the preceding discourse, most of the studies focused on family and school based ecological interventions and their impact on teenage pregnancy in various parts of the world with special reference to developed countries. Though some of the studies were based on primary data sources, there was over emphasis on desk review of existing literature. In this regard, most of the studies may not be relied on for policy making in the context of the present study. As such, the studies do tend to attempt to link specific interventions with the factors contributing to teenage pregnancy. There is need for an ecological model in Mombasa County. This emanates from the fact that although there are high levels of teenage pregnancy in the area, holistic studies on the ecological responses are scanty or missing all together from the public domain. This underlines the importance of this current study.

III. METHODOLOGY

The study will adopt the descriptive survey and cross-sectional study designs. In this design, the researcher collects data through interviewing or administering questionnaires to sample of individuals. The design has an interesting attribute in that the relationship between variables is described. Thereafter, generalization principles and/or theory that have universal validity are developed (Khan, 1993). In assessing the contribution of ecological transformative social change strategies to the management of teenage pregnancies in Mombasa County, this is deemed a suitable design. The design is also cross-sectional because it is a point in time study (2021). Data will be collected using questionnaires, interview and Focus Group Discussion (FGDs).

The study was based on primary data sources. This section presented the target population, sample and sampling procedure as well research instruments (tools).

There are 7 public girls’ secondary schools in Mombasa County as reported by the County Ministry of Education. The study shall target principals, guidance and counselling teachers and students from these schools. There are 15,676 girls in these schools. Only Form 3 students (which number 3,801) will be targeted (Mombasa County,
2021). This is for purposes of narrowing down the study in scope. Furthermore, these students are targeted because by the time they reach this class, they are able to understand the factors influencing their behaviour considerably. This is in line with a 2015 study by Kiarie that show that students in Form 3 and 4 are better suited to understand the factors influencing teenage pregnancy in public schools since they have stayed in their respective schools longest and have a wealth of information from their experiences (Kiarie, 2015). This study will not focus on Form 4 students who are often busy preparing for national examinations. At the same time, the study targets the 7 principals and the 15 guidance and counselling teachers from the 7 public girls’ secondary schools. At the same time 30 senior religious leaders from the County will be targeted. Additionally, 8 Ministry of Education Science and Technology (MoEST) officials will be targeted. These include 3 from the national and 5 the county governments respectively.

The study shall use the following formula put for obtaining the girls’ sample size (Khuanbai, 2019). The formula is:

\[ n = \frac{z^2 \cdot p(1-p)}{e^2} \]

Where:
- \( z \) = z score
- \( e \) = margin of error
- \( N \) = population size
- \( p \) = population proportion

When the formula is fitted to the population of form three girls, a sample of 349 will be obtained. On their part, all the 7 principals, 15 guidance and counselling teachers, 8 government officials and 30 religious leaders will be sampled. To deal with attrition, the study will include 5 more guidance and counselling teachers, 50 more girls and 5 more religious leaders. The sample size is presented in Table 1:

<table>
<thead>
<tr>
<th>Category</th>
<th>N</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls</td>
<td>3,801</td>
<td>349</td>
</tr>
<tr>
<td>Guidance Counseling Teachers</td>
<td>15</td>
<td>15</td>
</tr>
<tr>
<td>Religious Leaders</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>MOeST Officials</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3,861</strong></td>
<td><strong>402</strong></td>
</tr>
<tr>
<td><strong>Attrition</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Girls</td>
<td></td>
<td>50</td>
</tr>
<tr>
<td>Teachers</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>Religious leaders</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>60</strong></td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td></td>
<td><strong>462</strong></td>
</tr>
</tbody>
</table>

The study used simple random sampling to select students from each school. Purposive sampling shall be used to select principals and a guidance and counselling teacher from each of the 7 public secondary schools. These are selected as the key informants due to their role in offering guidance and counselling services to girls in the schools. In addition, all the MOeST officials and religious leaders will also be purposively sampled.

The study used questionnaires, interviews guides and Focus Group Discussion (FGD) guides as data collection tools. The questionnaires shall be used to collect data from students while the interviews shall be carried out on the guidance and counselling teachers, principals and MoEST officials. On their part, religious leaders will take part in 3 FGDs. Each FGD will comprise 10 to 11 persons. The questionnaire will have closed-ended questions on the respondents’ demographic information and likert-type statements for the purpose of capturing relevant and important information for the study based on the study variables and the gaps arising from the literature reviewed. The interviews and FGDs will be guided by open-ended questionnaires that shall be based on the research objectives.

Kaphagawani and Kalipeni (2017) defined a questionnaire as a quantitative method aimed at expressing its findings in figures. A questionnaire obtains the requisite quantitative data that is useful to a study. The questionnaire will be a self-report inventory adapted from school going girls. It will consist of 7 sections. Part A will seek the

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background information of the study respondents. Part B contains questions on Family Based Interventions; parts C and D investigate the School-Based and Community-Based Intervention respectively. Part E looks at faith-based interventions while part F looks at government measures/policies.

McGrath, Palmgren, and Liljedahl (2019) an interview schedule consists of questions directed to an individual so as to get information about particular aspect. In this study an interview schedule for the counselling and guidance, principals and MOeST officials will be used. The questions will be on the level of teenage pregnancy, family-based, school-based, community-based and faith-based and government measures/policies that influence the management of teenage pregnancy in Mombasa County.

A focus group discussion (FGD) comprises of individuals with certain characteristics who freely discuss a given issue or topic. A focus group explores attitudes, perceptions and feelings about a topic. The study has prepared four questions that will be discussed by the religious leaders in 3 FGDs of 8 to 12 persons.

Pre-testing will be conducted to assist in determining accuracy, clarity and suitability of the research instrument. This will include a pilot study targeting 10 girls and 2 guidance and counselling teachers drawn from 2 schools in neighbouring Kale County.

The data obtained from the pilot study will be used to ascertain the appropriateness and relevancy of the questionnaire to the study. Cronbach’s alpha, a reliability coefficient which varies from 0 to 1 whereby a value of 0.7 or less indicates unsatisfactory internal consistency reliability will be used to test the reliability of items in the questionnaires (Malhotra, 2004).

To ensure the validity of the instrument, internal and external validity tests will be carried out. Face validity shall be assessed by finding out the ease with which the respondents answer the research questions. In this case, any ambiguous questions shall be adjusted to make them easy to understand and answer. Cooper and Schindler point out that content validity offers adequate investigation of the study questions (Cooper & Schindler, 2003). The questionnaire shall also be presented to the supervisors for review and their input on the constructs of the research used to improve the questionnaire. Construct validity shall be ensured through the operationalization by setting the questions in the questionnaire based on the reviewed literature and the operationalized definition of the study variables.

Content validity will be used to find out if the instrument would answer all the research questions. Furthermore, factor analysis will also be used to test construct validity whereby the right coefficients from the data will be obtained and the results use to make adjustments, corrections, and additions to the research instrument.

First and foremost, the researcher will obtain a research authorization letter from Kenya Methodist University and a research permit from the National Commission for Science, Technology & Innovation (NACOSTI). Thereafter, the researcher will recruit and train three research assistants to help with the data collection. These will be trained for purposes of ensuring that they understand the objectives of the study as well as the research instruments. The researcher together with the research assistants will then visit the study area to issue the questionnaires and carry out the interviews. Appointments will be sought from the various respondents for interview while the questionnaires will be self-administered. The whole data collection exercise will last 21 non-continuous days.

The data collected using questionnaires will be analysed using the Statistical Package for the Social Sciences (SPSS) version 24. Descriptive statistics such as: frequencies, percentages and means shall be conducted. Furthermore, inferential statistics (Multiple Regression Analysis) shall be used to test the relationships between the independent and the dependent variables.

The findings obtained were presented in form of Tables and Figures and conclusions drawn. Data from interviews and FGD guides will be subjected to thematic analysis. These shall be reviewed and the emergent meanings drawn and applied to answer initial research questions and issues (Miles & Huberman, 1994).

IV. FINDINGS & DISCUSSIONS

4.1 Findings

4.1.1 Response Rate

The study sampled 349 girls, 15 guidance and counselling teachers, 30 religious leaders and 9 MOeST officials. Out of these, 296 girls (84.8%), 11 guidance and counselling teachers (73.3%), 24 religious leaders (80%) and 6 MOeST officials (75%) took part in the study. The overall response rate was 82.4%. This was considered sufficient for data analysis.
Table 2
*Response Rate*

<table>
<thead>
<tr>
<th>Category</th>
<th>Sampled</th>
<th>Responded</th>
<th>Response Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Girls</td>
<td>349</td>
<td>296</td>
<td>84.8</td>
</tr>
<tr>
<td>2. Guidance &amp; Counseling Teachers</td>
<td>15</td>
<td>11</td>
<td>73.3</td>
</tr>
<tr>
<td>3. Religious Leaders</td>
<td>30</td>
<td>24</td>
<td>80.0</td>
</tr>
<tr>
<td>4. MOEST Officials</td>
<td>8</td>
<td>6</td>
<td>75.0</td>
</tr>
<tr>
<td>Total</td>
<td>409</td>
<td>337</td>
<td>82.4</td>
</tr>
</tbody>
</table>

4.1.2 Demographic Information

The study sought to examine selected demographic information about the girls. This included age, parents’ marital statuses, persons the girls lived with and their religion. The findings are as shown in Figure 1 shows that most of the girls (48%) were aged between 15 and 16 years. This was followed by those aged between 17 and 18 years at 47.3%. The rest were aged 14 years and below at 4.7%. These findings show that most of the girls were in their late teenage. The reason for this was most girls aged 14 years and below had just joined secondary schools and were not well suited to understand the ecological transformative social change strategies under investigation in this study.

![Figure 1](Ages of Girls)

Regarding the marital status of the parents/guardians of the girls, the findings as shown in Figure 2 shows that more than half the girls (54.7%) had both parents. This was followed by 17.6% who had single parents and 16.9% who had separated parents. The rest had divorced parents (6.1%) and guardians (4.7%). These findings show that whereas the girls came from diverse families, most of them had both parents signifying high levels of family stability which is one the variables under investigation in this study.
The study went on to examine the religion of the girls. The findings show that most of the girls (60.8%) were Christians. These were followed by 37.8% who were Muslims. Only 4(1.4%) opined that they came from other religions. The findings show that most of the girls came from the mainstream religions in Kenya. This could create bulwarks against risk taking behaviours among the girls and by so doing prevent teenage pregnancy. The findings were presented in Figure 3.

4.1.3 Community-Based Interventions and Management of Teenage Pregnancy

The third objective of the study was to explore the influence of community-based interventions on the management of teenage pregnancy in Mombasa County. The findings were presented in Table 3.
Table 3
Community-Based Interventions and Management of Teenage Pregnancy

<table>
<thead>
<tr>
<th>Statement</th>
<th>Min</th>
<th>Max</th>
<th>Mean</th>
<th>Std. Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>I consider the society to have clear standards of how I should behave e.g. who to relate with</td>
<td>1</td>
<td>5</td>
<td>3</td>
<td>1.60</td>
</tr>
<tr>
<td>The society does not care how one lives and so I can do as I wish.</td>
<td>1</td>
<td>5</td>
<td>2</td>
<td>1.62</td>
</tr>
<tr>
<td>There are instances of sexual relationships between adults and school going children in the society</td>
<td>1</td>
<td>5</td>
<td>4</td>
<td>1.52</td>
</tr>
<tr>
<td>The society does not have places where we can get advice on the consequences of certain behaviours</td>
<td>1</td>
<td>5</td>
<td>2</td>
<td>1.47</td>
</tr>
<tr>
<td>My community is a sure defence line against all forms of negative risky sexual behaviour</td>
<td>1</td>
<td>5</td>
<td>3</td>
<td>1.51</td>
</tr>
<tr>
<td>There are various programs aimed at the prevention of teenage pregnancies in my home area</td>
<td>1</td>
<td>5</td>
<td>3</td>
<td>1.64</td>
</tr>
<tr>
<td>Girls are often trained about responsible behavioural choices in our community and this has checked teenage pregnancy.</td>
<td>1</td>
<td>5</td>
<td>3</td>
<td>1.53</td>
</tr>
<tr>
<td>The environment that a teenager lives in could influence their likelihood to or not to become pregnant early</td>
<td>1</td>
<td>5</td>
<td>4</td>
<td>1.21</td>
</tr>
<tr>
<td>There are organizations that promote contraceptives use and this has checked the level of teenage pregnancy in our community</td>
<td>1</td>
<td>5</td>
<td>3</td>
<td>1.49</td>
</tr>
<tr>
<td>There are opportunities for scholarships and bursaries in our community aimed at keeping girls at school</td>
<td>1</td>
<td>5</td>
<td>4</td>
<td>1.53</td>
</tr>
</tbody>
</table>

N=296

By agreeing to a great extent (M=4), the girls opined that there were instances of sexual relationships between adults and school going children in the society and that the environment that a teenager lived in could influence their likelihood to or not to become pregnant early. The girls also agreed to a great extent that there were opportunities for scholarships and bursaries in their communities aimed at keeping girls at school. The girls went on to agree to a moderate extent (M=3) that they considered the society to have clear standards of how they should behave e.g. who to relate with and that the community was a sure defence line against all forms of negative risky sexual behaviour (M=3).

They also agreed to a moderate extent (M=3) that there were various programs aimed at the prevention of teenage pregnancies in their home area and that girls were often trained about responsible behavioural choices in their community and this had checked teenage pregnancy (M=3). They also agreed to a moderate extent (M=3) that there were organizations that promoted contraceptives use and this had checked the level of teenage pregnancy in our community (M=3).

Lastly, the girls agreed to a little extent (M=2) that the society did not care how one lives and so they could do as they wished and that the society did not have places where they could get advice on the consequences of certain behaviours. These findings show that there were immense negative or positive influences in the society that could predispose girls to teenage pregnancy. Whereas some members of the society could lure girls into risky sexual behaviours, the society, albeit not strongly had some strategies for protecting girls from teenage pregnancy.

The risks that girls were exposed to in the society were underlined by one of the respondents who said that that some members of the society lured and recruited girls for prostitution. For example, some girls had been caught in the web of sex tourism. This is a pointer to the fact that the society while offering some protection to girls against risky sexual behaviours and teenage pregnancy by extension was also replete with temptations for girls. This often cancelled the gains against teenage pregnancy in the society. Breakdown of societal values also meant that girls did not enjoy the traditional fence against risky sexual behaviours. This called for concerted efforts to fill this gap.

**There had been immense breakdown of societal values in the county as well as elsewhere in Africa. In response to this, there is need for organizations to fill this void by offering guidance to girls. Mentors should also play a key role in guiding girls appropriately.**

Respondent H, May 2022, Mombasa
4.1.4 Management of Teenage Pregnancy

The dependent variable in this study was the management of teenage pregnancy. The findings from psychometric scale statement was presented in Table 4.

Table 4
Teenage Pregnancy

<table>
<thead>
<tr>
<th>Descriptive Statistics</th>
<th>N</th>
<th>Minimum</th>
<th>Maximum</th>
<th>Mean</th>
<th>Std. Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>There are high levels of teenage pregnancy in my community</td>
<td>296</td>
<td>1</td>
<td>5</td>
<td>3</td>
<td>1.59</td>
</tr>
<tr>
<td>Sometimes we have cases of unwanted pregnancies and abortions in the school</td>
<td>296</td>
<td>1</td>
<td>5</td>
<td>3</td>
<td>1.30</td>
</tr>
<tr>
<td>Sometimes I have casual and unprotected sex among my colleagues in school</td>
<td>296</td>
<td>1</td>
<td>5</td>
<td>1</td>
<td>0.91</td>
</tr>
<tr>
<td>Some girls have dropped out of school due to teenage pregnancy and opted to get married</td>
<td>296</td>
<td>1</td>
<td>5</td>
<td>4</td>
<td>1.29</td>
</tr>
<tr>
<td>There are some girls who are young mothers and have been allowed to go back to school and learn</td>
<td>296</td>
<td>1</td>
<td>5</td>
<td>4</td>
<td>1.14</td>
</tr>
</tbody>
</table>

The girls agreed to a great extent (M=4) that some girls had dropped out of school due to teenage pregnancy and opted to get married. They also agreed to a great extent (M=4) that some girls who were young mothers had been allowed to go back to school and learn (M=4). They also agreed to a moderate extent (M=3) that there were high levels of teenage pregnancy in their communities and that sometimes they have cases of unwanted pregnancies and abortions in the school (M=3). However, the girls denied that sometimes they had casual and unprotected sex with their colleagues in school (M=1). These findings show that there were incidences of teenage pregnancy among school girls. This underlines the need for interventions aimed at checking the teenage pregnancies and their associated consequences such as abortions, girls dropping out of school as well as early marriages among others.

The interview and FGD participants affirmed the gravity of teenage pregnancy among girls in the county. Some of the respondents said that it was often hard to quantify the numbers of teenage pregnancy. Nevertheless, it was hard to deny the consequences of teenage pregnancy in their communities and that sometimes they have cases of unwanted pregnancies and abortions in the school (M=3). However, the girls denied that sometimes they had casual and unprotected sex with their colleagues in school (M=1). These findings show that there were incidences of teenage pregnancy among school girls. This underlines the need for interventions aimed at checking the teenage pregnancies and their associated consequences such as abortions, girls dropping out of school as well as early marriages among others.

Teenage pregnancy was a menace in the society. Girls were often exposed to risky sexual behaviours with some of them ending up getting pregnant. Some of them ended up carrying out abortion.

FGD 2, May 2022, Mombasa

4.1.5 Hypotheses Testing

Pearson correlation shows that community-based ecological interventions (r=0.253, p<0.05) had statistically significant effects on the management of teenage pregnancy in Mombasa County. This shows that interventions in the community level had contributed to transformative social change and had significantly controlled teenage pregnancy in the county.

Table 5
Pearson Correlation

<table>
<thead>
<tr>
<th>Pearson Correlation</th>
<th>Community-based ecological interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>296</td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.000</td>
</tr>
<tr>
<td>Pearson Correlation</td>
<td>.253**</td>
</tr>
</tbody>
</table>

**. Correlation is significant at the 0.01 level (2-tailed).
4.2 Discussion

4.2.1 Social Demographic Characteristics of Respondents

The findings show that most of the respondents (48%) were girls aged between 15 and 16 years. About 47% were aged between 17 and 18 years. This shows that the majority of the girls were in their late teenage. These girls, as posited by Nguyen et al. (2016), confront significant risks and vulnerabilities that have a negative impact on their health and overall well-being. These include low educational attainment and illiteracy, household poverty, lack of economic independence, limited income earning options, exposure to violence, and social isolation among others. As a result, early adolescence affords a significant window of opportunity to intervene at a time when females are facing several challenges, but before those experiences have resulted in irreversible outcome as pointed out by Omoro et al. (2018).

4.2.2 Community-Based Interventions and Management of Teenage Pregnancy

The third objective of the study was to explore the influence of community-based interventions on the management of teenage pregnancy in Mombasa County. The findings show to a great extent (M=4) that there were instances of sexual relationships between adults and school going children in the society, and that the environment that a teenager lived in could influence their likelihood to or not to become pregnant early. These findings agrees with a study undertaken elsewhere in Uganda, East Africa that shows that the environmental influences predict the level of teenage abuse among girls (Ochen, Chi, & Lawoko, 2019).

Even though, the conceded that there were opportunities for scholarships and bursaries in their communities aimed at keeping girls at school. Furthermore, the girls moderately agreed that the society to had clear standards of how they should behave (whom to relate with) and that the community protected them against all forms of negative risky sexual behavior. This effort was further supported by various programs aimed at the prevention of teenage pregnancies in their home area including undergoing training in responsible behavioural choices and use of contraceptives. These findings are similar to findings by Saunders (2016) who posits that community mobilizations help to prevent teen pregnancies.

On the flipside, the girls lamented that the society did not care how one lives and so they could do as they wished and that the society did not have places where they could get advice on the consequences of certain behaviours. These findings show that there were immense negative or positive influences in the society that could predispose girls to teenage pregnancy (Ochen, Chi, & Lawoko, 2019). The risks that girls were exposed to in the society included being lured and recruited girls for prostitution. This shows the contradiction in the society. On one hand, the society offers some protection to girls against risky sexual behaviours and teenage pregnancy, but then turns against the same girls. As such, this often cancelled the gains made against teenage pregnancy. Breakdown of societal values also meant that girls did not enjoy the traditional fence against risky sexual behaviours as argued by Yeboah-Asiamah et al. (2019).

4.2.3 Management of Teenage Pregnancy

The dependent variable in this study was the management of teenage pregnancy. The findings show that some girls had dropped out of school due to teenage pregnancy and opted to get married (M=4) while some young mothers had been allowed to go back to school to continue with their studies. This is because there were high levels of teenage pregnancy in their communities. Allowing girls to back to school could alleviate the negative effects of teenage pregnancy among such girls as attested to by Morgan and others (Morgan, Agyemang, Dogbey, Arimiyaw, & Owusu, 2022).

Although cases of unwanted pregnancies and abortions in the school were rampant, the girls denied that they recklessly engaged into casual and unprotected sex with their colleagues in school. These findings show that there were incidences of teenage pregnancy among school girls. This underlines the need for interventions aimed at checking the teenage pregnancies and their associated consequences such as abortions, girls dropping out of school as well as early marriages among others (Nabugoomu et al., 2020).

V. CONCLUSIONS & RECOMMENDATIONS

5.1 Conclusion

This section presents the conclusions of the study findings. This is done in line with the objectives of the study. The purpose of this study was to assess the contribution of societal ecological transformative social change
strategies to the management of teenage pregnancy with reference to Mombasa County, Kenya. The findings show that the issue of teen pregnancy is of great concern in the county of Mombasa. This is evidenced by the high rate of school dropout among girls who got pregnant, early motherhood, transmission of venereal diseases, cases of abortion and death after abortion in some cases. Pearson correlation shows that community-based ecological interventions could statistically predict the management of teenage pregnancy (P values <0.05). Thus, interventions at the societal level played pivotal role in the management of teenage pregnancy in the study area. This called for efforts to refine interventions at this level.

5.2 Recommendations

There is need to put measures in place aimed at checking teenage pregnancies and their associated consequences such as abortions, girls dropping out of school as well as early marriages among others. As a result there is thus the need to strengthen the contribution of community-based ecological interventions in curbing teenage pregnancy. To this end, civil society organizations, role models and other targeted community based interventions should be carried out to advocate for changes that could lead to reduction in teenage pregnancy among girls.

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