

# TEENAGE PREGNANCY IN CAMBODIA

## BACKGROUND

Teenage pregnancy remains a major health concern in Cambodia. Whereas the total fertility rate for women of reproductive age has sharply declined, pregnancy rate among girls aged 15-19 has increased from 8% in 2010 to 12% in 2014. The percentage of rural girls beginning childbearing before the age of 20 is double that of urban girls.

In Cambodia, teenage pregnancy is often not out of deliberate choice, but rather a consequence of community expectations and traditional mindsets, lack of education, lack of sexual and reproductive health knowledge and the lack of understanding of the social and health implications involved with pregnancy at a very young age.

The lack of education is both a contributor to and a result of teenage pregnancy. Future prospects become limited when young girls become pregnant at a too young age. Seila, a 16-year-old girl pregnant with her first child, explains that while she would have liked to move to the city to pursue a higher degree, she did not want her parents to waste time and resources on something she did not perform well on and also thought it was more important to help her parents on the plantations. Having been married off at the age of 15 after dropping out of school in Grade 7, Seila expresses regret that she is now limited to farming for a living, "If I were to have a choice, I would have studied more". When talking about her future children, she expresses that she will support their higher education as she wants them to have good jobs.

Teenage pregnancy does not only affect the job and education prospects of young mothers, but also poses risks for the newborn child. It has been found in Cambodia Demographic and Health Survey 2014 that the risk of dying for a child born into any of the avoidable high-risk categories is 2.4 times higher than for a child not in any high-risk category.



*Chuon Seila contemplates about her children's future on the wooden bed in her parents' still house in Trabek Village, Memut District, Tbong Khmum Province.*

*Photo: UNFPA Cambodia*

Having a mother aged below 18 is one of the high-risk categories. Approximately 1 in 8 Cambodian women aged 15-19 have become mothers or are currently pregnant with their first child.

Svet, a 16-year-old mother to a newborn child, acknowledges that she and her partner lack information about motherhood, sexual reproductive health and family planning. Having lagged behind in school, Svet was overage for her grade, and decided to drop out from school after grade 4.

Nobody had talked with Svet about what she needed to do to be a good mother; in fact, she is not even comfortable with holding the baby in her arms for breastfeeding. Her lack of knowledge and inability to care for her child may reflect the reasons behind the increased probability of dying in infancy among children born to mothers younger than 18. Svet's baby was 2.5 kg at birth and looks quite small and unhealthy.

Additionally, she was unaware of forms of contraception available before giving birth to her child. "I hope my daughter will grow up to be wise and intelligent, so that she will not follow in my footsteps", says Svet regretfully.

*Sources: CDHS 2010, CDHS 2014, UNFPA case studies 2015*



16-year old mother, Sen Svet, looks at her newborn girl asleep in the mosquito net on the wooden bed in their house. They keep warm by burning charcoal under the bed.

Photo: UNFPA Cambodia

## HIGH LEVELS OF INTEREST IN SEXUAL AND REPRODUCTIVE HEALTH AND FAMILY PLANNING

On the other hand, it is encouraging to see that young girls in rural villages are able to access antenatal care services at the nearby Referral Hospitals. The percentage of women being able to access antenatal care by health professionals in rural areas has increased from 88% in 2010 to 94.8% in 2014.

Many, a 4-months pregnant 17-year old girl, has just attended two antenatal check-ups at a Referral Hospital. There (at their respective Referral hospitals), both she and Seila learnt about family planning methods, of which short-term contraceptive options, such as the pill and injections, are most appealing to them. With the procurement of contraceptives in Cambodia, cost does not seem to be an issue for them. Having learnt about the concept and methods of family planning, Seila confidently replies that she and her husband are planning to have two children.

Svet and her partner are also eager to learn more about sexual reproductive health issues, including family planning and safe motherhood. Due to the limited consultation times with doctors and nurses at the Referral Hospitals, they expressed interest in connecting with outreach health workers, and would like to know where to access information, education and communication (IEC) materials available to refresh their memory and deepen their understanding.

## COMMUNITY PERCEPTIONS AND EXPECTATIONS ON TEENAGE PREGNANCY

Moreover, it should be appreciated that traditions and community perceptions may, in reality, encourage teenage marriage and teenage pregnancy. Data from the CDHS 2014 shows that the percentage of girls beginning childbearing before the age of 20 decreases with increased levels of education. However, the community's expectations for these girls are not to receive an education, but to help out on the family farm and to get married at an early age. Many, for example, explains the reasoning behind getting married and having children as early as possible in the village: "Since my father is getting older and often gets sick, my husband is of great help to the running of the farm and makes sure that it is fully functional".

She also adds that villagers believe the sooner they have children, the sooner they will be able to have someone to help out on the farm and to share domestic responsibilities with.

## UNFPA'S INTERVENTIONS

To help girls avoid teenage pregnancy, UNFPA Cambodia has been partnering with the Government, NGOs and civil society to provide quality and accessible sexual and reproductive health education and care. On a national level, UNFPA has been supporting the training of midwives at Emergency Obstetric and Newborn Care (EmONC) facilities as well as the development of a Comprehensive Sexuality Education, which will be implemented in the upper primary, lower secondary and upper secondary school curriculum nationwide. The curriculum aims to provide young people with the necessary knowledge to make informed and responsible decisions about their sexual health. UNFPA also supports local initiatives and the dissemination of information through media, which can target out-of-school youth. The Inthanou hotline, which provides counselling on sexual and reproductive health and rights and psychological support especially to people living with HIV/AIDS, and BBC Media Action's innovative multimedia programme on sexual and reproductive health for youth, Love 9, are both supported by UNFPA.



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