



Adolescent Pregnancy: Risk and Protective Factors

In Canada, rates of adolescent pregnancy (i.e., pregnancy occurring between the ages of 12 and 20 years) remain some of the highest among developed countries. Saskatchewan has the highest rate of live births from adolescent pregnancies in Canada (excluding the Canadian territories). In 2012, the rate of live births for Saskatchewan girls aged 15 to 19 was 2.8 times the national average.

Adolescent pregnancy is a complex issue and is influenced by familial, home, socioeconomic, social, and educational factors. It is important that prevention and support strategies take these factors into consideration.

Adolescent pregnancy is associated with many consequences for the mother, the father, and the child throughout their lifespans. Some of the potential adverse outcomes include poorer pregnancy outcomes (e.g., pre-eclampsia, low birth weight, preterm delivery), and poorer educational and employment outcomes for both parents. Due to the increased risk of these outcomes with adolescent pregnancy, the delay of pregnancy until adulthood is often advantageous for the overall health of both the mother and the child.

Risk and Protective Factors

Adolescent pregnancy is affected by both protective and risk factors. Protective factors are those that are known to reduce the risk of adolescent pregnancy, while risk factors are associated with an increased risk. Although adolescent pregnancy prevention programs have limited capacity to affect many of these factors, it is important that these factors are kept in mind when designing and implementing prevention programs.

Risk factors that increase the risk of adolescent pregnancy include:

- physical or sexual child abuse
- poverty, low socioeconomic status (cyclical relationship where poverty increases the risk of adolescent pregnancy and adolescent pregnancy increases the risk of poverty)
- poor school experiences, including dropping out of school
- preference for early childbearing (e.g., cultural or familial preference)
- familial factors, including a single-parent household, low parental monitoring, excessive home responsibilities, and/or inconsistent or harsh discipline
- maternal characteristics, including low education level and being parented by an adolescent mother
- poor parent-child relationship
- early onset of puberty
- relationship factors, including peer and partner pressure toward sex, dating older partners, having a violent partner, and difficulty negotiating safer sex options
- lack of actual or perceived access to sexual health information and services



Risk Factors for a Rapid Repeat Pregnancy

There are numerous unique risk factors associated with adolescents having a rapid repeat adolescent pregnancy, including:

- early age at first pregnancy
- being married as an adolescent
- having an intentional first pregnancy
- poor first birth outcome
- poor family involvement
- mental health and behavioural issues

Protective factors for preventing adolescent pregnancy include:

- parental factors, including parent-child closeness, parental involvement, parental monitoring, and parental communication related to sexual health and relationships
- education, including sexual health education and educational aspirations
- religious views and beliefs, including involvement in religious activities (only true if the religion opposes premarital sex and adolescent marriage)

In terms of relationships, male partners can impact the use of contraception and other sexual health behaviours that influence whether their partners become pregnant. If a pregnancy occurs, males can either positively or negatively impact financial situations, child care, and relational support.

Risk factors associated with males being involved in an adolescent pregnancy include:

- poverty
- familial factors, including having an adolescent parent, having a poor parent-child relationship, and being from a single-parent family
- behavioural problems, including high-risk behaviours (e.g., smoking, drinking, illicit drug use), and aggression

Males who contribute to an adolescent pregnancy are at increased risk of many of the same negative outcomes as mothers (e.g., employment difficulties, lower educational achievements, poorer emotional and mental health). Therefore, it is important that the needs and experiences of males are considered in prevention and support programming.

