Teenage pregnancy and social dilemma in a province of northeastern Thailand

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Abstract

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The purpose of this study was to explore the awareness of communities about teenage pregnancy using focus group among 56 participants. Qualitative method was adopted and the focus group discussion was performed for three groups: one with teenage mothers, one with the parents of teenage mothers, and one with community representatives.

The results showed that the qualitative analysis revealed current situation of teenage mothers that is the biggest problem that should be resolved. The focus group participants agreed that the issue of teenage pregnancy, there are several causes such as problems of themselves, parent/guardian or families, social and environment. The most important is teaching of sex education. It is too weak and is not suited to the present social context, so that schools should provide training about sexual relationships, how to avoid having sex and the skills to refuse sexual relationships. Schools should be a priority setting for interventions and should teach about sex education more.

This study contributes to understanding the awareness of Thai teenage mothers, their mothers and community representatives. This study revealed the opinions of Thai teenage mothers, their perceptions of the causes of teenage pregnancy, and their views on preventing associated problems for the next generation of youth from several groups, including groups of teenage mothers.

Based on this research, the researchers suggested that sex education should be conducted in primary school students so they will have knowledge, ability and skill to prevent or avoid sexual harassment.

**Keywords:** Teenage mothers, Premature pregnancy, Focus group discussion, Awareness
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การตั้งครรภ์ในวัยรุ่นและความตระหนักของสังคมในจังหวัดหนึ่ง ภาคตะวันออกเฉียงเหนือ ประเทศไทย

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gการตั้งครรภ์ในวัยรุ่นและความตระหนักของสังคมในจังหวัดหนึ่ง ภาคตะวันออกเฉียงเหนือ ประเทศไทย
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วัตถุประสงค์ของการศึกษานี้เพื่อสำรวจความตระหนักของชุมชนเกี่ยวกับการตั้งครรภ์ในวัยรุ่นผ่านกระบวนการสอบถามกลุ่ม โดยใช้รูปแบบของการวิจัยเชิงคุณภาพ การวิเคราะห์ข้อมูลจากการสอบถามกลุ่มของผู้เข้าร่วมทั้งหมด 56 คน การประเมินคุณภาพได้ดำเนินการในรูปแบบของการสอบถามกลุ่มย่อย ประกอบด้วยสมาชิกกลุ่ม ได้แก่ กลุ่มแม่วัยรุ่น กลุ่มผู้ปกครองของแม่วัยรุ่น และกลุ่มตัวแทนชุมชน

ผลการศึกษาแสดงให้เห็นว่าการวิเคราะห์ข้อมูลจากกลุ่มทางการคุณภาพของการตั้งครรภ์ในวัยรุ่นเป็นปัญหาใหญ่ที่ต้องได้รับการแก้ไขอย่างรุนแรงด้วย ซึ่งข้อมูลจากกลุ่มทั้งหมด 56 คน ผู้เข้าร่วมการคุณภาพได้ดำเนินการในรูปแบบของการสอบถามกลุ่มย่อย ประกอบด้วยสมาชิกกลุ่ม ได้แก่ กลุ่มแม่วัยรุ่น กลุ่มผู้ปกครองของแม่วัยรุ่น และกลุ่มตัวแทนชุมชน

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จะต้องมีการดำเนินการเพื่อให้เกิดความตระหนักของแม่วัยรุ่นในการตั้งครรภ์ในวัยรุ่น ด้วยการจัดทำเป็นกิจกรรมการศึกษาในโรงเรียนที่ชัดเจนและเป็นปัญหาที่ต้องการแก้ไขอย่างเร่งด่วน ซึ่งการตั้งครรภ์ในวัยรุ่นเป็นปัญหาใหญ่ที่ต้องได้รับการแก้ไขอย่างรุนแรงด้วย ซึ่งข้อมูลจากกลุ่มทั้งหมด 56 คน ผู้เข้าร่วมการคุณภาพได้ดำเนินการในรูปแบบของการสอบถามกลุ่มย่อย ประกอบด้วยสมาชิกกลุ่ม ได้แก่ กลุ่มแม่วัยรุ่น กลุ่มผู้ปกครองของแม่วัยรุ่น และกลุ่มตัวแทนชุมชน

การศึกษาที่ทำให้เกิดความตระหนักในการตั้งครรภ์ในวัยรุ่นของแม่วัยรุ่น ผู้ปกครองของแม่วัยรุ่น และตัวแทนจากชุมชน การศึกษานี้ได้สะท้อนความตระหนักของแม่วัยรุ่นไทยและการวิจัยของสห sukhothai

คำสำคัญ: แม่วัยรุ่น การตั้งครรภ์ก่อนวัยอันควร การสนทนากลุ่ม ความตระหนัก
Introduction

Thailand has one of the highest rates recorded for mothers giving birth under the age of 20 in the world, the average was one hundred thousand people1. As a result, Thailand has record number two in the world after the average for countries on the African continent. It was found that in 2010 that pregnancy and childbirth for Thai females under 20 years of age was 13.76 percent² higher than the targets of the World Health Organization (WHO), which have been set to not exceed 10 percent³. Between age group 15 to 19 in 2013 was 51.20 percent⁴ and in 2014 was 47.9 percent⁵.

An overview of Thailand in 2011 found that the incidence of childbirth in mothers younger than 20 years was a total of 114,000, childbirth from a girl aged under 15 years was 3,676, in 2012 was 3,725 and in 2013 was 3,415⁶. Previous study found that the youngest teenage mother was eight years old⁷.

Data from The National Health Commission (NHC)² showed that about 70 percent of teenage mothers had social problems during pregnancy and lacked skills to raise a child; this affected both the social and the health of teenage mothers and infants⁸. The reason for pregnancy was recorded as being due to forgotten birth control pills, natural contraceptive methods, coitus interrupts or unplanned sex. The NHC reported that underlying causes included inadequate or inaccurate information about sexual and reproductive health, although the report did not draw directly on the perspectives of young mothers.

Data from Phon Hospital, Khon Kaen province showed that childbearing of teenage mothers has exceeded the limit every year, which WHO has set the standard surveillance situation of teenage pregnancy, the percentage of women under 20 years of age to a pregnant women of all age groups who are pregnant must not exceed 10 percent⁹. Between the years 2010 to 2012 the percentages of teenage mothers giving birth were 14.3, 16.8 and 16.0 percent⁹.

There is not much research on the awareness of parents of teenage mothers, and people who live in communities about teenage pregnancy. Especially, there is very little research on teenage mothers in the context of their feelings when they face this problem.

This study focuses on the awareness of communities about teenage pregnancy in a district of Khon Kaen province, Thailand. The study draws on the perspectives of mothers who were teenagers at the time of pregnancy, parents of teenage mothers and community representatives join the focus group discussion and discussion groups with a view to find various ways and means to resolve the problem together. Ultimately the study seeks to contribute towards reducing sexual health problems of Thailand’s youth in the future.

Methods

This study is a qualitative research for exploration of the awareness of communities about teenage pregnancy in Phon district, Khon Kaen province. The populations in this study were teenage mothers who gave birth at the Phon hospital, Phon District, Khon Kaen Province. The sample used in this study were teenage mothers aged less than 20 years of age on the date of birth. The following selection criteria were used: female adolescents who gave birth at Phon hospital, Khon Kaen province, domiciled in Phon district, Khon Kaen province, and did not live
in the municipality. The teenage mothers gave their consent and fully cooperated in the research.

Recruitment got a list from the hospital of teenage mothers, researcher went into community to look for teenager and before interview consent parent or guardian and teenager.

Qualitative assessment was performed in the form of focus group discussion with 56 participants including three groups, one with teenage mothers, one with the parents of teenage mothers, and one with community representatives. The community representatives were health volunteers, teachers, and community leaders. The researcher constantly interacted and communicated with the groups for a period of time until they received the fiduciary. Focus group discussion involved brainstorming and interactive discussions. Each group included eight to twelve people, with a moderator and an assistant by twice, repeated. The focus group discussions were taken at Soknokten Health Promoting Hospital and Chodnongkae Health Promoting Hospital.

The focus group interview schedule consisted of the following topics: safe sex, the circumstances of teenage mothers in their local community and wider society, the causes of the problems for teenage mothers, their practises in the prevention and control of pregnancy, their recommendations for program used to prevent teenage pregnancy and associated sexual health problems of youth.

The recording equipment used during the interview was a voice recorder and note taking. The tape recording was done under the permission and the researchers kept confidential of data. In this stage of the study to triangulate the data collection, expert qualitative researchers examined the classification of the information, the participatory observation, coupled with the questioning. The duration of each focus group was about two hours, the researcher immediately paused the focus group if a participant expressed discomfort with the questions. This study received ethical approval for research in human subjects from office of the Khon Kaen University Ethics Committee in Human Research, the ethical ID HE562274.

Results

Themes obtained from the transcribed data from the focus group discussion of 56 participants were in the covered the following areas: (1) safe sex, (2) the community and wider social situations of teenage mothers, (3) the causes of the problems for teenage mothers, (4) their practises in the prevention and control of pregnancy in teenagers, and (5) suggested characteristics of programs used to protect the sexual health problems of young people.

In terms of safe sex most of the participants agreed that safe sex was important and that more education was needed in order to promoted understanding. However, the all focus group participants teenage mothers agreed that the most safe way to prevent pregnancy and sexually transmitted diseases was through use of a condom.

All Participants felt that monogamous relationships were preferable to those involving multiple partners: ‘No having sex with other people, only our partners’ (01C1: Community representatives of the first group). They said that young people can forget to take birth control pills or fail to take the prescribed step: ‘Taking a birth control pills, sometimes young people forgot to take them so condoms are the most safe way, using a condom is the best way’. (01T3: Teenage mothers of the second group).
The focus group participants believed that the current situation of teenage mothers was the biggest issue that needed to be resolved. Some participants had become teenage mothers at a very young age, and were pregnant between the age of ten to thirteen years old. At the time, most of them were still in school age and not ready for pregnancy or age for parenthood. These circumstances further impacted upon their immediate family members and the wider community.

The focus group participants also commented on this issue and considered it to be one of society's problems. Many young people who become pregnant were felt to be unable to keep their child, which in turn often led to an abortion: ‘Pregnancy and end of pregnancy by abortion’ (02T4: Teenage mothers of the first group). In some cases, children who felt pregnant were afraid to tell their parents. The parents learnt that their daughter was pregnant because they could not hide their physiological changes. In other cases, they sought to terminate their pregnancy. ‘In the first time, I thought I should get an abortion’ (04T7: Teenage mothers of the second group). If they cannot do it successfully, they will tell the truth to their parents.

In addition, the focus group participants believed that this issue is affecting the teenage mothers because they were studying and were not mature enough to deal with the consequences of this problem. If they have sex and then get pregnancies. They will catch with many problems because they cannot look after their own. ‘Children can not responsibility when they get pregnant and do not know what a pregnancy is’ (02P5: Parents of teenage mothers of the second group). Finally, those burdens fall on the parents. Most teenage mothers cannot raise their own children and leave their children to their parents or grandparents to look after. Parents of the teenage mothers strongly believed that if the teenage mothers look after their child full time; perhaps it would deter them from having more children in the future.

Although teenage mothers can return to study after giving birth most of them cannot return due to money problems. For example, they need to work and raise the money to meet the financial responsibilities of family life. It is often difficult for the teenage mothers to find work. However, teenage mothers go out to work, but with social and economic problem as well as the daily cost of living is high, making the cost of everyday living is not enough. As a result, many teenage mothers were unable to send money back home as expected. They were received a little compensation because their age was not up to the standards of the Department of Labour Contractors; only general contractors. As the children grow up, teenage mothers would have many burdens, such as the cost of food, clothing and school fees. As a result, they cannot return to study. Some teenage mothers wanted to graduate their studies but their parents cannot afford to send them back to school due to money problems. Most of the burden will fall to the women or the teenage mothers and parents of teenage mothers because most men are not responsible. When they know that women are pregnant, they stopped the relationship or separated. Women have to bear a heavy burden for becoming a young parent. Even though, many parents are trying to force their children to marriage for making a contract between them to maintained relationship forever but children cannot live together. They will be breakup or divorce.

One of them said ‘A child at the age of 13 years old at her village has married but they lived with
together about a year and then they have separated’ (02P1: Parents of teenage mothers of the first group).

Some teenage mother said that when she get pregnant or have a child. Her boyfriend or husband will look after and her life will be happy and comfortable without thinking that the problems will fall back to the parents or guardians. 'I think if I have a child. My life will be happy with my boyfriend. I do not think my parents will be in trouble, she said.' (03T2: Teenage mothers of the second group). The parents said that these problems are often redundant problems.

They believed that these problems are caused by the new culture; women have the courage to make more confidence. Many participants also believed that young girls are starting flirt with boys at first. ‘Girls go out to meet boys first’ (02C3: Community representatives of the first group). Young girls are often talk about men; this is one of the important issues in groups. If one of the group has boyfriend will talk to friends and boast a friend who has no boyfriend. The one who have no boyfriend would denigrate themselves stupid or ugly to find a boyfriend. Some friends who have boyfriend has volunteered to contact a boy for who has no boyfriend.

In addition, they also noted that children nowadays are curious about sex due to the social media. This included the use of the internet in a way that is inappropriate. Young children are quickly dating, having sex, and easy separating. Young children are easy to change their partners. It seems that they just need fun everyday life. They thought that most of young girls are start to break a relationship more than boys.

The parents have expressed their feelings on this issue was that upset because they have hope in their children. They want their children have a good life not poor like them. They need their children graduated in high level and have a good job in the future. One of them said ‘I feel disappointment and regret. I would like to send her to school for studying. I donot want her to be the same as parents, poverty. I just hope that she will have a good life in the future.’ (02P1: Parents of teenage mothers of the second group).

They agreed that today's parents prefer their children to the grandparents as they have to work in cities away from their hometown. Most of grandparents are often angry and orders. ‘Grandmothers often used angry mood in teaching children’ (04C5: Community representatives of the first group). ‘We have to understand in it, grandmother is grandmother.’ (04C6: Community representatives of the first group). ‘Mother and grandmother would have different thoughts due to the gap of age and era.’ (04C9: Community representatives of the first group). ‘Children who lived with grandparent, they are quite loneliness’ (04C7: Community representatives of the first group). ‘Living with grandmother, when children have the opportunity to leave the house, it is like a little bird out of the cage’ (04C8: Community representatives of the first group).

They believed that the issue of teenage pregnancy, there are several causes such as they have problems of themselves, guardians or family, social and environmental problems.

Problems of teenage mothers, they believed that the teenage mothers groups are very much believe in their friends. They would like to have a boyfriend like a friend who has. Otherwise, they cannot join
the group and talk to their friends in the same topic. Regularly, they are very curious and want to try to do as a friend. Some teenage mother said that when she saw a good looking boy, she needs him to be her boyfriend. ‘When I met a handsome man, I want to get a relationship with him’ (03T4: Teenage mothers of the first group). They were live with negligence, lack of restraint, and easy to have sex and making love in young age.

Regarding social and environmental causes, they believed that the present is an era strongly influenced by modern technology, such as the smart phone with integrated functions, including picture and video recorders. Young people are shooting sexual videos and forwarding them to their friends. This in turn becomes a model for other young people to imitate, which results in the sexualisation of young age groups. ‘Nowadays new technologies mean that people can communicate faster. The biggest issue is mobile phone, there was no mobile phone in the past, it was not a problem like today’ (05C1: Community representatives of the first group).

With respect to the problems of a parents/guardians or families, they believed that most teenage mothers lacked parental warmth in cases where the parents had gone to work in cities away from home and had left their children with the grandparents. Children reported that they felt that parents had no time for them. ‘I think my parents are not paying attention to me. I think that my life is a problem’ (03T3: Teenage mothers of the second group). It allows the family relationships between parents and children are neglected due to letting the children live with their grandparents. It is quite different between the age gap, discipline may not be good enough as a parent. The elderly are often taught in force that you cannot do that or this; do not give an advice or a good reason. As a result, the children have psychological problems, lack of shelter or consultant so children are believed their friends and think that friends is important for them, so they focus on and follow their friends who are the same age.

However, the focus group participants also commented that parents should talk to their children in the instructions, should not be a reproach. If not, children will fear. When they have a problem, children will not tell parents. As a result, children have to say the problem to their friends, so parents should behave as both parents and friends. They will trust the parents. Parents have to aggravate the problem and try to help them as much as possible. If we use violence can make children run away from home in the end.

Sometimes parents or guardians should understand the nature of teenagers as well. We need to understand children. Then the family should create a common agreement. Most importantly, a family must have cultivated their children about awareness of having a lover at appropriate age.

The practices in the prevention and control of teenage pregnancy, they believed that children are hard to avoid having sex in recent day. They should be known a way to prevent pregnancy before and after having sex, in particular, the use of condoms. They suggested that the use of condoms does not encourage children to have sex, but to prevent other problems ensue such as pregnancy. ‘We do not encourage children to have sex, but we do not want babies. Therefore, we need to introduce children to prevent pregnancy by using condoms’ (04C7: Community representatives of the second group).
Regularly, Children should have access to the acquisition of a condom easily.

Schools should provide training about sexual relationships, how to avoid having sex and the skills to refuse sexual relationships. Schools should be a priority setting for interventions and should teach about sex education more. This should include various activities including life skills and sex education from the fifth grade and upwards, but it will be good if schools find a training program to educate families and parents.

They believed that children should be avoided near the opposite sex or are by themselves alone. Young girls and young boys are closer together; it is hard to avoid having sex.

One of teenage mother said ‘If two people love each other. Love cannot break my heart to stop loving and thinking about sex. There are very few people would deny that.’ (04T6: Teenage mothers of the second group).

The focus group participants said that hanging out with friends or boyfriend at night. It is likely to lead to have sex also drinking alcoholic beverages are finally a chance of having sex as well. Therefore, they have to avoid stay with friends at night. Ultimately, they should do other activities when they have a free time, such as reading, studying in library, listening music, watching some movies, and do housework.

They said that the current system of teaching sex education in schools has not been given too much serious attention. Although the Ministry of Education put the teaching of sex education in health and physical education course, the topics of sex education were too few hours of instruction. They noted that the teaching of sex education in the secondary school, but the teachers are taught seriously in high school.

‘During the secondary school, teachers do not focus on sex education; most teachers will focus on the high school. It is quite late to prevent sexual problems in adolescence’ (05T4: Teenage mothers of the first group). According to the majority of various studies found that the problem occurs when the children are studying in secondary schools. Therefore, the children have an opportunity to have sexual problems by lack of knowledge about sexual problems.

They suggested that the program model for preventing sexual health problems in youth should be develop the teaching of sex education in schools, such as the content of knowledge, in the form of teaching sex education, and the number of hours of instruction.

The focus group participants suggested that the content of knowledge should be taught in new ways by teaching with the aid of videos and other visually supported materials. The content of the books should use image that are easy to understand and interesting. Teachers should be used attractive teaching equipment, should use a variety of activities to encourage students to participate. The instruction should be emphasize fun and encourage the students to be interested in learning more. There should be an activity for making exhibition board, and should focus on activities outside the classroom. ‘Teachers should take the students to see the example from the villages to know how the teenage pregnant premature and conditions of living of the teenage mother are’ (05T7: Teenage mothers of the first group). They suggested that schools should be taught about sex education from fourth grade onward because they believed that children in fourth grade are old enough to study in sex education.
However, most of them agreed that elementary schools should be teaching sex education from fourth grade onward, also suggested that this is a hard problem so they should be taken to all elementary schools. Nowadays, it is quite difficult to forbid children from having sex that would more difficult than in the past. Thus, they should be taught children to understand it so that it can be immune to them in the future. Teaching of sex education in schools for children of this age has the opportunity to lead and encourage them to follow it; they believed that they cannot say like this in this era. Schools have to teach them to know how to love themselves and need to focus on this issue because there are many sexual transmitted diseases, especially HIV/AIDS. One of them said ‘Nowadays, I do not think we can forbid children to have sex because if we forbid them they will do it.’ (05C6: Community representatives of the first group).

They agreed that the number of hours of instruction about sex education should be taught consecutive in one hour a week till 15 weeks. They believed that this is not too much. Schools should be taught about sex education only in 15 hours. If they teach 15 hours by one time a week the students can be absorbed the knowledge and memory in the future.

**Discussion**

In the context of Thailand, there is very little research on teenage mothers’ quality of life, life in a few years after giving birth of teenage mothers and feelings after becoming a young parent. There is not much research on the feelings of parents of teenage mothers when they have this problem in family. In addition, there is little research that has sought to study the perceptions teenage mothers on how to improve their quality of life and develop initiatives to prevent teenage pregnancy.

With regard to sexual behaviour of teenage mothers in the past, the previous study found that the experienced sex for the first time of teenage mothers at the age of 16, with the mean age calculated at 15.6 years old (s.d.=1.8)\(^ {10} \). This is consistent with previous research has found that teenagers who become pregnant during studying were aged between 16 to 18 years old and studying in secondary school had sexual intercourse for the first time at the age of 15 to 17 years old\(^ {11-12} \). The minimum and maximum age at first intercourse was 11 and 19 years old. It was found that the current study shows that having sex for the first time at 11 years old and is considered a very young age.

Other data collected in the study found that the lives of teenage mothers were not necessarily smooth and happy. The current study found that almost half teenage mothers were not living together with their partners. About one third were not living with their children. Perhaps the most worrisome finding was that almost teenage mothers did not continue their educational studies after pregnancy. Whilst there is little evidence available from analogous contexts, this appears to be much higher than other studies on the percentages of teenage girls who quit school following pregnancy\(^ {13} \).

The study found that educational drop-out amongst participants furthers impacted upon their immediate family members and the wider society. Some teenage mothers were still at a very young age still in education and not ready for pregnancy or the responsibility of parenthood. The current suggests that the causes of
teenage mothers are multifaceted as relate to individual circumstances, parental and family dynamics and wider environmental factors. Some specific issues reported included the consequences of economic prosperity, the role of mass communications and social media, the lack of close and supportive relationships with parents and influence of parental and community role models.14

The study found that family plays an important role in the prevention of pregnancy in the child.15 In addition, family influences on sexual behaviour of adolescents16-17.

This research suggests that the mothers who became parents as teenagers recognize the importance of teaching sex education in schools.18 The study participants suggest that sex education should be taught from the age of ten years onwards. The study suggests that teaching sex education is important in order to give children a well-informed basis to protect themselves from having sex prematurely or have knowledge of how to prevent pregnancy and sexually transmitted disease in the future. The issue of teenage pregnancy was caused by environmental factors, with the three main issues, behaviour of teenager, family and social environment.19 However, it is impossible to ban teenagers for having sex because the perception of teenagers seen having sex is a common in daily life.20

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