Northeastern Thai Adolescents’ Perceptions of Being Unmarried and Pregnant

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Abstract: Unmarried pregnant adolescents are at risk of maternal and infant health issues, including psychological problems and socioeconomic disadvantages. These issues are complex, with respect to their context, and often are not clearly understood by healthcare providers and others. This descriptive qualitative study sought to glean further understanding of the meaning of being an unmarried pregnant adolescent in northeastern Thailand.

Sixteen northeastern Thai unmarried pregnant adolescents, aged 13 to 17 years, participated. All were primiparas and interviewed at a gestational age of 32 to 36 weeks. Data were collected via in-depth interviews, and analyzed using the process of abstraction described by Morse and Richard.

Results revealed “Being Devalued” and “Ending Adolescent Life” were the thematic meanings of being an unmarried pregnant adolescent. “Being Devalued” was the adolescents' perception they were seen as a “bad girl” and had lost their sense of self-worth. “Ending Adolescent Life” was the adolescents’ perceptions their adolescence ended because of: being isolated from their peers; being unable to engage in teen activities; and, dropping out of school.

Findings may assist nurses and other healthcare providers better understand unmarried pregnant adolescents from their own perspectives. Age and situation appropriate prenatal care that takes into account adolescents’ viewpoints, shows respect and does not place blame appears to be needed.

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Background

Adolescent pregnancy continues to raise serious concerns for healthcare providers and societies regarding maternal and infant issues. In Thailand, healthcare providers have encountered an increased incidence of adolescent pregnancies (from 13.9% in 2004 to 14.5% in 2006) that is higher than the national health plan indicator (less than 10%). Pregnant adolescents have been found to have increased maternal and
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infant physiological health problems, especially anemia, preterm delivery and low birth weight babies.\(^1\), \(^3\) - \(^5\)
In addition, an increased incidence of maternal and infant health problems has been found among unmarried pregnant adolescents\(^1\) and adolescents who have failed to receive adequate prenatal care.\(^5\)

Although there is a belief among healthcare providers that early prenatal care reduces maternal and infant health problems, some adolescents delay or avoid seeking prenatal care because of feeling embarrassed about, or attempting to hide, their pregnancies.\(^5\), \(^6\) Dissatisfaction with available prenatal care, because of failing to meet the clients’ needs,\(^7\) - \(^9\) also is an issue among pregnant adolescents in northeastern Thailand.\(^10\) Such feelings may be precipitated by healthcare providers failing to appropriately acknowledge concerns and needs of adolescents because they view them as too young to have a baby or as being “bad”.\(^9\) Therefore, prenatal care providers may treat pregnant adolescents as passive individuals,\(^11\) which leads to pregnant adolescents feeling uncomfortable with services provided, ignored and stigmatized.\(^7\), \(^8\)

Prior research has found unmarried pregnant women often experience psychological difficulties, including depressive symptoms, severe depression, attempted suicide and/or self-mutilation.\(^12\), \(^13\) In Thailand, as in poor, black, urban American populations, being an unmarried pregnant adolescent is considered a stigma or immoral occurrence.\(^14\) - \(^16\) Among unmarried adolescents, being stigmatized and considered immoral often leads to development of low self-esteem and isolation from peers.\(^14\) - \(^15\)

Prior studies have revealed unmarried pregnant adolescents encounter serious physio-psychological health problems and socioeconomic disadvantages.\(^4\), \(^7\), \(^12\), \(^14\), \(^17\), \(^18\) Their socioeconomic disadvantages have been found to include having insufficient education,\(^19\) as well as limited career and economic opportunities.\(^20\), \(^21\) Socioeconomic disadvantages appear to be influenced by the adolescents’ life context rather than their age.\(^19\), \(^20\), \(^22\) Being unmarried, and often unemployed, leads pregnant adolescents to seek unreliable support and resources, including their parents, especially their mothers, with whom they usually have conflict.\(^14\), \(^17\), \(^23\) Advice about pregnancy and social activities, the adolescents receive from their mothers and sex partners, most commonly does not meet their needs.\(^21\) Perceiving a lack of support and being influenced by negative societal perceptions about them being pregnant, adolescents view being pregnant and unmarried as difficult.\(^8\), \(^18\)

However, each adolescent’s situation may be influenced by her experience of being pregnant and unmarried in regards to the meaning of her given situation, socioeconomic status and/or cultural beliefs.\(^15\), \(^22\), \(^24\), \(^25\) Different contexts create different perspectives in regards to being unmarried and pregnant, especially among pregnant unmarried adolescents in northeastern Thailand, where unique socio-cultural contexts exist. For example, being pregnant and the nurturer of a baby are deemed as rites of passage to becoming a mature and successful woman. However, young females are expected to delay childbirth and, instead, work to make money, which is a form of prestige for women.\(^26\) In addition, the size of the dowry the groom’s family gives to the parents of the bride, for raising her, is based upon the importance of the bride, as well as the degree of respect they desire to reflect.\(^27\)

Little specific knowledge is known regarding unmarried pregnant adolescents in northeastern Thailand. Therefore, learning what it means to be an unmarried pregnant adolescent, from the adolescents’ perspective, may help healthcare providers better understand adolescents’ needs, and to delivery more appropriate health care. Thus, this study aimed to describe the meaning of being an unmarried pregnant adolescent in northeastern Thailand, and to answer the question: “What meaning do unmarried pregnant adolescents in northeastern Thailand ascribe to being unmarried and pregnant?”
Method

A qualitative descriptive approach was undertaken to address the research question. In an attempt to gain legitimized insight into unmarried pregnant Thai adolescents’ lived experiences in their own terms, an interpretive paradigm was employed as the philosophical underpinning of this study.

Participants: The study was approved by the Ethics Review Committee of the Faculty of Nursing, Chiang Mai University, and one tertiary care hospital located in northeastern Thailand. Through use of purposive sampling, unmarried pregnant Thai adolescents were recruited, by the primary researcher (PI), while attending the antenatal clinic of the tertiary hospital used as the data gathering site. The PI obtained, from the prenatal clinic personnel, a list of names of pregnant women who were being seen at the clinic. From the list of names, pregnant adolescents (n=125) and their prenatal visiting appointments were identified. When the identified pregnant adolescents attended the clinic, as an initial screening measure, they were directly contacted and asked, by the PI, about their “marital status.” So as to maintain confidentiality, this process took place in a private room within the clinic. Those who identified themselves as an unmarried adolescent were provided with a brief explanation of the study and invited to participate if they met the following inclusion criteria: a) no traditional or legal marriage at the time of the interviews; b) plans to continue the pregnancy until term; c) at a gestational age of 32 to 36 weeks at the time of the first interview; and, d) being healthy. Each eligible participant who was interested in becoming part of the study was provided comprehensive information about the study, as well as assured their anonymity and confidentiality would be maintained, and they had the right to withdrawn at anytime without repercussions.

Eligible participants, as well as their parents, were asked to give verbal assent and consent, respectively, to participate in the study. Since being an unmarried, pregnant adolescent in northeast Thailand is considered a sensitive issue, the researcher felt reluctant to ask them to provide written assent or consent to participate.

Eighteen of 28 unmarried pregnant adolescents approached were deemed eligible to participate. However, two were excluded because their parents did not give verbal consent for them to participate. Consequently, 16 unmarried pregnant adolescents who were 13 to 17 years of age (average = 15.6 years) and had a gestational age of 32 to 36 weeks participated. Prior to becoming pregnant, over half (56.3%) attended junior high school, while 12.5% attended senior high school, 12.5% attended vocational school and 18.8% dropped out of school. Two worked prior to becoming pregnant, but left their jobs when others learned they were pregnant. All participants were primipara and identified their pregnancy as unplanned. More than one-third (37%) admitted unsuccessfully attempting to terminate the pregnancy.

Data Generation: Data were generated through use of a demographic questionnaire and interviews. A researcher designed demographic questionnaire was used to obtain personal and healthcare information (age, gestational age, education, work activities and attempts to terminate the pregnancy) regarding each participant. In addition, each participant was interviewed 2 – 4 times, for 60 – 90 minutes each time, in an attempt to gather rich information regarding being an unmarried pregnant adolescent. Field notes and reflective journal comments were written after each interview, and used as supplementary data in interpreting the information and context in which it was obtained.

Open-ended questions, developed from the literature, by the PI, and validated by two experts in the areas of midwifery and qualitative research, were employed for use as an interview guide. The interview guide was composed of a grand tour question, focused questions, and probing questions that were
modified throughout the study with regard to emerging information

The interviews took place, between December 2006 and March 2008, in a location chosen by each participant, including: a private room in a hospital (n = 11); their home (n = 4) and, the primary researcher’s office (n=1). Each interview was tape-recorded, with permission, and transcribed verbatim. Those who preferred to speak in their native dialect were encouraged to do so. This may have helped provide reassurance to them, as well as to facilitate rapport with the investigator.

The initial interviews began with the grand tour, open-ended question: “Could you tell me about your life now?” This was asked to invite the participant to begin to tell her story. Focused questions (“What has it been like for you to be an unmarried and pregnant adolescent?”) were asked in an attempt to encourage participants to ascribe their perceptions of being unmarried pregnant adolescents. In addition, probing questions (“What do you mean by...?” and, “How do feel about ...?”) were posed in an attempt to obtain specific information regarding issues addressed in prior interviews and/or to clarify findings generated from the ongoing data analysis. Prior to the second interview and for all following interviews, each participant was presented with a summary of her prior interview and asked to verify, explain and/or add additional information she felt should be included.

Data Analysis: Data collection and analyses were simultaneously conducted. Data were analyzed using the process of abstraction delineated by Morse and Richards. Verbatim transcripts of each interview repeatedly were read to gain insight into, as well as to examine significant statements regarding the study objectives. Data were coded, sorted and grouped together prior to being labeled with the same name as the topic coding. Similar analytic coding was linked and grouped to create a category. To enhance the credibility of the findings, the categorization development process and, ultimately, the thematic meanings and categories were discussed with the members of the research team, as well as with two qualitative research experts.

Results

Two thematic meanings of being an unmarried pregnant adolescent in northeastern Thailand emerged from the data. They were: “Being Devalued” and “Ending Adolescent Life”.

Being Devalued

“Being Devalued,” was recognized as the unmarried pregnant adolescents’ perception their value was reduced by others, and sense of self-worth was diminished by them. Two major categories, related to “Being Devalued” also emerged from the data. They were: “Being seen as a Bad Girl” and “Losing Self-Worth.”

Being seen as a Bad Girl: This category implied the unmarried pregnant adolescent was an object of criticism regarding her sexual behavior. An unmarried pregnancy was perceived as a sign of premarital sexual activity. Those who violated the cultural norm of abstinence were considered “bad girls.” Being labeled “bad girls” appeared to be closely related to the attributes of being unable to control sexual desires and engaging in sexual activity at an early age [Jai-Teak (ใจแตก)], as well as having sexual activity with many partners [Mau (มั่ว)].

Participants stated the culture dictated one should be more than 20 years of age before getting pregnant, and that becoming pregnant during adolescence was considered improper. Once the pregnancy was obvious, the adolescents were criticized as Jai-Teak [one who had sex and got pregnant while she was young].

A 13 year old reflected:

“I’m a child and then I get pregnant. People may say, Look at that kid, ‘A kid having a kid.’ I’m shy when they stare at my face and my belly. They may think I’m a Jai-Teak.”
Becoming pregnant resulted in the adolescent being discredited as a female and being considered to be a *Mau* (มั่ว) [loose woman]. Although the unmarried, pregnant adolescents defended themselves, saying they had sexual intercourse only with their boyfriends, they still were condemned as being sexually loose women. However, they recognized some of their behavior (going to bars or discotheques, and smoking and drinking), may have convinced others to think negatively about them. One remarked:

> My friend’s parents say that I’m Mua (มั่ว). They think I have sex with a lot of guys, and then got pregnant. They may think I drink and smoke. Although I went out to a bar, I was there only with my boyfriend. I never had sex with anyone else.

Lacking ability to concentrate on school studies was another aspect of being a “bad girl.” Being pregnant as an adolescent appears to show one is not interested in studying and does not want to be a “good person,” but rather one who desires to have a baby. The participants quit school, as soon as possible, after recognizing they were pregnant. This was done to avoid being criticized and experiencing the disdain of peers and teachers. Since Thai society places a premium on higher education as a way to become a qualified person, and to have future opportunities, those who leave school before graduation are stigmatized as “bad or idle students.” One stated:

> “My friends’ parents said, I’m a bad girl because their daughters have never been like what I am [pregnant and quit school]. These girls’ are not pregnant and they study and will graduate, then becoming good women.”

Getting pregnant before marriage was identified as another attribute of a “bad girl.” Since pregnancy is socially shaped as happening within the context of adult marriage, the adolescents, and their respective family, were disappointed regarding the unmarried pregnancy. Pregnancy before marriage broke the cultural norms. As one girl said:

> Finishing schooling, getting a job, and then marrying, this is a custom. But I’m young and pregnant while a student, this is improper.

Adolescents who violated the cultural norms were considered blemished and gossiped about. One remarked:

> People said I’m a bad girl; no one is pregnant and bad like me. I got pregnant, but I’m still not married. I’m not married so people gossip and look down on me.

**Losing Self-Worth:** The second major category of “Being Devalued” emerged as losing self-worth, and refers to the idea unmarried pregnant adolescents’ perceive their sense of self being devalued and reduced because of having lost their virginity without receiving dignified compensation (having a wedding ceremony or receiving a valuable dowry). Once a female, Thai adolescent engages in sexual intercourse she is marked as Sia-Tua (เสียตัว) [loss of virginity]. Not only did the girls loose their virginity, their education and future were destroyed, and they were unable to ask for valuable compensation.

Participants believed their virginity had been taken and their “sense of self” damaged by men in their lives. However, boys who engaged in sexual activity never were blamed, and loss of virginity was not applicable to them. One participant recounted:

> A female has sex then gets pregnant. She loses her body and is ruined. Anyways, a male has sex, but never gets pregnant and he never loses.

Because they lost their virginity prior to marriage, loss of virginity without having a wedding ceremony was deemed as the unmarried, pregnant
adolescents’ losing their sense of self. The public recognized the unmarried adolescents had lost their virginity when they were visibly pregnant. Since Thai cultural values virginity of women, pregnant adolescents are considered to have given access to the boys who got them pregnant. In addition, because they had lost their virginity, they could no longer be given approval to become married. Thus, they perceived they had lost their sense of self-value and felt ashamed of what had happened to them. As one commented:

I feel ashamed of everything. I have a baby although I’m still young and not married yet. Others might look at me as an easy girl. I lost my virginity to him and got pregnant, but I’m not getting anything back. It’s odious, and not the same status as a married girl.

Having a wedding ceremony in Thailand not only symbolizes social acceptance of girls and their parents, but also is the means by which females gain a sense of self-worth. Although participants had lost their virginity and gotten pregnant, their parents expected them to be married.

Although, I’m pregnant, my mother wants me to get married. ... If a wedding ceremony is arranged, people would know who my boyfriend is ... they would accept my pregnancy. My parents and I are respected by others. ... I would feel better, if I became married.

However, because of having broken the cultural norms, the unmarried pregnant adolescents were less likely to become married, have a wedding ceremony and be accepted by others. As one adolescent described:

If I break out of my custom that a female must be married before becoming pregnant, like getting pregnant before marriage, people wouldn’t accept me.

Within the Thai culture, not having a wedding ceremony implies the girl and her family are not respected by the boy’s family. One girl remarked:

I’m a female, and I should have a wedding ceremony. I think, if I live with him, not married, it’s like I’m not valuable to be his wife. I’m of less value than nothing. At least a customary ceremony should be arranged to show his respect for my parents, but there is nothing.

Losing virginity without receiving a valuable dowry is considered another aspect of losing one’s self-worth. Participants perceived they had lost their sense of self-value because of not receiving, as well as being unable to receive, a valuable dowry. Being unable to receive a valuable dowry appears to have shown they were not worthy. One adolescent stated:

My parents asked for a bride price of about 100 thousand baht, but my boyfriend’s parents refused and would pay only 10 thousand ($300 USD) because I’m pregnant. They look down on my family.

Receiving a valuable dowry may have restored the adolescents’ self-worth because the “bride price” is viewed as a means of repaying moral obligation to parents. In terms of social expectations, participants felt a good, Thai daughter should obey her parents’ discipline and pay back their moral obligation when she grows up. One adolescent recounted:

This money is paid for my mother’s milk and care in bringing me up. I must pay her back, but my boyfriend’s parents have no money for the bride price.

Although the adolescents did not receive a valuable dowry, six were given money as compensation or fine payment, from the boy’s family, for him having caused “virgin damage.” One participant remarked: He paid me for the ruin. He paid me for destroying...
my education and my future. However, the girls and their parents were disappointed. They perceived compensation was given for virgin damage rather than for honoring the girl and her family, as would have been done with a valuable dowry. One girl stated:

My parents and I feel upset with this money since it is paying for his mistakes. … He pays for damaging me and ending the story. … If he gives me money and then I give it to my parents on the wedding day, it is a dowry and would be valuable.

Ending Adolescent Life

The second thematic meaning of being an unmarried pregnant adolescent in northeastern Thailand emerged as “Ending Adolescent Life.” Although participants recognized adolescence as a period for studying and enjoyment, it was ruined for them when their pregnancies were confirmed. One adolescent recounted:

I want to keep my teen life as long as possible. But it ended, once I knew I was pregnant. I’m not a teen due to having a baby.

Three major categories were noted as reflecting the adolescents’ perception of “Ending Adolescent Life.” They were: “Being Isolated from Peers;” Being Unable to Engage in Teen Activities;” and, “Dropping out of School.”

Being Isolated from Peers: Isolation from peers refers to the fact the adolescents often were prohibited from contacting friends. Participants stated they were separated from their peers because of being seen as a bad role model and keeping one’s self in the shadows. Being seen as a bad role model was their perception regarding how others felt about them in regards to their pregnancies. In other words, they felt others thought they set a bad example for other girls. They also believed parents of other girls would not allow their daughters to be friends with them because, as bad role models, they might persuade their friends to behave badly, become sexually active and get pregnant. One participant commented:

I think my friends’ parents forbid their daughters to be with me. They’re afraid that I’ll make their good daughters do bad things, go to wrong places and act in wrong ways.

Because they felt embarrassed and/or wanted to avoid being blamed for being pregnant, keeping one’s self in the shadows was viewed as their attempt to conceal their pregnancy. Since being unmarried and pregnant was deemed a violation of cultural norms, the adolescents felt humiliated. Although they said they were embarrassed, they indicated their parents and family members experienced shame because of their pregnancies. Thus, five attempted to conceal their pregnancy by moving to unknown communities, as well as avoided contact with former friends and neighbors. One adolescent who moved from her hometown to hide her pregnancy recounted:

I stay here, and don’t know my neighbors. I haven’t seen my friends for a long time, and only stay at home by myself. I feel lonely.

As part of keeping one’s self in the shadows, the adolescents avoided interacting with peers and friends. Often this separation was driven by the fact their parents encouraged them to isolate themselves from others. As indicated by one adolescent:

My parents tell me not to contact my old friends. I should wait until my baby is born.

As a result, the adolescents tended to stay alone and not participate with anyone.
**Being Unable to Engage in Teen Activities:**
The inability to engage in teen activities done prior to pregnancy was perceived by participants as the end of their adolescence. They said they stopped doing teen activities with their friends because of physical changes that resulted from their pregnancies, changes in social status and feeling ashamed when in public. Physical changes, such as morning sickness and general discomfort, made it difficult and inconvenient for them to go places with friends to engage in usual teen activities. Two participants indicated:

I couldn’t go anywhere because I got pregnant and did not feel well because of morning sickness. I just stay at my home though I want to go out for fun.

Once I got pregnant, it was difficult to go, my belly was big. I have to be careful for my baby, not to jump or run as I did. Having a baby makes it so hard to have fun with friends. I can’t behave as my friends do.

Feeling ashamed, when in public, was another reason participants did not engage in teen activities. Thirteen participants indicated to take part in teen activities, they would have to go to school. This would bring their pregnancies to the attention of the public, which would result in them becoming the target of gossip. As one girl stated:

I felt ashamed because there are many people at school. They might look at me and gossip about me.

Changing social status from adolescence to motherhood was a factor that prevented participants from being involved in teen activities. As socially expected, they felt they should prepare themselves to become a mother and take good care of their unborn baby. If they still went out to have fun, they would be criticized for their behavior.

When I go out, there are both my friends and others joining us. I’m afraid that they would blame me, saying: ‘You already have a baby and a husband. Why do you still go out? You should stay home and raise your child.’

In addition to being an expectant mother, participants perceived they should take care of their infant and themself. Thus, they tried to avoid harmful activities and gave up some teen activities. One noted:

I used to go out and sleep very late. Once I got pregnant, the doctor instructed me to rest. My mother tells me to go to bed at 8 p.m. Because of the pregnancy, I can’t enjoy my night time.

**Dropping out of School:** School was significant for the adolescents, and they placed value on higher education as a means to getting a good job and having an income. They perceived dropping out of school before graduation led to the end of their adolescence and, subsequently, to their adulthood. One participant expressed:

My life definitely changed within a second or a minute when I knew I was pregnant. I couldn’t continue my study. It’s like a half of my life is dead.

Being pregnant while still in school was considered improper behavior. As a result, pregnant students either dropped out or were expelled from school because of being perceived as bad students.

Being a bad or problem student was seen as part of the pregnant adolescents’ behavior related to not following school regulations (i.e. becoming pregnant). Going against school regulations was perceived as behavior that would lead to lowering the school’s reputation. As a result, pregnant adolescent students would be dismissed. One girl reflected:
The teachers said that having a pregnant student in school would destroy the school’s reputation. Teachers would expel a pregnant student from school or ask her to move to another school.

Consequently, to protect themselves from being criticized by their peers and being embarrassed, participants most often decided to leave school without a certificate. If they continued their studies, as soon as their pregnancy was recognized they said others would gossiped about them. Two adolescents explained:

My classmates would gossip about me and then this would spread out to every corner of the school.

I feel ashamed. People would ask: Where I study, why I still go to school and whether I feel ashamed in front of my friends? Girls with an unwanted pregnancy generally have to quit school. No one waits for dismissing her, as it will be embarrassing.

**Discussion**

In Thailand, a girl is expected to be inexperienced in sexual matters and to preserve her virginity until marriage. Having sex before marriage, on the part of a female, is met with social disapproval, although it is not the case for males. In this study, pregnancy was seen by the public, through the eyes of the adolescents, as a sign of having engaged in sexual activity. Thus, participants felt they were devalued by others and considered a ‘bad girl,’ especially since Thai society dictates that only married women should become pregnant. These findings are similar to those of prior studies conducted in northeastern and northern Thailand, but different from an Australian study wherein little condemnation of unmarried pregnant adolescents was found.

Virginity is seen as the mark of a good Thai female. In this study, participants believed they had not only lost their virginity, but also their sense of self. They perceived they were not adequately compensated (no valuable dowry or wedding ceremony) for these losses. Like previous findings, participants felt their male sex partners gained something by taking away their virginity, while they had lost a great deal.

Loss of female virginity, without marriage, was characterized in terms of being ruined as a person, a good female or a good daughter. However, as pointed out in the literature, females who have engaged in premarital sex might have their reputations salvaged if they are able to marry. In this study, participants perceived having a wedding ceremony represented the idea that adolescents and their families were socially respected. As a result, the adolescents’ felt their sense of self-worth could be regained if a marriage ceremony took place.

The receipt of a dowry, however, was seen as a means for a daughter to repay moral obligations to her parents, as well as an indication of her self-worth. This idea is consistent with traditional norms of the dowry among Hmong women, where the dowry is a symbolic recognition of the worth of females among members of the Hmong culture. However, in this study, most adolescents were refused a wedding ceremony or not given an honorable dowry because of the pregnancy. The lack of these two events is congruent with prior findings regarding northeastern Thai women wherein they have been found to be treated with a different standard, regarding sexuality, compared to males.

Adolescents in this study perceived, as a result of pregnancy, their life as an adolescent ended. They were isolated from peers, unable to engage in normal teen activities and had to drop out of school.
Similar to prior research, this study’s findings showed respondents found pregnancy, during the school years, changed their lives and their futures. Congruent with prior findings, they became socially stigmatized. To prevent having to confront stigma and blame, participants avoided contact with peers and family members, which intensified and further contributed to their sense of isolation.

Gender role expectations dictate a female should be a good mother by making personal sacrifices for her baby. As a result, participants encountered conflict between their maternal roles and their adolescent lives. No longer could they simply be a teenager. Similar to the findings of Pungbangkadde and colleagues, being a mother required them to provide care for their babies, instead of attending school or going to work.

The desire to obtain an education seemed to be significant to the participants. However, they saw future involvement in educational pursuits ending because of being unmarried and pregnant. They perceived their life as an adolescent ending because of having to assume the maternal role rather than being able to attend school. This finding is quite different from research conducted in Australia where, being pregnant outside of wedlock is considered a disturbance, unmarried pregnant adolescents are provided an opportunity to obtain an education.

In order to protect themselves from being blamed by peers or school teachers, participants left school before the pregnancy was obvious. This finding is similar to a study, done in the United States, where African-American, unmarried pregnant adolescents dropped out of school because of feeling stigmatized. However, other studies have shown that when parenting classes for unmarried, pregnant adolescents are available in alternative schools, adolescents sometimes do not drop out of school, but instead work at focusing on school work and future goals. The differences between findings in other studies and this study, most likely, are related to the cultural context in which the studies were conducted.

Limitations

This study focused on the experiences of unmarried pregnant adolescents in northeastern Thailand. Social norms and contexts in other parts of Thailand may be quite different, making the study’s findings generalizable only to the northeastern part of the country. In addition, since social disapproval of pregnant unmarried adolescents exists, within the northeastern part of Thailand, obtaining a true cross sectional sampling of the population was not possible. As a result, many adolescents were likely to conceal their pregnancy and, thus, became unavailable for the study.

Conclusion and Recommendations

Findings from this study could assist nurses and other healthcare providers in understanding perceptions of unmarried pregnant adolescents’ regarding their pregnancy experiences. The results also might prove helpful in developing age and situation appropriate health care that demonstrates respect and does not place blame, as well as self-help groups that focus on dealing with the feelings and public scrutiny unmarried pregnant adolescents are likely to encounter.

Future studies need to explore experiences of unmarried pregnant adolescents in other regions of Thailand, so as to determine if cultural differences are present based upon geographic location. Studies that follow pregnant adolescents from the antenatal period to the postpartum period also might prove helpful in determining if perceptions change as adolescent pregnancy progresses. Finally, examination of the effect of providing educational experiences to unmarried pregnant adolescent, so they can complete their education, is warranted.

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References

การรับรู้ถึงการเป็นหญิงตั้งครรภ์วัยรุ่นที่ไม่แต่งงาน ของวัยรุ่นหญิงไทยในภาคตะวันออกเฉียงเหนือ

สมจิตร เมืองพิล, สุจิตรา เทียนสวัสดิ์, กรรณิการ์ กันธะรักษา, สุสัณหา ยิ้มแย้ม, Susan C. Vonderheid

บทคัดย่อ: หญิงตั้งครรภ์วัยรุ่นที่ไม่แต่งงานเป็นกลุ่มที่มีความเสี่ยงต่อปัญหาสุขภาพผิวเผือกและความรัก
รวมถึงปัญหาสุขภาพจิต และมีข้อเสียข้อบกพร่องด้านเศรษฐกิจสังคม ปัญหาเหล่านี้มีความซับซ้อนชัดเจนขึ้นอุกับบริบทของแต่ละบุคคล ซึ่งจำเป็นต้องมีการวิเคราะห์และบุคคลที่มีการเข้าใจอย่างถูกต้อง การศึกษาเชิงคุณภาพโดยวิธีการพรรณานี้มีวัตถุประสงค์เพื่อทำความเข้าใจความหมายของการเป็นหญิงตั้งครรภ์วัยรุ่นที่ไม่แต่งงานในภาคตะวันออกเฉียงเหนือ ของประเทศไทย

หญิงตั้งครรภ์วัยรุ่นไทย ที่ไม่แต่งงาน จำนวน 16 ราย ซึ่งอาศัยอยู่ในภาคตะวันออกเฉียงเหนือมีอายุระหว่าง 13 ถึง 17 ปี เข้าร่วมวิจัยครั้งนี้ โดยมีทฤษฎีเดินทาง 32 เส้น 36 สิ่งที่เกี่ยวข้อง เช่น การรวบรวมข้อมูลวิธีการผสานเนื้อหาของบันทึกลาว่าความรู้และประสบการณ์ที่ดีสู่มุมมองวิธีการวิเคราะห์ข้อมูลของมอร์สและริชชาร์ด

ผลการวิจัยพบว่า “การถูกลดคุณค่า” และ “การสิ้นสุดชีวิตวัยรุ่น” เป็นความหมายของการเป็นหญิงตั้งครรภ์วัยรุ่นที่ไม่แต่งงาน โดยการถูกลดคุณค่า เป็นการรับรู้ของหญิงตั้งครรภ์วัยรุ่นว่าตนเองถูกมองว่าเป็นเด็กไม่ดี และรู้สึกถูกนิยามค่าความย่ำแย่ สำหรับการสิ้นสุดชีวิตวัยรุ่น เป็นการรับรู้ว่าชีวิตวัยรุ่นได้สิ้นสุด เพราะตนเองถูกแยกออกจากเพื่อน ไม่สามารถร่วมกิจกรรมของวัยรุ่นได้และต้องออกจากโรงเรียน

ผลการศึกษานี้อาจช่วยให้พยาบาลและเจ้าหน้าที่ที่มีประสบการณ์ด้านความเข้าใจหญิงตั้งครรภ์วัยรุ่นที่ไม่แต่งงานมีการจัดการปัญหาที่เหมาะสมขึ้น ควบคุมการจัดแนวทางการให้บริการหญิงตั้งครรภ์วัยรุ่นที่ไม่แต่งงาน โดยมีการกำหนดวัย สถานการณ์ และจัดการของหญิงตั้งครรภ์วัยรุ่น รวมถึงการให้บริการควบคุมโรคที่ส่งผลต่อสุขภาพและไม่สำคัญ

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คำสำคัญ: การตั้งครรภ์วัยรุ่นที่ไม่แต่งงาน; ภาคตะวันออกเฉียงเหนือ ประเทศไทย