Investigating Social Determinants of Adolescent Pregnancy in the Cusco Region, Perú

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Background

Adolescent pregnancy is associated with worse health, social, and economic outcomes for both mothers and infants.

Perú: 50,000 girls under 19 years old experience motherhood annually. Adolescent pregnancy rates are disproportionately high in rural regions. In 2017, rural Cusco's fertility rate was 60 per 1000 women, while urban Cusco's was only 26 (UNFPA Peru).

Community Partner: VIDAWASI

VIDAWASI Perú is a pediatric health citadel in Urubamba, Cusco, Perú. The organization aims to decentralize healthcare in Perú and provide quality services to the rural Sacred Valley.

VIDAWASI served as a local contact and assisted the research team in recruitment through their relationships with local health posts and women's groups. Kate and Ally spent 7 weeks living at VIDAWASI to build community relationships in Cusco and Lima, recruit participants, and prepare for data analysis.

Research Question

What are the social determinants of adolescent pregnancy in rural Cusco, Perú?

Objectives

Primary objective: understand the unique set of social factors that influence adolescent women's reproductive health in this area.

Secondary objective: serve as a knowledge base for any future intervention projects.

Fig 1. Kate and Ally with VIDAWASI's founder and director, Jesús Dongo.

VIDAWASI
Al Servicio de la Vida

Methods

Mixed Methods Case-Control Study

Case: n=30 girls (12-19yo) with a history of pregnancy

Control: n=30 girls (12-19yo) without a history of pregnancy

Recruitment

Visited local health centers, women's shelters, schools, and social organizations to recruit participants.

2-Part Research Instrument

42 quantitative survey questions:
- Participant demographics
- Home and family
- Work and education
- Access to resources
- Social and emotional health and substance use
- Pregnancy history
- Sexual health

8 written interview questions:
- Sexual health education from families, schools, religion, and community
- Attitudes towards contraception and abortion
- medical decision-making
- Medical, emotional, and social support during pregnancy
- Relationship with partner

In Progress: Due to IRB delays, student researchers have trained local interns at VIDAWASI to complete remaining data collection. 7 surveys have been completed.

Preliminary Data

Themes from initial interviews include:

Lack of sex education from schools and families

- "I learned some things in school about how babies are made. I did not receive any education about contraceptives. I learned abortion is a crime… I learned nothing about sex from my parents." -mother, age 19

Religious and community influence

- "In Christianity, we learn that you have to protect yourself with contraceptives in marriage, and we learned that abortion is a sin." -mother, age 18

Lack of medical, social, and emotional support

- "(When I found out I was pregnant), I was sad. I hadn't finished school, and we had no money. Now I still don't feel good because I feel alone, I live with my parents, and I have to take care of the baby." -mother, age 17

Poor relationships with partners

- "He almost never calls me, and I never see him. He never comes here to take care of the baby nor to help with the money." -mother, age 17

Potential Future Interventions

The research team is considering interventions that prevent adolescent pregnancy through sex education in schools and families, and that support young mothers socially and emotionally.

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