Letter to the Editor: Teenage Pregnancy in the Philippines: Effects and Interventions

Dalmacito A. Cordero Jr.
Department of Theology and Religious Education, De La Salle University, Manila, Philippines

Dear Editor,

In a recent article published in this journal, the authors insightfully investigated the prevalence and factors associated with adolescent pregnancy in the Chepang communities of Nepal. The study revealed that the prevalence rate of teenage pregnancy among Chepang women was very high at 71.4%, and poor knowledge of adolescent pregnancy, unplanned pregnancy, and lack of sex education were significantly associated with teenage pregnancy, making them among the most vulnerable in the region [1]. This result is indeed alarming since adolescent pregnancy can result in a variety of adverse effects in women. Herein, I would like to discuss a similar scenario in the Philippines, where this issue has remained a public health concern for many years, and suggest interventions to address it for the well-being of adolescents.

In the Philippines, teenage pregnancy was determined to be a “national and social emergency” by the National Economic and Development Authority in 2019. In a nationwide survey commissioned by the Commission on Population and Development in November 2020 among adults 18 years old and above, the issue of pregnancies among adolescents figured prominently as the most mentioned in all geographic areas and across socioeconomic groups [2]. In 2022, a total of 3135 adolescent girls younger than 15 years old gave birth—a 35.13% increase from the 2320 recorded in 2021. The number of registered live births by teenage mothers aged 19 and below decreased at an annual rate of 8.61% from 2017 to 2021. However, this trend changed in 2022, when live births in that group reached 150 138, up by 10.15% from 136 302 the previous year. This means that at least 411 children were born to teenage mothers every day in 2022, corresponding to one of the highest teenage pregnancy rates in Southeast Asia [3].

Becoming pregnant at a young age can result in various health risks primarily because the bodies of teenage mothers are not yet suitable or ready to carry a child in the womb. When the mother is not healthy, the child she carries will also be unhealthy. Adolescent mothers (aged 10-19 years) face higher risks of eclampsia, puerperal endometritis, and systemic infections than women aged 20-24 years, and babies of adolescent mothers face higher risks of low birth weight, preterm birth, and severe neonatal conditions [4]. Aside from these physical consequences, pregnancy during adolescence may also result in mental/psychological health disturbances and social and financial problems that can seriously affect the well-being of the adolescent.

Interventions are essential for addressing this issue. I propose a comprehensive community-based sexual education program starting in primary education. The development of a well-designed curriculum for all school levels that is focused on sexuality, responsible parenthood, and virtues must be implemented. With the government, other institutions like the Church, the private sector, and non-governmental organizations should collaborate with one another to create community programs that will focus on and promote sexual responsibil-

Corresponding author: Dalmacito A. Cordero Jr.
Department of Theology and Religious Education, De La Salle University, 2401 Taft Avenue, Manila 1004, Philippines
E-mail: dalmacito.cordero@dlsu.edu.ph

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ity among teens. This partnership between institutions will hopefully make a significant difference for the sake of our adolescents.

NOTES

Conflict of Interest
The author has no conflicts of interest associated with the material presented in this paper.

ORCID
Dalmacito A. Cordero Jr. https://orcid.org/0000-0001-8062-1242

REFERENCES