

Addressing the rising problem of teen pregnancy: Rethinking context and evolving capacities



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Teen pregnancy “is a reflection and a symptom of the problematic health system and community structure that we have. [It] is an indicator of what the Philippine culture is right now. And this is why we say: if you’re going to address it only by blaming adolescents, by blaming parents, you’re missing the point.”

May-i Fabros, the Philippine Commission for Women’s Board Member for the Youth and the Coordinator of Young Women Collective,

stressed the importance of looking at context and taking a different approach to addressing adolescent pregnancy during a health forum co-hosted by the Philippine College of Physicians and WomanHealth Philippines in January 12, 2016.

According to Fabros:

- In the Philippines, a girl aged 15-19 years old gives birth every 2.5 minutes.
- 1 out of 50 girls aged 15-17 had their first sexual intercourse before their 15th birthday.
- 8 out of 10 first sexual encounters by 15-

to 19-year-old girls are unprotected.

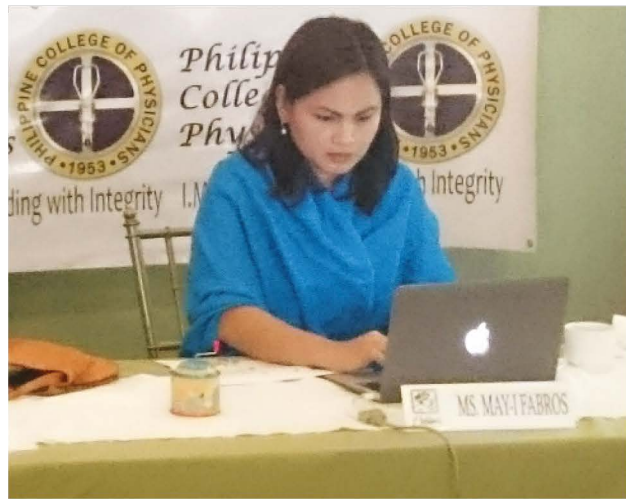
- 15 percent of girls who had sex before age 15 experienced it under violence.

Fabros qualified “violence” to mean not only physical violence but sexual intercourse without full, informed consent. She cited a 2014 study by WomanHealth Philippines: “Young people did not fully know that sexual intercourse was not their only option. When asked even further about why they had sex, kids would say that all they wanted was to kiss or to hold hands or just [have] company.”

Context is important

Poverty, inequality, inequity, rapid urbanization, mass workforce migration and the changing nature of families are just some of the factors that contribute to adolescent pregnancy, said Fabros. People who are younger, poorer and less educated have less access to health services – and yet they are the ones who are more likely to experience intimate partner violence. Children who live with relatives in a one-bedroom house do not yet clearly understand that they alone have ownership of their bodies, and they do not immediately realize that there is something wrong when trusted adults start touching them inappropriately.

Fabros also deplored the inconsistency of Philippine laws regarding the age at which children are considered sufficiently capable of making decisions for themselves. For example, she said, children who get pregnant at age 12 are not automatically assumed to be victims of statutory rape – it can still be argued that they gave consent – and yet these same minors are



not allowed to access contraceptives and family planning services without the consent of their parents.

Rights do not begin at 18, argued Fabros. “The context is not about creating more adolescent mothers but in creating...more young women who are able to make decisions over their bodies.”

Recognition of evolving capacities is key

“Evolving capacities” refers to the concept that children in different environments, undergoing different life experiences, will acquire competencies at different ages. For Fabros, measures to address adolescent pregnancy should involve acknowledgment of children’s evolving capacities. “When we recognize adolescents’ and children’s evolving capacities, we recognize that their right to make decisions, their rights over their bodies, their right to make mistakes and to bounce from that, to make their lives better, is not contingent on their age.”

Aside from giving adolescents adequate access to health care services – including con-

traception, family planning and reproductive health education – Fabros also advocated implementation of social programs that support those teenagers who have already become mothers. WomanHealth asked an assembly of adolescent mothers what they needed and their proposals included:

- Subsidized child care to enable them to continue their studies or look for work to support their family
- Financial support and/or scholarships for vocational or English language courses that can improve their chances to land a decent job
- “Safe spaces” where they can avail of

health, education and community services without stigma and discrimination

Fabros quoted a 16-year-old mother, a participant in the assembly, who resolutely declared: “Kakayanin ko ang responsibilidad ko sa aking anak. (I will do whatever I can to care for my child.)” With adequate access to health services and education, and sufficient social services to support adolescent mothers, the problems arising from teen pregnancy can be mitigated. If adults can give themselves space to make mistakes and get up from those mistakes, said Fabros, how much more the children?

