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Local Euphemism Increases Communication Gap in Reproductive Health Education

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***Abstract* – This qualitative study, utilizing a grounded theory method covered in-depth interviews with five pregnant students, who were identified through a convenience purposeful sampling, in Eastern Samar State University – Salcedo Campus, during the 1st semester of School Year 2014-2015, was conducted in order to understand the recurrence of unintended pregnancy among adolescent and young adult. It examined the involvement of language to the phenomenon and how it could contribute to the prevention of unintended pregnancy among adolescents and reproductive health intervention programs.**

Results of the study identified four thematic areas: Euphemism, Misconceptions, Hearsay, and Inferences, which influence adolescents of Eastern Samar, Philippines, construct meanings on how their reproductive health educators (parents, guardians, teachers, and health care providers) discuss terminologies regarding reproductive health to them.

This study recommends revisiting intervention programs and reexamining how reproductive health educators are empowered incommunicating adolescents about reproductive health.

***Keywords* – Grounded Theory, Qualitative Study, Reproductive Health Program Interventions, Unintended Pregnancy.**

I. Introduction

Recurrence of unintended pregnancy particularly among adolescents has been a perplexing phenomenon in spite of the presence of multifaceted intervention programs in addition to the volumes of multidisciplinary perspectives on adolescent pregnancy and teen-parenting presented both in local and international contexts.

For the past decades, countermeasures on unintended pregnancy particularly among adolescents havebecome a directive in assessing the success of Reproductive Health programs. For instance, Males (2010) claimed that it is not conceivable to discuss "teenage pregnancy" without raising the vital issues of poverty, race, family abuses, adult sexual behaviors, adult fatherhood, and lack of opportunity.

Unintended pregnancy is a particular concern in adolescents worldwide because in about 16 million girls and women aged 15-19 years, who give birth each year, most are unintended [12].It has been incorporated into the reproductive health research agenda due to its adverse outcomes for women and child's health [3].

Repeat pregnancies in this group also occur frequently and are linked with social outcomes and adverse health for teen mothers and their children, although these outcomes often reflect preexisting social deficits [8]. Compared with women who delay childbearing until their 20s, as reported in Alan Guttmacher Inst. (1994) and Hoffman (2006) teen mothers are more likely to drop out of school and have low educational attainment; to face poverty, unemployment, and welfare dependency; to become single mothers; and to experience divorce, if they marry; orto experience more rapid repeat pregnancy [1] [11].

Hence, this study intended to investigate this paradox of a seemingly cyclical unintended pregnancy among adolescent college students in the local context of Eastern Samar, Philippines. It projected to provide some insights into the cultural and social context and the role that language play where these events and decisions take place.

Statement of the Problem

This study aimed to understand the recurrence of unintended pregnancy among adolescents in spite of their exposure to intervention programs. Specifically, it aimed to answer the following:

1. How does language influence in the phenomenon of unintended pregnancy;
2. How do adolescents respond to intervention programs that they have been exposed to; and
3. How do pregnant adolescents respond to the community's reaction upon knowing their pregnancy?

Theoretical Framework

The underlying assumption in this research since it focuses on the adolescents and young adults themselves is the Developmental Assets/Resiliency Theory. Brindis, C.D., Sattley, D., Mamo, L. (2005) [5] presented this theory in order to assist program planners and staff members in integrating theoretical models into their programs.

This may have been suggested to be used as underpinnings in intervention programs, however, this theory facilitated after thematic areas were derived in this study; thereby leading the researcher to derive a framework in dealing with studies on adolescent pregnancies.

Developmental Assets/Resiliency Theory represents a shift away from viewing youth as "problems" (the problem, or deficit, paradigm) that somehow must be "fixed" or "repaired" [5]. Instead, this theoretical framework sees youth in terms of the positive assets and resources that either resides within themselves, or that can be enlisted in support of youth in the broader community as positive change agents (resiliency/prevention paradigm) [5].

II. Methodology

Five respondents were identified from the College of Agriculture and Allied Sciences in Eastern Samar State University – Salcedo during the 1st Semester of S.Y.

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2014-2015. All five respondents were in their young adulthood stage. The youngest was 16 and the oldest was 22 years old. Two of the respondents were in their 6th month gestation, while three of them were in their 5th month gestation. All were in cohabitation with their intimate partners and were experiencing pregnancy for the first time. None were identified as a rape victim.

The researcher conducted pilot testing to two pregnant students who were in their 2nd month gestation on the first week of August 2014 to determine the administrability and clarity of the questions. This was made in order to improve the way of conducting the interview which may be difficult to understand or even offensive to the respondents. Two of the questions were revised after feedback was given by the two students.

After the interviews with the respondents included in the sample and the first open-coding, the researcher conducted another two sets of interview in order to validate the interpretation of responses.

The researcher worked and interacted with the original data from the five respondents only from the 1st week of August 2014 until the 3rd week of October 2014.

Ethical Standards

In order to protect the rights of the respondents, permission from the Dean of College of Agriculture and Allied Sciences was sought first to utilize a room to conduct a closed-door interview. Then a written agreement was signed both by the Researcher and the Respondents that permission was sought to conduct interview with video-recordings and that it would be utilized for the purpose of this study only.

Permission from the parents of one minor respondent was sought verbally, but with the researcher's knowledge that these parents know about their child's pregnancy. The researcher made sure that the parents were aware of their child's pregnancy before asking permission because as Barbour (2014) directed, "in some areas of deviance, there may be conditions where permission could jeopardise the research such as research on pregnancy particularly adolescents; thus, the researcher need to regard the potential risk to the principal subjects of the research as priority" [4].

Transcribing

After a series of interviews, these were transcribed verbatim. As cited by Stuart (2009), Charmaz advised that terms should be in vivo to capture participants' fresh perspectives.

Coding and Recoding

In the coding frame, each respondent had a corresponding number paired with the SR acronym which stands for Student-Respondent together with their age. Hence, respondent 1 - was coded as SR1/21; respondents 2, 3, 4, and 5 were coded as SR2/16, SR3/22, SR4/20, SR5/21, respectively.

III. Results and Discussion

Four thematic areas emerged: (*as shown in Figure 1*) euphemism; misconceptions; hearsay; and inferences. Quotations from the interviewees are labelled 'according to the codes assigned to them.

Euphemism

Adult's Guidance. All five respondents admitted to being constantly reminded by their parents or guardians of not to get pregnant while studying specially the two respondents whose parents knew of the cohabitation.None of them disclosed of beingasked ifthey have engaged in intimacy with theirpartners or being advised about what to do in case they have.

As responded by the participants:

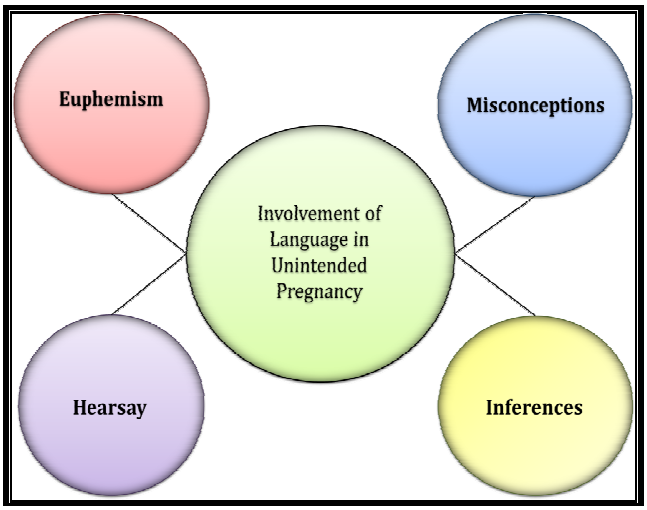

Fig. 1. Thematic Areas derived from the In Derived from the Study on Understanding Unintended Pregnancy among College Students of ESSU-Salcedo, S.Y.2014-2015

"There is no way I am going to talk about it (referring to sexual act) with my parents; we're not just friends.)- SR1/21

"They can't even tell me not to have sex with my boyfriend because it's very malicious to say it – SR2/16

"Before when I didn't have a boyfriend yet, my father

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almost slapped me when I happened to read aloud the word "sex" in the bio data, which just actually mean "male" or "female"; so how much more if I talk about it (sex) with him. - SR3/22

"*My mother and I are close so we sometimes talk about me not getting pregnant yet, but not about the details on what I need to do in order to postpone pregnancy while I am studying. It would feel awkward*" - SR4/20

"*They used to advise me when I was not yet living with my boyfriend, but it was mostly indirect like saying 'ayaw la anayisuko it Bataan' (a euphemistic phrase in the Philippines about not giving up one's virginity*" - SR5/21

These descriptions pointed out that the way theparent of the respondents interact with their children, whether directly or indirectly, influence the actions of their children. In this case, by saying 'do not engage in sexual activities' or by using euphemistic words in lieu of outright information about sexuality and the consequences of risky behavior only added confusion and suppression of emotion among the respondents.

This result confirmed the study of Craig and Richter-Strydom (1983) when parents in some places were traditionally do not get educated about reproductive health from their own parents; then most likely they would not be doing so to their own children [7].

The result was also similar to that of Guzman and colleague (2013) in most Latino parents and teens about not communicating often or extensively regarding teen parenthood, dating, and particularly sex, yet these parents believed they were sending clear messages to their teens about the expected behavior and values that they need to uphold [10].

On the other hand, if indeed these risky sexual activities were result of college students' exposure to a number of conflicting messages that challenge traditional views as Lacson (1997) claimed, then it would be just right to strengthen these views by bridging this gap in communication between children and adults (parents/ guardians/teachers) [15].

Misconceptions

Intimacy. Respondents of this study reported that they were not coerced by their partners into having intercourse. When asked about the number of months in their relationship before they decided to engage in sexual intercourse with their partners, the average answer was one month. This implies that young adults were most likely to engage in pre-marital sex even when relationship has not matured yet.

Furthermore, the respondents were oblivious of the fact that they can control the outcome of the intercourse. They disclosed that when they decided to get intimate with their partners, they left the decisions to their partners (referring only to folk methods of family planning – mostly withdrawal and calendar methods). Although all admitted about hearing the reproductive health rights, none of the respondents have attended any family planning program before.

This confirmed the result of the study of Geda and Lako (2011) stating that those who have autonomy on their health care and those visited by Family Planning workers are less exposed to unintended pregnancy. In this case, the respondents were less knowledgeable about their reproductive health and reproductive health rights because of non-attendance to intervention programs [14].

Hearsay

Standpoint on Reproductive Health Programs. The non-attendance to reproductive health programs among the respondents was not characterized by limited programs because Non-Government Organizations and International Non-Government Organizations in their places were educating the populace about reproductive health rights and that includes free consultation, access to contraception and even administering of injectable. They just did not want to use contraception and will not advice others in using these because they accepted their belief that it will have side-effects on their bodies. They believed that if they use these, and time comes that they wanted to get pregnant already, they might have abnormalities in their pregnancy and that might affect their babies.

This information did not however come from their doctors. Probing further, result showed that this belief in hearsay will most likely affect future decisions regarding contraception. As disclosed:

"*No I will not advice my friends who are engaging in pre-marital sex to use contraceptives because I am not using it personally. They say it has side-effects"* – SR1/21

"In our place, they say that it's bad for the body. No, it didn't come from a doctor but that's how it is in our place"– SR2/16

"Oh no! I will not use it because it's not good for the body" – SR4/21

In addition, respondents were asked if the information they just shared would lead to the influence of their religious belief. They negated it. They said that their church would never talk about contraception; it would advise them rather to abstain from having intercourse or to postpone it until marriage.

These findings were comparable to the result in the study of Borne (2011), showing a significant relationship and moderate correlation between the level of religiosity and the preference for abstinence-only sex education [6]. Moreover, there was an association between higher levels of religiosity and increased preference for abstinence-only sex education and a decreased preference for comprehensive sex education [6].

Brown and Guthrie (2010) also found similar results about young people being aware of the need to use contraception, and knowledgeable about its availability; however, it did not yield the same result about not using it. They found out that these adolescents often do not think about using contraception, especially where sex is unplanned becausethe key factors that diminished contraceptive use were alcohol and being 'in the moment' [13]; whereas in this study it was purely based on hearsay.

Inferences

Motherhood. In order to understand better the occurrence of the intendednessof the pregnancy, respondents were asked how they felt about their own pregnancy. These were most of the responses:

"*In June 2014, before classes started, I learned that I*

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was pregnant because I didn't have my period [laughs], anyway, I just went on with the pregnancy." – SR1/21

"*My parents knew that I was in cohabitation, so when we learned about the pregnancy, they weren't shocked anymore*" – SR2/16

"*First thing that came into my mind was how to tell my parents; how to explain to them that I'm pregnant. I was scared of their reaction, just like others when they tell their parents, they get disowned. But when they learned and it was alright with them, I went on with the pregnancy* – SR3/22

"*I wasn't expecting to get pregnant yet, but since it happened, I just have to go on with the pregnancy*" – SR4/20

"*When I learned about the pregnancy, I didn't mind, anyway, it's my child*" – SR5/21

Based on these accounts, it shows that all cases were unintended. Prior to pregnancy, even when they were in cohabitation, none were expecting to have a child yet. The Waray-Waray (*one of the dialects in the Philippines*) term "nala" was common to all responses, which could be an indicator of passiveness; hopelessness; and/ or merely an expression. In order to avoid ambiguity probing questions were asked. All of the respondents expected to be stigmatized since they were still young and studying, which is a social taboo in their respective places. Nonetheless, they anticipated to get through the stage of social stigmatization because of the disposition to become mothers to their future children.

This implies that the concept of Motherhood or the acceptance of becoming mothers would only emerge after the acceptance of the pregnancy. The respondents were saying about being alright, but the tears welling up, gave other implications. When they were asked about preparations of giving birth, the emotions that built up just poured out. Being young, they were all scared of giving birth and of dying, yet they felt that they would feel worse if they abort it.

These words and emotions that the respondents displayed were in concurrence with what the American Academy of Child and Adolescent Psychiatry (2012) found in most pregnant teens: that many different emotional reactions can be observed from teens such as wanting the baby to have someone to love, but not totally comprehending the extent of the needs of their future children, being depressed, or becoming overwhelmed by fears about the future, guilt, and anxiety [2].

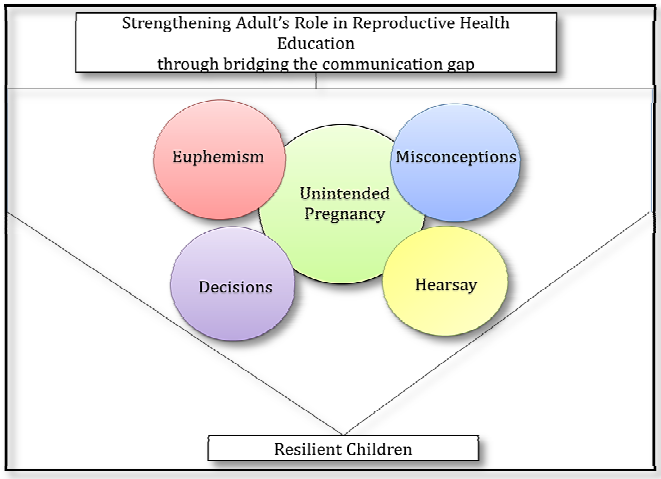

Fig. 2. Mothering Approach for Intervention Programs derived from the Study on Understanding Unintended Pregnancy among College Students of ESSU-Salcedo,S.Y.2014-2015

VI. Conclusion

Based on the results grounded on the data, young adult still look forward to openness in communication. This gap however, widens because of euphemistic terms being used instead of directly using appropriate words. This may have implications on how adults were supervised before by their own parents because if information about sexuality were not discussed openly. This however, will widen the gap between adolescents and their parents regarding this issue and will draw closer other influences such as peers, information from the internet and media.

Hearsay still influence in the respondents' standpoint on Reproductive Health Programs.

There is no need to be detached from the situation even when looking at it objectively because these answers no matter how deviant they may sound will guide policies and programs and even personal dealings in the family in order to avoid recurrence of this phenomenon.

Recommendation

It is recommended as well to validate the results through other methods in another setting.

The researcher further recommends a dry-run to utilize the Mothering Approach (see Figure 2) for intervention programs, which was derived from this study. Results should be documented.

This framework recommends empowering the parents and guardians in dealing with their children to bridge the generation gap and to understand how different the circumstances are between these age groups by strengthening their roles through appropriate communication.

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REFERENCES

[1] Alan Guttmacher Inst. (1994) 'Sex and America's Teenagers' New York: Alan Guttmacher Inst.
[2] American Academy of Child and Adolescent Psychiatry (2012) 'When Children have Children: Facts for Family' No 31
[3] Azevêdo, A.C., et al., (2013) 'Intimate partner violence and unintended pregnancy: prevalence and associated factors' Cad. Saúde Pública, Rio de Janeiro, Vol. 29 No. 12
[4] Barbour, R.S. (2014) 'Introducing Qualitative Research' A Student Guide. 2nd ed., Sage Publications, Asia-Pacific Pte Ltd., Singapore
[5] Brindis, C.D., Sattley, D., Mamo, L. (2005). From Theory to Action: Frameworks for Implementing Community-Wide Adolescent Pregnancy Prevention Strategies. San Francisco, CA: University of California, San Francisco, Bixby Center for Reproductive Health Research & Policy, Department of Obstetrics, Gynecology & Reproductive Sciences, and the Institute for Health Policy Studies. Available at: http://crhrp.ucsf.edu
[6] Borne, P. (2011) 'Social Work Students' Attitudes Toward Teenage Pregnancy Prevention: The Importance Of Religiosity And Feminist Ideology'. Louisiana University Journal Vol 11
[7] Craig, A. and Richter-Strydom, L.M. (1983) Unplanned Pregnancies among Urban Zulu School Girls' SA Medical Journal Vol 63
[8] Furstenberg F. 2007. Destinies of the Disadvantaged: The Politics of Teenage Childbearing. New York: Sage
[9] Geda, N.R., Lako, T.K. (2011) 'A population based study on unintended pregnancy among married women in a district in Southern Ethiopia' Journal of Geography and Regional Planning Vol. 4(7) ISSN 2070-1845
[10] Guzman, L. et.al., (2013) 'Let's (Not) Talk About Sex: Communication And Teen Pregnancy Prevention Within Hispanic Families'. Research Briefs: Child Trends. Wisconsin, USA. Publication #2013-50
[11] Hoffman S. 2006. By the Numbers: The Public Costs of Teen Childbearing. Washington, DC: Natl. Campaign Prevent Teen Pregnancy
[12] World Health Organization (2011) 'Making pregnancy safer' Adolescent pregnancy (Available at:www.who.int/making_pregnancy_safer/topics /adolescent_ pregnancy/en/index.html.)
[13] Brown, S. and Guthrie, K. (2010), "Why don't teenagers use contraception? A Qualitative interview study" The European Journal of Contraception and Reproductive Health Care
[14] Geda, N.R. and Lako, T. (2011) "A Population-based study on unintended pregnancy among married women in a district in Southern Ethiopia" Journal of Geography and Regional Planning Vol. 4 (7) Available: http://www.jstor.org/stable/2950841
[15] Lacson, R. et.al. (1997) "Correlates of Sexual Abstinence Among Urban University Students in Philippines." Guttmacher Institute. Available: http://www.jstor.org/stable/2950841

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