



## EVIDENCE BRIEF



### Curbing Teenage Pregnancy in Namibia: The Protective Role of Social Institutions and Family Planning (2017)



#### Why is it important?

Family planning variables had a mildly protective effect on teenage pregnancy in Namibia, which has some of the highest rates of teenage pregnancy in the East and Southern Africa region. This study examines the social and behavioural reasons for Namibia's high rates of teenage fertility. It seeks to inform national programmes and policies to curb the incidence of teen pregnancy.

#### Methodology

Data from a 2015 study of 3,125 youth aged 12 to 23 years, commissioned by UNFPA and WHO to look into teenage pregnancy, used a longitudinal method to support more detailed and rigorous analyses. The latest three DHS waves (2000, 2006, and 2013) were also used to check consistency with the University of Namibia data and to offer information that could serve to estimate the influence of community conditions on the risk of first sexual intercourse or first pregnancy. Univariate, bivariate, and multivariate analyses were conducted.

#### Key findings

By age 17, half of Namibian adolescents have had their first sexual experience. Sexual debut is delayed by social protection variables. The greatest protection comes from family, specifically the quality of relationships with parents. Adolescents who believe in their academic or professional potential are much less likely to initiate sexual activity early on. Interestingly, these positive self-perceptions correlate with the quality of relationships with

parents. Only 52 per cent of first sexual encounters were reportedly consensual, with the percentage being lowest among girls (46 per cent). Family planning variables had a mildly protective effect but community affluence increases the risk of unwanted first sexual activity, perhaps because of pressure from consumerism and/or growing economic inequality. About five years separate the age at which the median teen starts having sex (17 years) and the age of first pregnancy (22 years).

#### Conclusion

- 1. Families:** It is recommended that parents go beyond pious messages to “just avoid sex”, and consider the socioeconomic and psychological context in which adolescents are making decisions about sexual relations. Rather than retreating when adolescents become sexually active, families should in fact become more involved. Parents should strive to maintain communication channels and position themselves as a source of patient advice.
- 2. Schools:** School-based programmes should be developed to cultivate extra-curricular interest and individual counselling and career guidance.
- 3. Communities:** It is recommended that programmes that promote broader socioeconomic development be pushed.
- 4. Family Planning:** Motherhood may be embraced as a way to reduce economic and social uncertainty.

**United Nations Population Fund, East and Southern Africa Regional Office**  
9 Simba Road, PO Box 2980, Sunninghill, South Africa  
Tel: +27 11 6035300  
Web: [esaro.unfpa.org](http://esaro.unfpa.org) Twitter: @UNFPA\_ESARO  
Facebook: UNFPA East and Southern Africa Regional Office

*Developed in partnership with:*

