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Fertility among very young adolescents

1. Childbearing among adolescent girls aged 10 to 14 years remains a challenge in selected settinas

To address issues related to adolescent fertility in a comprehensive manner, the international community has recognized the importance of monitoring fertility levels among girls aged 10 to 14 years, in addition to ongoing surveillance of birth rates at ages 15-19 years. The two measures are included as part of indicator 3.7.2 of the Sustainable Development Goals, which records the birth rate per 1,000 women in both age groups.1

Early adolescence is a transitional period in which young people develop health behaviours that may last a lifetime. Also, at these ages, people often experience their sexual debut and establish their gender role and sexual identity.^{2,3} Yet, this period of early adolescence is often overlooked by researchers and policy makers, making it one of the least well understood stages of human development.^{4,5}

2. Data on childbearing among girls at ages 10-14 years are not routinely collected

Data on fertility among girls under age 15 are deficient in part because childbirth at these ages is not common in most societies. In addition, childbearing at these ages, which often occurs outside marriage, is likely to be underreported or concealed to avoid shame and stigmatization.⁶ Data are particularly scarce in settings where birth registration is deficient. Recent estimates indicate that, globally, roughly three quarters of children under age 5 in 2017 had their births registered with a civil authority. In the least developed countries, the figure was only 40 per cent.7

To fill this data gap, the Demographic and Health Surveys and other survey programmes have been collecting retrospective birth-history data among young women aged 15-19. By gathering information about any births that may have occurred in a window of 3 or 5 years before

the survey, it is possible to derive fertility and related reproductive health indicators for 10- to 14-year-old girls.^{8,9} Building on this work, the Population Division has analysed birth history data and available administrative records from more than 200 locations in Africa, Latin America and the Caribbean, Asia and the Pacific, Europe and Northern America, as available in December 2018 and covering years 1940 through 2017.

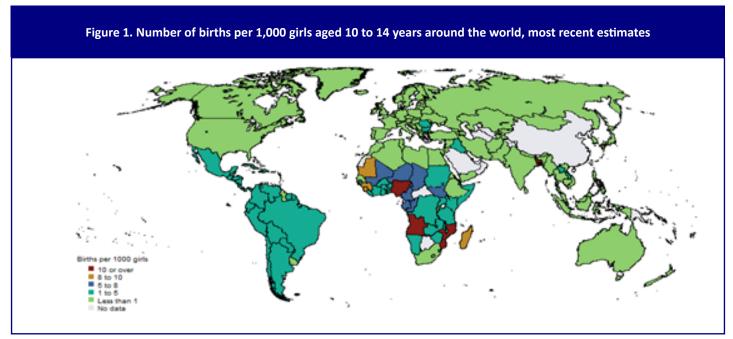
3. Early childbearing is more common in sub-Saharan Africa and Latin America and the Caribbean than in other parts of the world

The most recent values available for 190 countries (referring to the year 2000 or earlier) show elevated levels of early adolescent fertility for a small number of countries in sub Saharan Africa and Latin America and the Caribbean. Elevated levels of childbearing at ages 10-14 years are not common in other regions, with the notable exception of Bangladesh in Asia (figure 1).

In sub-Saharan Africa, particularly in Western and Central Africa, early childbearing is generally more frequent and its levels span a wider range than elsewhere in the world. Three of the four countries in the world with more than 10 births per 1,000 girls aged 10 to 14 years are in sub-Saharan Africa, namely Angola, Mozambique and Nigeria. They are followed by Guinea and Sierra Leone with an estimated nine, and Madagascar and Mauritania with eight births per 1,000 girls aged 10-14. Gabon reports a value of seven, followed closely by Cameroon, Chad, the Congo, Mali, Niger and South Sudan with six, and finally, Cote d'Ivoire and Liberia with five births per 1,000 girls in this age group. Outside Africa, Bangladesh reports an estimated 10 birth per 1,000 girls at ages 10-14 years.

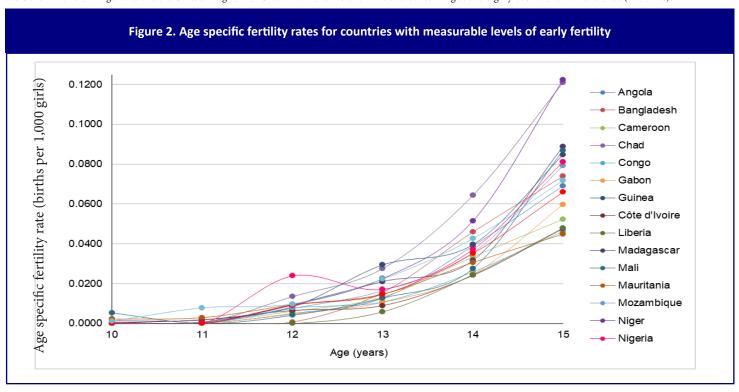
Fertility rates among young adolescents in Latin America and the Caribbean are considerably lower than in sub-Saharan Africa and Bangladesh (figure 1). The highest rate was recorded for Venezuela, with five births per 1,000 girls aged 10-14 years, followed by two per 1,000 for the Dominican Republic.

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Source: Demographic and Health Surveys (Various years).

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Source: Demographic and Health Surveys (Various years).

Notably, even in countries with somewhat elevated levels of early adolescent fertility, fertility below age 15 years occurred at such low levels that it is almost unmeasurable. Using the most recent data, the earliest age at which the level of childbearing can meaningfully be described in terms of a rate (annual number of births per 1000 girls) is around age 12, but only for a small number of countries (figure 2).

In very few countries, such as Mali and South Sudan, births are occasionally recorded starting as early as age 10.

Most countries with measurable levels of early childbearing recorded a reduction in the adolescent birth rate (ABR) at ages 10-14 between 2000-2007 and 2010-2017 A decline in the early ABR was particularly noticeable in Sierra Leone and South Sudan (figure 3—green arrows), both of which each recorded a reduction of 6.4 births per 1,000 girls aged 10-14 years in both countries during the decade between 2000-2007 and 2010-2017.

In addition, presented in order of magnitude, Niger, Ivory Coast, Liberia, Madagascar, Gabon, Mali, Venezuela, Chad and Mauretania recorded improvements in their ABR at ages 10-14 years from 1.5 to 0.4 births per 1,000 girls aged 10-14. In contrast to these general reductions, six countries with relatively high levels of early adolescent fertility—Angola, Cameroon, Congo, Guinea, Mozambique and Nigeria—recorded increases in the early ABR from 2007 to 2014 (red arrows) from 8.2 in the case of Nigeria to 2.2 births in Cameroon. Almost no change was reported for Bangladesh over the same period.

4. Why very early childbearing matters

In 2017, the number of adolescents aged 10 to 14 years is estimated at 612 million, comprising 8.3 per cent of the global population. Around 90 per cent of these adolescents live in the less developed regions, often with limited access to health-care services in general and to sexual and reproductive health care in particular.

Early childbearing is a precursor to socioeconomic deprivation, early marriage and high risks of maternal or child death, among other consequences

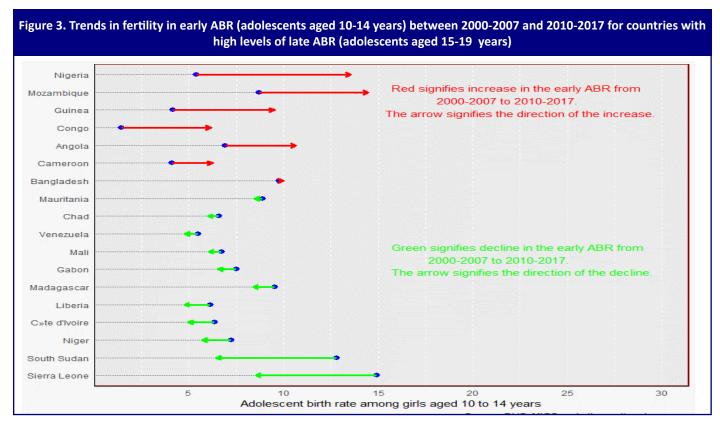
Available evidence from both developing and developed countries suggests that risks of maternal mortality are higher for young adolescents, with girls aged 15 years or younger facing higher risks than older adolescents. Further, the potential health, social and economic disadvantages that young mothers face are widely recognized.

Early childbearing is positively associated with the total fertility rate

In the 17 African countries with at least five births per 1,000 girls at ages 10-14 years, total lifetime fertility was over four births per woman (figure 4).¹⁴

Early adolescent fertility is associated with early marriage

Very early childbearing matters because it is closely related to child marriage, a standalone indicator within Goal 5, considered critical to achieving the Sustainable Development Goals. Mozambique and Nigeria, which have the highest estimated fertility levels for young girls,

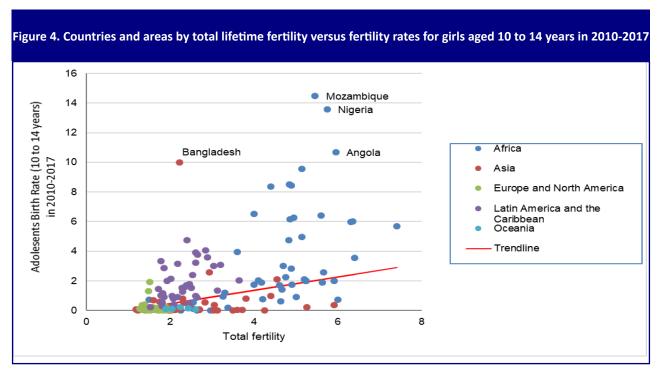


Source: Demographic and Health Surveys, Multiple Indicator Cluster Surveys and other national surveys (Various years).

also have elevated levels of early marriage. Thirteen and 15 per cent of 15-year-old girls were found to have ever been married in Mozambique and Nigeria, respectively. Niger, with an estimated 38 per cent of girls married at age 15 years, recorded six births per 1000 girls at ages 10-14. In eight of the 15 countries with an early ABR of at least five, no fewer than 10 per cent of girls were married or in a union at age 15 years. 16

The finding that at present very early fertility is prevalent

only in a small number of countries in Africa, Asia and Latin America and the Caribbean should not detract from the message that reproductive health among adolescents should remain a priority for both national governments and the global community. Reduction and elimination of very early fertility is critical for breaking the cycle of deprivation in young girls and women through ensuring their access to continued education, reproductive health care and livelihood opportunities.



Source: Demographic and Health Surveys (Various years).

NOTES

¹This document focuses on fertility among girls aged 10-14 years only. Therefore, all mentions of fertility levels refer to ages 10-14 years unless stated otherwise.

- ² Blum, R.W., K. Mmari, C. Moreau (2017). It Begins at 10: How gender expectations shape early adolescence around the world. *Journal of Adolescent Health*, vol. 61, No. 4S, pp. S3-S4.
- ³ Saewyc, E. (2017). A global perspective on gender roles and identity. *Journal of Adolescent Health*, vol.61, No. 4, pp. S1-S54.
- Neal, S., Z. Matthews, M. Frost, H. Fogstad, A.V. Camacho AV and L. Laski (2012). Childbearing in adolescents aged 12–15 in low resource countries: A neglected issue. New estimates from demographic and household surveys in 42 countries, Acta Obstetricia et Gynecologica Scandinavica, vol. 91 pp.1114–1118.
- ⁵ Global Early Adolescent Study (2015). The Global Early Adolescent Study: a case statement. Available from http://aphrc.org/wp-content/uploads/2015/04/GEAS-Case-Statement-March-2015.pdf.
- ⁶ Maly, C., K.A. McClendon, N.J. Baumgartner, and others (2019). Perceptions of Adolescent Pregnancy Among Teenage Girls in Rakai, Uganda. Global Qualitative Nursing Research, vol. 4, 2333393617720555. Published 2017 Aug 10. doi:10.1177/2333393617720555.
- ⁷ According to the last estimates of the dissemination platform of the Global SDG Indicators Database. Available from https://unstats.un.org/sdgs/indicators/database/.
- ⁸ MacQuarrie, Kerry L.D., Lindsay Mallick and Courtney Allen (2017). Sexual and Reproductive Health in Early and Later Adolescence: DHS Data on Youth Age

10-19. DHS Comparative Reports No. 45. Rockville, Maryland, USA: ICF.

- 9 Way, A. (2014). Youth data collection in DHS Surveys: An Overview. DHS Occasional Papers No. 9. Rockville, Maryland, USA: ICF International.
- ¹⁰ United Nations, Department of Economic and Social Affairs, Population Division (2017). *World Population Prospects: The 2017 Revision*.
- ¹¹ United Nations Population Fund (UNFPA) (2016) Adolescent Girls in Disaster and Conflict. Interventions for Improving Access to Sexual and Reproductive Health Services. Available from https://www.safebirthevenhere.org/sites/default/files/pub-pdf/UNFPA-Adolescent_Girls_in_Disaster_Conflict-Web.pdf.
- ¹² World Health Organization (2018). Maternal Mortality. Available from: http://www.who.int/news-room/fact-sheets/detail/maternal-mortality.
- ¹³ Nove, A., Z. Matthews, S. Neal and A.V. Camacho (2014). Maternal mortality in adolescents compared with women of other ages: Evidence from 144 countries. *Lancet Global Health*, vol. 2, pp. e155-164.
- ¹⁴ This is in line with findings from: i/ United Nations, Department of Economic and Social Affairs, Population Division (forthcoming). World Fertility report 2019.; ii/MacQuarrie, Kerry L.D., Lindsay Mallick, and Courtney Allen. 2017. Sexual and Reproductive Health in Early and Later Adolescence: DHS Data on Youth Age 10-19. DHS Comparative Reports No. 45. Rockville, Maryland, USA: ICF.
- $^{\rm 15}$ Estimates of women aged 15 years who are married or in a union are based on the recent DHS data.
- ¹⁶ The countries are Chad (12 per cent of the girls married at age 15), Guinea (10 per cent), Madagascar (14 per cent), Mali (16 per cent), Mauritania (18 per cent), Mozambique (13 per cent), Nigeria (15 per cent) and Niger (38 per cent).