Adolescents with an Unwanted Pregnancy: An Experience

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Abstract

Malaysia has recorded an alarming increase of adolescence pregnancy cases resulting in abandonment of foetus and babies, a pressing issue which demands immediate attention. This paper intends to understand the experience of three adolescents aged 16 to 18 with unwanted pregnancy, selected based on purposive sampling through the application of Interpretative Phenomenological Analysis (IPA). IPA, the newest entry in the qualitative research is concerned with the quality or nature of human experiences and what these phenomena mean to individuals in their everyday life context. Analysis of data is conducted based on face-to-face interviews to achieve in-depth description of experiences. Three main findings emerged from this study and are themed as (1) transformation from an unwanted to wanted pregnancy; (2) emotional numbing; and (3) seek solace in Allah (Supreme Being). The implications of the outcome of personal experience could be beneficial in developing theories, models, training modules and educational programs which may assist in informed policy.
The phenomenon of pregnancy among adolescents is a global endemic and a particular focus of concern in Malaysia. This is due to the rise in sexual initiations among adolescents in the last decade (Lee, Chen, Lee, & Kaur, 2006; Zulkifli & Low, 2000). It was found that the alarming increase in sexual activities was due to rapid modernization and social changes including the increase in the age for marriage and the lack of boundary between the interactions of unmarried male and female adolescents (Jaafar, Wibowo, & Afifiatin, 2006; Lee et al., 2006; Zulkifli & Low, 2000).

Pinto e Silva (1998) found in his study that more than a million adolescents making up a total of 11% of all girls between the age of 15 and 19 years old were found pregnant in the United States of America. These pregnancies are generally unplanned and unwanted (Pinto e Silva, 1998). In a recent study, it was found that the number has increased to a total of 40% (UNICEF, 2009). As reported by Lee et al. (2006), the incidence of adolescents engaging in sexual intercourse in Malaysia increases with age. This means, as the adolescents aged mature, their involvement in sexual intercourse is reported to rise. They found that the mean age at first sexual intercourse is 15 years based on a study conducted on students aged between 12 and 19 (Lee et al., 2006).

Most studies in the past have tended to focus on the causes of such illicit sex and on ways to curb the issues (Lee et al., 2006; W. Y. Low, 2009; Wah Yun Low, Ng, Fadzil, & Ang, 2007; Macleod Catriona, 2010; Omorodion, 2006; Pinto e Silva, 1998; Sabo, Miller, Farrell, Melnick, & Barnes, 1999; Schmiege & Russo, 2005; Wah-Yun, 2004; Zulkifli & Low, 1995; Zulkifli & Low, 2000). There is a lack of research in understanding adolescence sexuality, since issues pertaining sexuality is thought to be conservative, hence not discussed openly. Hence, their experiences have not been recorded and studied to particularly understand them from their world view. Little is known of adolescent girls’ experiences as young mothers and what factors influenced their becoming pregnant (Palacios & Kennedy, 2010).

The issue of unwanted pregnancy has grown in importance in light of recent cases of babies being abandoned, as indicated by the statistics provided by the Royal Malaysia Police (Sexual Cases Statistics, 2012) which showed that nationwide, there is a steady rise from the year 2007 to 2011 resulting in 76 and 98 babies being abandoned respectively. For the month of January to April, 2012; statistics by Royal Malaysia Police recorded 23 such cases. Out of the total cases mentioned above, the abandonment of babies involving adolescents aged 18 years and below totalled to 26 cases based on the statistics given for the year 2007 to 2011 (Sexual Cases Statistics, 2012). Babies were found abandoned in residential areas, religious sites, hospitals, restaurants, outside the bank, at the walkway, under the bridge, parking areas, cemeteries, fields, playground, and rubbish dumpsites and at building sites under constructions (Sexual Cases Statistics, 2012). The adolescence pregnancy is a transition to parenthood and may result in a stressful life event for young mothers especially when the pregnancy is unplanned and unwanted (Farber, 2009; Macleod Catriona, 2010).

One way to understand the phenomenon is to use the case study approach in Interpretative Phenomenological Approach (IPA) (Creswell, 2007; Fade, 2003) and develop the thick descriptions of each adolescent’s personal encounter and their personal world view (Chapman & Smith, 2002; Fade, 2004; Frost, 2011; Smith, Flowers, & Larkin, 2009; Smith & Osborn, 2003a, 2003b). Hence, the purpose of this study is to explore the experience of the unmarried adolescents with unwanted pregnancy and address the following research question: What is the experience of adolescent girls in Malaysia going through an unwanted pregnancy?

Methodology

Participants

To understand the lived experiences of the adolescent girls with unwanted pregnancy, three samples were selected based on purposive sampling. The criteria for the purposive sampling included: 1) pregnant in the third trimester, 2) 16 to 18 years old, 3) unwed before pregnancy, 4) stayed in a ‘safe home’ that takes in unmarried pregnant adolescents, and 5) all participations were on voluntary basis. All three participants were of Malay-Muslim origins. Participants were selected from this ‘safe home’ because of the non-regimented and non-rehabilitating nature of the home. The participants only registered to the ‘safe home’ in their final trimester of the pregnancy. At the point of study, only three participants were available and this meets the requirement as proposed by Creswell (2009); Smith et al. (2009).
Data Collection

Data was collected using a three-interview series during a period of four months. An semi-structured interview protocol was prepared to assist in probing questions. The questions were derived from an IPA experiential approach. The main question used to guide the interviews was: a) What are the experiences of adolescents going through an unwanted pregnancy?

All participants were interviewed in person with each interview lasting approximately 90 minutes. All interviews were audio taped and transcribed verbatim. As the instrument of the study, the researcher kept a reflexive journal throughout data collection stage, field notes to note all the affective responses, expressions and body language, and the surrounding environment to assist in the analysis of data.

Data Analysis

The first step of data analysis requires the researcher to immerse in the data and familiarize herself with the data. The IPA approach involving questioning, reflecting, and interpreting was applied. The case study approach of IPA requires the researcher to conduct an in-depth analysis of each participant’s data. This is to unravel the meaning based on the participant's own account (Seamark & Lings, 2004). The common themes or shared meanings of each participant is then merged to make sense and meaning to the phenomenon.

As a primary instrument to the study, the researcher accessed the participants experience directly through interviews, field notes, and the researcher’s own reflexive journal. Henceforth, this research was enhanced through a number of strategies in the study based on the process of triangulation, prolonged engagement, member checks, peer review, and audit trail to address the issue of rigorousness. The transcripts have been read and reread to ensure the full understanding of the context of the said phenomenon. Since the interviews were all conducted in the local language, Malay Language; the excerpts of the transcripts to be illustrated have undergone a peer review check to ascertain its authenticity. Excerpts from selected transcriptions are illustrated in both Malay and English Languages.

Ethical Considerations

Participants were ensured that all data would be kept confidential and only the researcher and the team that she is working with will have access to the data. A written consent was obtained from the gatekeeper who acts as the management of the safe home before the start of the study. Since the adolescents are 18 years and below, the researcher is required to gain the assent from the adolescents themselves. In this study, the researcher ensures that no harm was inflicted on the adolescents. The purpose of the informed assent form is to provide confidentiality or representation and anonymity of the participants involved in the study (Jenkins, 2010; Smith et al., 2009). The informed assent form explains the topics to be covered during the interview as well as the purpose of the research (Boserman, 2009). The informed assent form by no means replaced the parental or guardian informed consent but merely to seek the adolescents’ approval and agreement to participation (Boserman, 2009). In this study, pseudonyms were used to protect the anonymity of the participants to the study (Gabrielle, 2006). Confidentiality is necessary to protect and safeguard the sensitivity, increased emotional and physical vulnerability among the adolescents with unwanted pregnancy (Jenkins, 2010). For the purpose of this study, the researcher adopted the informed consent and informed assent based on the Research Ethics Review Committee, World Health Organization (Research Ethics Review Committee).
Findings

The study in understanding the experiences of adolescent girls with unwanted pregnancy has resulted in the emergence of three themes: 1) transformation from an unwanted to wanted pregnancy, 2) the emotional numbing affecting the familial relationship and 3) solace seeking in Allah (Supreme Being).

Results indicated that understanding an individual’s lived experiences of a phenomenon is consistent with recounting one’s personal story and essence of meaning through the adolescents’ emic perspectives. Each theme will be discussed in turn and illustrated by direct quotations from the transcripts.

Theme 1: Transformation from an unwanted to wanted pregnancy

All participants had a strong desire to keep their babies after going through the second trimester of their pregnancy. It was a transformation from unwanted to wanted pregnancy and the participants had said that this feeling comes from within and it feels very natural for them to take care of their own babies. Owing to the decisions made, they had experienced a mixed reaction within and outside of their family circles. By contrast, Orkid had not tried to talk in detail to the gatekeeper of the home where she stayed as she was concerned that the news might not be well-received by her. Instead she had decided to talk to her parents in her third trimester. Orkid described her parent’s initial reaction to hearing what she had to tell them about her decision:

Nak jaga dia lah!
(Wants to take care of him!)

Interview 3, Orkid, Line Number: 390

Rasa lain lah sebab ada benda dalam perut kan, kira anak ni bergerak, dapat rasa lah macam mana pengalaman mengandung. mmm..pengalaman lain dari yang lain. Macam seronok lah juga..tapi kita dapat rasa macam mak kita mengandungkan kita semua. Pastu sedar lah, macam ada penat semua, naik tangga.
(It feels different because there is something inside us, when the baby moves, I can feel and experience the pregnancy. Mmm…The experience differs from others. It’s like I feel happy… and I could actually feel how my mother feels when pregnant with us. I realized that it is very tiring like taking a flight of stairs.)

Interview 4, Orkid, Line number: 175-178

She was ecstatic and overjoyed to learn that her parents gave their consent to take care of her baby however; she was worried that the gatekeeper of the home will not agree with her decision:

Memang gembira tapi tak tahu lah takut Umi tak bagi, takut dia tak bagi je, tu je lah tapi rasa gembira sebab kita pegang sendiri.
(Absolutely happy but I don’t know and fear that Umi will not, will not agree to it, that’s all but I am happy to be able to take care of the baby myself.)

Interview 4, Orkid, Line number: 13 - 14

The fear of rejection that she experienced prevented her from broaching the subjects to others about her decision to take care of the baby. Her wrongdoings, being pregnant out of wedlock had diminished opportunities to talk about her wants and needs and left her with feelings of shame, powerlessness, frustration, a disgrace to the family, and isolation. She feared that the gatekeeper, whom they all called Umi (mother in Arabic) will not be agreeable to her decision since most of the females housed in the home will normally give their baby up for adoption thinking that it was in the best interest of the child.. Sakura on the other hand was more outgoing and discusses openly how she felt about the baby:
Masa mula, rasa macam benci, rasa nak buang sebab kita mengandung sorang-sorang kan pastu bapak budak ni pun nak buang, tolong buang kan. Pastu risau pastu bila jadi macam ni pun rasa lagi nak buang kan, nak buat-buat jatuh tangga nak buat macam tergugur.
(At first, I resented, feels like undergoing abortion because I am all alone and the father of the baby wants to help terminate the pregnancy. However, I worry what will happen next, afterwards; I feel like terminating the pregnancy again that I tried to fall off the stairs.)

Interview 4, Sakura. Line number: 288 – 290

(Sometimes I feel like I want to take care of this baby but my family does not like it. I have asked Umi what if I want to take care of the baby? Umi said not to take care of the baby, it is going to be difficult, the baby might ask about his father. And I thought of asking Umi to take care of my baby, but my mother disagreed to the idea and was worried that if they decided to come down to Kuala Lumpur, they will visit Umi. My mom does not want to visit Umi.)

Interview 2, Sakura. Line number: 85 - 89

Sebab saya terfikir lah mak bapak budak ni nak amik dia masa saya keluar terus nak amik ke apa, bagi saya duduk dengan dia pula sehari dua ke. Tapi saya harap bagi saya duduk dengan dia sehari dua.
(Because I have been thinking that the foster parents want to take this baby immediately after birth or let me stay with my baby at least for a day or two. But I hope that they allow me to stay with my baby for a day or two.)

Interview 4, Sakura. Line number: 219 - 221

She felt that she wanted to keep the baby, however; she realized her economic condition and to protect the family’s interest, the best decision made was to give the baby up for adoption. Her decision to take care of her own baby was overruled by the mother’s decision to protect not only her interests and well-being, but the baby and the family’s interest as well.

Violet experienced a similar encounter with Umi and her parents. Umi does not encourage her to take care of her baby and her parents are adamant about her giving the baby up for adoption:

Saya cuma minta satu dan harap ia boleh dimakbulkan. Saya nak bayi ni saya nak keluarga saya dan Mohammad saya. Tahun depan semuanya akan baru. Saya nak hidup bahagia juga.
(I only ask for one thing and hope it will be fulfilled. I want this baby, I want my family, my Mohammad. Next year everything will be anew. I want to live a happy life too.)

Interview 3, Violet: Line 3-4

Violet knows that she wants to keep her baby but is confused. She is torn between the love for her family, Mohammad (father of the baby) and baby.

All three participants have shared their personal and innermost stories of how they attempted abortion by putting yeast down their throat, traditional medicine to regularize the period cycle, and taking pills ordered from the online advertisements that is said to induce abortion. They were all depressed, confused, and caught in a
blaming game. The pregnancy has negatively changed their outlook towards life, the sole cause of their misery. Yet, after some time, when they found that their attempts to abort the life within them unsuccessful, their outlook towards the pregnancy changed. They then realized an important decision had been made to save a life and grew to love the baby inside them, resulting in a positive experience towards the life outlook. The love for the baby grows each day and realized that the start of motherhood begins once they conceived, henceforth transforming from an unwanted to a wanted pregnancy. The love and natural instinct as a mother just comes naturally (Middleton, 2011). They began to communicate with their unborn babies by speaking soothingly, laughing at all the movements they felt, rubbing the baby bumps constantly and even singing to them. The transformation from an unwanted to a wanted pregnancy has resulted in a roller coaster ride of emotions, feelings and behavior experienced by all three participants changing their perspective towards the pregnancy. The very cause of their misery that is the unborn baby, has also become the very cause for them to soldier on steadfastly.

Although these adolescents voiced their fears and potential difficulties that they have to face after the birth of their babies, overall they felt that it was worth the while to go through the pregnancy. All the participants agreed that keeping the baby is the best decision that they have made despite their attempts to abort the baby during the first trimester of their pregnancy.

Theme 2: Emotional numbing

All three participants faced a numbing feeling that affects their familial relationship. The siblings of Orkid and Violet did not know their condition and thought that they are currently working in Kuala Lumpur. Meanwhile Sakura’s siblings knew her condition and understood that she will only be home after giving birth to the baby. However; family members outside the nucleus family did not know the whereabouts of these three girls. The decision made by the participants to keep the baby tore the family apart in the case of Orkid and Violet.

Orkid misses her siblings very badly. Her condition was not known to her siblings.

Sebab ayah dan Umi saya tak nak takut dia orang tak boleh terima. Tak nak hubungan kekeluargaan tu rosaklah.
(Because my mum and dad were worried if they can’t accept me and the family ties will be ruined.)

Interview 1, Orkid. Line number: 320 – 321

Violet expressed her feelings when she realized that her parents played a role in deciding the fate of the baby. She sought for their forgiveness and requested for her prayers to be answered but to no avail:

(I longed for all of you. Wish being together. I love all of you. Can you give me a chance? I wish for it. I am sad and lonely here. The baby is my strength, prayers, solah and Al-Quran accompanies me too. I cried all the time. Nobody knows. Why can’t all of you give me a chance? I’m sad! I’m too sad. Please forgive me and my sins. All the hardships and joyful moments that I experienced here, I experienced it
with my baby. Now, sleepless nights are more frequent. Every time I opened my eyes, the tears just come. My hands are always resting on my tummy. Please, I am begging you. This is my last request in my life.

Interview 3, Violet: Line 5 - 9

Seandainya keputusan semua adalah sama, saya mohon ampun dan terpaksa derhaka. Saya akan jaga bayi ni. Saya tunggu keputusan semua orang kat sana. Sayang semua sangat-sangat.
(If the answer is still the same, I wish to seek your forgiveness but I have to disobey. I shall wait for your decision. I love all of you.)

Interview 3, Violet Line 15 – 18

Violet is willing to take the risk to take care of her only child. She loves her family and her unborn child. She has gone through and experienced a lot of sadness during her pregnancy. Her parents are adamant about the decision not to keep the baby and their refusal has made Violet behave coldly towards her parents. Sakura on the other hand accepted her parent’s decision of giving up the baby for adoption. She was in constant fear that her parents do not love her anymore:

Sakura nak macam dulu balik. Kalau boleh putar masa, Sakura nak putar mas ( I want it to be like the old times. If only I could change the time. I want to change the time.)

Interview 3, Sakura. Line number: 363

Ya lah, memang saya rasa diri saya jahat pun. Ya lah saya kan, macam saya cakap dulu, memalukan keluarga semua. Saya malas nak kisah pasal keluarga lagi. Mak saya pun tak hiraukan saya, buat apa saya nak ingat lagi?
(Yes, I know I am a bad person. Yes, I am; like I mentioned before, an embarrassment to my family. I don’t care anymore, my mother doesn’t bother about me, then why should I bother about them?)

Interview 2, Sakura. Line number: 188-189

Sakura often talks about her mother during the interview. She was often emotional when describing her loneliness

Being away from the family resulted in them feeling lonely at the ‘safe home’ and the much needed support and love that the participants craved were not felt, resulting in an emotional numbing towards their parents. All three participants felt as though they were left at the ‘safe home’ to fend for themselves and go through the experience alone resulting in erratic emotions due to irrational thoughts.

**Theme 3: Seek solace in Allah (Supreme Being)**

All three adolescents believe that they found peace when they submitted themselves to Allah.

*Yang jadi penguat saya baby, selalu teman saya, doa, sembahyang, al-quran.*
(The baby is my strength, prayers, solah and Al-Quran accompanies me too.)

Interview 3, Violet, Line number: 6

*Janganlah buat benda-benda yang dilarang Allah.*
(Do not do anything that Allah forbids.)

Interview 4, Orkid. Line number:185

Sembahyang pastu doa kat dia baik-baik lah. Supaya dia jadi orang yang baik-baik.
(Prayers and perform solah for him. So he will turn out to be a good person.)

**Interview 2, Sakura. Line number: 336**

Sembahyang untuk diri sendiri pastu doa kat dia supaya lebih orang yang berguna, jadi orang yang baik.
(Pray for self and my baby so that he will turn out to be a good Muslim.

**Interview 2, Sakura. Line number: 338**

According to all three participants, seeking solace in *Allah* means finding inner peace. This was achieved by performing *solah* (prayers) and reading the holy book of *Al-Quran*. As a coping mechanism to stay mentally healthy, the participants regarded this as one of the positive changes experienced.

**Discussion and Conclusion**

This study was designed to pursue the objective of understanding the adolescents’ experiences with an unwanted pregnancy. Experience of the adolescents participating in the study has revealed three shared themes: (1) transformation from an unwanted to wanted pregnancy, (2) the emotional numbing, and (3) seeking solace in *Allah* (Supreme Being).

In this study, the adolescents shared the same voice that is the transformation from an unwanted to wanted pregnancy. The participants described their experience as a major transformation from acting as irresponsible to responsible adolescents who needs to care not only for the baby but themselves. Coleman and Cater (2006) agreed that young mothers often neglect themselves while raising their babies. Hence, there is a need for young mothers to be taught responsibility in caring and fending for themselves. This resulted in their planning for the future to ensure that they could provide for their child. On the whole, the adolescents described the transformation from an unwanted to wanted pregnancy as a positive experience. They learnt to make a life changing decisions and agreed that with it comes a great responsibility. Positively, they found that they matured in behavior, managed their emotions and way of thinking as agreed by Seamark and Lings (2004) in their findings. Seamark and Lings (2004) also found that the young mothers had a positive experience towards motherhood. This was indicated through their experience and outlook towards coping strategy, responsibility towards self and their child.

The second theme illustrates how emotional numbing can negatively impact on the relationship with friends and family. Orkid, Sakura and Violet were all placed in the home for adolescents with unwanted pregnancy by their parents to hide the pregnancies from the knowledge of other family members and the community. Consequently, these adolescents felt disoriented, unwanted, a sense of loneliness, and anger resulting in an intensified cycle of emotional withdrawal towards their familial relationships. The participants tried to act as normal as possible but soon realized that the emotional numbnness that they were suppressing only led to them feeling more unsettled within. Instead of receiving the love and support from their parents and partners, Orkid, Sakura and Violet had to experience the pregnancy alone at an unfamiliar place, not knowing what to expect. These adolescents realized that they have done wrong in the context of religion and understood that it is socially unacceptable to be pregnant before marriage, hence the isolation and being ostracized. In the Malaysian context, discussion of sexuality is often considered as taboo and this is especially true amongst the Malay-Muslims families. Being pregnant before marriage is unacceptable socially. This is supported by Jaafar et al. (2006) in their study that found pregnancy amongst Malaysian and Indonesian adolescents were socially unacceptable due to their religious and cultural background.

Higginbottom et al. (2006) found that young mothers in their study have become closer and relied on their mothers as the main supporters. This was opposed by findings in this study which indicated that the relationship with their mothers and other family members were affected due to separation and not receiving the love and support needed in time of crises. The findings are supported by Williams and Vines (1999) who found that neglected first time young mothers often experienced denial and minimalization and undertook coping strategies by emotionally distancing themselves from their families.

In the Malaysian context, the phenomenal increase in the number of unwanted pregnancy and birth of out-of-wedlock children amongst adolescents is seen as an issue of concern from the religious view point.
where it contradicts the value and belief systems of the Malay-Muslims families. This is supported by Nurullah, Makol-Abdul, Imam, and Abd Rahman (2009) in their study. In the context of my study, the adolescents originated from the Malay-Muslim families and all three participants were found to have only basic knowledge of the religion. They were fully aware that the religion of Islam forbids them from having premarital sex. However; peer pressure, being apart from the family and inadequate religious background were factors that contributed to their early sexual initiation. Jaafar et al. (2006) supported the finding by arguing that adolescents with less religious background are more prone to be involved in deviant activities and early sexual initiation although the adolescents are predominantly Muslims and bounded by strict traditional and Islamic values. Consequently, it is a startling increase in the rise of the numbers of adolescents having premarital sex although the majority of Malaysians embrace Islam, which prohibits sex before marriage. Since discussion about sexuality is considered as a taboo, the Muslim parents in this modern society tend not to discuss any issues related to sexuality due to the influence of cultural upbringing and not their religious training as found by Athar (1996). The experience of pregnancy, emotional turmoil and numbness, and fear of rejection has resulted in all three participants realizing that inner peace is important to keep their sanity intact. This is the result of the transformation of depression and frustration to hope and anticipation by seeking solace in Allah.

**Implication for Counselors and Practitioners**

Sexuality education is a delicate subject that needs to be addressed by the government of Malaysia. A comprehensive study of the curriculum needs to be tabled and discussed thoroughly as a way to curb the rising number of adolescent pregnancies. In this study, it was found that several modules on sex education has been established but these were targeted only to the high risk groups. It is therefore important for the school system to include education on sexuality in its syllabus.

Counselors will also gain insight on how best to assist clients by understanding the adolescents from their own emic perspectives. In addition, family therapists and counselors may need to address the apparent dilemma of the parents.

Supplementary interventions by professionals such as physicians, counselors and other mental health providers are recommended to reduce the increasing number of unwanted pregnancies. This includes an understanding of contraceptive methods and responsibility of understanding their sexuality for high risk families.

**Implication for Future Research**

The strengths of this study were derived from the interviews resulting in thick descriptions, richness and in-depth quality of the data. The main potential limitation of this study may be due to the small number of participants hence limiting the comparison on the true account of experiences. There is the possible underreporting of their experience due to fear of their wrong doings being exposed to the community and being stereotyped. Stigma associated with premarital sexual relations encouraged adolescents to be discreet especially when one is involved in sexual intercourse. Hence, there is a need to study the future implications of having informed sexuality education for parents and adolescents.

Secondly, the source of data for this study was collected and analyzed based on the personal encounter with three participants staying in a home for adolescent girls with unwanted pregnancy. Therefore, this study cannot be used to generalize to a bigger population but is only applicable for other researchers, readers and policy makers to apply them in their own unique context. The usage of contraceptives was not deeply explored and an area of research can be further developed on understanding the use of the right contraceptive methods and their effectiveness for high risk adolescents. Questions about men and their understanding about contraceptives have also not been explored.

Thirdly, future research can be conducted in developing an understanding of the adolescents’ partner towards the pregnancy. Does he want to be part of the pregnancy? How his emotion, behavior and cognition affecting him upon finding out about the pregnancy? Is he aware of the contraceptive methods and its effectiveness? Formulation of early family planning can then be prepared; nonetheless, many issues remained unanswered.
Finally, complex cultural, social, psychological, physiological and economic factors are amongst the factors that underlay the problem in unwanted pregnancy. No research was uncovered that specifically looked at the interplay between primary care interactions and community-based interventions. Hence, the formulation of interventions is crucial to assist in curbing the rising trend of unwanted pregnancy.

**References**


