

Influence of Socio-Cultural Practices on Teenage Pregnancy in Public Primary Schools in Magarini Sub-County, Kilifi County, Kenya

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ABSTRACT

Teenage pregnancy remains a major global public health concern with significant health, educational, and socio-economic consequences for adolescent girls. Complications related to pregnancy and childbirth remain among the leading causes of death among girls aged 15–19 years (World Health Organization, 2023; Neal, Channon, & Chintsanya, 2018). This study examined the influence of socio-cultural practices on teenage pregnancy among school-going adolescents in public primary schools in Magarini Sub-County, Kilifi County, Kenya.

A descriptive cross-sectional survey design was employed. Multistage sampling was used to select respondents comprising 96 teachers, 12 head teachers, 32 teenage mothers, and 32 parents of teenage mothers. Data were collected using structured questionnaires and interview schedules. The validity and reliability of the instruments were established through piloting and Cronbach's alpha reliability testing. Quantitative data were analyzed using descriptive statistics and inferential statistics including Spearman's rank correlation, t-tests, and multiple regression analysis using SPSS. Qualitative data from interviews were analyzed thematically to complement the quantitative findings.

The results revealed a statistically significant positive relationship between socio-cultural practices and teenage pregnancy ($r = 0.617$, $p < 0.05$). Cultural norms, peer influence, poverty, and community ceremonies were identified as key contributors to teenage pregnancy. The study recommends strengthening community awareness programs, enforcing child protection policies and improving the implementation of the school re-entry policy for adolescent mothers.

Keywords: Teenage pregnancy, socio-cultural practices, adolescent reproductive health, Kilifi County, Kenya

INTRODUCTION

Teenage pregnancy continues to pose significant public health and social challenges globally. According to the World Health Organization (2023), approximately 21 million girls aged 15–19 years become pregnant each year in developing countries. Complications arising from pregnancy and childbirth remain among the leading causes of mortality among adolescent girls (Neal et al., 2018).

In Sub-Saharan Africa, adolescent fertility rates remain among the highest in the world due to structural inequalities, poverty, limited access to reproductive health services and restrictive socio-cultural norms (Yakubu & Salisu, 2018). Cultural expectations regarding sexuality, gender roles, and early marriage often influence adolescents' reproductive behaviour (Akella & Jordan, 2015).

In Kenya, teenage pregnancy remains a major concern despite government policies aimed at protecting adolescent reproductive health. Data from the Kenya National Bureau of Statistics (2023) indicate that approximately 18% of girls aged 15–19 years have begun childbearing. The situation worsened during the COVID-19 pandemic when prolonged school closures increased adolescents' vulnerability to early pregnancies, sexual exploitation, and child labour (United Nations Population Fund, 2022).

Teenage pregnancy has serious implications for adolescent girls. It often leads to school dropout, limited employment opportunities, increased poverty and adverse health outcomes for both mother and child (Wall-Wieler, Lee, Nickel, & Roos, 2019). Adolescents who become pregnant also face stigma and social exclusion within their communities (Yakubu & Salisu, 2018).

In Kilifi County, teenage pregnancy has remained particularly high. Magarini Sub-County has consistently reported higher numbers of teenage pregnancy cases compared to other sub-counties. Socio-cultural practices such as early marriages, community ceremonies, gender norms, and poverty have been cited as key contributors to the problem (Akella & Jordan, 2015).

Despite government interventions such as the school re-entry policy for adolescent mothers, teenage pregnancy continues to disrupt the education of many girls in the region. Understanding the socio-cultural drivers of teenage pregnancy is therefore essential for developing effective interventions (Yakubu & Salisu, 2018).

Objectives of the Study

The study sought to examine the influence of socio-cultural practices on teenage pregnancy in public primary schools in Magarini Sub-County.

Specifically, the study aimed to:

1. Establish the influence of social practices on teenage pregnancy in public primary schools in Magarini Sub-County.
2. Determine the influence of cultural practices on teenage pregnancy in public primary schools in Magarini Sub-County.

LITERATURE REVIEW

Teenage pregnancy is a complex phenomenon influenced by social, economic, cultural, and behavioural factors. Research indicates that socio-cultural norms play a significant role in shaping adolescents' reproductive behaviour (Yakubu & Salisu, 2018). Studies conducted in the United States show that social and cultural contexts influence adolescents' attitudes toward early motherhood. Adolescents from disadvantaged communities often face higher risks of early pregnancy due to poverty, limited education, and exposure to risky social environments (Akella & Jordan, 2015).

In developing countries, cultural practices such as early marriage and expectations of early childbearing contribute significantly to teenage pregnancy (Yakubu & Salisu, 2018). In South Asia, studies have shown that societal expectations often encourage girls to marry and bear children at a young age (United Nations Population Fund, 2022). Research conducted in Malawi identified socio-cultural factors such as early sexual debut, limited contraceptive use, poverty, gender inequality, and lack of reproductive health knowledge as key drivers of teenage pregnancy (Kaphagawani & Kalipeni, 2017).

Within Kenya, socio-cultural practices such as traditional ceremonies, poverty, and limited parental supervision have been linked to adolescent pregnancy (Kenya National Bureau of Statistics, 2023). In Kilifi County, community events such as funeral dances commonly referred to as *disco matanga* have been identified as environments where adolescents may engage in risky sexual behaviour (Yakubu & Salisu, 2018). Despite these findings, limited studies have examined the influence of socio-cultural practices on teenage pregnancy among school-going adolescents in Magarini Sub-County. This study therefore sought to address this gap.

METHODOLOGY

Research Design

The study adopted a cross-sectional descriptive survey design. This design enabled the collection of data from different respondents at a single point in time to examine the relationship between socio-cultural practices and teenage pregnancy.

Target Population

Table 1: Target Population

Category	Population
Public primary schools	118
Head teachers	118
Teachers	956
Teenage mothers	32
Parents of teenage mothers	32

Sample Size

Table 2: Sample Size

Respondent Category	Sample Size
Head teachers	12
Teachers	96
Teenage mothers	32
Parents	32
Total	172

Research Instruments

The study utilized two primary instruments:

1. Questionnaires administered to teachers, parents, and teenage mothers.
2. Interview schedules administered to head teachers.

These instruments enabled the collection of both quantitative and qualitative data.

Validity and Reliability

Validity was ensured through expert review and pilot testing. Reliability was assessed using Cronbach's alpha, which confirmed acceptable internal consistency ($\alpha > 0.70$).

Data Analysis

Quantitative data were analyzed using SPSS. The following statistical techniques were applied:

- Frequencies
- Percentages
- Spearman's rank correlation
- t-tests
- Multiple regression

Qualitative responses were analyzed using thematic analysis.

FINDINGS AND DISCUSSION

a) Socio-Cultural Practices Contributing to Teenage Pregnancy

Teenage mothers identified several socio-cultural factors contributing to teenage pregnancy. These findings are consistent with studies indicating that cultural norms, gender inequality, and limited reproductive health knowledge influence adolescent pregnancy (Yakubu & Salisu, 2018; Kaphagawani & Kalipeni, 2017).

Table 3: Socio-Cultural Factors Reported by Teenage Mothers

Factor	Frequency	Percentage
Birth control errors	32	100%
Sexual experimentation	22	69%
Irresponsible sexual behaviour	19	59%
Cultural acceptance of premarital sex / forced marriage	31	97%
Stigma and social isolation	11	34%
Gender-based violence	5	16%

These findings indicate that cultural norms and limited reproductive health knowledge significantly contribute to teenage pregnancy.

b) Educational Aspirations of Teenage Mothers

Table 4: Planned Activities after Childbirth

Activity	Percentage
Return to regular school	50%
Vocational training	5%
Undecided	45%

c) Parents' Views on Causes of Teenage Pregnancy

Table 5: Parental Perspectives

Factor	Percentage
Early / forced marriages	39%
Poverty	25%
Lack of parental supervision	20%
Peer influence	14%
Teenage curiosity	2%

d) Teachers' Perspectives on Causes of Teenage Pregnancy

Table 6: Teachers' Perspectives

Factor	Agreement (%)
Lack of psychosocial skills	95%
Irresponsible sexual behaviour	22.5%

Correlation Analysis

Spearman's correlation was used to examine the relationship between socio-cultural practices and teenage pregnancy.

Table 7: Spearman Correlation Results

Variable	Correlation Coefficient (r)	p-value
Socio-cultural practices	0.617	0.019

CONCLUSIONS

The study established that socio-cultural practices significantly influence teenage pregnancy in Magarini Sub-County. Key contributing factors include:

- Early marriages
- Cultural acceptance of premarital sexual relations
- Poverty
- Lack of parental supervision
- Community ceremonies

Despite these challenges, many teenage mothers expressed a desire to continue their education.

RECOMMENDATIONS

1. Strengthen community awareness programs addressing harmful socio-cultural practices.
2. Improve enforcement of laws preventing early marriage and sexual exploitation.
3. Promote comprehensive sexuality education in schools.
4. Strengthen the implementation of the school re-entry policy.
5. Provide psychosocial support programs for adolescent mothers.

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