

# **Impact of Guidance and Counselling in Curbing Early Pregnancy among Adolescent Female Secondary School Students in Post-Covid Nigeria**

By

**Shehu Yahaya Tsagem, PhD**

Department of Educational Foundations, Usmanu Danfodiyo University Sokoto  
shehu.yahaya@udusok.edu.ng

**Abdullahi, Rukayya**

Department of Educational Foundations, Usmanu Danfodiyo University Sokoto  
raqiyyaskudu1977@gmail.com

**&**

**Ahmad, Sa'adatu Ali**

Department of Educational Foundations, Usmanu Danfodiyo University Sokoto  
Adm No: 22310413003      aahmadasa@gmail.com

**Paper Presented at the 8<sup>th</sup> Annual National Conference of the Faculty of Education and Extension Services Themed: Cultivating Impactful Pedagogy in the Post-COVID 19 Era for Sustainable Education. Held at University Auditorium, Main Campus, Usmanu Danfodiyo University Sokoto.**

**September 11<sup>th</sup> – 13<sup>th</sup>, 2023**

## **Abstract**

*This paper examined the roles of guidance and counseling in curbing teenage pregnancy among adolescent girl children in Nigeria. The concept of teenagers and adolescents were critically examined. The paper further considered the causes of teenage pregnancy among adolescents' girls as well as the roles played by guidance counselors in preventing unwanted pregnancies among the teenagers. Some of the strategies highlighted to be used in counseling against teenage pregnancy among adolescent girls include self-control, problem solving skills, dialogue, self-directive behavior, encouraging abstinence, sex education, shaping, and laying out the consequences. It was recommended, among others, that guidance counselors should use different strategies to inculcate in the female secondary school student's relevant knowledge about dangers of teenage pregnancy and its consequences. The paper concluded that the high incidence of teenage pregnancy can be attributed to wrong orientation, misconception and ignorance which make teenage pregnancy to be at its peak among adolescents. Therefore, all hands must be on deck to avert the dangers and effects of this menace among the female adolescents.*

**Keywords:** Guidance, Counseling, Curbing, Teenage, Adolescent, Pregnancy.

## **Introduction**

Teenage pregnancy has long been a worldwide social, economic and educational concern for the developed, developing and underdeveloped countries. Almost one-fifth of adolescent girls in Africa get pregnant out of wedlock; the highest being in the Eastern African region, as the wide differences in rates were observed across the different sub-regions of Africa (World Health Organizations [WHO], 2017).

## **Concept of Adolescent**

In the simplest form, adolescence is seen as the phase of life between childhood and adulthood, from ages 10 to 19. Thus, Hu & Nash and Stehlik as cited in Tsagem (2022) saw adolescence (from Latin *adolescere* 'to mature') as a transitional stage of physical and psychological development that generally occurs during the period from puberty to legal adulthood (age of majority) and observes that the period of adolescence marks the period when the quality of various psychological traits such as interest, aptitude, values, thinking, reasoning,

judgment begin to transcend those of childhood and progress to adulthood quality. Adolescence is also seen as a transitional period from childhood to adulthood characterized by significant physical, psychological, reproductive health and social changes.

Adolescent pregnancy is defined as the occurrence of pregnancy in girls aged 10 to 19. According to Okere & Onyechi (2001) it is a condition whereby a young girl of between the ages of 11 and 16 becomes pregnant when she is not yet married. Likewise, Albert, Chein & Stenberg (2013) referred to it as pregnancy that occurs at an early age. Adolescent pregnancy and child bearing is a global health and economic challenge nowadays. Thus, Kyei (2012) observes that adolescent girls suffer from a disproportionate share of teenage pregnancy which is a universal public health problem that affects maternal and child health. According to WHO (2008), globally, about 18 million adolescent girls between 15 – 19 years give birth each year (adolescent birth rate was 53 births per 1000 women). Babies born to adolescent mothers account for 11% of all births worldwide and 95% of these occur in developing countries. Rates of adolescent pregnancy is increasing in developing countries with higher occurrences of adverse maternal and prenatal outcomes. Thus, in Sub-Saharan Africa in the year 2013, 101 births per 1,000 were some of the highest rates of adolescent fertility in the world (Clifton & Hervish, 2013).

Teenage pregnancy also has significant long term social consequences for the adolescents, their children, families and the community; it leads those adolescents to less educational attainment and high school dropout, poor health and poverty. The children of teenage mothers are also more likely to have lower academic achievement and be out of school, have more health problems, are incarcerated at some time during adolescence, give birth as a teenager, and face unemployment as a young adult (Aderibigbe, Araoye, Akande, Musa,

Monehin & Babatunde, 2011). Although adolescent pregnancy occurs among all racial, cultural and socioeconomic groups, some adolescents are more likely than others to become pregnant. Factors such as economic status, education, religion, place of residence, peers and partner' behaviours, family and community attitudes, age, mass media, lack of reproductive health services and knowledge are contributing factors to the increase of unintended pregnancy among adolescents (Clifton & Hervish, 2013).

### **Causes of Teenage Pregnancy**

Magino (2008) opined that teenage pregnancy is a pregnancy by a teenager and that teenage pregnancy is usually understood to occur in a teenager that has not completed her core education, has few or no marketable skills, and is financially dependent upon her parents. There are lots of factors responsible for teenage pregnancy. Some girls engage in sexual activities for material gains. This is usually as a result of inability of parents to meet their needs due to lack of money. Some parents do not live up to their obligations to their children. Some teenagers also hawk wares and this exposes them to sexual abuse or rape which could result in pregnancy. The present general economic depression according to Ogunjimi (1997) has forced so many teenagers into trading their bodies for money (commercial sex workers). This according to him is being done to either supplement their meager financial resources or as a survival strategy.

More so, most teenagers, in an attempt to want to be like their mates in areas such as dressing, hair-do and other material things get a lot of wrong information about sex activity. Still yet, some teenagers are deceived by their peers to engage in sexual intercourse to get its taste. In some cases, they are being urged into doing that by their peers or friends who often ask them to accompany them on an errand where illicit sexual activity is carried out (Okere & Onyechi, 2001). Thus, Albert, Chein & Steinberg (2013) reported that most girls who are not involved in

love relationships are usually influenced by their peers into this act. In another perspective, Eruesegbefe (2005) pointed that education about responsible sexual behavior and specific clear information about the danger of sexual intercourse and teenage pregnancy are frequently not offered. Thus, much of the sex education that teenagers receive and information about sex are through uninformed peers. Hence, Magoon (2010) maintained that teenage pregnancy appears to be encouraged by lack of access to sex education. Again, there is the issue of lack of sex and sexuality education in several countries especially in Nigeria. Most parents in Nigeria due to cultural and traditional norms find it difficult to engage or involve their children who are of adolescent age in sex and sexuality discussions. These cultural and traditional norms are so strong that the children may not be able to know the proper names of their sex or reproductive organs.

Teenage pregnancy is a common problem that is more likely to affect vulnerable populations due to factors including poverty, illiteracy, and lack of job prospects. It continues to be significant factor in infant mortality and maternal mortality, as intergenerational cycles of illnesses and poverty. Teenage pregnancy incidences were shown to be mostly caused by a lack of education, lack of access to contraception and health information, and autonomy in making decisions.

### **Role of Guidance and Counseling in Preventing Teenage Pregnancy**

Guidance and counseling are series of developmental processes embark upon to assist an individual to understand, accept and utilize his or her abilities and capabilities maximally, make informed decisions and solve his or her own problems by himself or herself. Thus, it is specialized services geared towards assisting persons to maximally utilize their competencies and capabilities by understanding their abilities and overcoming any negative feeling that they may entertain towards their achievements. Guidance and counseling when delivered adequately

would lead to individuals understanding their strengths and weaknesses and exploiting same to make concrete decisions that would ensure a meaningful, satisfying and beneficial life (Aliero, Aliero & Tsagem, 2022). The main task of counseling according to Morake (2011), is to give the individual an opportunity to define, explore, discover, and adopt ways of living a more satisfying and resourceful life within the educational, vocational environment and the society at large.

Anagbogu (2005) noted that counseling as the process of helping an individual to understand himself and his world, therefore does not just deal with problems, problematic situation, and troubled individual, but rather, it sharpens the individual understanding of themselves and their environment. Counseling is crucial in minimizing teenage pregnancy and proper counseling requires counseling strategies to tackle the problem. Morake (2011) denoted counseling strategies as the theories, techniques and skills needed by a counselor to achieve a certain goal and objective.

Accordingly, McIntosh, Pruett and Kelly (2014) noted some counselling strategies that could be used in counselling against teenage pregnancy; which include self-control, problem solving skills, dialogue, self-directive behavior, encouraging abstinence, sex education, shaping, and laying out the consequences.

### **Self-Control**

Self-control is the ability to make one do things he or she would ordinarily do or not do as the case may be, even when he/she don't want to. It might be seen as self-discipline or willpower. As adults, we practice self-control on a daily basis, as a necessary part of being a responsible adult. Some young people are also naturally disciplined, while others need some parental coaching or counseling, but self-control for teens and adolescent youths is a behavior that can only be learnt. Counselors as a matter of necessity should try hard in inculcating the

habits of self-control in the lives of the adolescents and teenagers under their watch or care in Nigerian secondary schools. They should also be taught on how to change their thinking and orientation that, being disciplined is not or shouldn't be about depriving themselves of things they so much like to do, but rather as a matter of goal setting which is a positive behavior that will bring about reward through determination and focus.

### **Problem Solving Skills**

Problem-solving is a complex skill in counseling. It is a process that involves critical thinking, decision-making, creativity, and information processing. Effective problem solvers use a systematic approach that allows them to break down difficult problems into smaller and more manageable parts. Because the teenager/ adolescent might feel guilty or anxious about the pregnancy, the counselor must focus on assisting the adolescent teens through the mental and emotional distress she will feel, while also providing practical advice regarding the pregnancy.

### **Dialogue**

Dialoging is a mutual conversation between two or more people. It is also the act of engaging or interacting with others to explore aspects of emotional experience and emotion work that one cannot fully recognize alone. When dialoging, the counselor should offer a supporting, compassionate, friendly and professional counseling service. The counselor will work with the teenage or adolescent girl student to help her through her difficulties. He or she will also offer a confidential space where the adolescent/teenage counselee will not be judged and where he/she will make every effort to see the world from her own point of view. That is to say that, a space where she can feel safe to explore her feelings and gain insights into why she is finding life difficult. Counseling can put her back in control of her life and as a result, she can equally move her life forward in the direction that feels right for her.

## **Self-Directive Behaviour**

Self-directed individuals actively managed their own lives rather than passively following the path of least resistance. Thus, these adolescent girl students are to take cognizance of their will power of making choices about their future that will also help them prepare for successful and fulfilling lives. The roles of counselors and teachers in counseling these young teenage and adolescent secondary school girls will go a long way in transforming them into good future house wives and good ambassadors of their generation. By so doing, the counselors are no longer seen as only educators who are the carriers of the primary source of information to be transferred to the teenage and adolescent students, but rather, they are freed up to perform the roles of coaches and facilitators who guides these students in their decision making and learning, rather than making decisions for them.

Acquiring essential self-knowledge and learning to be self-directed are important and desirable goals for all students and should be a focus for the work of all school counselors. Through interactions with the counseling program, specifically, all adolescents and teenage female students are encouraged to identify their own life directions, make academic choices consistent with these directions, and connect their classroom learning to their life goals (Adamu, 2012).

As noted, even though the focus of self-direction lies solely on the individual, but the ability to self-direct and become proficient, self-directed learners need to develop in social contexts, since no individual is born into this world with the ability to self-direct. It is therefore a learned trait, where other people help encouraged and nurture the process, thereby leading to the mastery of this process, and the school counselors are saddled with the responsibility or such a role by acting as guides and facilitators.



## **Encouraging Abstinence**

Abstinence means choosing not to have any kind of sex with a partner. Sex includes vaginal intercourse, oral sex and anal sex. Oral sex is any kind of contact between the mouth and the genitals or anus. Anal sex is intercourse through the anus, instead of the vagina. A lot of teens and adolescents think being abstinent only means not having vaginal intercourse. They may still have other kinds of sex and think of being abstinent. Although, complete abstinence is actually the only way to avoid getting sexually transmitted infections (STIs) like HIV/AIDS and is also the best way to prevent pregnancy and to make sure that this works, it is just to remain abstinent all the time.

## **Sex Education**

Sex education, also referred to as sexuality education, is any process dedicated to providing information about sexual techniques, practices, and health or human sexuality. However, the term is usually used to refer to sex education for children, either at home or in school. There is a wide variety of examples of sex education. These include a parent explaining to his or her child where babies come from, a friend telling another friend about how to use a condom, or a teacher teaching his or her students about the risks of sexually-transmitted diseases. Some schools may require parental permission before students can take sex education.

Accordingly, Mathewos and Makuria (2018) viewed sex education as the teaching of topics related to sexual intercourse, which is a component of RSHE, which stands for Relationship, Sex and Health Education. They also noted that, in England, relationship education is a compulsory part of the primary curriculum, as is health education. Many primary and secondary schools decide to teach sex education alongside relationships and health education. The content of these subjects complements each other to ensure children are well-informed at an

appropriate level for their age and that they can begin to develop their own ideas of healthy relationships and what they look like. With the onset of puberty happening for some children before they leave primary school, it means they have an understanding of what is happening to their body. Learning about sex and relationships also promotes children's safety and wellbeing as they begin to navigate their way through puberty. Accordingly, Step (2015) shows that sex education can generally be broken down into three categories; abstinence-only sex education, health and safety-oriented sex education and comprehensive sex education.

### **Laying out the Consequences**

Most Nigerian parents shy away from such discussions on sex, pregnancy and its related matters, because it is generally believed that it will make the adolescent or student attempt to experiment on what they have been told. Ogbah (2006) observed that more than 50% of girls in Nigeria are sexually active or have had sexual relationship at least once. Most pregnancies among secondary school students are unwanted because, majority of them are unmarried with no financial and physical power or strength to assume parenting responsibilities. Most of the pregnancies were unwanted and are terminated through unsafe abortion which is injurious to the female victim's health (Okere, Anyaegbunam & Onyechi, 2014). Nigeria culture no longer has a grip on the secondary school students as our society seems to be plagued with decayed moral codes and values and so the sense of right and wrong is eroded. This seems to affect secondary school students towards teenage pregnancy as this is manifested in the acceptance of sex before marriage and indecent dressing (Eruesegbefe, 2005).

Teenage pregnancy no doubt has far-reaching consequences on the students, family and the society. Thus, the problems that go along with teenage pregnancy extend to not only the individual but to the society as a whole. Cases of teenage pregnancy are on the increase in

Nigeria. Literature revealed that about one-half of unmarried adolescents or teenagers in Nigeria have been pregnant (Matthew, 2017).

### **Recommendations**

The following recommendations are made among others to avoid teenage pregnancy among adolescent girls, or reduce it to the barest minimum:

1. Government should from time to time organize public enlightenment campaign to educate teenage and adolescent girl-children on the roles of adolescents, guidance counselors, teachers and parents in minimizing teenage pregnancy.
2. Guidance counselors should use different strategies to inculcate in the secondary school students' relevant knowledge about dangers of teenage pregnancy and its consequences.
3. Curriculum planners and other relevant authorities should introduce sex education as a subject in secondary school curriculum.

### **Conclusion**

This work has examined various ways through which counseling could be used as a tool for curbing teenage pregnancy among female secondary school students in Nigeria. The study revealed that adolescents have little or no knowledge on the dangers and consequences of teenage pregnancy. Thus, the following conclusions were reached.

Teenage pregnancy is at its peak among adolescents due to ignorance of its dangers and effects. This high incidence of teenage pregnancy can also be attributed to wrong orientation and misconception.

Adults are not comfortable discussing sex education with adolescents even when adults feel like discussing it, adolescents on their own are always too secretive and prefer keeping sex issues to themselves.

The paper also stressed that, parents should endeavor to strengthen relationships with their children as this will help them to discuss relevant issues relating to sexuality and reproductive health that will help prevent unwanted teenage pregnancy. Lastly, sex education is not taught in secondary schools and guidance and counselors don't make effort to teach students sex education.

## References

- Adamu, A. (2012). The role of social science in combating security challenges in Nigeria. *A paper presented at the 3<sup>rd</sup> International Conference at Ibrahim Badamasi Babangida University Lapai, Niger State, Nigeria.*
- Aderibigbe, S.A., Araoye, M.O., Akande, T.M., Musa, O.I, Monehin, J.O., & Babatunde, O.A. (2011). Teenage pregnancy and prevalence of abortion among In-school adolescents in North Central, Nigeria. *Asian Social Sciences*, 7(1), 122-127.
- Albert, D. Chein, J, & Steinberg, L. (2013). Peer influences on adolescent decision making. *Current Directory in Psychological Sciences*, 1(2), 114-120.
- Aliero, B. U., Aliero, H. S. & Tsagem, S. Y. (2022). Guidance and Counselling: A Tool for Enhancing Performance in Senior Secondary Schools of Kebbi State, Nigeria. *International Journal of Innovative Science and Research Technology*, 7(11), 1577–1583.
- Anagbogu, M.A. (2005). *Foundations of guidance and counseling for colleges and universities*, (Revised Second edition. Enugu: Academic Printing Press.
- Clifton, D. & Hervish, A. (2013). *The world's youth 2013 data sheet: Teenage pregnancy and childbearing*. Washington DC: Population Reference Bureau.
- Eruesegbefe, R.O. (2005). A literature review of causes, effects and remedies of teenage pregnancy. *The Counsellor*, 21(3), 56.
- Kyei, K.A. (2012). Teenage fertility in Vhembe district in Limpopo province: How high is that? *Journal of Emerging Trends in Economics and Management Sciences (JETEMS)*, 3(2), 134-140.
- Magino, J.G. (2008). *Voices of teen mothers: Their challenges, support systems, and successes*. Unpublished Doctoral Thesis, University of Pittsburgh.
- Magoon, K. (2010). *Sex education in schools*. Edina, MN:ABDO Publishers
- Mathewos, S. & Makuria, A. (2018). Teenage pregnancy and its associated factors among school adolescents of Arba Minch Town of South Ethiopia. *Ethiopian Journal of Health*, 28(3), 287-298.
- Matthew, M. (2017). *The dialogical principle in counseling and psychotherapy*: Unpublished M.Ed Thesis, James Madison University, Ankara.
- Mcintosh, J.E., Pruette, M., & Kelly, J.B. (2014). Parental separator and overnight care of young children, part II: *Putting Theory into Practice Court Review*. 52(2), 257-263.
- Morake, A. (2011). *Factors associated with teenage pregnancy in Limpopo province*. Polokwane: Government Printers.
- Ogbah, P. (2006). Attitude of secondary school students towards teenage pregnancy, teenage: A national concern. *Unpublished Manuscript*, University of Lagos.

- Ogunjimi, L.O. (1997). *The evaluation of the need for sex education in Oyo State*. Unpublished Master's Dissertation, Obafemi Awolowo University Ile-Ife.
- Okere, A.U. & Onyechi, K.C. (2001). The universal basic education and teenage pregnancy: A challenge to the counselor Nigerian. *Journal of Curriculum Studies*, 8(11), 142-148.
- Okere, A.U., Anyaegbunam, N.J., & Onyechi, K.C. (2014). The Universal Basic Education and Teenage Pregnancy: A challenge to adolescents in secondary schools in Enugu state. *International Journal of Research in Arts & Social Sciences*, 7(2), 231-239.
- Step, L. S. (2015). Study cast doubt on abstinence-only programs. *Washington Post*. Retrieved from <https://www.washingtonpost.com/wpdyn/content/article/2015/04/13/AR2007041301003.html>.
- Tsagem, S. Y. (2022). Adolescence. In Akinade, E. A. (Ed.), *Developmental Psychology: A Life-Span Approach*. Ibadan, Oyo State – Nigeria: Brightways Publishers. ISBN: 978-978-995-467-4
- World Health Organization (2008). Adolescent pregnancy. Department of making pregnancy safer. Geneva, Switzerland: Available at <https://www.who.int/maternalchildadolescent/mpsnnotes21r.pdf>
- World Health Organization (2017). Adolescents: Health Risks and Solutions. Geneva: World Health Organization. Retrieved on 02/07 from <https://www.who.int/mediacentre/factsheets/fs345/en/>