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## Preface

This volume is a result of the certainty that we can learn from each other. Especially, there is a great deal to be learned by studying the way people from different cultures and from different countries respond to a socially defined individual behavior, such as adolescent pregnancy. This volume provides a multitude of views on adolescent pregnancy that can help our thinking move from the oversimplified *constructs* based on our own cultural perspective to a construct that is built upon a foundation of biological science (e.g., a knowledge of child development, and sexual and reproductive development), issues common to all adolescents, particularly girls. These differences between the way people from various countries respond to adolescent pregnancy, as will be observed in these chapters, is the result of religious and cultural beliefs specific to individual groups and individual countries.

In the early years of the twenty-first century, the number of adolescent girls worldwide passed a population milestone of 500 million. Among these adolescent girls, about 16 million a year start their family as a teen mom, accounting for 11 % of births globally. The children born to adolescent girls, however, are not distributed equally from country to country. Some 95 % of these children, born to adolescent girls, are born in the developing, least developed countries, and the United States. Consequently, inadequate pre and postnatal care in these countries and communities makes pregnancy and childbearing the leading cause of death and disability among adolescent girls and their children (UNICEF 2012).

This reality about the number of adolescent pregnancies and child-birth for some is an alarming turn of events and a serious threat to the social and economic order. For others, this observation shows a failure of families to provide adequate sexual information and a failure of governments to protect the inalienable rights of adolescents, particularly the inalienable rights of girls. For those who see adolescent sexuality as a problem, particularly when it is reframed as a problem of morality, the focus is on stopping adolescent sexual behavior and thus stopping adolescent pregnancies and abortions. For those who view adolescent sexual behavior as a normal part of adolescent development, the focus is on sexuality education, the preventing of unintended pregnancy, and the delay of pregnancy. From this perspective, adolescent

sexual and reproductive health programming is designed to empower girls and boys to act responsibly and thoughtfully if they do choose to engage in sexual behavior. Sexual and reproductive services would include accurate information on contraception and emergency contraception, and the abundant availability of condoms for both boys and girls. What will become apparent in these chapters is that in most countries adolescent mothers and their children will face challenges that may limit their educational achievements, impede occupational success, and it will increase their chances of living in poverty. It will also become apparent that the rates of adolescent pregnancy vary across countries from being almost non-existent, to rates as high as 100 births to adolescent mothers per 1,000 live births. Based on these variations, the philosophies, policy, and programs can be compared in terms of the rate of adolescent pregnancy and childbearing.

This volume was compiled and written by a team of international scholars. These researchers and practitioners provide original chapters that critically examine country-specific perspectives and programming related to adolescent pregnancy in its historical, religious, and cultural contexts. Demographics on adolescent pregnancy and childbearing will be used to help describe medical, social, and legal issues. These chapters will also report on programs providing sex education, birth control, maternal and childcare health provisions, and public policies that are intended to address concerns about adolescent pregnancy.

In this volume, the first eight chapters address the major issues associated with adolescent pregnancy. The chapter, “[An International Perspective on Adolescent Pregnancy](#)” provides an overview of issues related to international adolescent pregnancy. The next seven chapters present issues and context, which are not country specific but impact adolescents to a serious degree in many countries. These chapters include biological, sexual and reproductive health, and mental health issues. They also cover adolescent fathers, LGBTQ adolescent mothers and fathers, and issues associated with adolescent pregnancy as a feminist issue and the effect of viewing adolescent pregnancy as a social problem.

The remaining 31 chapters are country specific. These countries are in different regions of the world: *North America*: United States, Canada; *Central and South America*: Argentina, Chile, Colombia, Costa Rico, Mexico, Nicaragua; *Europe*: France, Germany, Ireland, Netherland, Portugal, United Kingdom, Spain, Sweden, Switzerland; *Central and Eastern Europe*: Russia, Eastern Europe; *Africa*: Indonesia, Nigeria, South Africa, Uganda; *Middle East*: Iraqi, Turkey; *Asia and Pacific*: Australia, India, Japan, Philippines, South Africa, and Vietnam. Taken as a whole, this volume provides a wide-ranging source of information about different and similar issues related to international and country-specific adolescent pregnancy and childbearing.

Finally, both content and style of writing vary among the authors of these chapters. These variations reflect the differences in the authors’ style and perspective on adolescent pregnancy. Since these differences in

stylistic approaches among the authors may be useful to the reader, they were retained in their original context, as much as possible.

## Reference

UNICEF. (2012). *The Multiple Indicator Cluster Survey (MICS)—Round 4 programme Global Databases*. New York: United Nations Children's Fund. More detailed information on methodology and data sources is available at <[www.childinfo.org](http://www.childinfo.org)>.

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