

# PhD defence A.S.M. Shahabuddin

## Exploring Maternal Health Care-seeking Behavior of Married Adolescent Girls in Bangladesh and Nepal

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Booking recommended



Dit is de omschrijving

### Supervisors

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### Summary

In South Asia, Bangladesh has the highest rate (31%) of adolescent pregnancy, while Nepal has the second highest rate (17%). Teenage marriage has a long tradition, both in Bangladesh and Nepal, increasing the likelihood of early childbearing. Despite substantial progress in reducing maternal mortality in Bangladesh and Nepal in the past two decades, rates of adolescent pregnancy remain high and the utilization of skilled maternal health services among married adolescent girls continues to be low. Therefore, through a mixed of quantitative and qualitative approaches and using a Social-Ecological Model (SEM), this thesis identifies determinants and explored maternal health care-seeking behavior of married adolescent girls in Bangladesh and Nepal.

Results show that several socio-demographic, individual, family, socio-cultural, community and health systems level factors embedded in the SEM, influence adolescent girls' childbearing decisions and their use of skilled maternal health services in Bangladesh and Nepal. When targeting adolescent girls, a systems approach should take into account for interpersonal and family level factors, since family members (i.e. husbands, mothers-in-laws etc.) are likely the most influential decision-makers regarding decisions on the use of skilled maternal health services. Since adolescent girls show little decision-making autonomy and little knowledge about maternal health care, interventions that focus both on the continuation of girls' education and creating opportunities for generating income (i.e. life skills training) would strengthen their decision-making autonomy and potentially increase their knowledge of reproductive health, including the importance of using reproductive and skilled maternal health services. Moreover, building community cohesion by including wider social actors, such as community leaders, religious leaders and ensuring availability and access to adolescent-friendly public health facilities are important in tackling the issue of adolescent pregnancy and to improve the maternal health of adolescent girls.