An Assessment of Factors Influencing Teenage Pregnancies among Secondary School Girls in Kenya: A Case Study of Baringo Central Sub-County

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Abstract: Despite various Government interventions such as policies on the integration of teenage mothers in Secondary schools by the Kenyan Government, teenage pregnancies are still rampant. The purpose of this study was to establish factors influencing teenage pregnancies in secondary schools in Baringo Central Sub-County. A descriptive survey design was adopted in this targeting 56 girls as respondents from public secondary schools in Baringo Central Sub County. Questionnaires were used to collect data upon which quantitative data were analyzed using descriptive statistics and presented in the form of percentages, frequency, graphs, and tables. Qualitative data were categorized and analyzed into various themes that emerged. The study established that peer pressure, poverty, and social media influenced teenage pregnancy among secondary school girls. The study recommends the formulation, implementation and enforcement of stringent laws by the government to protect the rights of the girl child in school. In addition, the Ministry of Education should also provide sanitary towels and other basic needs to school-going girls. Further study is suggested on the stigmatization of teenage mothers who decide to go back to school and the influence of socio-culture on teenage pregnancies.

Keywords: Teenage Pregnancies, School Girls, Peer Pressure

1. Introduction

Teenage pregnancy is defined as pregnancy among girls aged between 13 to 19 years. This has become a global issue. According to UNICEF, 15 % of girls and young women give birth before the age of 18 years. Teenage pregnancies are not a new phenomenon; commonly, girls are married in late adolescence with their first birth experience occurring before attaining the age of 20. While this practice was considered socially desirable and normal at the time, it is now known that the bodies of such girls are not physically ready. Teenage pregnancy leaves the girl exposed to a high risk of complications including obstetric fistula, eclampsia, puerperal endometriosis, and systemic infections which may lead to short-term and long-term health problems (Impey & Child 2017).

Globally, the teenage pregnancy rate stood at 44 per 1000 girls. The periods from 2015 to 2022 for young girls aged 15 to 19 years. In comparison, the developed countries, teenage pregnancies in 2010 stood at 29 per 1000 women with the United States leading with 57 per 1000 followed by New Zealand with 51 in 1000 girls. On the other hand, Switzerland, Netherlands, and Slovenia reported the lowest rate of between 8 and 14, respectively. The differing rates of teenage pregnancies are closely linked to liberal communities, exposure to information, and the minimum reduced ages for consent to engage in sex.

Teenager childbirth in Sub-Saharan Africa remains a concern for policymakers. According to the Guttmacher Institute (2015), unplanned unintended pregnancies among teenagers were at 31 percent of the population under study with Africa recording the highest incidences. In the period 2015 to 2020, the rate stood at 115 per 1000 girls.

In Africa, teenage pregnancies are major reproductive health and socio-economic concerns. High levels of unintended and mistimed pregnancies continue to be recorded in Kenya, Ethiopia, Burkina Faso, and Malawi such that in 2008, it was ranging between 121 to 187 per 1000 girls.

In 2016, UNFPA reported that the prevalence of pregnancies had increased from 3% to 40 % amongst teenage girls. Kahurani (2020), using data obtained from the health sector in Kenya reported that in three months, the rate of teenage pregnancy had dropped slightly to 151,433 in 2020 as compared to 175,488 reported in the previous year; showing there was a large improvement based on the enactment of laws that supported communities in addressing the situation. According to NCPD (2013), Information on sex education, both in schools and home, is inadequate in Kenya. Few teenagers receive comprehensive sex education, and often

teachers have insufficient training to give students correct information. The Ministry of Education and the Ministry of Health Kenya, jointly concur there is a need to provide information on sexuality; however, the content and modes of delivery need to be based on the cultural and religious backgrounds so as to bring about meaningful change. Most of the time, teenagers are expected to gather information on their own.

According to Gaille (2016), poverty pushes girls into activities that expose them to sexual exploitation and having sex in exchange for money and food. In such situations, teenage girls are not able to negotiate safer sex and are often at risk of pregnancy, sexually transmitted infections, including HIV, and gender-based violence. In Baringo County, the population is generally youthful with 48 percent of the population aged below 15 years. According to an AFIDEP (2016) report, about 13 percent of teenage girls between the ages of 15 to 19 years had started childbearing. Data from the Ministry of Health in Kenya (2021) shows theoverall frequency of teenage girls aged 13 to 19 years having visited an antenatal clinic in Baringo during the year 2020 were 556. The numbers varied by Ward from the lowest 21 cases in Kapropita to the highest number of 362 pregnancy cases in Kabarnet Ward as presented in the table 1.

Ward	Reported Pregnancy	Percentage prevalence
Kabarnet	362	65%
Ewalel Chapchap	75	13%
Sacho	53	10%
Tenges	45	8%
Kapropita	21	4%
Total	556	

Table 1: Sample comparison of Teenage Pregnancy cases in selected Baringo Central Sub County

The data in the table 1 spells a scenario where secondary school girls' pregnancy is so high. Urgent action is therefore necessary to reduce the number of cases. It is envisaged by the Kenyan Constitution 2010 on the Bill of Rights and Basic Educations Act 2013 that, a Kenyan child is entitled to free and compulsory education. According to NPA (2019), the Principal Secretaries of the state departments of Planning, Gender, Social Protection, Health, Youth and ICT, and Education held a meeting in September 2020 to build consensus on a unified government approach to addressing teenage pregnancy in Kenya.

Section 8 of the Sexual Offenses Act 2009 provides punitive punishment for anyone engaging in sexual intercourse with a minor. Most of the secondary school girls are below the age of 18 years. The Act terms sexual intercourse with a minor as defilement and is punishable by imprisonment for a minimum of 15 years.

According to the Kenyan Ministry of Health, statistics show that one in every five-adolescent aged between 15-19 is already a mother or pregnant with their first child. The situation is alarming and Baringo County is not left behind in teen pregnancy. The cases are rampant in Baringo County to the extent that the County Woman Representative of Baringo has set aside some funds to take teenage mothers back to school (Onono *et al.*, 2020).

Despite the interventions by the government through legislations, policies, and regulations on teenage pregnancy nationwide, Baringo County continues to suffer high levels of teenage pregnancies. Therefore, it remains unclear why such interventions are yet to curb this problem. If the situation continues to persist, it is bound to be extremely difficult for the girl child to make large strides in education among other benefits. There is was an urgent need therefore for empirical evidence to support the search for plausible solutions to this problem. It is against this backdrop this study sought to assess the factors influencing teenage pregnancy among public secondary school girls in Baringo Central Sub County.

2. Literature Review

Based on the social exchange theory, the study proposes that social behaviour is a result of an exchange process. Aspostulated by this theory, people entertain the idea of potential benefits and their social interaction. When the risks are more than rewards they receive, they terminate or stop the interaction. Most relationships are a 'give and take' (win-win) situation though they may not always share equally. It suggests that the valuing of benefits and costs of each interaction controls the extent of social relationships.

The concept of social behaviour as an exchange was identified first by American Sociologist George C. Humans in 1958. Humans was a pioneer in behavioural sociology and exemplified the excellence associated with this career including serving as President of the American Sociological Association (1963 to 1964), and Chairman of Harvard's Department of Sociology (1970 to 1975). John Thibault, Harold Kelley, and Peter Blau also contributed to the development of Human social exchange although from a different perspectives.

Rewards derived from relationships include being taken care of and sex. As a reward, the teenager is being taken care of by the boyfriend in terms of food, clothing, mobile phone airtime, hair, and beauty accessories. Poverty subjects one to having insufficient basic commodities that are required at home as well as in secondary school. A school girl child requires necessities like sanitary towels, learning materials, food, and clothing. For the student to access and enjoy the basic requirements that the parents cannot afford, she ends up rewarding the boyfriend who plays the role of provider of the basic needs in exchange for sex leading to pregnancy.

Costs include financial investment and time. The student receives financial help to purchase the necessities to reward herself. Time is also wasted since she is unable to concentrate in school and is likely to drop out as a result. This social exchange theory is relevant to this study as it elaborates on reward and benefit. The theory guided this study as it relates to benefits which presumably is sex that may lead to pregnancy.

2.1 Peer Pressure and Teenage Pregnancy.

Many studies have shown a correlation between peers and how they copy behaviours from each other. In friendship or social groups, some teenagers may feel a greater urge to engage in sexual intercourse because they want to fit in their social group or friendship if they want to maintain their social standing within their friendship group and seek the experience of intimacy (Maxwel & Chase 2008).

Yakubu, (2018) in his study motivated by the high rate of teenage pregnancy in Sub-Saharan Africa on adolescent pregnancy in Sub-Saharan Africa concluded that, peer social factors which include pressure influence adolescent pregnancy in Sub-Saharan Africa. Peer pressure has a large influence on teenage pregnancy; it can influence the typical teenager's perception of sexuality so much so that, teenagers conform to the norms about sexual behaviours' which are deemed acceptable to the teenage group to which she belongs. Peer pressure significantly influences teenage pregnancy (Isuku, 2015).

Mutara (2015) conducted a study in a rural community in Zimbabwe to assess the factors contributing to teenage pregnancy. He similarly identified peer pressure as a major factor influencing teenage pregnancy; teenagers rely on their peers for information and this makes vulnerable to teenage pregnancy since they access condoms, pornography pictures, and videos and they discuss among themselves on about these things.

Nyangaresi *et* al. (2021) sought to identify the causes of teenage pregnancy in Kenyan public secondary schools in Kakamega Central Sub-County. They concluded that most of the adolescents did not have their moral stand hence ending up wanting to imitate their peers, leading to engagement in romantic intimate relationships thus resulting in unplanned teenage pregnancy.

2.2 Poverty and Teenage Pregnancy

There is a strong link between the level of poverty and teenage pregnancy. Poverty is the main contributing factor to teenage pregnancy. Poverty is associated with illiteracy, poor health, and low or poor economic status. Young *et* al. (2004) in their research on antecedents of teenage pregnancy in the United States established that, internal and external poverty contribute to teenage pregnancy. In their paper, they established that, poverty contributes to teenage pregnancy. Other studies in the US show that, poverty is positively correlated to teenage pregnancy.

In Ethiopia, Elizabeth, (2020) postulates that, the prevalence of unintended pregnancies stands at 28%, and unintended pregnancy is associated with poor communication between the wife and the husband. It was also established that, the education levels and wealth of the households were a determinant of pregnancy. Furthermore, poverty and low education levels limited the access by women to contraceptives (Alene *et al.*, 2020). In Ghana, Amoadu *et al.* (2022) confirmed that, poverty is a determinant of teenage pregnancy; indeed, two out of ten girls got pregnant or gave birth before the age of 18 years.

In Nigeria, Yetunde (2010) in his study on poverty and teenage pregnancy, teenage pregnancy has dynamics related to poverty. Several of the human and environmental risk factors that are determinants of teenage pregnancy, particularly in developing nations, may be connected to experiences of poverty.

Gaille, (2016) in his study on teenage pregnancy and poverty established that, poverty is a cause and a consequence of teenage pregnancy; the poverty cycle in households is the cause of teenage pregnancy. In Nyanza, transactional sex and sexual experimentation among orphans and non-orphans were found to be influenced by poverty. It was thought that, lack of basic needs directly caused people to engage in this conduct as a means of survival (Juma *et* al., 2013).

The reviewed studies have shown that scholars have tried to link poverty as cause of teenage pregnancy alongside some cultural and social economic factors. However, poverty dimension in the African set-up has not been fully researched to establish if it is a factor that influences teenage pregnancy and more so in Baringo County which is considered vast and marginalized. There is need for more refined study on poverty as a factor influencing teenage pregnancy.

International Journal of Latest Research in Humanities and Social Science (IJLRHSS) Volume 06 - Issue 06, 2023 www.ijlrhss.com || PP. 263-272

2.3 Social Media and Teenage Pregnancy

Studies have identified an association between social media use and teenage pregnancies. Social media is widely used among adolescents hence the risk of exposure to sexually explicit content. According to a national survey conducted among teenagers in the US, 93% of them reported using social media with 81% reporting that they use it almost daily. The popular sites visited were Snapchat, Instagram, Facebook, and Twitter (Rideout & Fox 2018).

A study carried out in Sarawak, Malaysia on the potential social risk factors for teenage pregnancy found that social media was the main source of accessing pornographic material among the respondents. This exposure to pornography was associated with higher chances of engaging in risky sexual behaviour potentially leading to teenage pregnancies (Panting *et al.*, 2019). A different study among pregnant teenagers in Malaysia also found that frequent exposure to sexually explicit material accessed on different internet sites was associated with teenage pregnancy (Haidah *et al.*, 2017).

A systematic review conducted by Pathmendra *et* al. (2023) on nineteen papers covering fourteen countries to assess the relationship between exposure to pornography and sexual behaviours, established that exposure to pornography among adolescents had a positive correlation with the early age of first sex (defined as age below 16 years), leading to higher chances of teenage pregnancies.

Bedzo *et* al. (2019) carried out a cross-sectional study among 223 teenagers in the eastern region of Ghana to assess factors contributing to teenage pregnancy. Fifty-five percent (55%) of the study participants reported frequent use of the internet to access social media sites including WhatsApp, Facebook, Instagram, YouTube, and Twitter. The study established that the use of social media and its influence on sexual behaviour had a correlation with teenage pregnancy. The study also identified the use of the internet to listen to sexually explicit music and to chat with strangers.

A study conducted in rural Eastern Uganda sought to identify the factors associated with adolescent pregnancy and propose recommendations to reduce the high prevalence. Among the social determinants identified, social media were identified as a major factor influencing teenage pregnancy. Exposure to pornography and other sexually explicit material on movies, videos, and song lyrics shared on social media sites was linked to influencing teenagers to consider sex as an adventure or something being done by their peers and to try out the sex scenes. This was associated with increased chances of teenage pregnancy (Nabugoomu *et al.*, 2020).

A study undertaken in Meru Countyby Kimemia & Mugambi (2016) on the influence of social media on teenage pregnancies particularly amongst public secondary school students unearthed the social networking sites frequently used by the participants were WhatsApp, FaceBook, Twitter, and YouTube. Participants indicated using the internet to search for adult-rated movies, sexually explicit music, and viewing sexual images. Students also reported cases of being solicited for sex online. The authors concluded that social media had a major influence on teenage pregnancy among students due to its high level of use and the concentration on sex-related information.

With rapid increases and changing technology, social media has a great influence on the social behavior of people and society. Social media is part of society as a mode of communication and entertainment. It has made the world a global village. A review of previous research shows that social media influences teenage pregnancy. There is a need for research as social media technology keeps changing and the technology change, this is necessitating research on the influence of social media on teenage pregnancy particularly in remote villages in Africa.

2.4 Critical Analysis of Empirical Literature

Nyangaresi *et* al. (2021) sought to identify the causes of teenage pregnancy in secondary public schools in Kakamega Central Sub-County and found that most of the adolescents did not have their moral stand hence ending up wanting to imitate their peers. This led to engagement in romantic intimate relationships thus leading to unplanned teenage pregnancy.

In Nyanza, transactional sex and sexual experimentation among orphans and non-orphans were found to be influenced by poverty. It was thought that a lack of basic needs directly caused people to engage in this conduct as a means of survival, (Juma et al., 2013).

Kimemia & Mugambi (2016) investigated the influence of social media on teenage pregnancies among public secondary school students. The social networking sites frequently used by the participants were WhatsApp, FaceBook, Twitter, and YouTube. Participants indicated using the internet to search for adult-rated movies, sexually explicit music, and viewing sexual images. Students also reported cases of being solicited for sex online.

The reviewed studies have shown that scholars have tried to establish the cause of teenage pregnancy. The studies have given some cultural factors, social factors, and economic factors as variables in trying to establish

International Journal of Latest Research in Humanities and Social Science (IJLRHSS) Volume 06 - Issue 06, 2023 www.ijlrhss.com || PP. 263-272

the causes of teenage pregnancy. To corroborate such findings further, there is a need for a succinct studies in rural Africa, and particularly rural, remove and vast Baringo County to establish factors influencing teenage pregnancy in secondary schools in the County particularly involving the variables of peer pressure, poverty, and social media.

2.5 Conceptual Framework

According to Kumar (2014), change variables are the causal factors that bring about change in a phenomenon or situation. Similarly dependent variables, are considered outcome/effect variables. Additionally, there are unmeasured variables that arise as a result of cause-and-effect relationships that help link the cause and effect. He further illustrates the ways that the relationships between variables apply to research studies in the cause supposed to be responsible for bringing about change(s) in a phenomenon or situation and the outcome or change(s) brought about by the introduction of an independent variable.

This research paper conceptualizes that peer pressure, poverty, and social media (independent variables) are key factors that influence the levels of teenage pregnancies (dependent variable) in Baringo Central Sub-County. The conceptual model shown in Figure 1 is a depiction of the relationship between Independent and Dependent variables used in the research.

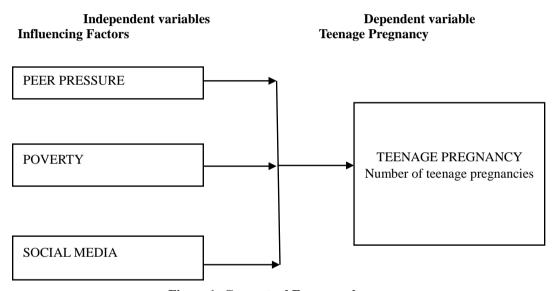


Figure 1: Conceptual Framework

3. Materials and Methods

This study adopted a descriptive research design to assess the factors that influence teenage pregnancy in Baringo Central Sub-County. A descriptive research design assisted the researchers to gather both qualitative and quantitative data on how variables; peer pressure, poverty, and social media influenced teenage pregnancy in Baringo Central Sub-County. Baringo County has thirty-seven secondary schools with a total population of 14,962 girls. In Baringo Central Sub-County there are 4,847 secondary school girls (County Integrated Development Plan 2018-2022). This study concentrated on secondary school girls who are directly affected by teenage pregnancies who were 556 for the year 2020 in Baringo Central Sub-County.

The study's sample size was determined using a stratified random sampling technique. Kothari (2008) notes that stratified random sampling is a method where respondents are selected using well-defined strata. A convenience sampling technique was used in selecting a representative sample of the schools which was based on easy accessibility and location. Purposive sampling was used in selecting respondents for the questionnaire as they would provide in-depth and detailed information as they are victims of teenage pregnancy (Saunders et al 2012). Mugenda and Mugenda (2013) recommended limiting a study accessible population if the population units are more than thirty. As a result, a sample of respondents representing 10% of the population of 556 was used giving a sample of 56 respondents, which satisfied the above conditions.

This study used a structured questionnaire containing five-point Likert-scale questions as the data collection instrument for the study. It comprised two sections; the first section was used to gather fundamental issues concerning the respondents' demographic characteristics; the second section comprised sections that stated the three objectives of the study. Questionnaires were preferred for their suitability and easy administration. Kombo and Tromp (2010). It was good for data collection because it helped the researchers to

www.ijlrhss.com // PP. 263-272

meet many people within a short timeframe and ensured the confidentiality of the information given by the respondents. It also made it possible for descriptive and inferential analysis.

The study made use of primary data which was original information collected from firsthand experience. Cooper and Schindler (2014) consider primary data to be data collected at the source. A structured questionnaire was used for data collection and was administered on a drop-and-pick-up basis. This gave respondents sufficient time to respond to the questions and increased the study's response rate. The questionnaire was administered by the researchers. The study was undertaken in Baringo Central Sub-County, where 56 questionnaires were administered to female teenagers who were victims of teenage pregnancy. 45 out of 56 questionnaires were answered.

Data collected from the field was coded and edited to detect errors and omissions which ensured that the responses were complete, accurate, and suitable for further processing. They were thereafter manually classified using frequency distribution tables and percentages following the questionnaire items. Simple descriptive statistics including frequencies and percentages were used as they had an advantage over more complex statistics in that they were simple to understand particularly when communicating results to a diverse audience. The results were presented using tables, charts, and graphs which aided in a clear interpretation of the study findings and assisted in forming a conclusion. A letter of introduction from The Kenya School of Government Baringo Campus was obtained as an ethical consideration for the researchers. Confidentiality of the respondents' answers was maintained through the anonymity of the questionnaires. Participation in the study was voluntary.

4. Results and interpretation

4.1 Perception of Whether Community Plays a Role in Girls' Pregnancy Prevalence

The students were also requested to indicate whether it was common for Secondary School Girls to get pregnant in the community. The results were as in Table 2.

Table 2 How common is it for Pregnancy Cases to occur in the community

Frequency

Percentage Response Rate

Response	Frequency	Percentage Response Rate
Yes	20	36%
No	29	52%
Don't know	7	12%
Total	56	
Mean		18.67
Standard Deviation		9.03

From the findings in Table 2, 52 percent of the students did not think it was common for girls in the community to get pregnant. This was followed closely by 36 percent who felt that the situation was common in the community while 12 percent were not sure. From these findings, we can deduce that the community did not play a large role in the number of girls getting pregnant.

4.2 Prevalence of Pregnancy Cases in School

The students were further requested to indicate whether they had any children while in school. The results are in Table 3.

Table 3: Prevalence of Pregnancy cases in School

Response	Frequency	Percentage Response
Yes	45	80%
No	11	20%
	56	
Mean		28
Standard Deviation		17

From the findings in Table 3, 80 percent of the students indicated they were pregnant and had children while attending school while 20 percent indicated they did not have any. From this, we can infer that the issue of

teenage pregnancies is indeed a serious issue.

4.3 Peer Pressure as a factor influencing Teenage Pregnancy

The students were further asked to indicate whether they have ever been influenced by peer pressure to have sex leading to pregnancy. The scale of agreement used in the section to quantify their response includes Strongly Disagree (SD), Disagree (D), Neither (N), Agree (A), and Strongly Agree. The findings are as per Table 4.

Table 4 Responses on Peer Pressure as a factor influencing Teenage Pregnancy

Scale of Agreement Peer Pressure	SD	D	N	A	SA
I got pregnant because my friends influenced me to have sex	20 %	18 %	9%	42 %	11 %
I got pregnant because I engaged in sex at an early age out of curiosity	24 %	24 %	7%	38 %	9%
I got pregnant out of engaging in sex because I wanted to fit in and not feel left out	18 %	13 %	13 %	47 %	9%
I got pregnant after being pressurized by my boyfriend to have sex	27 %	16 %	9%	42 %	7%
I got pregnant because of fear of losing my boyfriend	22 %	16 %	20 %	36 %	7%

From the findings in Table 4, 47 percent of the students indicated that pressure to fit in was the key factor influencing Secondary school girls to get pregnant, followed closely by 42 percent of respondents who reported that being pressurized by boyfriends to have sex led to pregnancy. From the response rate above it is clear the role peer pressure plays in influencing secondary school girl pregnancies.

4.4 Poverty as a Factor Influencing Teenage Pregnancy

The students were asked to indicate whether poverty influenced students to get pregnant. The scale of agreement used in the section to quantify their response includes Strongly Disagree (SD), Disagree (D), Neither (N), Agree (A), and Strongly Agree.

The results on the influence of poverty are as per Table 5.

Table 5: Poverty as a Factor Influencing Teenage Pregnancy

Scale of Agreement Poverty	SD	D	N	A	SA
I got pregnant in the process of trying to get money for my personal needs	11%	16%	9%	24%	40%
I got pregnant because I needed to support my parents financially	11%	24%	18 %	42%	4%
I got pregnant when I went to the neighbours/ relatives to look for accommodation	18%	24%	38 %	13%	7%
I got pregnant in the process of looking for my school fees	11%	29%	16 %	11%	38%
My parent's irresponsibility pushed me into engaging in sex at an early age resulting in my pregnancy	16%	22%	31 %	20%	11%

The findings in Table 5 states that 40 percent of the respondents indicated that they got pregnant while getting money for personal needs. 42 percent indicated that they got pregnant while taking up the role of breadwinner to support the parents financially and 38 percent got pregnant while seeking school fees. It is important to note that the majority were not doing to divulge knowledge on family dynamics that could influence teenage pregnancies further posing a limitation to obtaining adequate information on the role Poverty plays in aggravating the situation.

4.5 Social Media Influences on Teenage Pregnancies

Students were asked to indicate the influence social media has on teenage pregnancies. Their responses were as shown in Table 6.

Table 6: Social Media Influence on Teenag	e Pregnan	cies			
Social Media Influence by Percentages	SD	D	N	A	SA
I got pregnant after being approached by boys/ men using chats, text,	7%	20%	13%	29%	33%
WhatsApp, Instagram, etc.					
I got pregnant after exposure to explicit content on social media sites	24%	11%	13%	40%	13%
which were easy to access					
I got pregnant after exposure to information on social media showing	11%	9%	20%	27%	31%
sex as a normal thing					
I got pregnant after admiring the lifestyle of socialites/ celebrities on	36%	16%	22%	18%	9%
social media					
I got pregnant after attending video shows/ cinemas in my locality	16%	16%	18%	40%	11%
		1			1

From the findings in Table 6, a large proportion of the respondents concurred that social media plays a role in the upsurge in teenage pregnancies. The key drivers were identified as texts and chats as key drivers of students engaging in risky sexual behavior that leads to pregnancy. Interestingly it is important to note that the lifestyles of celebrities that they admired did not play a large role in the number of students getting pregnant.

5. Conclusions and Recommendations

5.1 Influence of Peer Pressure on Teenage Pregnancy

The first objective sought to determine the influence of Peer Pressure on Teenage pregnancies in Baringo Central Sub-County. The study established that peer pressure plays a large role in influencing the number of teenage pregnancies. From the findings, 47 percent of the students indicated that pressure to fit in was the key factor influencing Secondary school girls to get pregnant, followed closely by 42 percent of respondents who reported that being pressurized by boyfriends to have sex led to pregnancy. From the response rate above, it is clear the role peer pressure plays in influencing secondary school girl pregnancies. The findings are similar to the findings of Mutara (2015) who established that peer pressure influences teenage pregnancy in secondary school-going girls. Maxwel & Chase, (2008) also established that some teenagers may feel a greater urge to engage in sexual intercourse because they want to fit in their social group or friendship if they want to maintain their social standing within their friendship group and seek the experience of intimacy.

5.2 Influence of Poverty on Teenage Pregnancy

The second objective sought to assess the influence of poverty on teenage pregnancy among secondary school girls in Baringo Central Sub-County. 40 percent of the respondents indicated that they got pregnant while getting money for personal needs. 42 percent indicated that they got pregnant while taking up the role of breadwinner to support the parents financially and 38 percent got pregnant while seeking school fees and other school requirements. It is important to note that the majority were not doing to divulge knowledge on family dynamics that could influence teenage pregnancies further, posing a limitation to obtaining adequate information on the role Poverty plays in aggravating the situation. This study is consistent with the findings of Juma *et al.* (2013) who observed that a lack of basic needs directly caused teenagers to engage in transactional sex as a means of survival. In addition, Gaille, (2016) in his study on teenage pregnancy and poverty said that poverty is a cause and a consequence of teenage pregnancy. The cycle of poverty in households is the cause of teenage pregnancy.

5.3 Influence of Social Media on Teenage Pregnancies

On the third objective, 33 percent of the respondents strongly agreed that being approached by men/boys through WhatsApp, Instagram, and FaceBook influenced them into engaging in sex leading to pregnancy. 40 percent of the respondent agreed that they were influenced into engaging in sex after watching explicit movies and videos on social media sites as well as attending videos and cinemas. This implies that social media is a large factor in influencing teenage pregnancy.

These findings concur with those of Nabugoomu *et al.* (2020) who found that exposure to pornography and other sexually explicit material on movies, videos, and song lyrics shared on social media sites were linked to influencing teenagers to consider sex as an adventure or something being done by their peers and to try out the sex scenes. Kimemia & Mugambi (2016) also investigated the influence of social media on teenage pregnancies among public secondary school students, the social networking sites frequently used by the participants were WhatsApp, FaceBook, Twitter, and YouTube. Respondents indicated that using the internet to search for adult-rated movies, sexually explicit music, and viewing sexual images exposed them to cases of

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being solicited for sex online. Interestingly it is important to note that the lifestyles of celebrities that they admired did not play a large role in the number of students getting pregnant.

6. Conclusion

The study sought to investigate factors influencing teenage pregnancy amongst secondary school girls in Baringo Central Sub-County. It was necessitated by the rampant cases of teenage pregnancy in Baringo County. The variables peer pressure, poverty, and social media were used as independent while teenage pregnancy was the dependent variable. The researchers established that peer pressure, poverty, and social media influenced teenage pregnancy in Baringo Central Sub-County.

7. Recommendations

The findings demonstrate that there is a need for collaborative efforts between the larger national and county governments to invest in appropriate solutions to curb the worrying trends in teenage pregnancy. Enhancement of existing social protection mechanisms, policies, laws, and regulations that keep teenage girls safe in the communities and prioritized by the County Commissioner, Deputy County Commissioner, Assistant County Commissioner, and Chiefs in collaboration with the County Director of Education to keep teenage girls safe in the communities. Ministry of Education should upscale the provision of sanitary towels and underwear to all girls in secondary schools in the County. This keeps girls in school and greatly reduces the need for them to engage in transactional sex to meet their needs. County Governments through the Sub County Administrators and Ward Administrators should work with the school administration to ensure girls who leave school because of pregnancy are reintegrated back to secondary school.

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