



Quality of Life of Young Adult Woman Who Experienced Unwed Pregnancy

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Abstract

This study aimed to understand further the description and factors affecting the quality of life of young adult women who experienced unwed pregnancy. This study used qualitative approach in the form of case study. The data collection method was interview using general guideline and non-participatory observation. The research subject was a 23 years-old young adult woman who experienced unwed pregnancy when she was 19 years old. Based on data analysis, it was found that the quality of life of the young adult woman who experienced unwed pregnancy was poor, and there is factors which affected the quality of life of the young adult woman who experienced unwed pregnancy, that is physical violence, anxiety about the future, economic issues, and financial dependency. However, family support and help, also awareness of the role as a mother, could improve the quality of life of young adult women who experienced unwed pregnancy.

Keywords: quality of life, young adult woman, unwed pregnancy

1. Introduction

Quality of Life is an individual's perception on their position in life in the context of culture and value system (norms) consistent with the place where the individual lives and related with their purpose, expectation, standard, and concern in life. This definition reflects the view that quality of life refers to subjective evaluation ingrained in cultural, social, and environmental contexts (World Health Organization, 1997).

There are some quality of life studies on pregnant adult women, including the study by Fauzy and Fourianalisyawati (2016) that indicates significant relation between depression and all dimensions of quality of life among high risk pregnant women. The relation is negative, meaning the higher the subject's depression score, the lower their perception on quality of life. Meanwhile, Mazúchová, Kelčíková, and Dubovická (2017) state that the riskiest aspects of quality of life are spouse's life satisfaction, physical change that causes limitation, limited physical activity, and fear



of managing energy during birth. There is also no statistically significant difference in quality of life in terms of age, parity, and pregnancy term.

Pregnancy doesn't only happen to married and mature couples, but also adolescents. Adolescence is a transition period from childhood to adulthood. This transition leads to inner turmoil, which affect physical, cognitive, and psychosocial aspects of adolescent (Papalia, Olds, & Feldman, 2009). This leads to great curiosity, including on sexuality. Adolescent sexual behavior may be affected by alcohol and drugs, poor sexual reproductive education and information that includes poor access to contraception, peer pressure to perform sexual activities, inappropriate usage of contraception, sexual assault that leads to rape, poverty, harassment, violence, and family discord, low self-esteem, low education ambition and goal that may cause to teen pregnancy and teen marriage (UNICEF, 2008).

According to Tasdemir, Balci, and Gunay (2010), pregnant adolescent has higher risk compared with pregnant adult in terms of certain social issues, e.g. ending education, unemployment, and social isolation. In the case of female who hasn't completed physical, psychological, and social development, pregnancy may negatively affect mother and baby, so that the quality of life of pregnant adolescent is predicted to lower than pregnant adult.

Based on the description above, pregnancy doesn't only happen to married and mature couples, but also adolescents. Therefore, the present study was conducted to examine the quality of life and factors affecting quality of life among young adult woman who experienced unwed pregnancy in the adolescence.

2. Method

The present study used case study approach. The research subject was a 23 years-old young adult woman who experienced unwed pregnancy when she was 19 years old, and who is currently a stay-at-home mother of two twin boys. The researcher also explored and confirmed information on the subject with some informants referred to as significant others. The first significant other was a 25 years old man, who is the subject's husband, and the second significant other was a 28 years-old woman, who is the subject's sister. The significant others were involved as additional information source on the subject's life.

The data collection techniques in the present study were interview and observation. In the present study, the researcher used guided interview because during the interview, the researcher made a general guideline and wrote issues to address without determining the order of the questions (Patton in Poerwandari, 2013), and the observation was non-participatory observation, in which the researcher wasn't directly involved in the subject's daily activities, but only observes from a distance and in certain situations instead (Basuki, 2006).



To measure data accuracy in the present study, the researcher used four triangulation concepts, i.e. data triangulation, source triangulation, theoretical triangulation, and methodical triangulation, because they are interrelated and support each other to get accurate and clear research result to address the issues in the present study.

The steps to analyze the research result were organizing data, data coding and analysis, testing hypothesis, and performing strategy analysis, and interpreting data.

3. Result and Discussion

Based on case analysis, the research subject experienced unwed pregnancy in adolescence due to promiscuity and high-risk sexual behavior, as well as cold and disharmonious family due to economic issues. The subject said that she started dating from the 6th grade and had 6 ex-boyfriends. The subject started having sex in high school and when she was dating her current husband in college, they often had sex. They usually had sex without contraceptive. This was in line with the study of Amalia and Azinar (2017) who state that the factors affecting unwanted pregnancy were risky premarital sex and permissiveness to premarital sex. This is also supported by the study by Kornides, Kitsantas, Lindley, and Wu (2015) that states that effective contraception is a strong determinant for preventing unwanted pregnancy.

The subject's family was cold and disharmonious due to economic issues. However, this coldness was between the subject's parents, while the subject claimed to still get enough attention from her mother, although she didn't get enough attention from her father. This was in line with the study by Amalia and Azinar (2017), which states that the factors affecting unwanted pregnancy include lack of parental attention.

Regarding quality of life and factors affecting the quality of life of young adult woman who experienced unwed pregnancy in adolescence, it was found that:

The subject's quality of life during the research (the subject was married and cared for both her children) had improved compared with when the subject discovered her pregnancy. However, the subject's quality of life wasn't good yet. In the past, the subject had been sad, depressed, and stressed due to the unwed pregnancy, preventing her from continuing her study and meeting her friends, leading to arguments with her husband, and making her feel disliked by her mother-in-law and regretted the unwed pregnancy, so that the subject had considered about suicide and killing her twin boys. However, the subject eventually realized her role and responsibilities as a mother and decided to focus on caring and raising her children, as well as making her children her source of strength. This was in line with the study by Ferreira, Haas, and Pedrosa (2013), which states that unwed pregnancy and having more than one child negatively affect quality of life. Inability to continue pursuing



education is one of the consequences of unwed pregnancy. However, shifted focus in life as a consequence of motherhood is the best aspect of life.

Some factors which affect the subject's quality of life included physical abuse, anxieties about the future, economic issues and financial dependency, and family support and help, and awareness of maternal role. The subject had had massive fight with her husband, leading to physical abuse that resulted in the subject's ear drum being torn. The subject was concerned about her and her children's future, especially because the subject and her husband didn't have steady income and still relied on the subject's husband's parents for daily needs. This was in line with the study by Ferreira, Haas, and Pedrosa (2013) which states that economic condition and financial dependence make individual anxious during pregnancy and after labor, negatively affecting quality of life.

The subject's family support also improved the subject's quality of life. The support provided by the subject's family included moral support, caring for the subject's children when she was sick, and financial support for the subject and her children. This was supported by the study by Jantacumma, Powwattana, Lagampan, and Chansatitporn (2018) which states that support from family members, especially mother, partner or friend, can reduce negative emotions, such as depression, sadness, despair, and low self-esteem, and can enhance self-esteem and self-efficacy. Awareness on the subject's role as a mother also improved the subject's quality of life.

4. Conclusion

Based on the data analysis in the present study, it's found that the quality of life of young adult woman who experienced unwed pregnancy is poor, although it's better than when she discovered her pregnancy. Some factors affect the quality of life of young adult woman who experienced unwed pregnancy are physical abuse, anxiety about the future, economic issue and financial dependency. However, family support and help, also awareness of the role as a mother can improve the quality of life of young adult woman who experienced unwed pregnancy.

5. Suggestion

Based on the research results, some suggestions are:

1. Women who have unwed pregnancy shouldn't be lost in despair and be depressed, sad, and hopeless. They should focus on self-improvement and educating and raising their children for a better future.

2. The society, especially people close to women who have unwed pregnancy, should support and embrace these women to make them feel accepted and rise from their despair.
3. Future researches should develop good communication with research subject to get more in-depth and complete information. Future researches should also study women who experience unwed pregnancy using other variables.

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