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ORIGINAL





Level of Resilience in Adolescent Motherhood attend in a Hospital in Lima

Nivel de Resiliencia en la Maternidad Adolescente atendidas en un Hospital de Lima

Rosa Perez-Siguas¹ , Hernan Matta-Solis¹ , Eduardo Matta-Solis¹ , Victoria Tacas-Yarcuri¹ , Hernan Matta-Perez¹ , Alejandro Cruzata-Martinez¹ , Eva Ventura-Hernandez² , Brian Meneses-Claudio³ .

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ABSTRACT

Introduction: resilience in adolescent mothers will play an important role, since it will help the adolescent to improve her coping capacity in situations that make her vulnerable during her pregnancy, so the research objective is to determine the level of resilience in adolescent motherhood attended in a hospital in Lima. **Methods:** it is a quantitative, descriptive-cross-sectional and non-experimental study; with a total population of 125 adolescent mothers who answered a questionnaire of sociodemographic aspects and the Connor and Davidson Resilience Scale instrument in the 25-item version.

Results: in their results, we can observe that 5(n=4,3%) have a low level of resilience, 29(n=25,2%) medium resilience level and 81(n=70,4%) high resilience level.

Conclusions: in conclusion, the adolescent's environment should be evaluated, since it will allow us to show if there are protective or risk factors that promote resilience.

Keywords: Resilience; Adolescents Mothers; Mental Health.

RESUMEN

Introducción: la resiliencia en las madres adolescentes jugará un papel importante, ya que ayudará a la adolescente a mejorar su capacidad de afrontamiento ante situaciones que la hagan vulnerable durante su embarazo, por lo que el objetivo de la investigación es determinar el nivel de resiliencia en la maternidad adolescente atendida en un hospital de Lima.

Métodos: es un estudio cuantitativo, descriptivo-transversal y no experimental; con una población total de 125 madres adolescentes que respondieron un cuestionario de aspectos sociodemográficos y el instrumento Escala de Resiliencia de Connor y Davidson en la versión de 25 ítems.

Resultados: en sus resultados se puede observar que 5(n=4,3%) tienen un nivel de resiliencia bajo, 29(n=25,2%) nivel de resiliencia medio y 81(n=70,4%) nivel de resiliencia alto.

Conclusiones: en conclusión, se debe evaluar el entorno del adolescente, ya que nos permitirá evidenciar si existen factores protectores o de riesgo que promuevan la resiliencia.

Palabras clave: Resiliencia; Adolescentes Madres; Salud Mental.

¹Instituto Peruano de Saud Familiar, TIC Research Center: eHealth & eEducation. Lima, Perú.

²Universidad Cesar Vallejo, Escuela de Posgrado. Lima, Perú.

³Universidad Científica del Sur, Facultad de Ciencias Empresariales. Lima, Perú.

INTRODUCTION

Adolescent pregnancy rates are increasingly relevant in those with limited socioeconomic and educational resources, and this has long-term implications for girls, their families and communities. (1,2)

However, girls and young women in vulnerable communities around the world often do not have access to quality education and distance learning opportunities, (3,4) therefore they have been disproportionately affected by the coronavirus (COVID-19) pandemic. (5,6)

The United Nations Educational, Scientific and Cultural Organization (UNESCO) estimated that 11 million girls may not have returned to school due to disruption caused by COVID-19. In addition to being excluded from education, the crisis puts girls at risk of teenage pregnancy, early and forced marriage, and violence. (7)

With regard to the World Health Organization (WHO), it reported that, globally, it maintains that the adolescent birth rate has decreased, but that they are uneven worldwide, with the greatest decline covering more in South Asia and the slowest declines occurring in Latin America, the Caribbean and Africa., as they continue to have the highest rates of adolescent pregnancy worldwide. (8)

Likewise, the United Nations Population Fund (UNFPA) maintains that in Latin America and the Caribbean, more than 140 million adolescents are in a situation of vulnerability being unplanned pregnancy, being the region with the second highest rate of teenage pregnancies worldwide, estimating almost 18 % of pregnancies correspond to women under 20 years, (9) consequently, maternal mortality in Latin America and the Caribbean is among the top three causes of death in adolescents between the ages of 15 and 19 years due to the risk of dying since their body is not developed to have a gestation at that stage. (10)

Therefore, having babies during adolescence can have serious health consequences for the young woman and her baby(11) Also, adolescents' bodies are not yet fully developed and too short gestation can lead to high rates of debilitating or life-threatening conditions for pregnancy. (12,13)

In a study conducted in Colombia, with 499 pregnant adolescent participants, in their results they stated that 12,8 % of the participants had low resilience, associating them with family dysfunction, violence within the home, decreased happiness and low self-esteem. (14)

In a study conducted in Nigeria, with 241 adolescent participants, they stated in their results that 77,2 % of adolescents had a low level of resilience, where factors such as shame, rejection of pregnancy by the couple and lack of parental support are predictors of low resilience. (15)

In a study conducted in Malaysia, with34 pregnant participants, in their results they stated that pregnant women had moderate resilience, and that factors such as rejection or marginalization by their parents, coping with pregnancy and depression, decrease levels of resilience. (16)

Therefore, the objective of the research is to determine the level of resilience in adolescent motherhood attended in a hospital in Lima.

METHODS

A. Research type and Design

In the study, according to its properties is quantitative, with respect to its methodology is descriptive-crosssectional non-experimental. (17)

B. Population

The population consisted of a total of 125 participants from a district of Lima. A inform consent were made to be signed by all the participants. All the participants included in this study signed the informed consent CIE IPSF 015-2022, as well as being aware of the objectives, the data collected and the purpose of the study.

C. Inclusion Criteria

- Teenage mothers attending the hospital in Lima
- Teen mothers between 10 and 19 years old
- Teen mothers who voluntarily agree to participate in the study, in turn inform you about the implications in the study
- People who signed the inform consent CIE IPSF 015-2022. It was previously accepted by the institution.

D. Technique and Instrument

The data collection technique was the survey, which presents sociodemographic data and the Connor and Davidson Resilience Scale instrument in the 25-item version (CD-RISC 25).

The CD-RISC 25 instrument presents 25 items distributed in 5 dimensions (persistence-tenacity-self-efficacy, control under pressure, adaptation and resilience, control and purpose; and spirituality). In which their score is determined by a Likert-type scale where: "0 = never", "1 = rarely", "2 = sometimes", "3 = often" and "4 = almost always", where the final score ranges from 0 to 100 points, in which, the higher the score, the greater the resilience the adolescent mother will have. (18)

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For the reliability of the instrument was performed by Cronbach's Alpha obtaining a score of 0,913 ($\alpha > 0,6$) for the 25 elements of the instrument, where we can determine that the instrument is reliable.

E. Place and Application of the Instrument

In the first place, prior administrative coordination was made for formal admission to the hospital located in the district of Comas, to then inform them about the study to be treated, and thus have the knowledge of the research.

RESULTS

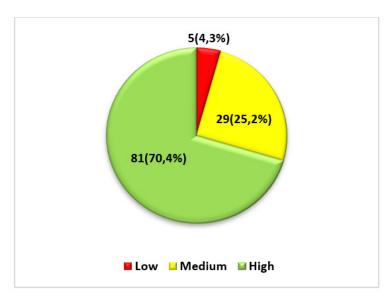


Figure 1. Level of resilience in adolescent motherhood attended in a hospital in Lima

In figure 1, we can see that 4.3% of the participants have a low level of resilience, 25.2% medium resilience and 70.4% high resilience.

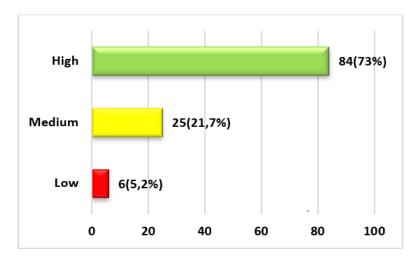


Figure 2. Level of resilience in its dimension persistence, tenacity and self-efficacy in adolescent motherhood attended in a hospital in Lima

In figure 2, we can see with respect to the persistence, tenacity and self-efficacy dimension, that 73 % of the participants have a high level of resilience, 21,7 % medium level of resilience and 5,2 % low level of resilience.

In figure 3, we can see with respect to the dimension control under pressure that, 72,2 % of the participants have a high level of resilience, 20,9 % medium level of resilience and 7 % low level of resilience.

In figure 4, we can see with respect to the adaptation dimension and resilience that, 60,9 % of the participants have a high level of resilience, 37,4 % have medium resilience level and 1,7 % low resilience level.



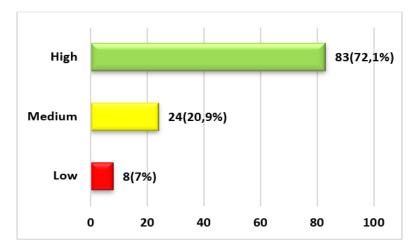


Figure 3. Level of resilience in its dimension control under pressure in adolescent motherhood attended in a hospital in Lima

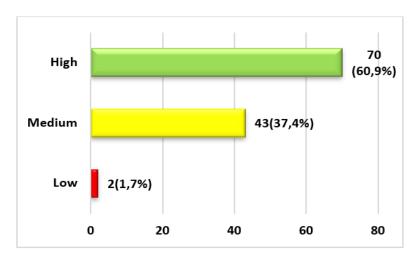


Figure 4. Level of resilience in its dimension adaptation and capacity to recover in adolescent motherhood attended in a hospital in Lima

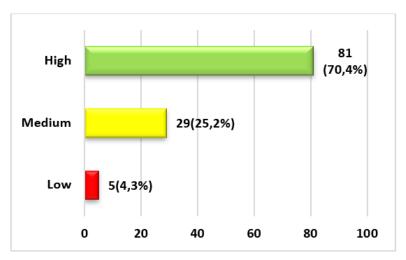


Figure 5. Level of resilience in its control, purpose dimension in adolescent motherhood attended in a hospital in Lima

In figure 5, we can see with respect to the control and purpose dimension that 70,4 % of the participants have a high level of resilience, 25,2 % have medium resilience level and 4,3 % have low resilience level.

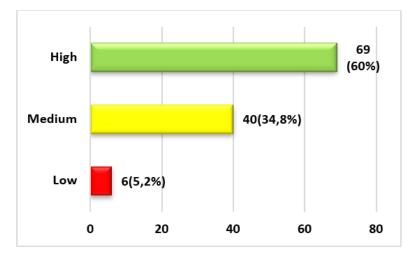


Figure 6. Level of resilience in its spirituality dimension in adolescent motherhood attended in a hospital in Lima

In figure 6, we can see with respect to the spirituality dimension that 60 % of the participants have a high level of resilience, 34,8 % have medium resilience level and 5,2 % have low resilience level.

DISCUSSION

In the present research, it is presented from the perspective of women's and adolescents' health, in which the main issue of adolescent motherhood is one of the problems at the social and public level that affects adolescents, putting their lives and that of their baby at risk.

In the results of resilience in adolescent motherhood, they had high levels of resilience, this is because, the adolescent mother by promoting protective factors such as familism, social support and good mental health, allows the adolescent mother to increase their indices of resilient abilities in situations that compromise their well-being, although it is true to be such young mothers, They tend to create negative factors that obstruct the progress of the adolescent, but if she develops coping skills, decision-making and her ability to adapt in addition to having a good relationship with her families, her resilience indicators tend to increase.

As for its dimensions, we can observe that in its results all have a high level of resilience, this is because, the adolescent mother, has the necessary capacities to be able to face the situation that is happening, adapting and overcoming adversity in an effective way, and that this allows in the adolescent mother the reduction of symptoms of stress and anxiety during her pregnancy, and that this can have an impact if the adolescent e does not cope with situations that compromise her mental health, since it is a heavy psychological burden, since it affects both her physical and mental health since she does not have the ability to adapt to the situation that is happening and not be able to face unexpected events that can happen in life in her stage of gestation.

Resilience in the adolescent stage is one of the stages in which adolescents must have greater social support and in turn have a positive mother-child bond, since it can help the events, they may encounter in childhood and the challenge of being a mother.

CONCLUSIONS

It is concluded that health strategies should be carried out towards adolescent mothers in an integral manner, to improve their resilience capacities and coping skills.

It is concluded that, it is necessary to evaluate the environment of the adoelscente, since it will allow us to evidence if there are protective or risk factors that promote resilience.

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CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

AUTHORSHIP CONTRIBUTION

Conceptualization: Rosa Perez-Siguas, Hernan Matta-Solis, Eduardo Matta-Solis, Victoria Tacas-Yarcuri, Hernan Matta-Perez, Alejandro Cruzata-Martinez, Eva Ventura-Hernandez, Brian Meneses-Claudio.

Data curation: Rosa Perez-Siguas, Hernan Matta-Solis, Eduardo Matta-Solis, Victoria Tacas-Yarcuri, Hernan Matta-Perez, Alejandro Cruzata-Martinez, Eva Ventura-Hernandez, Brian Meneses-Claudio.

Formal analysis: Victoria Tacas-Yarcuri, Hernan Matta-Perez.

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Research: Victoria Tacas-Yarcuri, Hernan Matta-Perez. Methodology: Hernan Matta-Solis, Eduardo Matta-Solis.

Project management: Brian Meneses-Claudio.

Resources: Brian Meneses-Claudio.

Software: Rosa Perez-Siguas, Hernan Matta-Solis, Eduardo Matta-Solis, Victoria Tacas-Yarcuri, Hernan Matta-Perez, Alejandro Cruzata-Martinez, Eva Ventura-Hernandez, Brian Meneses-Claudio

Supervision: Hernan Matta-Solis, Eduardo Matta-Solis.

Validation: Rosa Perez-Siguas. Display: Brian Meneses-Claudio.

Drafting - original draft: Rosa Perez-Siguas, Hernan Matta-Solis, Eduardo Matta-Solis, Victoria Tacas-Yarcuri, Hernan Matta-Perez, Alejandro Cruzata-Martinez, Eva Ventura-Hernandez, Brian Meneses-Claudio.

Writing - proofreading and editing: Brian Meneses-Claudio.