



## Child pregnancy in Modern Nigeria: A socio-legal analysis

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### Abstract

Though theories on protection of the human rights of the child seem to identify with the principle of the best interest of the child, the latter principle has faced difficulties related to its application and assessment of what is in the best interest of the child, and also the balance between interests. Child pregnancy as we know it today, not only violates the right to dignity, life, personal liberty and reproductive health of the girl child, its resultant effects and implications impose far reaching consequences on an under aged girl, causing her to begin life as an adult from a rather disadvantaged point. This research extracts the truth on the growing wave and consequences of sexual activities amongst persons below the legal age of maturity as well as identifying a complexity of challenges within social, cultural and economic dimensions.

**Keywords:** child pregnancy, human rights, child rights, reproductive rights

### 1. Introduction

Violence against children has and still exists in modern times. At the social and political levels, child pregnancy may be a contentious issue, with the rights to health, education, dignity and gender equality paramount for girls and young women <sup>[1]</sup>, but child abuse, child marriage and other violations must be viewed within the context of force and coercion in which they belong, involving pressure and emotional blackmail on children <sup>[2]</sup>.

Generally, pregnancies are the result of sexual intercourse with the opposite sex, whether voluntary or involuntary <sup>[3]</sup>. Pregnancy in a girl between ages 10 and 19 years is termed teenage pregnancy <sup>[4]</sup>, and pregnancy is defined as the time between conception and birth <sup>[5]</sup>. Most child pregnancies are unplanned or unwanted and the girls are immature both physically and psychologically <sup>[6]</sup>. Child pregnancy occurs in all societies but the level of child pregnancy and childbearing varies from country to country <sup>[7]</sup>.

Child Pregnancy as a human rights violation, directly affects girls' education, health, psychological well-being, and the health of their off spring <sup>[8]</sup>, and is a problem with global effects and implications <sup>[9]</sup> which needs to be tackled through multi-sectoral approaches <sup>[10]</sup>. Worldwide, boys are also married off as children, but girls are disproportionately affected <sup>[11]</sup>, and the consequences of child pregnancy are enormous and inimical to the wellbeing of the girl child, against her human rights and personal development <sup>[12]</sup>.

#### 1.1 Who is a Child

Art. 1 of the Convention on the Rights of the Child (CRC) 1989 defines a child as every human being below the age of 18 years unless, under the law applicable, majority is attained earlier <sup>[13]</sup>. S 274 of the Childs Rights Act (CRA) 2003 defines a child in line with the CRC and the African Charter on the Rights and Welfare of a Child (ACRWC) 1990, as a person who has not attained the age of eighteen (18) years <sup>[14]</sup>. By Art 2 ACRWC 1990, 'For the purpose of this charter, A Child means every human being below the age of 18 years.' Several countries have in accordance with

the provisions of the CRC expressed the age of majority <sup>[15]</sup>.

#### 1.2 Child Pregnancy

Child pregnancy is pregnancy in human females under the legal age of maturity. A pregnancy can take place in a pubertal female before menarche (the first menstrual period), which signals the possibility of fertility, but usually occurs after menarche. In well-nourished girls, menarche usually takes place around the age of 12 or 13 <sup>[16]</sup>.

The term childhood is often used in this discourse adolescence and adolescent is often used synonymously with teenager. Adolescent pregnancy means pregnancy in a woman aged 10-19 years <sup>[17]</sup>.

#### 1.3 Reproductive Rights

Reproductive rights are rights concerning reproduction and includes the right to safe motherhood, the right to be free from violence, the right to be protected from sexual diseases, the right to decide freely and responsibly the number, timing and spacing of children, the right to safe abortions under specific circumstances and conditions, the right to accessible and available means of contraception, and the right to have proper and adequate education, information and means to achieve these rights etc <sup>[18]</sup>.

The concept of reproductive rights was introduced in a global scale at the 1994 International Conference on Population and Development (ICPD) in Cairo. Reproductive health involved sexual rights, sexual health and reproductive rights <sup>[19]</sup>, and the girl child is as much entitled to reproductive health as women are.

#### 2. The best interest of the child and child pregnancy

A right is a well-founded claim, and when a given claim is recognized by law, it becomes an acknowledged claim or legal right enforceable by the power of the State <sup>[20]</sup>. Part I of the Child Rights Act 2003 provides that the best interest of the child shall be of primary or paramount consideration in all actions to be undertaken and necessary protection and care shall be given to the child for his/her well-being <sup>[21]</sup>.

Although the child's best interests are an indeterminate legal concept, their assessment and determination should be founded on objective criteria <sup>[22]</sup>.

The general comment No 14 of 2013 lists elements to be taken into account in considering the best interest of a child, and it includes the child's views, the child's identity, preservation of the family environment and maintaining family relations; the child's care, safety and protection, situations of vulnerability; the child's right to health or to education etc <sup>[23]</sup>.

The basic best-interests assessment is a general assessment of all relevant elements of the child's best interests, the weight of each element depending on the others ... The content of each element will necessarily vary from child to child and from case to case, depending on the type of decision and the concrete circumstances, as will the importance of each element in the overall assessment <sup>[24]</sup>.

There are many difficulties related to the application of the principle of the best interests of the child which include: the difficulty of assessment of what is in the best interests of the child, and also the balance between interests <sup>[25]</sup>. Child pregnancy remains a violation of human rights. It eliminates the child's freedom to choose. Child pregnancy can only result from child sexual violation (in or out of wedlock), and there is no justification for sexual intercourse with under aged girls in Nigeria.

Fundamental rights for the child such as the rights to survival and development, to freedom from discrimination, to dignity of the child, to health and health care Services, to parental care, protection and maintenance, to free, compulsory and complete secondary education protected by law <sup>[26]</sup>, including prohibitions of child marriage, child betrothal, trafficking, use of children in any criminal activity, dealing in children for the purpose of prostitution, unlawful sexual intercourse, other forms of sexual abuse and exploitation prejudicial to the welfare of the child are identified under the protective laws <sup>[27]</sup>. The child's best interest principle can be (mis)used as a shield to defend other stakeholders' interests <sup>[28]</sup>. A consensus on the phrase is one thing but how to actualize it, is more important. It involves determining what the best interest of the child is, in every conceivable situation, entrenchment through positive legislation and the issue of enforcement <sup>[29]</sup>.

Children constitute a high-risk group often highlighted in public debates. One of the most important commitments a country can make for future economic, social and political progress and stability is to address the health and development needs of its young people <sup>[30]</sup>. Greater numbers of countries are taking action to reform laws to end child marriage and sexual abuses against girls which often result in pregnancy.

### 3. Human rights and child pregnancy

While children are in general a healthy population group, adolescence also poses new challenges to health and development owing to their relative vulnerability and pressure from society, including peers, to adopt risky health behaviour. These challenges include developing an individual identity and dealing with one's sexuality <sup>[31]</sup>.

The belief that all child pregnancies happen by chance, is not typical. A few girls effectively plan to end up pregnant by not utilizing contraception, believing that pregnancy is a genuine strength in some dicey situations. In other situations, some parents or guardians give their underaged

children out in marriage. The consequences of child pregnancy are quite grave both for the underaged mother and her child and are inimical to the best interest of the child. In 1979, the Convention on the Elimination of All Forms of Discrimination against Women stated that child marriage is illegal <sup>[32]</sup>. Many countries passed laws changing the legal age of marriage to 18 years to reduce child violations, but enforcement of these laws, and of laws requiring marriages to be registered, especially in Nigeria, are weak.

WHO study revealed that each year, about 15 million girls are married before the age of 18 years, and 90% of births to girls aged 15 to 19 years occur within marriage <sup>[33]</sup>. Age-based definition is considered as representing the most objective criterion for determining who falls within the framework of child protection policy <sup>[34]</sup>. Islam in Nigeria takes into account the natural phenomena and not the numerical age, as Abubakar argued that there is no consensus among *Ulama* as to the age of majority but puberty is the end of childhood <sup>[35]</sup>.

In Nigeria, premarital child pregnancy has increased and more underaged girls are getting pregnant. Studies have linked the menace of child pregnancy and motherhood to declining age at first menstruation (menarche), increasing premarital child sexual activity, cohabitation, age at first sexual intercourse, low educational levels, low or ineffective use of contraceptives as risk factors in child pregnancy and childbearing <sup>[36]</sup>. Other factors associated with high rate of child pregnancy in Nigeria include loss of the elders' traditional social controls over sexual behaviour of the children, the collapse of the extended family structure, societal approval of child sexual relationship and premarital pregnancy as a sign of fruitfulness before marriage, sexual abuse and rape, and the effect of globalization, modernization, and urbanization on sexuality.

Nigeria is a closeted society. Sexual issues are not discussed freely; even amongst married couples. Advocates of sex education in schools have met with stiff resistance from religious leaders who say that such education would promote immorality. Nigerian society preaches abstinence to children, ignoring the large number of children and young adults who are sexually active nonetheless, and must be taught how to manage their sex lives and sexual health.

As much as sustainable development is desired in Nigeria, the 2030 agenda requires that the welfare of the child cannot be frustrated or abandoned. Total Fertility Rate (TFR) is affected by the increase in child brides and child motherhood, increasing rate of poverty, economic imbalance and unemployment, increase in crime rates, and low level of education. Can a framework within a human rights context be created structurally to achieve the set goal of eliminating child sexual abuse and child marriage? Studies indicate that the major causes of child pregnancy are sexual abuse, child marriage and poverty. There is thus the need for a holistic approach to dealing with the menace of child pregnancy and an in-depth understanding of the contemporary challenges and implications thereof.

### 4. Law and policies on eradication of child pregnancy

It is hard to raise a child when one is still but a child. Child rights are fundamental freedoms protected by law and are the inherent rights of all children irrespective of race or sex <sup>[37]</sup>. The negative consequences of undesired motherhood, unsafe abortion, premature marriage and parenthood are colossal <sup>[38]</sup>. Child rights however, seems to be the most

isolated and marginalized concern of policy implementation<sup>[39]</sup>. Unintended pregnancy can have a devastating toll upon individual, the offspring, family and society<sup>[40]</sup>, and children are faced with violence and sexual abuse, exploitation, and harmful health practices every day.

Recognizing that the child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding, the child, by reason of her physical and mental immaturity, needs special safeguards and care, including appropriate legal protection, before as well as after birth, child pregnancy violates the right of the girl-child, to life, personal liberty, to movement, peaceful association, and her dignity. It bathes her in mental and physical torture and exposes her to uncountable discriminatory acts and inactions<sup>[41]</sup>. It frequently inhibits a child's basic rights to health, education and security<sup>[42]</sup>.

#### **4.1 The Constitution of the Federal Republic of Nigeria (CFRN) 1999 (As Amended)**

The Constitution of the Federal Republic of Nigeria (CFRN) 1999 (As Amended) confers everyone with the right to life and respect of human dignity. The Constitution also guarantees the right to freedom from discrimination on account of sex, origin and religion. The social objective of the Constitution is founded on the ideals of freedom, equality and justice<sup>[43]</sup>. The Nigerian State pledges to direct her policy towards ensuring the health, safety and welfare of all persons<sup>[44]</sup>.

The principle of social justice and equity and the ideals of freedom and opportunity as affirmed in the 1999 CFRN, the 1989 Convention on the Rights of the Child (CRC), Commitment to global and regional goals relating to child health and development such as the Millennium Development Goals (MDGs), the African Charter, and African Union's commitment to the MDGs and other values and commitments guide several policies<sup>[45]</sup>, including the National Child Health Policy 2006 which has the overall goal of ensuring the survival and healthy growth and development of the Nigerian child<sup>[46]</sup>.

#### **4.2 The Child Rights Act 2003**

The structure of the 2003 Child Rights Act (CRA) was informed by the mandate to provide a legislation, which incorporates all the rights and responsibilities of children, and which consolidates all laws relating to children in a single legislation. Apart from the factor that Nigeria is a pluralist state with multiple laws, norms and forum that co-exist to function as a legal system, there are the socio-cultural, legal, religious and economic occurrences in Nigeria; factors necessary to be considered for the practical realization of the basic rights of children under the CRA 2003.

The CRA 2003 is a comprehensive embodiment of rights seeking to protect the rights of children in Nigeria, and classified into four broad ways, namely; survival rights, development rights, participation rights and protection rights. The Nigerian Constitution makes no reference to child's rights under fundamental rights protection, and child's rights or welfare is also not listed in the exclusive or the concurrent legislative list. By implication, some states refuse to adopt laws enacted at the national level regarding children. For over 15 years, since the enactment of the CRA 2003, several states in Nigeria have failed to adopt the Child's Right Act into their state legislation.

The provisions of the Child's Rights Act 2003 supersede all other enactments on the rights of the child<sup>[47]</sup>. SS 21, 22 and 23 CRA 2003 prohibit child marriage, child betrothal and punish same in view of the simple fact that such acts violate the human rights of the child. Under the Act, no person shall have sexual intercourse with a child<sup>[48]</sup>. It is immaterial that sexual intercourse with a child was committed under the belief that the child was above 18 years, or that the child consented<sup>[49]</sup>. But despite the enactment of the Child's Rights Act 2003, realizing some of these rights by children, is not without its own challenges of impracticability.

#### **4.3 The 2007 National Policy on the Health and Development of Adolescents and Young People in Nigeria**

The 2007 National Policy on the Health and Development of Adolescents and Young People in Nigeria promotes the optimal health and development of children especially teenagers and other young persons and emphasizes the importance of access to information and youth friendly services, and encompasses reproductive health, risky behaviors, and sex education.

#### **4.4 The 2008 National Gender Policy**

The 2008 National Gender Policy brings together various gender related policies in the country and focuses on some critical areas of bringing about a change in gender perceptions and stereotypes through sensitization and cultural re-orientation; promoting women's human rights, especially related to sexual and gender based violence (SGBV); promoting the empowerment of women and integrating gender within key sectors; and supporting institutional development and building strategic partnerships. This policy directly affects the lives of young girls and their development into womanhood.

**4.5 Other policies which protect and influence the lives of young girls and the protection of their sexual/reproductive rights include the 2004 National Policy on Population and Sustainable Development (NPP) which creates room for addressing maternal and child mortality as well as HIV/AIDS, and brings in the importance of adolescents and the youth in sustainable nation building. The 2001 National Reproductive Health Policy and Strategy also provides an overarching framework for addressing sexual and reproductive health. Initiated in 2003, the Family Life and HIV Education (FLHE) Program is also one of government's efforts to improve child Sexual and Reproductive Health (SRH) outcomes in Nigeria<sup>[50]</sup>.**

The interpretation of a child's best interests must be consistent with the International Conventions, including the obligation to protect children from all forms of violence. It cannot be used to justify certain practices which conflict with the child's human dignity and right to physical integrity. An adult's judgment of a child's best interests cannot override the obligation to respect all the child's rights under the International Convention protecting the rights of children<sup>[51]</sup>. Legal prohibition is an essential element of eradication, but concerted societal and community-based action is needed to put law into effect<sup>[52]</sup>.

#### **4.6 The 1990 African Charter on the Rights and Welfare of the Child (ACRWC)**

The rights enunciated in the African Charter on the Rights

and Welfare of the Child (ACRWC) which was adopted by African Union (AU) Assembly of Heads of States and Governments in 1990 complemented or reinforced the goal of the African Charter<sup>[53]</sup>. Art 18 (3) of the African Charter on Human and Peoples' Rights 1986 and art 4 (1) of the ACRWC 1990 emphasize the protection of the right and interests of the child. Both instruments contain sets of standards and principles for survival, development, protection and participation of children. It reflects children as human beings and as subjects of their own rights. According to Emejuru and Amadi:

The best interest of the child needs to be more than 'raw judicial intuition', as art 3(1) of the African Charter on the Rights and Welfare of the Child (ACRWC) does not refer to the 'best rights', but to 'interests'; the term 'interests' being a broader concept and a precondition of rights. It implies that cultural, religious and social values and traditions will not be accepted, where they impede internationally protected rights of children, and in this case, the girl child<sup>[54]</sup>.

The ACRWC 1990 prohibits marriage under 18. Being more detailed the regional instrument advocates that States Parties take all appropriate measures to eliminate harmful social and cultural practices affecting the welfare, dignity, normal growth and development of the child<sup>[55]</sup>.

#### **4.7 The 1989 Convention on the Rights of the Child (CRC)**

In all actions concerning the child undertaken by any person or authority, the best interests of the child is the primary consideration<sup>[56]</sup>. Other than the 1948 Universal Declaration of Human Rights (UDHR)<sup>[57]</sup>, in 1959 the United Nations adopted the Declaration on the Rights of the Child (DRC), which affirmed the rights of children everywhere to receive adequate care from their parents and the community<sup>[58]</sup>. The United Nations Convention on the Rights of the Child (CRC) was finally adopted on 20th November 1989. This provided an enabling environment for the United Nations to make attempts to consolidate the international law on the basic rights of children to survival, education, improved health conditions and protection from all forms of abuse and exploitation.

The CEDAW 1979 and General Recommendation No. 21 (1994) of the Committee on the Elimination of Discrimination against Women prohibits child marriage, and sets 18 years as the minimum age for marriage for both men and women. The CRC and the CEDAW, the ACRWC, and the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol) have specific references also, to harmful practices<sup>[59]</sup>.

#### **5. Children having children: Consequences of Child Pregnancy**

An individual is a victim regardless of whether the perpetrator of the violation is identified, apprehended, prosecuted or convicted, and regardless of any familial or other relationship between the perpetrator and the victim. 'Victim' also extends to include affected immediate family or dependents of the victim as well as persons who have suffered harm while intervening to assist victims or to prevent victimization<sup>[60]</sup>. It is apposite to state that the lives of children are threatened in Nigeria, where incidences of sexually transmitted infections (STIs), unwanted pregnancy, unsafe illegal abortion and child marriage are widespread<sup>[61]</sup>.

Nigeria has recorded several cases of child sexual abuses, sexual exploitations, rape, molestations, forced child marriages, child pregnancy etc, with little measures executed towards preventing future occurrences. We seem to prefer the road of a continuous pursuit and punishment of perpetrators, rather than addressing the root of all such social harms that lead to child pregnancy. Child pregnancy is one of the main issues in every health care system and women who are married before the age of 18 tend to have more children than those who marry later in life and many young women get married before the age of 18<sup>[62]</sup>. Factors that are associated with child pregnancy include rapid urbanization, low socioeconomic status, low educational and career aspiration, residence in a single parent home and poor family relationship<sup>[63]</sup>.

The consequences of child pregnancy are gigantic and inimical to the wellbeing of the population as well as to development in the broad spectrum<sup>[64]</sup>. The medical, social and economic cost of unplanned child pregnancies can be devastating to mothers and their children. The effect of child pregnancy is not only on the child-mother, the effect on her child could also be devastating. Child pregnancy could lead to incomplete education, unemployment and other numerous emotional traumas. Early motherhood affects the psychological development of the child adversely<sup>[65]</sup>. Apart from psychological challenges, physical risks cannot be ignored. A girl's body is not as developed as adult women in terms of childbearing and she often faces certain complications during pregnancy<sup>[66]</sup>.

Where contraceptives are widely available sexually active children hardly and rarely use contraceptives than adults. Children can barely afford the available contraceptives, while majority lack sexuality education. The medical, social and economic cost of unplanned child pregnancies can be devastating to mothers and their children. Underaged mothers are more likely to have medical complications during pregnancy and prolonged labor. Their babies are more likely to be born prematurely and to have low birth weights. These are caused by inadequate pre-natal care and poor nutrition often experienced by child mothers living in conditions of poverty<sup>[67]</sup>. Obstetric complications can also occur in teen mothers due to their body not being fully developed physically to sustain a healthy pregnancy or to give birth.

Underaged mothers are less likely to receive prenatal care, often seeking it in the third trimester, if at all (for fear of stigma or ridicule). Underaged brides are likely to become pregnant at an early age and there is a strong correlation between the age of a mother and maternal mortality. Very young mothers face higher risks during pregnancies including complications such as heavy bleeding, fistula, infection, and anemia which contribute to higher mortality rates of both mother and child.

Amongst the most troubling consequences of child pregnancy and motherhood is dislodgement in education and schooling<sup>[68]</sup>. Child pregnancy and unwanted births are major contributors to maternal and childhood mortality, the vicious cycle of ill-health, poverty, and truncated educational opportunities<sup>[69]</sup>. For girls, experiencing pregnancy while still at school often means facing harsh social sanctions and difficult choices that have life-long consequences. Becoming pregnant could mean expulsion from home and school; vulnerability to early marriage; being shamed and stigmatized by family, community

members and peers; increased vulnerability to violence and abuse; and greater poverty and economic hardship <sup>[70]</sup>.

At the social and political levels, child pregnancy may be a contentious issue, with the rights to health, education, dignity and gender equality paramount, especially for girls and young women. Greater clarity is needed relating to the evidence and priority actions required by policy-makers, advocates, programme developers, implementers and other stakeholders to tackle this issue. Child pregnancy is a social as well as an economic issue as it portends low education and employment, high rate of poverty and the psycho-social stigma. The correlation between child pregnancy and failure to complete high elementary school reduces career opportunities for many young mothers <sup>[71]</sup>.

Preventing child pregnancy ought to be the collective effort of all stakeholders, including individuals, parents, communities, the media, government and the law. A number of researches have shown that age-appropriate sex education and access to modern contraception are indispensable in averting child pregnancies <sup>[72]</sup>. From health consequences of child marriage to isolation and depression, risk of sexually transmitted infection and cervical cancer, risks during pregnancy, risks during labor and delivery, risks for infants, to mental, educational, social and economic disadvantages, the consequences of under aged girls sexual relations, which includes child pregnancy and under aged motherhood, abortions and STIs, can be devastating to the girls, their parents and guardians <sup>[73]</sup>. Child pregnancy in Nigeria is usually outside of marriage, which carries a social stigma in many communities and cultures. However, many girls in Nigeria are often married and their pregnancy becomes welcomed by family and society, as almost everyone - educated or not, seems to turn a blind eye as soon as the bride price is paid.

Child mothers are less likely to graduate from secondary school or attend higher institutions of learning except in the midst of family, social and financial support. The lack of educational achievement makes it more difficult for them to obtain adequate employment. They have a lower standard of living and are more likely to require public assistance. The young mother can become easily frustrated with all the incidental challenges and find violence or suicide as the way to overcome grief <sup>[74]</sup>. These consequences exist in most circumstances irrespective of the marital status of the child. Accordingly, conditions inimical to the development of the child in all considerations cannot supersede the best interest of the child.

Discussing child pregnancy involves identifying the issues which hinder positive and inclusive elimination of the menace, or at the least, reduction of the rate of child pregnancy in Nigeria, which is apposite if sustainable human and societal development is to be achieved. Most parents in Nigeria due to cultural and traditional norms find it difficult to engage or involve their children who are of child age in sex and sexuality education. These cultural and traditional norms are so strong that children who have not attained puberty do not know the proper names of their sex or reproductive organs.

Educational level of the parents <sup>[75]</sup>, lack of communication between parents and their children <sup>[76]</sup>, the 'it won't happen to me' syndrome of some girls, poor attitude to the use of contraceptive devices, sexual abuse, inspirational approaches from associates or friends, hormonal urge to have sex, rebellion against authority, irresponsible and

unguided way of interacting with the opposite sex, lack of role models, chaotic life style, poverty as a result of low economic background etc, influence the spread of the menace. Oke expressed that poverty has dual dynamics in child pregnancy. Being a determinant as well as a consequence of child pregnancy especially in developing countries, many of the individual and environmental risk factors that are determinants of child pregnancy may be tied into experiences of poverty <sup>[77]</sup>.

Girls with better and higher education up to secondary level are less likely to marry as children than girls with few years of schooling <sup>[78]</sup>. Drugs and alcohol that removes inhibition can easily trigger and encourage unintended sexual activity <sup>[79]</sup>. Girls that are often exposed to abuse, domestic violence and family strife are most likely to become pregnant as children, and the risk of getting pregnant as a child increases with several adverse childhood experiences <sup>[80]</sup>. There is also the influence of media as a factor for child pregnancy <sup>[81]</sup>. Sustainable Development Goal (SDG) 2 is enshrined as a right in art 28 and 29 of the CRC as well as other conventions such as CEDAW and CRPD. It is a driver of gender equity, poverty reduction, empowerment, peaceful and inclusive societies and economic growth.

## 6. Conclusion

Law can promote development and at the same time, it can inhibit it. Law must be in harmony with development and must be able to address social problems. Pregnancy takes physical, social, physiological and emotional preparation to accomplish, and the child girl may become pregnant as a result of many factors and conditions, including rape, marriage and consensual dating relationships. Child pregnancy is a public health issue and could be effectively addressed only when integrated healthcare interventions and proper education are involved. It is also very important regarding sex education that teachers, school nurses and other agencies work together effectively and inform parents about the content of sex education programmes that should be implemented.

Whether a boy or a girl, children must be aware of the consequences of unwanted pregnancy, and people must be made aware of the existing rights of the girl child, while she learns how to prevent unwanted pregnancy and shares this information with friends. Society must also learn to be understanding of girls who become pregnant and encourage them to continue their education. In order to act adequately on information or data gathered, children need to develop the skills necessary, including self-care skills at an early age, skills for dealing with particular social situations such as interpersonal communication, decision-making, and coping with stress and conflict.

Not only does child pregnancy affect the girl child and her family or society, it protracts the population problem facing the country and achievement of sustainable development goals. It is on the basis of this and more, that a new national management strategy to tackle the issue of child pregnancy must be established. It is evident that there is no magic bullet to collapse the menace of child pregnancy. Given the multiple levels of predisposing factors concerning the problem, a single intervention strategy by a single sector will not resolve the existing and emerging issues which continue to infringe on the human rights of the girl child. Nevertheless, by specifically addressing and elaborating greater standards around the unique role that gender plays in

girls' access to sexual and reproductive health services and how lack of access to such services perpetuates inequalities and discrimination against girls, Nigeria must recognize that the failure to ensure girls access to a full range of sexual and reproductive health services violates their rights to substantive equality and nondiscrimination, and shield them from the ability to protect themselves from further abuse.

It is anticipated that enriched understanding of the factors associated with child pregnancy and child bearing will lead to better social policies, improve cultural and religious restrictions on the rights of girls, and whittle down the causes of the increasing rate of child pregnancy. Girls and women have always borne the brunt of a fundamentalist vision, for in the dailies of a woman's life she can lay claim to no identity of her own, constantly having to deny and subsume it to the interests of her family, community and nation.

Child pregnancy is an issue that cannot be solved in legal isolation as it results from a complexity of social, cultural and economic dimensions and widespread gender discrimination. Ending its occurrence requires collective efforts on all fronts, addressing the underlying determinants. The truth remains that if children are not open to reproductive and sexual health services, all other major attempts at curbing the menace would achieve a slow growth. We need not continue to plan and design policies in denial of the growing wave of sexual activities amongst children and with underaged girls

## 7. Recommendations

It is recommended as follows:

1. We require a comprehensive approach that can incorporate the home, the school, the healthcare system, the community, the government as well as change at structural and non-structural levels. Government must ensure that girls have the opportunity and are actively encouraged to continue their education if they become pregnant while still at school. Ensure these strategies have adequate resources, trained teachers and a supportive environment that is responsive to the needs of the child.
2. The media can produce features and editorials on the importance of ensuring young Nigerians have access to advice on reproductive health and the means to prevent unwanted pregnancy – through life skills education and youth friendly health services. Use the appeal of popular youth programmes on radio, including local radio, to help young people learn about preventing unwanted pregnancy, and draw attention to youth-friendly health services where these exist and campaign for more to be established.
3. Sex education as a necessity should be initiated in society as early as 5 years of age and appropriate messages should be designed for specific age group to be included in the school curriculum. There is the need for legislation to compel all schools in the country to create the right environment within the school system that will be conducive for underaged mothers. This environment will encourage these girls to continue with their schooling. The home and school environments should be protective enough to shield the children from exposure to negative influences, by parents and teachers been concerned about the well-being of the girl child through education about sex and sexuality and the danger inherent.
4. Abolish the legal prohibition of termination of pregnancy (abortion) under the criminal laws, which affects the human rights of the girl-child. Effectively enforce laws to punish perpetrators of coerced sex, promote community norms that do not tolerate coerced sex and engage men to re-examine gender norms. Religious leaders should tackle the problem of child unwanted pregnancies through moral instructions in churches and mosques and motivational centers or gatherings.
5. Federal and state governments can contribute in the effort to reduce child pregnancy by providing stable funding for comprehensive educational and support services to pregnant and parenting girls. Bring all local legislations and policies in conformity with international treaties, taking into account the recommendations from Treaty Bodies, and the provisions of the Nigerian Child Rights Act 2003, on the minimum age of marriage.
6. Gaps and inconsistencies in the national legal framework should be addressed to ensure that there is a strong and coherent legal framework prohibiting gender discrimination. Setting and enforcing a uniform minimum legal age for marriage is necessary to protect girls. The Judiciary and law enforcement agencies need to identify and prosecute all parties involved in child marriages and betrothals. Encourage judicial activism and declarations identifying the right to safe termination of pregnancy and safe health practices as a basic human right in Nigeria.
7. Raise awareness on the illegality of child marriage and need to promote gender equality which helps in changing people's attitudes and perceptions toward early marriage. This requires public education and awareness about the dangers of child marriage, the laws in place and more generally about the gender norms and stereotypes that perpetuate this practice. Saving family honor, which is linked to preserving girls' virginity and eliminating the possibility of premarital affairs is a reason some families marry off their daughters at a young age. Efforts to eliminate child marriage should go hand in hand with efforts to protect girls from the risk of sexual harassment and rape.
8. Strengthening child protection mechanisms at national and local level through adequate resources and coordination between different stakeholders should be an integral part of efforts to eliminate child marriage. National and community-based child protection systems should be promoted to provide a comprehensive, sustainable and coordinated solution to protect all children. An effective system consists of a set of laws and policies which comply with the UNCRC, a central Government coordination mechanism with a clear mandate to prevent and respond to child protection concerns, adequately funded child protection services, regulations and monitoring at all levels, a committed workforce with competence and mandate, data collection and awareness-raising. Improving birth and marriage registration systems is critical for eliminating child marriage, as well as child pregnancy.
9. Poor families often consider girls as an economic burden and they want to marry off their daughters as soon as they reach puberty. The combination of poverty and gender-based discriminatory norms and practices, such as the dowry and exorbitant marriage lists/bride price,

increases the vulnerability of girls to early marriage, and abuses in such homes. Thus providing girls with livelihood opportunities can help reduce child marriages. When young girls can work and are able to earn money, they have greater control over their futures, more options when it comes to delaying marriage and childbirth, higher status within the family, and improved ability to provide for themselves and their children.

10. Improve access to youth-friendly sexual and reproductive health services as well as access to contraception. Healthcare providers, teachers, parents, community leaders and other influencers need to be willing to counsel young people on sexual health without discrimination or judgment, as well as provide accurate information about family planning options. Address cultural taboos surrounding youth and sexuality. Some parents may lack the knowledge to talk to their children about sexual health and health providers may be morally opposed to providing contraception to young people if they believe they should not be having sex. As a result, young people may be afraid to be seen seeking contraception due to judgmental and disrespectful attitudes of health providers or fears about confidentiality. Others may be afraid to use condoms for fear of being thought of as promiscuous. Thus we need to educate the society on the right of child sexual health.
11. Children have the right to access adequate information essential for their health and development and for their ability to participate meaningfully in society. This should include information on the use and abuse of tobacco, alcohol and other substances, safe and respectful social and sexual behaviors, diet and physical activity.

Joint actions to ensure that all arms of government and health and education services institutions work harmoniously and effectively in implementing policies about sex, health and education. Furthermore, they also need for encouragement of victims of the menace, and support them through the hard times and to also help them reach their goals after pregnancy. Parents, teachers, school counselors, social workers and peer support groups should provide them with the needed support to help them complete their education and skills development programs.

## 8. References

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