

The impact of the COVID-19 pandemic on adolescents' sexual and reproductive health in Mexico

Mitzi Ramírez Fragoso¹, Gabriela Mejía-Paillés^{1,2}, Maricruz Muradás Troitiño¹

¹National Population Council of Mexico

²ESCR Centre for Population Change, University of Southampton

Short Abstract

Adolescents (15-19 years) are a priority group for attention in terms of their sexual and reproductive health and rights (SRHR). However, the COVID-19 pandemic is having enormous consequences on the lives of adolescents around the world. In Mexico, despite the downward trend in fertility since the introduction of contraception methods in the 1970s, the adolescent fertility rate (AFR) has been stagnant during the past decades. Contraception prevalence among adolescents has remained low compared with older age groups of women. The main objective of this paper is to estimate the impact of the COVID-19 pandemic on a series of indicators of sexual and reproductive health among adolescents in Mexico. Applying the adding-it-up methodology to data from the Mexican Surveys on Demographic Dynamics 2014 and 2018, we estimated the increase in unmet need for contraception among adolescents, as well as their additional number of unintended pregnancies and births due to the pandemic in 2020. Preliminary findings indicate that unmet for contraception among adolescents in Mexico increased by nearly 40%. This implies nearly 2 in 5 adolescents with unmet need in 2020 due to the pandemic. Moreover, AFR could increase by 5.3% due to the pandemic, from an estimated value of 67.7 to 71.5 births per 1000 adolescents.

Extended Abstract

Introduction and justification

The COVID-19 pandemic is having enormous consequences on the lives of adolescents around the world, not only by limiting or depriving them of educational and labor opportunities, but also by limiting their access to health, including sexual and reproductive health services (SRHS). Even before the COVID-19 pandemic, adolescents, and young people from low- and middle-income countries have experienced inequalities that have persisted for decades when it comes to their sexual and reproductive health and rights (SRHR) (Sadinsky et al., 2020). These gaps are getting even worse as a consequence of the current pandemic, leaving the most vulnerable adolescent and young people in a more precarious condition (Sadinsky et al., 2020).

In Mexico, the downward trend in fertility since the introduction of contraception methods in the 1970s and the impressive achievements made up to the end of the 1990s, have been widely documented (Mier y Terán, 2011; Mier y Terán y Partida, 2001; Welti, 2014; Zavala de Cosío, 1992), level that currently places the country at replacement level (2.1 children per woman) (CONAPO, 2020). However, it should be noted that these declines have occurred in a context of great inequality, generating very heterogeneous patterns in fertility among the different sectors of the population (Páez and Zavala, 2016). On the one hand, the better off socioeconomic groups are characterized by a late fertility calendar and with less intensity, while the less privileged socioeconomic groups present an early fertility calendar, usually with a much higher intensity.

Despite these gains in terms of fertility decline, adolescent fertility remains a concern in the country. Adolescent fertility rate (AFR) has been stagnant during the past decades. In 2000, the AFR was estimated at 77.1 births per 1000 adolescents, decreasing to 74.3 in 2015, a decrease of only 5% in a 15-year period. This decrease was significantly smaller compared to the ones observed on the rest of the age groups.

Faced with this situation, in 2015 the Government of Mexico launched the National Strategy for the Prevention of Pregnancy in Adolescents - ENAPEA, for its acronym in Spanish-, embedded in a framework of human rights, including sexual and reproductive health and rights (SRHR). In the first five years since the ENAPEA began to operate, the rate has decreased from 74.3 births per thousand adolescents in 2015 to 68.5 in 2020. It is undoubtedly an important advance, but it remains a higher rate, even compared with countries with similar socioeconomic level in the Latin-American region.

Moreover, despite the government efforts, unmet need for contraception among adolescents remains extremely high. In 2018, it was estimated that nearly 1 in 3 adolescents were not using contraception despite being sexually active and not wanting a child within the next 2 years (estimated at 29.2%).

Adolescents (15-19 years) are a priority group for attention in terms of their SRHR. However, it has been observed that their sexual activity has not decreased because of the pandemic (Gutmacher, 2020). Adolescents are facing greater barriers to confidential sexual and reproductive health care and accurate information. The closure of schools has significantly affected them, as they have not been receiving adequate information on SRH or accurate information on where to go for counseling and contraceptive methods. In Mexico, it is estimated that 21% of students in secondary education and 8% in high school (ENCOVID-ED)¹ drop from education due to the pandemic in 2020 (INEGI 2020).

Hence, the main objective of this paper is to estimate the impact of the COVID-19 pandemic on series of indicators of sexual and reproductive health among adolescents 15-19 years in Mexico.

Data and Methods

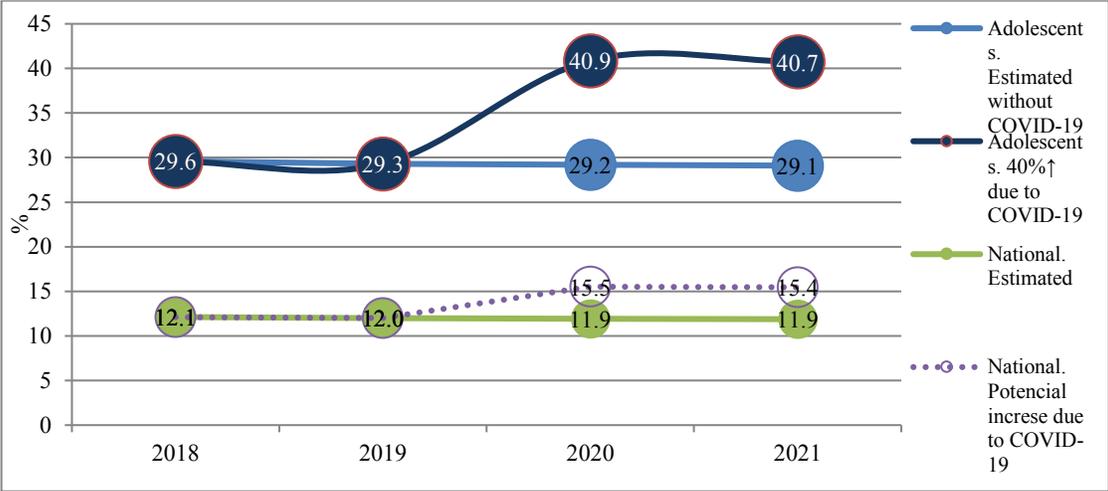
We used official records of the Ministry of Health regarding the number of consultations in adolescent friendly services between 2019 and 2020 to estimate the drop in access to contraception among this age group due to the pandemic. By applying the “Adding it up” methodology, described in Darroch, Sully and Biddlecom (2017), we used the most recent annual data from the National Survey of Demographic Dynamics (ENADID, for its acronym in Spanish) in its 2014 and 2018 versions (INEGI, 2014 & 2018). In addition, we used data coming from the Population Projections of Mexico, 2016-2050 (CONAPO, 2018), to estimate 3 indicators: 1) the additional number of adolescents with unmet need for contraception, 2) the additional number of unplanned pregnancies, and 3) the additional number of unintended births that could be added due to the COVID-19 pandemic among adolescents in 2020.

Results

¹ https://www.inegi.org.mx/contenidos/investigacion/ecovided/2020/doc/ecovid_ed_2020_nota_tecnica.pdf

Preliminary findings show that unmet need for contraception among adolescents increased from an estimated value of 29.2% in 2020 to 40.9% due to COVID-19. In other words, unmet need for contraction rose by 40% among adolescents 15-19 years as a consequence of the pandemic (figure 1). According to the estimates, with a 40% increase in unmet need for contraception among adolescents, it is estimated that 141,856 additional women between 15 and 19 years were added to having unmet contraception needs in 2020. This figure was added to the already 354,645 adolescents with unmet need that were estimated before the pandemic in 2020, implying that nearly half a million adolescents 15-19 years (496,501) had unmet need for contraception in 2020 in Mexico due to COVID-19.

Figure 1. Unmet need for contraception, Mexico 2018-2021

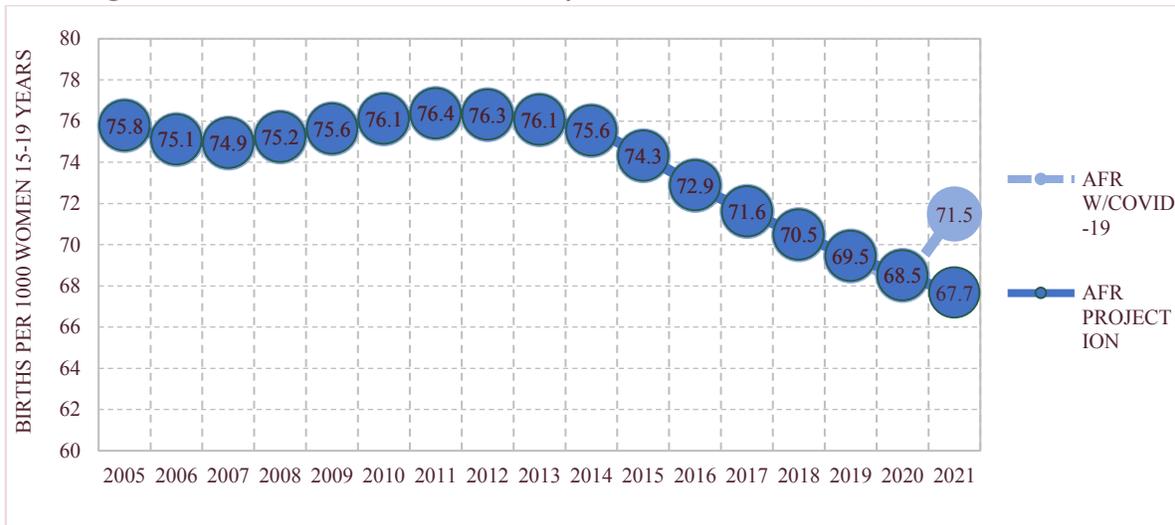


Source: Authors' calculations.

This additional number of adolescents with unmet need imply that with the pregnancy rates estimated among adolescents with unmet need, in addition to the pregnancy rates estimated in adolescents using contraceptive methods who had contraception failure, it is estimated that it led to an additional 21,588 unintended pregnancies if unmet need for contraception were to increase by 40% due to the pandemic in 2020 among adolescents. These pregnancies would be added to the estimated 85,019 unintended pregnancies estimated before the pandemic among adolescents in 2020 with unmet need and contraception failure, for a total of 106,607 unintended potential pregnancies in 2020 among women aged 15-19 years with contraceptive method failure and unmet need. Moreover, based on the fertility rates of these same adolescents (with unmet need and with failure of the contraceptive method), there could potentially be 19,183 unintended births with an increase in unmet need of 40% among adolescents due to the current COVID-19 pandemic – most births are expected to occur in 2021 given the 9-month gestation period. These additional unintended births would be added to the 79,148 births that were expected without the pandemic, for an estimated total of close to a 100 thousand (98,331) unintentional births in 2021 among adolescents in Mexico.

Given the increases in the number of adolescents with unmet need for contraception, it is expected that the projected age specific fertility rate for adolescents 15-19 years before the pandemic of 67.7 births per 1000 adolescents in 2021² will increase to 71.5 births per 1000 adolescents 15-19 year due to pandemic (figure 2), i.e., an increase of 5.3%, reverting part of the progress achieved by ENAPEA since it was launched 2015.

Figure 2. Estimated Adolescent Fertility Rate due to COVID 19, Mexico 2015-2020



Source: Authors' calculations.

Concluding Notes

Our results showed that COVID-19 is worsening unmet need for contraception among adolescents in Mexico, which, pre-pandemic, was already very high in this age group. If adequate and timely public policies are not implemented in this health emergency, significant setbacks could be observed, that is a significant number of additional unintended births, with unfavourable consequences for both the mother and the new-born. Hence, it is of utmost importance to ensure that the response to COVID-19 does not perpetuate inequalities in SRH in the country. The results presented in this paper suggest the need to conduct further studies on the barriers faced by adolescents to achieve their reproductive goals, in general, as well as in the context of a global health crisis, like the current COVID-19 pandemic.

References

- Ahmed, Z. (2020). COVID-19 Could Have Devastating Effects on Adolescents' Sexual and Reproductive Health and Rights. Guttmacher Institute.

² Given the 9-month gestation period, additional births are expected to occur in 2021.

- Ahmed, Z. & A. Sonfield (2020). The COVID-19 Outbreak: Potential Fallout for Sexual and Reproductive Health and Rights. Guttmacher Institute. Retrieve from (May 2021): <https://www.guttmacher.org/article/2020/03/covid-19-outbreak-potential-fallout-sexual-and-reproductive-health-and-rights>
- Bettinger-Lopez, C. & Bro, A. (2020). A double pandemic: Domestic violence in the age of COVID-19.
- Chandan, J. S., Taylor, J., Bradbury-Jones, C., Nirantharakumar, K., Kane, E. & Bandyopadhyay, S. (2020). COVID-19: a public health approach to manage domestic violence is needed. *The Lancet Public Health*, 5 (6), e309.
- Chakraborty, I. & Maity, P. (2020). COVID-19 outbreak: Migration, effects on society, global environment and prevention. *Science of the Total Environment*, 138882.
- CONAPO (2018). Tasa Específica de Fecundidad y Nacimientos, 1950-2050. Datos Abiertos. Retrieve from (May 2021): <https://datos.gob.mx/busca/dataset/proyecciones-de-la-poblacion-de-mexico-y-de-las-entidades-federativas-2016-2050/resource/d78a002f-c3ba-4170-be9f-fcd33e94e754>
- CONAPO (2021). Situación de los derechos sexuales y reproductivos. República Mexicana.2018. Consejo Nacional de Población. México. Retrieve from (May 2021): https://www.gob.mx/cms/uploads/attachment/file/634858/Situacion_de_los_derechos_sexuales_y_reproductivos_2018_RM_030521.pdf
- Darroch, J. E., Sully, E. & Biddlecom, A. (2017). Adding It Up: Investing in Contraception and Maternal and Newborn Health, 2017—Supplementary Tables. New York, NY: The Guttmacher Institute.
- INEGI (2014). Encuesta Nacional de la Dinámica Demográfica (ENADID) 2014. Recuperado de: <https://www.inegi.org.mx/programas/enadid/2014/>
- INEGI (2018). Encuesta Nacional de la Dinámica Demográfica (ENADID) 2018. Recuperado de: <https://www.inegi.org.mx/programas/enadid/2018/> INEGI (2020). Encuesta para la Medición del Impacto COVID-19 en la Educación (ECOVID-ED). 2020 NOTA TÉCNICA.
- Johnson, K., Green, L., Volpellier, M., Kidenda, S., McHale, T., Naimer, K. & Mishori, R. (2020). The impact of COVID-19 on services for people affected by sexual and gender-based violence. *International Journal of Gynecology & Obstetrics*, 150 (3), 285-287.
- Mier y Terán, M. (2011). La fecundidad en México en las últimas dos décadas. Un análisis de la información censal. *Coyuntura demográfica*, 1, 57-61.
- Mier y Terán, M. & Partida, V. (2001). Niveles, tendencias y diferenciales de la fecundidad en México, 1930-1997. José Gómez de León y Cecilia Rabell (coords.), *La población en México. Tendencias y perspectivas sociodemográficas hacia el siglo XXI*, México, Conapo/Fondo de Cultura Económica, 168-203.
- Páez, O. & Zavala, M. E. (2016). Tendencias y determinantes de la fecundidad en México: las desigualdades sociales. En: *El Colegio de México, El Colegio de la Frontera Norte*.
- Sadinsky, S., Jarandilla-Núñez, A., Nabulega, S., Riley, T., Ahmed, Z. & Sully, E. (2020). From Bad to Worse: The COVID-19 Pandemic Risks Further Undermining Adolescents' Sexual and Reproductive Health and Rights in Many Countries. Guttmacher Institute, June, 24.
- UNFPA (2020a). El impacto de COVID-19 en el acceso a los anticonceptivos en América Latina y el Caribe. UNFPA. (2020b). Impacto del COVID-19 sobre el acceso a anticonceptivos en México.
- Welti, C. (2014). Cambios recientes de la fecundidad en México. Estimaciones y problemáticas no resueltas. En José Luis Ávila, H. H. Bringas, & J. N. Robles (Coords.), *Cambio demográfico y desarrollo de México* (pp. 123-189.). Mexico: UNAM.

- Zavala de Cosío, M. E. (1992). Cambios de fecundidad en México y políticas de población. México: FCE-El Colegio de México.