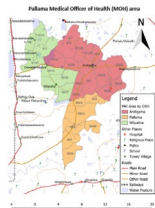


Early identification and targeted contraceptive interventions as teenage pregnancy prevention strategy in Sri Lanka

REDUCING TEENAGE PREGNANCIES IN THE PALLAMA MEDICAL OFFICER OF HEALTH (MOH) AREA THROUGH EARLY IDENTIFICATION AND CONTRACEPTIVE INTERVENTIONS: A CLINICAL AUDIT (2023–2024)

Background: Teenage pregnancy remains a significant public health concern globally. Although Sri Lanka's national rate declined from 4.85% in 2016 to 3.6% in 2023, the Pallama MOH area consistently reported higher rates (5.6%–8.1%). In 2023, Pallama recorded the one of the highest teenage pregnancy rates in the Puttalam district (7.3%), compared to the district average of 5.7%. Implementation of comprehensive sex education, a key preventive strategy, was limited by socio-political constraints.



Methods:

Targeted intervention was introduced in 2024, focusing on early identification of teenage couples with relatives, community groups, governmental officials. Public health midwife (PHM) visited the couples and sent for newly married couple registration. At the time of initial meeting, PHM identified the need for emergency contraception or short-term contraceptives.

Contraceptive counselling was carried out focusing on the importance of having Long-Acting Reversible Contraceptives (LARCs). Identified teenage couples were closely followed up by PHM. Monthly monitoring of PHMs' work performance on identification of teenage couples and teenage pregnancies and a knowledge improvement session was carried out for PHMs by MOH.

Monthly follow up and knowledge improvement sessions were carried out for PHMs. These include discussion on each incident of teenage pregnancies. Key indicators for clinical audit included the number of teenage pregnancies, contraceptive use, and LARC uptake. Descriptive analysis was used to compare trends before and after the intervention.

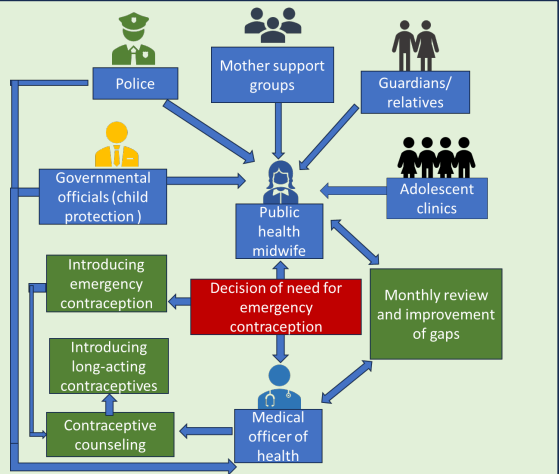


Figure 1: The process of identification and introduction of contraceptives to teenage couples: Step1 – Identification of risk teenagers with community network, Step2 – Immediate actions to prevent a pregnancy, Step3 – Long-term actions to prevent pregnancy including contraceptive counselling and LARCs.

Results

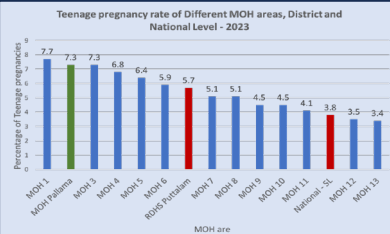


Figure 2: percentage of teenage pregnancies prior to the intervention

	2023	2024
No of teenage couples registered	53	43
No of teenage pregnancies	31	04
Number of contraception offered	30	30
Type of contraception offered		
OC ¹	13	10
Condoms	05	00
DMPA	05	00
Implant	00	09
Jadella	06	03
IUCD	02	01
Number of contraception failures	00	00



Figure 4: Comparison of National, District and MOH level teenage pregnancy rates From 2016 to 2023, teenage pregnancy rates in Pallama exceeded national and district averages. Following the intervention, the rate dropped to 0.9% in 2024 (4 cases), the lowest in the Puttalam district (district average: 5.3%). The reduction was statistically significant compared to 2023 ($p < 0.001$), the national rate ($p < 0.001$), district rate ($p < 0.001$), and other MOH areas ($p < 0.001$).

Recommendations: Targeted, community-based interventions—especially improved access to contraceptive counselling and LARCs—has led to a substantial reduction in teenage pregnancies in the Pallama MOH area. This success highlights the effectiveness of localized reproductive health strategies in settings where formal sex education is not feasible.

Limitations: The study was limited by its short follow-up period, reliance on PHM-reported data, and potential underreporting due to social stigma and legal constraints. Absence of a control area and socio-cultural sensitivities may also have influenced the observed outcomes. However, the data accuracy was maintained with all the necessary measures.

