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Abstract

As an effort to understand the alarming increase in teenage pregnancy in Sarawak Borneo, the study focuses on determining socio-cultural and psychological factors which contribute toward pregnancies among young girls. Collecting stories and narrative data on issues that are deemed sensitive and hidden were the known challenges of the study. An interview protocol was developed to enable the extraction of stories and information from a group of protected young women who have experienced pregnancies at a young age and currently living under protective custody. The instrument consists of six main sections – Respondent’s background, presenting the case, cognitive stage of the respondent, emotional stage of the respondent, attachment with family members and future planning. Using locally known socio-cultural beliefs and values surrounding the concept of pregnancy, gamifying the protocol was a necessary approach in the design phase, to allow for ease-of-use, efficiency, memorability, and subjective satisfaction in collecting sensitive data. The paper explains the design process which highlights the empathetic considerations which relate to local cultural beliefs and values.

Keywords

Pregnancy, Data, Gamified.

Introduction

Malaysia records 18,000 teenage pregnancies each year. Out of this number, 25% or about 4,500 cases involve pregnancies out of wedlock (Sulaiman, Othman, Razali & Hassan, 2013). The state of Sarawak, which is located on Borneo Island, has been reported to have
the highest number of teenage pregnancies in Malaysia. The statistic has shown the increased number with more than 10% which is from 48.5% in 2015 to 63.3% in 2019 (Sarawak Voice, 2019), and a total number of 623 cases in Sarawak was recorded in April 2020 (Sarawak Tribune, 2020). This has led to school dropouts accounted for almost 100% of unmarried teenage pregnancy (Sarawak Voice, 2019). In 2018, Kuching recorded 556 cases which is an increase of 184 cases (or 49.5 per cent) from the previous year. However, the data only represent cases that are reported in the state government clinics and hospitals. The actual number of cases may be higher if the numbers are combined with the actual cases of teenage pregnancy that are not registered in government clinics and hospitals (Panting et al, 2019).

Among the common reasons which have been cited for the rise in teenage pregnancy cases are rural-urban migration issues that involved single ladies in search for better opportunity migrants from rural areas in Sarawak due to poverty which led them to become unwed mothers, dysfunctional family relationships, flaws in Marriage Customary Law (Adat), alcohol and drug abuse, low awareness on sexual and reproductive health and indulgence in pornography (Albeny et al., 2019).

The contention of the study is to construct an interview protocol that is designed with cultural awareness values within its contents. Constructing the interview protocol as an instrument to collect data among a group of vulnerable female youths is a challenge because of the stigma and cultural perceptions around teenage pregnancy. Muniswaran et al. (2012) revealed that 62 per 1,000 live births in Sarawak General Hospital, Kuching were among young girls who were 43.8% unwed. It is a worrying phenomenon, as the number of inflicted groups of youth increases each year. To understand the issues faced by young people, the study uses the known causes of teenage pregnancies to construct a culturally sensitive interview protocol. The protocol is intended as a comprehensive investigation tool for qualitative researchers to collect personal stories and narratives from victims.

In the preliminary phase of the study, perspectives of young female victims who are currently under protective care in a shelter in Kuching. Insights are also sought from caregivers and parents, to understand how victims survive after their ordeals. Specifically, to understand their levels of attachment, religious affinity and psycho-social influences, the interview protocol takes into consideration the complex cultural and social backgrounds they come from. The interview protocol is meant to encourage participants to tell their stories a layer at a time. The target respondents are young women who are currently housed under protective custody at a shelter centre in the outskirts of the capital.
There are only two such shelters in the state of Sarawak, one for males and one for females. Interviews are conducted with the young women, their caregivers at the shelter, and their parents, where permissible.

In the past, many studies have developed interview protocols for qualitative research design. Among the most prominent are those by Jacobs and Furgeson (2012) and Castillo-Montoya (2016). Interview protocols are commonly developed to ensure the interview questions are aligned with the intended research questions and the interview would be structured on an inquiry-based conversation. In this study, a culturally sensitive interview protocol is developed to enable the investigation of the lives of young girls who have fallen victim to various incidences which led to pregnancy. It is important to capture in-depth narratives from these young mothers, to determine the types of support that could be designed to guide them through the rest of their lives. The complex experiences of the interviewees provide crucial information for a study. Patience, time, and effort on the part of the researcher must be carefully orchestrated to obtain the data from interviewees. As Seidman (2013) described:

The purpose of in-depth interviewing is not to get answers to questions… At the root of in-depth interviewing is an interest in understanding the lived experiences of other people and the meaning they make of that experience…. At the heart of interviewing research is an interest in other individuals’ stories because they are of worth. (Seidman, 2013).

Background of the Study

The frequency of teenage pregnancy among youth is an important public health issue. It is alarming and has become more or less a fact of life in many nations of the world including Malaysia. In a predominantly traditional yet progressively technology-equipped society, getting pregnant at a young age remains both culturally deleterious and personally destructive. The gradual departures from the traditions, customs, and religious doctrine of the different ethnic groups on the premise of civilization have been largely responsible for this. The infiltration of social media networks has enabled platforms for young people to be seduced to sexual acts with people know or strangers. Driven by poverty, lack of parental attention, lack of physical space at home to grow and lack of perspectives about planning their futures, young girls become susceptible to the life-changing issue.

There is a call for action from the Social Development Council for a reduction in the number of cases by 10 per cent every year as their key performance indicator (KPI). In the context of Sarawak, specifically many teen couples are commonly forced into express
marriages a provision under Majlis Adat Istiadat Sarawak where the Resident has the power to sign marriage certificates for 14 or 15-year-old. There is much research related to teenage pregnancy in general that has been conducted in Malaysia (Mohd Azri, Adibah Hanim & Haliza Ghazali, 2015). However, no known research has been conducted in Kuching, Sarawak. XXX is a location where young teenage mothers are placed, mandated by law. They are deemed unfit to live with their families for various reasons, mostly as a preventive measure to keep the young women safe until they turn 18. The shelter is a place to provide protection and rehabilitation facilities for teenagers from all over Sarawak who are being abused or exposed to moral problems including having pregnant at an early age. The facilities include custody and protection, residence, foods, clothes, daily needs and guidance and counselling. Currently, there are around ten (10) teenagers at the centre who have been identified to possess moral-oriented challenges which may have led them to pregnancy. Most of them are sanctioned under Section 41 of the Child Act 2001, a provision for the protection of teenagers who have been found pregnant to be placed at a custodial location. The diversity of the inhabitants of the shelter facility will be investigated in the study because they represent almost all ethnic communities throughout the state of Sarawak.

Although they have been many government interventions (as reported in the Borneo Post, 15th May 2019) to address teenage pregnancy such as Social Intervention Programmer to create awareness and advocacy of sexual education which has been conducted among school students, the cases are still on the rise. Therefore, there is still an urgent need to investigate influencing factors from individual and community perspectives.

Teenage years represent the transition from childhood to adulthood. The teenage years of 12-19 years is a time for learning about life, making many decisions, completing elementary schools, entering colleges, and starting careers. Childbearing during these crucial transitory years has given a negative impact on both the teenagers who become pregnant and their children (Langille, 2007), as the babies are less supportive home environments and poorer cognitive development (Wellings, Wadsworth, & Johnson (1999), and are more likely to have lower birth weights and an increased risk of hospital admission in early childhood (Botting, Rosato, & Wood, 1998).

Being pregnant as a teenager is also can interrupt the process of completing their education and can prevent them from fulfilling their life ambitions and plans. Besides, teenage mothers can become socially isolated, have mental health problems (Botting, Rosato, & Wood, 1998), and have fewer educational and employment opportunities (Corcoran, 1998). Not only will teenage pregnancy affect their education and future, but it
will also give them additional responsibility for early motherhood while they are still learning to take responsibility for their own lives. In addition, according to the public health perspective, adolescent pregnancy has a high-risk profile as the impact of multiple factors, including medical complications, lower educational level and long-term socio-economic consequences that confer increased risk of lifespan vulnerabilities to both mother and child. In addition, the perception of early childbearing is socially (McCarthy & Brien, 2014).

Methodology

Research Design

An exploratory qualitative study using a Cultural Awareness Protocol was undertaken. The design of the study was intended to examine socio-economic factors contributing to early pregnancy. Specifically, it is to determine the teenagers’ knowledge and attitude about pregnancy, after undergoing their own experience.

Respondents

The respondents are females, 12-19 years of age. The variables selected for the study are age, sex, religion, race, marital status, educational background, contraceptive use, knowledge of family planning types, and information about access to family planning, and related health services provided. Individuals who have experienced early pregnancy were the main participants in this study. Respondents were identified from the list approved by a young women’s shelter organisation located in the capital city of Sarawak.

Instrumentation

A Cultural Awareness Protocol was developed to navigate the process of information gathering using interviews. The Cultural Awareness Protocol addressed selected contextual issues that may be pertinent to cases that happened in Sarawak. The protocol is more than a list of interview questions. It extends to the procedural level of interviewing and includes a script for the preparation of the interview sessions, explanation of informed consent procedures, until the end of the interviews. The protocol is made up of a set of questions, and it also includes a procedural guide for directing a new qualitative researcher through the interview process. It was constructed using a gamified approach, as a strategy to lessen the psychological and emotional effect on the participants and interviewers.
## Culturally Sensitive Interview Protocol Development

<table>
<thead>
<tr>
<th>Stages of Protocol Development</th>
<th>Cultural Awareness Elements</th>
<th>Gamification</th>
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<tbody>
<tr>
<td><strong>Beginning</strong></td>
<td>Influences of the social-economic background of respondents such as age, sex, religion, race, marital status, educational background, contraceptive use, knowledge of family planning types, and information about access to family planning, and related health services provided. Influences of psychological factors of respondents. Rational Emotive Behaviour Therapy believes that most people are not aware that many of their thoughts about themselves are irrational and negatively affect the way they behave in important relationships and situations. It is these thoughts that lead people to suffer negative emotions and engage in self-destructive behaviour. By letting go of negative thoughts and replacing them with positive beliefs, one is better able to accept oneself and others and, in turn, live a happier life. As cognition, emotions, and behaviour are connected, it is essential to understand the impact of irrational thinking and beliefs that the respondents hold about these experiences which lead to negative feelings and unhealthy emotions.</td>
<td>All variables are placed as cards in the board game.</td>
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<tr>
<td><strong>Informed Consent</strong></td>
<td>Informed consent has got to be sought from the caretakers at the shelter organisation as the respondents are not currently living with their legal guardians. The caretakers at the shelter are government-appointed female social workers who are from the local community.</td>
<td>Items about consent are listed in the interview cards. When interviewees respond to the items about informed consent, they may use the “traffic light” cards to indicate if they agree, disagree, or are unsure.</td>
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<tr>
<td><strong>Data Collection</strong></td>
<td>All respondents are below 18 and have gone through at least one pregnancy. They are placed in the shelter organisation as mandated by law. All respondents are living with other female occupants who have also gone through teenage pregnancy.</td>
<td>The game begins with a roll of the dice. The number on the dice will decide which of the six boxes on the board will be the starting point of the interview session. The interviewees can use the Emotion cards to respond to the questions. They can also use the “traffic light” cards to signal their agreement, disagreement, or uncertainty. The board itself has many points which are used as triggers for the interview. For instance, the scale of 1-10 on the top centre part of the board is used for interviewees to indicate the levels of intensity or agreements they feel, as they respond to the interview questions. There are also three circles at the centre of the board, representing Past, Present and Future. The three circles can be used by the researcher to move from one timeline to another. If there is any need for clarification, the researcher and the interviewees can both use the graphical representations of time (the three circles) to denote the time reference.</td>
</tr>
<tr>
<td><strong>End of Interview</strong></td>
<td>Informing the respondents that all data collected would be strictly confidential which only be used for research and academic purposes. Keeping all the recorded tapes with the respondent’s code such as R1, R2 and R3 to protect anonymity and confidentiality.</td>
<td>The interview ends when all six main boxes are completed. All questions for each box have been addressed. The interviewee can toss the dice one more time to close the interview which is one final choice of the six boxes. If she wishes to add on to any of the narratives already provided earlier, she would be able to do so before she calls the interview to an end. The control for the interview process is on the interviewee, and not the researcher (interviewer).</td>
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Preparation Phase

The development of the protocol began with a preliminary psychological assessment that includes reviewing the literature review about teenage pregnancy to get a deeper understanding of the issue. The process served as a basis for developing questions to ask the participants. The process also helped the research to supply additional domain knowledge and vocabulary related to the research field. Not only that, but the process also includes visiting the place for logistic data. The focus of these questions is on factors contributing to their early pregnancy.

Selecting and Designing Phase

The questions are guided by the literature review, the previous research and the data received during the logistic visit to the place. The scripts are prompted to share critical details about the study. It reminded me about explaining the notion of informed consent and directed me to have the participant sign the statement of informed consent. The scripts provided wording that has helped the researcher alleviate any concerns the participant might have about confidentiality. (Schwandt, 1997).

The questions are constructed in an open-ended form. The goal is to uncover as much about the participants and their situations as possible. It started with asking some basic background of the participants as a way of warming up them. It is also a starting point to building trust between the researcher and the participants.

The interview adopted a descriptive format. It is meant to enable a researcher to collect an ongoing sample of a participant’s language. Descriptive questions are the easiest to ask and they are used in all interviews as they take advantage of the power of language to construct settings (Frake, 1964). Descriptive questions aim to elicit a large sample of utterances in the participant’s native language. The descriptive questions are constructed as grand-tour and mini-tour questions. A grand tour question simulates an experience of the participants, and they encourage participants to ramble on and on. The questions offer almost unlimited opportunity for investigating all aspects of experience. Mini-tour questions are identical to grand tour questions except they deal with a much smaller unit of experience. The researcher bears the responsibility to pose questions that make it clear to the participant what is being asked. Asking understandable questions also facilitates establishing rapport. Clarity can be sharpened by understanding what language participants use among themselves in talking about a setting activity, or other aspects of life.
Selecting Items Phase

The interview starts with building rapport to the harmonious relationship between the researcher and the participant. It aims to develop a basic sense of trust that allows for the free flow of information so that both the researcher and participant have positive feelings about the interviews. It is in a form of developing respect between two people who do not particularly like one another. The rapport process proceeds through the stage of apprehension, exploration, cooperation, and participation. It includes smiling and greeting while first meeting. It follows by the researcher self-introducing as the participant should know who we are and our purpose in interviewing them. This is where all formalities, such as the structuring process that informs about the duration of time, confidentiality and the objective of the session, consent forms and recording devices are attended to.

After that, it continues with the kick-off stage which will directly follow the formalities of the introduction. Here the interviewer will use conversational, yet relevant questions to make the respondent feel comfortable, and warm them up to answering more complex questions. Then, it follows by building a rapport which refers to a harmonious relationship between a researcher and participant. It means that a basic sense of trust has developed that allows for the free flow of information. Here the researcher and the participant develop a positive attitude towards the interview, perhaps even enjoy them. The dialogue is still relevant to the topic and continues to prepare the participant for the grand-tour questions. There are six sections of the questions including the introduction section. They are the background of the case, the cognitive and emotional state of the participants while facing such experiences, the attachment relationship with the family members and the future planning of the participants. These questions are meant to provide in-depth details for the research data as they elicit deeper meaning and allows the participant to talk at length to answer a particular question related to a specific place, time, or task. To get the most information, the researcher needs to ask more guided questions. For example: Can you share with me about your experience living at this shelter? Can you share with me how do you feel about Issue X? These questions are considered mini-tour questions and are asked in addition to broader, grand tour questions.

After that is a reflection stage as it is a way of bridging all that researchers have learned and allows clarifying statements that were made at different points early in the interview. The final stage is a wrap up where the researcher is saying thank you to the participant for
their time and follow up by letting them know how helpful they have been. It is also appropriate to ask if participants have any questions for the researcher.

**Gamification Phase**

The idea to gamify the interview process stemmed from a need to create a positive, non-threatening and playful setting for the young women who would be invited to participate in the study. The nature of their cases is highly personal, and culturally and religiously shunned in the public eye. Creating a safe and secure setting would ease the inquiry process. The narratives intended to be collected from these young women would illustrate the nearest to the true nature of their experiences. Using playful elements which were designed for the study, these young women can utilise the visual cues and game elements embedded into the interview protocol, to speak at ease about their experiences.

There are four types of cards created for the interview protocol. The first is a set of cards that would enable the interviewees to indicate if they want to continue or decline to participate in the interview. The cards use the “traffic light” concept, in that they would be able to choose the red card to say they want to stop; green to proceed, and yellow to proceed with caution.

The second set of cards represent several time references. The interviewees would be able to choose any of the cards to indicate the timeframe in which specific events took place, of their best-known memory or recollection. Illustrations of the time references are intended to help trigger their memory, and to encourage storytelling.

The third set of cards represent people. There are three key categories used in these cards – family members, friends and people living around them. Each card is illustrated to initiate the story and to help the interviewees make connections between people who have played a role in their experiences with teenage pregnancy.

The final set of cards represent emotions. A set of 17 cards are created, denoting major emotions often experienced by teenagers. The illustrations created on each card are inspired by Manga, a popular Japanese animation series, a popular choice of entertainment among young people in Malaysia.
Figure 1 Emotion cards which display various types of emotions familiar to teenagers

Figure 2 The People cards display various persons representing different age groups
Figure 3 Culturally Sensitive Gamification Board

Figure 4 A flowchart of how the gamified culturally sensitive interview protocol would be utilised in an interview session
Contribution of the Research

Although they have been many government interventions (as reported in the Borneo Post, 15th May 2019) to address teenage pregnancy such as Social Intervention Programmer to create awareness and advocacy of sexual education which has been conducted among school students, the cases are still on the rise. Therefore, there is still an urgent need to investigate influencing factors from individual and community perspectives.

The finding of this research would eventually contribute to the community by encouraging ongoing education and support for teenagers who find themselves pregnant. It is clearly understood that education leads to employment and employment helps to stop the cycle of poverty that many teenagers who become pregnant find themselves in. Generally, teen pregnancy especially out of wedlock is not well accepted within the Malaysian community. The social stigma discourages these pregnant teenagers to use available maternity services. The stigma is seen in families of the Muslim faith, and in this case, those of Malay and Melanau ethnic groups. Hence, unassisted pregnancy poses a high risk to both mother and infant. Over time, the increase of unassisted pregnancies raises a pending need for local communities to find solutions to provide these young mothers with necessary services and support.

Relevance to Government Policy

Child Act 2001 has made it a comprehensive law to protect children from abuse nationwide incorporated laws on the care protection and rehabilitation of the children. The 2030 agenda for sustainable development adopted by all United Nations' members stated in 2015 provides a shed blueprint for peace and prosperity for people and the planet, this study addresses the third goal which is good health and wellbeing.

Conclusion

In conclusion, numerous works need to be done to study various aspects of teenage pregnancy in Malaysia. However, gaps remain in certain areas that should be explored for a better understanding of this issue. Collaborative research among centres nationwide should be the way forward for results that can be translated into action by policymakers and stakeholders. Hence, this research is relevant to social and psychological factors as both can be influenced by each other and the effects of which are mediated through psychological understanding.
References


