Purpose: Adolescent pregnancy without intention are increasing in today Thais society that effect on family health system, socioeconomic and human resource development. Family faces with unexpected crisis situation couple with normal family development during adolescent period. Thus, this study project was aimed at examining the effects of family health care intervention on family with unintended teenage pregnancy health outcomes, especially, adaptation in rural setting, northeastern part of Thailand.

Methods: Mixed method design was used. The participant consisted of 40 families that were family members and pregnant teenagers aged 10-19 years who taking health services at primary health care settings for 1-2 months before giving birth. Instrument was the family health care intervention package (FHCIP) which be developed based on family resiliency theory, family health care concept, and evidence based practice. It consisted of Family health assessment form, Family health care intervention guideline, Family with Teenage Mom Handbook, and family and adolescent pregnancy adaptation questionnaires with open-end questions. All instruments were validated by five experts. After a trial run for the questionnaires with 10 similar families and pregnant teenagers. The reliability of adolescent pregnancy adaptation; Cronbach’s alpha coefficient was 0.80. And Cronbach’s alpha coefficient for family Adaptation was 0.89. Quantitative data was analyzed by descriptive statistics; frequency, percentage, mean, standard deviation, and analytic statistic for testing difference by dependent t-test. In addition, interviewed data was analyzed by content analysis. The findings were presented by describing with tables, and displaying the categories that emerged from analysis technique.

Results: The findings showed that before implementation; family health assessment was displayed family adaptation score was in low level (Mean = 74.96, Standard deviation = 4.17), and pregnant teenage adaptation score was also in low level (Mean= 112.23, Standard deviation = 6.04). Families had high stress and concern about their teenagers’ health with anger, guilt, and feel loss of their hope about future lives of their teenage girls. All families had kept secret due to negative social value and norm of their community toward teenage pregnancy. They tried to cope by emotional technique and problem solving for overcome their troubles. While, pregnant teenagers were sorry, sad, guilt, and fear about own future lives. They did not function for caring their health as normal pregnant women. They had poor health behaviors such as inappropriate food habit, risk to get accident from motorcycle, some smoking, drinking alcohol, and go around the night. They came to prenatal care clinic with their mothers or boyfriends so late; 2nd or 3rd trimester of pregnancy. They had conflict with their parents and parents of boyfriends. And, some had conflict with their boyfriends. After intervention by using the family health care guideline; (therapeutic communication, family and adolescent counselling, supporting family system, family psycho-education, family conference, family anticipatory guidance, and family education). The project team and 3 professional nurses did continuous monitoring and evaluating by telephone visit and follow up at prenatal clinic. The end of project, the score of family and pregnant teenage adaptation were increased at good level and be statistically significant difference from starting step (P<.05). Many families had planned and done everything for providing care and socializing their pregnant teenagers and their boyfriends to become good parents (adolescent parenting) and allowing to continue study for their good future lives. Some families planned to perform grand-parenting and let their pregnant teenagers continue to study or
work for their lives and babies. The pregnant adolescents had coped with the struggle events in daily living by increasing morale, and accepting to their changed situation. They had attempted to adjust their health behaviors and lifestyle for own health and their babies; especially, not smoking and drinking alcohol, not or less driving motorcycle, careful about risks and accidents. However, some adolescent pregnancies had emotional changes and high strain that made conflicts with their boyfriends and parents. Therefore, their families had tried to understand, support, and advise them in positive way. In term of effects and outcomes, the family and adolescent pregnancy showed effective adaptation both body and mind, including, family function. However, some families and pregnant teenagers have several negative or vulnerable factors, especially, poor family relationships and low economic status that made them faced with family health problems such as separation of teenage couple, violence, and being neglected.

**Conclusion:** As the results, the family health care intervention package could promote health of family with unintended pregnant teenagers in community settings. However, the study design could not approve effectiveness of the intervention package. Therefore, the future study project should design with reliable method and follow up for sustainable health outcomes. In addition, innovation of family health care approach should be created fitting with family and community context that can apply to promote health of family and teenage pregnancy as successfully.

---

**Title:**

Family Healthcare for Unintended Adolescent Pregnancy in Thais Rural Area

**Keywords:**

Adolescent Pregnancy, Family Health Care and Home Based Care

**References:**


Abstract Summary:

Unintended adolescent pregnancy troubles on family health system. This family health care intervention was conducted for improving family health as a whole. The result displayed that most of family had better health outcomes after implementation. However, family health care innovation is needed for achieving family health care goals.

Content Outline:

Adolescent pregnancy without intention are increasing in today Thais society that effect on family health system, socioeconomic and human resource development. Thus, the study project aimed at examining the effects of family health care intervention for family with unintended teenage pregnancy in rural area, northeastern part of Thailand.

The project was design by Mixed method which could explore the situation for gaining insight to the specific family health problems and needs. In addition, the method could test the effect of intervention on family health outcomes. The target participant consisted of 40 families with pregnant teenagers aged 10-19 years who taking health services at primary health care settings. Instrument was the family health care intervention package which be developed based on family family theory and health promotion concept, and evidence based approach. It consisted of Family health assessment form, Family health care guideline, Family with Teenage Mom Handbook, and family adaptation questionnaires with open-end questions. All instruments were validated by five experts. The questionnaires were tried out and the internal reliability was analyzed as Cronbach’s alpha coefficients. Data was analyzed by descriptive statistics and content analysis.

The findings showed that before implementation; the family and pregnant teenage adaptation score were in low level. Families had high stress and concern about their teenagers' health with negative emotion and behaviors. While, the pregnant teenagers had poor mental health that influenced on their health practice for becoming healthy pregnant women and mothers. After intervention by using the family health care guideline, monitoring, reassessing, and evaluation, The score of family and pregnant teenage adaptation were increased in good level and be statistically significant difference (P<.05). The pregnant adolescents had coped with struggle events in daily living, and alert to their changed situation. However, some pregnant adolescents had high emotion that made conflicts with their boyfriends and parents.

In conclusion, the effects and outcomes of this family health care intervention were effective adaptation of family and unintended pregnant teenager. However, some families and pregnant adolescents could not cope effectively due to facing with several obstacles and poor resource with vulnerability. However, this family health care intervention could be applied to promote health for similar family with pregnant teenagers in community settings. In addition, innovation of family health care intervention should be developed fitting with family and community context for successful promoting family and teenage pregnancy health.

First Primary Presenting Author
**Primary Presenting Author**

Saovakon Virasiri, PhD

Faculty of Nursing, Khon Kaen University
Department of Family and Community Nursing
Associate Professor
Khon Kaen
Thailand

**Author Summary:** She is Associate Professor in nursing science, especially, family nursing and child health nursing. She is a senior lecturer who teaches nurse students for over 33 years. For research and projects, she focuses on family health promotion for prevention of adolescent health risk behaviors, family health promotion for chronic illness, and family crisis intervention, including parenting adolescent.

Second Secondary Presenting Author

**Corresponding Secondary Presenting Author**

Surapol Virasiri, MD
Faculty of Medicine, Khon Kaen University
Department of Psychiatry
Associate Professor
Khon Kaen
Thailand

**Author Summary:** He is Associate Professor in medical science, psychiatrist. He is a speaker in the area of mental health problem and stress reduction, especially adolescent mental health promotion. His research program focuses on mood disorder, especially depression and bipolar mood disorder and sexuality health education.

Third Author

Pimpa Suitra, MNS
Faculty of Nursing, Khon Kaen University
Department of Family and Community Nursing
Associate Professor
Khon Kaen
Thailand

**Author Summary:** She is an associate professor who is an expert in child health and family nursing, especially in school and teenage health promotion. She is an educator for the family nursing program over 40 years. Her study focuses on child rearing, adolescent health nursing, and family nursing.