A qualitative investigation into perspectives and experiences of motherhood: a study of university students in Durban

By: Lungisile Shange
(209500376)

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DECLARATION - PLAGIARISM

I, Lungisile Shange declare that:

1. This dissertation is my original research except where otherwise indicated.

2. This dissertation has not been submitted for any degree or examination at any other university.

3. This dissertation does not contain other people's data, unless specifically acknowledged as been sourced.

4. This dissertation does not have other people's writing, unless specifically acknowledged. All the quoted sources have been referenced.

5. Where the exact words of participants have been used, their words has been placed in italics and inside quotation marks, and referenced.

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ABSTRACT

Early childbearing is one of the problems facing the world today. South Africa is no exception to this problem, as a number of young girls are becoming mothers at a very young age. Although South Africa's fertility rate has declined over the years, early childbearing remains high. The lack of contraceptive use is one of the leading reasons for early childbearing. South Africa is also one of the countries with a high prevalence of HIV especially among youth. However, this does not prevent young people from engaging in unprotected sex. The aim of this study is to shed insights into the perspectives and experiences of young mothers who are also university students. Data collection was done through face-to-face interviews. Twenty African women aged 18 to 24 years were recruited for this study. This study specifically focused on student mother who are raising their children by themselves. Findings suggest that juggling motherhood, while studying is not easy and it can have negative impacts on the academic performance of student mothers especially if they lack social support. One of the major problems faced by these young mothers is lack of time. Most of their time is spent traveling to and from school, taking care of their children after school and doing house chores. Most young mothers voiced that there is not enough time to focus on their studies; as a result, their academic progress is negatively affected. Student mothers who receive support from their families are however coping. Young people need to be taught about sexual reproductive health at a young age because some of them become mothers at a young age. There should be interventions and these interventions should include male youth because they also form part of the problem.

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TABLE OF CONTENT

CONTENTS   **PAGE**

LIST OF FIGURES AND TABLES

ACRONYMS AND ABREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
USAID	United States Agency for International Development
CommGAP	Communication for Governance and Accountability Program
CTDB	Child Trend Data Bank
DSD	Department of Social Development
GH₵	Ghanaian Cedi Currency
HIV	Human Immunodeficiency Virus
OECD	Organization for Economic Co-operation and Development
SASSA	South African Social Security Agency
STDs	Sexually Transmitted diseases
STIs	Sexually Transmitted Infections
UKZN	University of KwaZulu Natal
UNFPA	United Nations Fund for Population Activities
UNICEF	United Nations International Children's Emergency Fund
US	United States
TFR	Total Fertility Rate
WLUML	Women Living Under Muslim Laws
WHO	World Health Organization
HSRC	Human Sciences Research Council

CHAPTER ONE: INTRODUCTION

1.1.   Background of the study

Early childbearing is one of the problems facing the world today. Early childbearing according to Raymo, VanOrman, Carlson, Lim, Perelli-Herris, Iwasawa (2015), can be defined as births that occur very early in life before a woman is physically and emotionally ready to give birth. In other words, early childbearing refers to those births that occur prior to age 20 (Raymo et al. 2015). Childbearing has always been connected with recurrent sexual intercourse without the use of dependable contraceptive methods, sexual pressure, and lack of communication among partners, destitution and promiscuous behavior (Kantu, 2010). According to Rocca, Harper, and Bennett (2013), in a research study conducted by the National Survey of Family Growth in 2006 to 2008, it was discovered that about 82 percent of pregnancies were amongst adolescents and 64 percent were among women aged 20 to 24.

Hindin (2012) states that, over half of adolescents in sub-Saharan Africa are mothers, with 26 percent in Rwanda and 69 percent in Niger. Research by the WHO (2012) found that approximately 16 million young women fall pregnant yearly, especially in underdeveloped and developing countries (Mushwana, Monareng, Richter and Muller, 2015). Gibbs, Wendt, Peters and Hogue (2012) state that about eleven percent of births globally are among girls aged 15- 19 years, and 95 percent of these births are in developing counties. The countries with the highest rate of early childbearing include those in sub-Saharan Africa, Bangladesh and India, mainly in rural areas and communities where education for young women is not considered a priority or the education level for young women is low (Gibbs et al. 2012).

Over the past years there has been a growing number of young women who are having children at an early age, and because of this, several authors who are researching on fertility have given this issue sizeable attention. Madhavan (2010, p. 139) postulates that, "while overall fertility has declined dramatically in South Africa, adolescent fertility continues to be of concern to researchers and policymakers who see early childbearing as jeopardizing a young woman's life chances". Similarly, Karra and Lee (2012) further elaborate that, although South African women have had fewer children on average since 1970s, adolescent childbearing in South Africa has however

remained the same, at fifty-four births per thousand women aged 15-19. Karra et al. (2012) go on to argue that the number of women who give birth prior to age twenty has dropped since 1985 but remains historically high.

For many years, sub-Saharan African countries experienced a high fertility rate. Fertility rate refers to the number of births per thousand women between the ages of 15 and 44 years old in a specific year (Child Trends Data Bank, 2015). According to Bongaarts (2010), up to the 1970s, fertility in sub-Saharan Africa continued to be high with an average total fertility rate of about 6.7 births per woman. However, it is important to note that there has been a considerable decline in fertility rate over the past few decades.

Bongaarts (2010) emphasizes that the decline in fertility was first noticed especially in Eastern and Southern Africa, whereas fertility continues to be high in Western and Middle African countries. According to Bongaarts (2010), the fertility rate of different countries within the period of 2000 to 2005 ranged from seven births per woman in Niger to under three in South Africa. According to Rossouw, Burger and Burger (2012), South Africa has however experienced a rapid decline in the levels of fertility as from the 1960s and presently the total fertility rate (TFR) is the lowest on the continent of Africa. The Organization for Economic Co-operation and Development (2016) defines total fertility rate as the number of children that are expected to be born to women of childbearing, age 15 to 49 years.

The study focuses on young women aged 18 to 24. According to the World Health Organization, the term adolescence refers to young people aged 10 to 24 years (Ayelew, Mengistie and Semahegn, 2014). Adolescence is the change from childhood to adulthood and is regarded as a process characterized by constant changes of human development (Cohen, 2011). It is followed by intense physical, cognitive, social, and emotional changes (Cohen, 2011).

The term "early childbearing" is important in this study because, as much as the study is based on university students, some girls become mothers before they entered university. It is therefore important to consider that most people begin university at ages 18 or 19, straight after high school, which means for someone who enters university already a mother, they probably had their first

child at a very young age. As Raymo et al. (2015) state, early childbearing refers to births that take place before age 20. In addition, the impact of early childbearing is high. It is therefore important to understand what the impact is and how it affects women of early childbearing.

Universities worldwide are experiencing an increase in the number of female students and several of these students are mothers on top of their role as university students (Wilsey, 2013). "Although Ghana has reduced the gender gap in education over the last two decades, less emphasis has been placed on the challenges student-mothers face on campus" (Esia-Donkoh, 2014, p. 20). According to the U.S. Department of Commerce (2011), over the past forty years, the percentage of females in universities has gradually improved by approximately two hundred and fifty-six percent between 1971 and 2011. According to Wilsey, (2013), women in higher institutions of learning frequently engage in many life roles, plus the role of mother.

1.2.   Problem Statement

For many years, early childbearing has been seen as a problem for many countries. Despite the attempts to reduce adolescent pregnancy, girls continue to fall pregnant at a young age. This is an indication that there is a lack of contraceptive use among young girls. Early childbearing is not only a South African problem, but it is a global problem, therefore, it is important to study this phenomenon in order to understand where exactly the problem lies and what can be done to deal with this issue. Early childbearing means that young women are having unsafe sex and this does not only result in unintended pregnancies but it also exposes young girls to STIs and HIV. South Africa is already one of the countries with a high prevalence of HIV; however, young girls are continuing to practice unsafe sex, putting themselves at a high risk of contracting HIV.

1.3.   Rationale of the study

There have been several studies that have been conducted on early childbearing, however very few focus on university students, specifically student mothers. Being a student mother is a huge challenge, and even more so when a woman has to rearrange time for school with time to study

and be a mother. This is even more so because of the society's expectations with regard to women. For example, Adofo (2013) states that almost all societies assign the duty of caring for children to women. University is one of the most difficult and stressful times for many students. Being a mother and a university student at the same time may be accompanied by many challenges.

According to Draper and Sharp (2003), being a student mother may at times mean that some student mothers are expected to share their time with children, significant others, domestic commitments, social commitment, extended families and school work (Scevak & Cantwell; 2007, White, 2008). All student mothers come from different backgrounds and therefore present different experiences of motherhood. For instance, some student mothers are married, some are single, some are employed, either on a full time or part-time basis, and others are unemployed. It will therefore be unfair to assume that they go through same experiences. This study is important because it will provide a clear understanding of what university mothers actually go through and how they manage to juggle school and parenting at the same time.

1.4.   Aims and objectives

The overall objective of the study is to shed insights on the perspectives and experiences of young mothers who are also university students. The objectives of the study are to:

- explore university student mothers' attitudes towards early pregnancy;
- investigate the experiences of motherhood among university students; and
- examine the difficulties student mothers face and their strategies for coping.

1.5.   Theoretical framework

Several studies have revealed that although the fertility rate has declined in sub-Saharan Africa, fertility rate for young women remains high. This implies that many young women are having unprotected sex and therefore having children early in life. High fertility of young women is not the only problem facing the continent but the continent also has a high prevalence of HIV/AIDS. Eaton et al. (2003) states that, the highest prevalence of HIV infections occurs in the most destitute areas of sub-Saharan Africa.

The study will make use of the theoretical framework developed by Eaton et al. (2003). The theory focused on the sexual behavior of young people, specifically those aged 14 to 35 years old. This theory is important for this study because the study is based particularly on young mothers aged 18 to 24. This theory will therefore give a clear insight on why young people engage in risky sexual behavior regardless of the dangers it presents, such as HIV infection and unintended pregnancies. According to Eaton et al. (2003, p. 1) "HIV risk behavior is influenced by factors at three levels: within the person, within the proximal context (interpersonal relationships and physical and organizational environment) and within the distal context (culture and structural factors)".

The person factors are said to involve knowledge and beliefs. Misunderstandings can lead to risky sexual behavior. Eaton et al. (2003), claim that in the 1990s, young people in South Africa had an idea of what AIDS is, however they lacked a clear understanding of the relationship between HIV and AIDS, how the disease is transmitted and how it could be prevented (Eaton et al. 2003). Not only did young people have little knowledge about HIV/AIDS, but research shows that they also lacked knowledge of how to use condoms properly (Eaton et al. 2003). Young people also held misapprehensions that HIV infection could be prevented through hormonal contraceptives and intrauterine contraceptive devices, or that a condom can be used multiple times (Eaton et al. 2002). Under the person factors, several aspects such as low self-esteem, self-efficacy and perception of low personal risk may determine whether one refrains from risky sexual behavior.

The proximal context comprises of the interpersonal factors and physical and organizational environment. Interpersonal factors involve negotiating condom use, coercive, male-dominated

sexual relationships, peer pressure, interactions with adults (Eaton et al. 2003). According to Eaton et al. (2003), couples sometimes find it hard to communicate about condom usage since this could be linked with promiscuity, sexually transmitted diseases and AIDS, and this could be taken as an indication that the other partner is already infected or the relationship lacks trust. Eaton et al. (2003) also state that there is unequal power when it comes to decision-making with regards to sexual relationships, with males usually dominating and women following their orders, especially in relationships where women have the fear of being coerced. Both young men and women face pear pressure, as a result they end up succumbing to the pressures of being sexually active. According to Eaton et al. (2003), boys experience different pressures to girls. Boys feel the pressure to have multiply sex partners accompanied by undesirable peer viewpoints towards condom use (Eaton et al. 2003). Sexually unexperienced girls on the other hand feel pressure from boys who exclude them from sexual conversations because they treat them as children (Eaton et al. 2003).

The physical and organizational environment comprises factors such as lack of access to condoms, low access to the media, lack of recreational facilities, living on the street and being in prison (Eaton et al. 2003). According to Eaton (2003), the accessibility of condoms is not an issue; however, the accessibility of free condoms may be limited by the different sources to obtain them, nurses' negative attitudes or clinics not having enough provisions. Media plays a vital important role in the sense that youth that have high exposure to media are more knowledgeable about HIV/AIDS compared to youth from regions where there is too little or no exposure to media (Eaton et al. 2003).

The availability of recreational facilities reduces sexual activities among youth because young people always have something to do than to spend most of their time engaging in sexual activities (Eaton at al. 2003). In other words, recreational facilities serve as the replacement for sexual activities. Street children are more susceptible to sexual abuse and they are more likely to turn to prostitution as a way of making easy and quick cash and in many cases, clients do not ask for protection or they completely refuse protection (Eaton et al. 2003). In other words, the fact that they sleep with many different people occasionally, and in most instances while under the influence of drugs, increases the risk of HIV infection (Eaton et al. 2003).

The distal context involves culture and structural factors. Within the cultural factors, it is stated that the patriarchal cultures devalue women (Eaton et al. 2003). According to Eaton et al. (2003), socially rooted gender discrimination escalates the danger of HIV infection for Africa women.

Structural factors include urban versus rural conditions and poverty. Eaton et al. (2003) state that urban youth are more knowledgeable about HIV/AIDS than those from rural areas. The limited knowledge about HIV/AIDS among rural youth is a result of less exposure to media and it is suggested that this problem could be resolved by providing rural youth with information (Eaton et al. 2003).

South Africa is one of the countries with extreme inequality economically, socially and politically. A number of people live under the poverty line due to lack of formal education and high levels of unemployment. According to Eaton et al. (2003), lower levels of education and limited knowledge among young people are connected to youth sexual behavior.

Figure 1.1: framework.
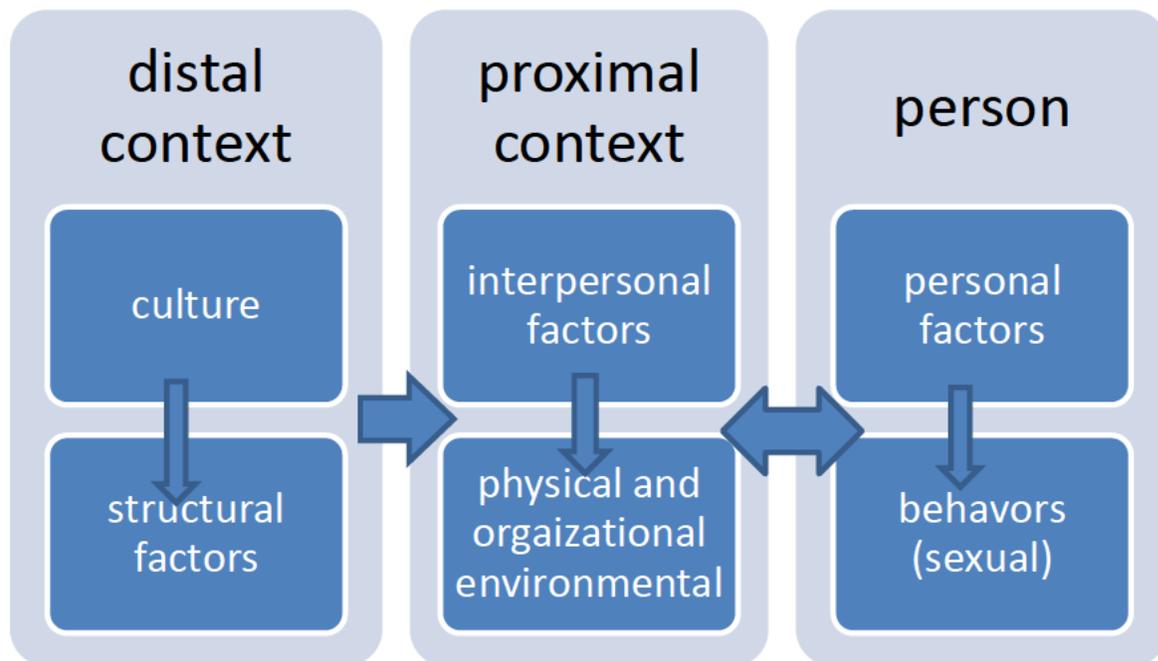
Source: Eaton et al. (2003)

According to Eaton et al. (2003), figure1.1 is the appropriate framework for organizing the relationship between sexual behaviour, personal factors and the proximal and distal contexts.

Organizational structure

This study is divided into five chapters. This chapter provides a background of the study, the theoretical framework and the objectives of the study. Chapter 2 includes the literature review, which includes a comprehensive review of early childbearing. Chapter 3 is the methodology of the study and includes an outline of the location of the study, research design, ethical considerations, data analysis, validity and reliability and limitations of the study. Chapter 4 discusses the major findings or the results of the study from the interviews conducted. Chapter 5 includes the discussion and recommendations to the study.

CHAPTER TWO: LITERATURE REVIEW

2.1. Introduction

Universities worldwide are experiencing quite an increase in the number of female students and several of these are mothers on top of their role as university students (Wilsey, 2013). The intention of this literature review is too look at recent studies and examine whether there have been any changes on early childbearing over the years. The aim is to discover what causes early childbearing, what are the challenges of early motherhood and how it affects the lives of young mothers. This chapter also looks at the experiences of motherhood from the perspective of university students.

2.2. Determining factors of early childbearing

2.2.1. Age at first sexual intercourse

Early childbearing is a global phenomenon. In contemporary society, young women engage in sexual activities at a very young age and consequently, they become mothers very early in life. Kara and Maharaj (2015) state that several studies in South Africa and in in Africa are discovering that the youth are engaging in sexual activities at a young age. In a DHS/AIS survey that has been done since 2005 in 24 sub-Saharan African nations, it was discovered that there was a big percentage of 15 to 19-year-old girls who have reported having engaged in sexual relations before the age of 15 years, ranging from 5 percent to 26 percent (Mavedzenge, Plummer and Ross, 2010).

The Ethiopian Demographic Health Survey (2005) cited in Tilahun and Ayele (2013), found that among females aged 25 to 49 years old, 32 percent already had sexual intercourse before the age of 15, 65 percent before the age of 18 and the majority of women have had sexual intercourse by the age of 24 years. In a study conducted by Magnusson, Masho, and Lapane (2012), it is estimated that in the United States, the age at which young girls first engage in sexual intercourse is 17 years old.

Many studies have shown that young people experience first sexual initiation at a very young age and therefore it is important to study early sexual debut. Richter, Mabaso, Ramjith and Norris

(2015) found that some young people started having sex very early, at about 13 years old to be exact. Ethiopian young women are more susceptible to HIV due to early age at sexual debut (Tilahun et al. 2013). In a study conducted by Mathews, Aaro, Flisher, Mukoma, Wubs and Schaalm (2009), it was discovered that in South Africa in 2002, approximately 8 percent of young women aged 15 to 24 years old engaged in early sexual debut and very few of them reported having used protection consistently and this placed them at a higher risk of acquiring HIV.

According to Marston, Beguy, Karibu and Cleland (2013), young people who engage in sexual activities at a young age are most likely to have more than one sexual partner and participate in unsafe sexual intercourse and contract sexually transmitted infections and HIV. Beguy et al. (2013) further state that early sexual debut escalates the chance of unintended pregnancies. Begay et al. (2013) postulate that early sexual debut is associated with several aspects, such as family structure, social groups and school attendance.

2.2.2. Early childbearing and child support grant

Most countries in Africa have a high rate of unemployment and this is a serious issue especially for women. In South Africa for instance, the government introduced the Child Support Grant to help parents or caregivers who cannot afford to meet their children's financial needs. The child support grant is the money paid to the caregiver of a child below 18 years who meets the requirements based on the terms and conditions of the grant (Patel, 2012). Each child receives the amount of R260 per month (Patel, 2012). Most young mothers in South Africa are single parents and unemployed; as a result, they are highly dependent on the social grant for their survival. The child support grant in South Africa was first introduced in 1998 (DSD, SASSA and UNICEF, 2012). According to Dlamini (2012), the child support grant was established as a strategy to combat child poverty.

There have been many debates about whether the child support grant is linked to high fertility of young women. Goldblatt (2005) cited in Kubheka (2013) states that the concern around the issue of child support grant is that the society believes that it promotes early childbearing and that young women have children in order to get it. Several researches refute this concern. In a study conducted

by Kubheka (2013) it was found that there is no significant relationship between early childbearing and the child support grant. Since the 1980s, adolescent fertility was relatively high and at the time the child support grant was not accessible to many South Africans (Makiwane, 2010).

It should however be noted that adolescent fertility declined in the 1990s, and this trend was already happening when the child support grant was made accessible to all sub-groups of the South African population (Makiwane, 2010). Makiwane (2010, p.193) therefore claims that "If adolescent women were having children mainly to gain from the Child Support Grant, then more would be making claims than is in fact the case". The child support grant is one of the factors that has been attributed to early childbearing but there are many other factors that need to be taken into consideration. (Makiwane 2006, cited in Kubheka, 2013).

2.2.3. Knowledge about HIV/AIDS

Before explaining HIV/AIDS knowledge among youth, it is important to understand why it is relevant in this section. The amount of appropriate knowledge young people have about HIV/AIDS can have a positive impact on their sexual behaviour. This means that with the right amount of knowledge, young people can refrain from risky sexual behaviors which will not only prevent them from contracting HIV but will also help prevent unintended pregnancies, thereby reducing early childbearing. According to Swenson, Rizzo, Brown, Vanable, Carey, Valois, DiClemente and Romer (2010), HIV knowledge contributes towards greater sexual behavior and health. Knowledge on its own is not enough however; correct information on HIV might be advantageous to young people's sexual health and behavior (Swenson et al. 2010).

Most current HIV cases globally involve youth aged 15 to 24 years (UNICEF, 2011). In four of the seven continents of the world, it is stated that young women are twice more likely to have HIV than young men (UNICEF, 2011). In 2008, UNAIDS reported that almost 12 million youth are infected with HIV/AIDS (Ciccio and Sera, 2010). Presently in sub-Saharan Africa, it is estimated that approximately two thirds of young women aged 15 to 19 years are living with HIV (Ciccio et al. 2010). In Southern and Eastern African countries, the prevalence of adults living with HIV are estimated at 10 percent or higher while the prevalence of HIV among young women aged 15 to 24

years is said to be twice or thrice as much as that of young males of the same age (UNICEF, 2011). Figures indicate that HIV prevalence is higher between both girls and boys aged 15 to 24 years in the following countries: Swaziland, Lesotho, Botswana, South Africa and Zambia (Loaiza and Wong, 2012).

A national survey conducted in 2007 found that, in several countries in Africa, 40 percent of young men and 36 percent of young women had precise knowledge concerning HIV, but it is lower than the 95 percent objective for youth's knowledge entirely agreed upon and supported by Member States in the Declaration of Commitment on HIV/AIDS (UNGASS, 2008 cited in Ciccio et al. 2010). Botswana is included as one of the sub-Saharan African countries that are struggling with HIV/AIDS (Majelantle, Bainame, and Nkwane, 2014). In Botswana, youth persist to participate in unprotected sexual intercourse in spite of extensive information and knowledge about HIV/AIDS (Majelantle et al. 2014). A study conducted at the University of Botswana found that students were able to provide 96 percent correct answers about HIV/AIDS knowledge (Majelantle et al. 2014). It was also discovered that only 43 percent of youth aged 15 to 24 had complete knowledge regarding HIV and nearly half of teenagers failed to recognize the shared misapprehensions concerning HIV/AIDS transmission (Majelantle et al. 2014).

The prevalence of HIV among young people aged 15 to 24 years is high in South Africa. Young females aged 15 to 24 years add to an uneven 24 percent of all new infections in South Africa, which is four times higher than that of their male peers (Dellar, Waxman and Karim, 2015). A survey done by the Human Sciences Research Council, discovered that in South Africa, only 28 percent of people had correct knowledge regarding how HIV is transmitted, and the degrees of knowledge about HIV transmission did not differ by sex but differed notably by age, race locality type and province (Shisana et al. 2014). The study found that 24.3 percent of young people aged 15 to 24 are more knowledgeable about sexual transmission of HIV (Shisana et al. 2014).

2.2.4. Education attainment in delaying early childbearing

Many studies have indicated a strong association between childbearing and education attainment (Mills, Rindfuss, McDonald and Velde, 2011). According to Beguy et al. (2013), education plays

a vital role in predicting the timing of childbearing. Young women who attend school are more likely to postpone childbearing, and this is even more so for women who attend tertiary institutions (Beguy et al. 2013). Mills et al. (2011) states that one of the reasons for postponing early motherhood is associated with time constraints and the balancing of school and parenting roles. Mills et al. (2013) further state that most educated women are career driven and having a child at a young age might get in the way of them pursuing their careers. It also appears that most educated women believe that children are expensive and therefore it is a good idea for one to wait until they are financially stable and have obtained personal autonomy (Mills et al. 2011).

Women are now invading the workforce and they are provided with better job opportunities, as a result, they are returning to tertiary institutions and putting childbearing on hold (Raymo, Carlson, VanOrman, Lim, Perelli-Harris and Iwasawa, 2015). This is however different for women who are less educated as they place greater value on childbearing and usually give birth out of wedlock (Raymo et al. 2015). The opportunities for females in the workforce have prolonged across low fertility, developed regions, indicating that the commonness of early childbearing among less educated females might be cumulative as females with tertiary education further postpone childbirth (Raymo et al. 2015).

Cohen (2011) suggests that a good comprehension of the relationship between childbearing and education would have comprehensive social significance. It is important to assess whether women are postponing childbearing because they want to complete education or because children would hinder their education attainment (Cohen, 2011).

2.2.5. Barriers to contraceptive access and use

The most frequently reported barrier to contraceptive use by young women is cost, shame and fear (Bankole and Malarcher, 2010). In a survey done in four countries in sub-Saharan Africa, namely, Ghana, Burkina Faso, Malawi and Uganda, young women who are sexually active mentioned that they felt shy, embarrassed and afraid to seek reproductive health service (Bankole et al. 2010). Chandra-Mouli, McCarraher, Philips, Williamson, and Hainsworth (2014), report that in some countries, contraceptives are available; however, there are restrictions as who can and cannot

access them, for example, some laws and policies forbid unmarried women and young women of certain ages to access contraceptives. Another barrier stated by Chandra-Muli et al. (2014) is that even in places where there are no legal restrictions; some health workers make it difficult especially for young women to obtain contraceptives because they do not support sex before marriage.

In a study conducted in Kenya, it was discovered that some barriers to contraceptive use among young women were based on misconceptions (Ochako, Mbondo, Aloo, Kaimenyi, Thomson, Timmerman and Kays, 2015). One of the concerns raised by young women was the fear that contraceptive use might result in infertility (Ochako et al. 2015). In the same study, one of the participants stated that contraceptives might bring about non-permanent sterility or decrease childbearing capacity (Ochako et al. 2015). Ochako et al. (2015) further state that some women were worried that injections have side effects, for instances, changes in one's physical appearances.

A South African study revealed that cultural taboos are a significant barrier to contraceptive use especially among young people (Lebese, Maputle, Ramathuba and Khoza, 2013). According to Lebese et al. (2013), in rural areas there is a silent condemnation of the use of contraception among young women as a result, they use contraceptives behind their parents' backs. This then becomes a problem because they hide the pill from their parents and therefore sometimes forget to take it, which then leads to pregnancy (Lebese et al. 2013).

2.2.6. Knowledge about contraceptives and contraceptive use

Many studies have confirmed that there is low contraceptive use among young people (Kinaro, Kimani, Ikamari and Ayiemba, 2015). The Demographic and Health Surveys found that in sub-Saharan Africa, three countries, namely: Ethiopia, Malawi and Rwanda, have successfully promoted contraceptive use, as a result, more people are using contraceptives (Africa Bureau and USAID, 2012). Although these countries have successfully achieved an increase to contraceptive use, an Ethiopian study revealed that early childbearing among girls aged 17 to 24 increased from 2000 to 2005 (Ayele, 2013).

Most studies conducted on young girls aged 15 to 19 years have found that adolescents hardly ever use contraceptives (Kinaro et al. 2015). In Kenya for instance, it is stated that more than 98 percent of young people are knowledgeable about contraceptives, however about 36 percent of young women give birth before the age of 20. South African studies are finding that the failure of young women to use contraceptives has become a public health concern because, it seems like instead, more and more young women are falling pregnant. (Seutlwadi, Peltzer, Mchunu, and Tutshana, 2012). The South African Department of Health found that in 1998 alone, there were approximately 35 percent young women who had their first child by age 19, and since then, this number has nearly become twice as much (Seutlwadi et al. 2012).

Early sexual debut has been linked with a rise in sexual risk behavior as well as a decline in contraceptive and condom use and unintentional pregnancies (Magnusson, Masho, and Lapane 2012). According to Magnusson et al. (2012), early sexual debut plays an important role in determining the use of contraceptives. Woman who start engaging in sexual activities before the age of 15 years are more likely to use contraceptives inconsistently (Magnusson et al. 2012). A South African study found that adolescents had knowledge of one or two contraceptive methods however, they had limited knowledge of a range of methods, as many of them knew only three kinds viz: the pill, condom and injection (Nkani and Bhana, 2016). Nkani et al. (2016) further state that most young women in South Africa are in the contradictory place of knowing about contraceptives, but seldom use any.

Contraceptives are provided free of charge in many countries in sub-Saharan Africa yet early childbearing is still an issue of concern. Botswana is one of the countries where contraceptives are offered free of charge (Hoquea, Ntsipeb, and Mokgatle-Nthabuc, 2013). A study in Botswana reports that students, particularly, are very much aware of contraceptive use (Hoquea et al. 2013). Female students reported being aware of the fact that contraceptives are not entirely effective especially when not used regularly, for example, condom use, skipping the pill or delaying taking of the injectable after the schedule time (Hoquea et al. 2013). An Ethiopian survey found that women aged 15 to 19 years showed great knowledge of contraceptives between 2000 and 2005,

however, out of the four sexually experienced females aged 15 to 24 years few used any method of contraceptives, especially married women (Ringheim and Gribble, 2010).

According to the O'Brien (2013), condoms continue to be the most popular contraceptive method among young people. Constant use of condoms among sexually active youth is of vital significance for sexual health and also very effectual protection against STIs, HIV and pregnancy among females (Widman, Noar, Choukas-Bradley and Francis, 2014). Although condoms are provided free of charge in public, young people have been reported to use condoms inconsistently (Kayiki and Forste).

A study conducted in South Africa on condom use among young people aged 15 years and older found that, more males (38.6 percent) than females (33.6 percent) reported using condoms in their last sexual encounter (Shisana, Rehle, Simbayi, Zuma, Jooste, Zungu, Labadarios and Onoya, 2014). As anticipated, condom use declined with age, with 58.4 percent of young people aged 15 to 24 years revealing that they used a condom at last sex (Shisana et al. 2014).

2.2.7. Parent child communication

Parents are supposed to be an important source of information for their children. Research indicates that parents' attitudes toward sex contribute towards young people's sexual behaviour, and that recurrent, open and constructive sex communication among parents, teachers and peers reduces risky sexual behaviour and encourage positive behaviours, as well as delaying sexual activity and encouraging the use of contraceptives (Harville, Madkour, and Xie, 2014). "Culture and cultural beliefs act as an inhibiter in mediating and addressing issues of sex and sexual and reproductive health" (Motsomi, Makanjee, Basera, and Nyasulu, 2016, p. 4). Parent-child communication about sex is forbidden bin some cultures; as a result, some parents would rather leave sex talk to initiation schools (Motsomi et al. 2016). Parents reported that they are even uncomfortable talking to their daughters about menstruation because they themselves never talked about reproductive health issues with their parents, but the things they know, they learnt from the initiation school (Motsomi et al. 2016).

Parents in sub-Saharan Africa, usually avoid sex talk with their children because their culture prohibits them to do so, as sexual discussions are regarded as a taboo in many cultures (Muhwezi, Katahoire, Banura, Mugooda, Kwesiga, Bastien and Klepp, 2015). In Uganda for instance, parents are forbidden to initiate sexual discussions and this responsibility is usually assigned to the close family members only, such as uncles and aunts (Muhwezi et al. 2015). Parent-child communication about sex is not frequent in the rural part of Nigeria where it continues to be a taboo to do so (Bastein, Kujula and Muwhezi, 2011). Parents tend to depict sex as risky, disagreeable, and distasteful in discussing with young people, and they worry that doing so would promote early sexual experimentation (Bastein et al. 2011). A study conducted in South Africa found that young people have good parent-child communication; however, their parents rarely discussed sex related topics with them even when adolescents themselves initiated the topic (Muhwezi et al. 2015).

2.2.8. Poverty and economic inequality

The substandard social and economic conditions appear to play a great part in increasing early childbearing rates (Lambani, 2015). A survey done in the United States and several other developing regions found that early childbearing is more prevalent among young women of low socio-economic status (Kearney and Levine, 2012). According to this survey, young women from low socio-economic status are more likely to have children at an early age and outside of marriage especially when they reside in places that are highly marked by inequality (Kearney and Levine, 2012). Poverty is considered as one of the factors that contribute towards early childbearing especially among young women who live under overwhelming poverty conditions (Lambani, 2015). It is a known fact that growing up in unfavorable circumstances, especially with regards to financial or social opportunities, like poverty, is connected with increased rates of early childbearing Kearney et al. (2012).

Research suggests that in most developing countries, the rates of early childbearing are higher amongst women from financially deprived families than those from wealthier families (Fatusi and Hindin, 2010). In South Africa, economic inequality also contributes to early childbearing (Flanagan, Lince, Durao de Menezes and Mdlopane, 2013). Fatusi et al (2010) further state that

young women who come from poverty-stricken families are more likely than those who come from well-off families to engage in risky sexual behaviour. Several studies have indicated that young women from disadvantaged backgrounds exchange sex for money with older males in order to meet their basic needs (Willan, 2013). A South African study found that these basic needs include things like cell phones and clothes (Bhana and Anderson, 2013). A Ugandan study found that girls from disadvantaged backgrounds engage in transactional sexual relationships with older men so that they can get money to pay for school fees, and in some cases, they sleep with these men to get a job (Bantebya, Ochen, Pereznieto and Walker, 2014). Poverty and financial dependency push young women into engaging in unprotected sexual activates with older men and even prostitution just to get money, and in extreme cases this money is used towards household needs such as food, and this is done as a way of earning a living (Bantebya et al. 2014). When adolescents engage in sex with older men, they are not able to decide whether they want to use contraceptives, thereby leaving them highly exposed to falling pregnant and therefore becoming mothers early in life (Willan, 2013).

2.2.9. Family structure

Several researchers have identified family structure as a contributing factor for early childbearing. According to Nkwanyana (2013), family structural characteristics have a significant part to play in influencing youth's sexual behaviour and childbearing. Unstable family structure has a major impact on young females' choices concerning childbearing (Hofferth and Goldsceider, 2010). It is important to also note that children who grew up as orphans are also more likely to become mothers at a young age (Beguy, Ndugwa and Kabiru, 2013). Growing up within a disorganized family makes young girls less eager to pursue education, delay intercourse, and use protection as a result they become mothers at an early age (Hofferth et al. 2010).

Young women who grew up in unstable homes are more likely to engage in premarital sex and have children out of wedlock and in addition, are more likely to cohabit. According to Thobejane (2015), dysfunctional families may be the cause of deviant behaviour among young people. In instances where children do not receive love and proper care from parents, they tend to look for it in wrong places (Thobejane, 2015). When young women feel rejected by their parents they are

more likely to engage in sexual activities at an early age thus becoming parents early in life (Thobejane, 2015).

Children of divorced parents are also more likely to engage in sexual intercourse at a young age (Nkwanyana, 2011). Nkwnyana claims that this is because in most cases single parents fail to pay attention to their children. Nkwanyana (2011) also postulates that mothers who fail to communicate with their female children put their daughters at risk of early sexual debut and possible pregnancy because instead, young women go to their male peers for sexual advice and closeness.

2.2.10. Peer pressure

Peer relations are especially essential for young people (Coyne and Onofrio1, 2012). Peers sometimes play a major role in the behaviour of other peers and it can either promote positive or negative feelings (Chakravarty, 2013). Peer pressure also occurs in higher institutions of learning (Chakravarty, 2013). Peer groups are very influential, particularly with young people because fitting in a group provides significance to adolescents (Chakravarty, 2013). Coyne et al. (2012) state that it is not shocking that peer attributes are especially vital determining factor of early childbearing. This study by Cherie and Berhane (2012) showed that peer pressure is the most significant factor connected with risky sexual behaviour among adolescents. According to Cherie and Berhane (2012), adolescents with friends who are involved in sexual activities are more likely to adopt similar behaviours. An 18-year-old girl mentioned that "I got [the older man] through peer pressure [...] you look at your friend with beautiful attire, and you too want it. Then when you ask how they got it, they will tell you that you get a man to provide. Later I wanted to have another man to get more things and I ended up in the sex trade" (Bantebya et al. 2014, p. 16). Peer pressure in conjunction with exposure to substance abuse worsens risky sexual behaviour (Tura et al. 2012).

2.2.11. Risky behaviour

Risky sexual behavior is a serious reproductive health problem among university students globally. Risky sexual behavior has more than one definition. According to Glen-Spyron (n. d.) one way of defining risky sexual behavior is by looking at unsafe sexual intercourse, and this could be anal,

vaginal or oral sex. Having sexual intercourse with a person who is infected by HIV, having more than one sexual partner and taking drugs through injections also form part of risky sexual behavior (Glen-Spyron (n.d.). Risky behavior predisposes young people to a variety of sexuality-associated problems including HIV (Akintola, Ngubane and Makhaba, 2011). Risky behaviours involve exploration and experimentation and can also result in serious health consequences (Cohen, 2011). Adolescents with no family or social support and too much freedom are more likely to engage in risky behaviours (Cohen, 2011). A study conducted with University students in Ethiopia found that, risky behaviour is sometimes aggravated by the fact that many students in the university experience the shortage of reproductive services and sexual facilities and they stay far away from their homes and are without parental supervision (Tura, Alemseged and Dejene, 2013).

2.2.12. Substance abuse

University students who drink heavily are more likely to be involved in risky behaviour thus restricting their capacity to use condoms and consequently risk falling pregnant (Mehra, Ostergren, Ekman and Agardh, 2014) Risky behaviour has been associated with risky sexual behaviour and early parenthood. Studies have shown that substance abuse is one of the leading causes of early childbearing. Kanti (2010) states that there are young women who conceive while drunk because they are unable to make good decisions because of alcohol consumption and thus they are less cautious. The study by Kanti revealed that when young women are too drunk, they tend to have unprotected sex and consequently fall pregnant (Kanti, 2010; Mosthiba et al. 2012). Mosthiba et al. (2012) states that as youth move through their adolescent years, they tend to drink more and an association has been observed between alcohol consumption and early childbearing.

Most adolescents consume alcohol because of peer influence. For instance, Conjoh et al. (2011) states that, in Sierra Leone alcohol consumption usually occur in social gatherings, often in organized dances and nightclubs. Boys and girls are influenced by their mates to drink alcohol during gatherings and they do that just so they can feel a sense of belonging at that time (Conjoh et al. 2011). However, this behaviour impairs judgment and loss of control among individuals; as a result, there is an increased likelihood of unintended and unprotected sex (Conjoh et al. 2011).

2.2.13. Multiple sex partners

Nowadays, having multiple sexual partners among young people is fairly common. Having more than one sexual partner exposes one to the risk of STI's and is also related to many sexual risk behaviors (Ken, Cheng, and Landale, 2010). According to Chistofides, Jewkes, Dunkle, Nduna and Sterk (2014), early childbearing was connected with multiply sexual partners followed by engaging in sexual intercourse with older men. A study conducted among Lund University students in Uganda revealed that thirty-nine percent of sexually active students have had more than two sexual partners (Alamrew, Bedimo and Azage, 2013). Engaging in early sexual debut and multiple sexual partners are risk factors for negative reproductive health outcomes including unwanted pregnancy and STDs (Coley et al. 2013).

2.2.14. Negotiating sex and condom use

Sexual health discussions are delicate and possibly uncomfortable for young people who are still learning to improve and retain intimate relationships and are frequently engaging in intimate experiences for the first time in their lives ((Widman, Noar, Choukas-Bradley and Francis ,2014). Most young women fail to talk to their boyfriends about sex because they fear that it will destroy their relationship (Kanti, 2010). They become mothers at a young age because they are scared of telling their boyfriends that they do not want to engage in sexual intercourse with them, and they do so because they feel the need to please them in order to maintain their relationship, which might suggest engaging in sexual intercourse without the use of condoms if asked to do so (Kanti, 2010).

In patriarchal countries like Uganda where gendered cultural standards and unequal power relations exist, females have little or no power in sexual relations (Mehra et al. 2014). A study focusing on university students in Uganda found that there is great risk of inconsistent condom use among women students compared to men students (Mehra et al. 2014).

The consistent use of condoms amongst young people who are sexually active is of vital importance because condoms do not only inhibit unintended pregnancy, but they are also good for preventing sexually transmitted diseases and HIV (Widman et al. 2014). Several studies conducted in sub Saharan Africa on the level of condom use among university students demonstrate the

worrying results considering the fact that university students are expected to be informed about the risks associated with sexual behaviour. One study found that condom use among university students vary according to the type of relationship, that is, students hardly used condoms with their frequent sexual partners and used them often in their occasional sexual encounters (Nkonzana and Maharaj, 2012).

Most families lack ways of talking to adolescents about sex and in some instances, some parents prohibit children from having sexual discussions (Klomegah, 2011). Some parents try by all means to control young people's sexuality and such circumstances result in decline in condom use (Klomegah, 2011). Young people who cannot afford to buy condoms do not use condoms because of the challenges they come across when they visit public health clinics to get free condoms, such as, clinic staff that tease and laugh at, or rebuke them (Klomegah, 2011). Some adolescents hold certain attitudes towards condom use, such as, condoms make sex uninteresting for both sexes (Thippeswammy and Gorvine, 2012).

2.2.15. Early marriage

Early marriage is common in many developing countries. Santhya (2011) states that South Asia and sub-Saharan Africa are indicated as the regions with a high prevalence of early marriage and the proportion is estimated to be a high of 55 and 50 percent. According to Santhya (2011), most females in developing countries marry before they reach the age of 18. Most children of early marriage are married off by their parents, and one of the stated reason for this is that, parents do not want their children to engage in sexual relations before marriage (Winter, Frances, Nambiath and Sindhu. 2016). One study found that in some countries, young girls are married off before they reach the puberty stage or at puberty, so that by the time they become sexually matured, they already have husbands, as a result, this will prevent them from becoming promiscuous (Boyden, Pankhurst and Tafere, 2012). The very same study found that, "families gain status by bringing their daughters up to be chaste and obedient; to have a prestigious marriage a girl must be a virgin and this is far more likely if she marries young" (Boyden et al. 2012, p. 517).

Early marriage is one of the factors that perpetrate early childbearing. According to WLUML (2013), it is imperative for women to have children instantly after marriage and therefore, it is not surprising that women who marry before the age of 18 tend to have more children than those who wait until they are old enough and ready. An Indian study found that young married women feel pressured to have children and this pressure comes from social norms that promote childbearing (Winter, Frances, Nambiath and Sindhu. 2016). In the same study, some participants reported that it is extremely important for them to conceive instantly after marriage in order to prevent people from talking about them and mocking them (Winter, Frances, Nambiath and Sindhu, 2016). Another study found that the pressure to conceive shortly after marriage comes from the husbands' desire to have children while the grandparents are still alive (MacQuarreil, Nahar, Khan and Sultana, 2016). Young girls are not considered in decision-making regarding childbearing, it is the man's right to decide on the matter (Fenn, Edmeades, Lantos and Onovo, 2015).

The society holds certain social expectations about marriage and fertility, especially for women (World Health Organisation, 2011). According to Agaba, Utuhaire, and Rutaremwa (2011), the primary aim of marriage is to have children. Marriage usually represents the start of exposure to the risk of childbearing in females (Kara et al. 2015). Most pregnancies in early marriages are unplanned and this according to Santhya (2011) is because young women are not able to effectively practice contraceptives. According to the WLUML (2013), most women in early marriages have very little or no access to contraception as contraceptive use is usually forbidden by the husband or the in-laws. WLUML (2013) further states that, women in early marriage are not given the freedom to decide when and if they want to have children. In many early marriages, especially in sub-Saharan Africa, females are expected to bear a child at the earliest possible moment shortly after marriage as a means to secure themselves in the marital home (Santhya, 2011).

2.2.16. Place of residence

Place of residence is one of the things that can drive early childbearing depending on the living conditions of that particular place. An Ethiopian and a Zimbabwean study found that that early childbearing is more common and high in rural areas that in urban area (Ayele, 2015; Mutanana and Mutara, 2015). According to Sulemana and Dinye (2014), in most rural areas, there is a lack

of health care facilities as a result people have to travel or walk very long distances to get to the nearest clinic or hospital, which is one of the main reasons why early childbearing is high in rural areas. Sulemana et al. (2014) state that, because of this, many women in rural areas reported inconsistences in contraceptive use. One woman cited that "I do not see why I should travel over 30 kilometers and pay for a transport fare of about GH₵15 just to access family planning service. My husband will not even give me the money" (Sulemana et al. 2014, p. 126). Despite the issue of the scarcity of health care facilities, Amoran, (2012, p. 4) states that in order to combat early childbearing, "Rural Health care services should make clinics and family planning centers more youth-friendly, and enhance community mobilization and information- education-communication (IEC) activities to promote family planning among youths".

2.2.16 Abortion laws

Almost all countries in the world have abortion laws and these laws differ according to each country. Legal abortion can sometimes restrict woman from having abortion even if they are not ready to have a child. Some countries have very strict abortion laws and these laws may act as a driver to have a child. Abortion in not legal in all countries of sub-Saharan Africa, however, in countries where abortion is legal, there are conditions under which abortion is permitted. In South Africa, abortion is permitted under the No. 38 of 2004: Choice on Termination of Pregnancy Amendment Act, 2004. According to the Government Gazette (2005), this law specifically states that women are only allowed to abort under the specified conditions. With regard to adolescents, the law also states that in case of a pregnant minor, the medical practitioner or registered midwife shall advise the miner to consult parents, family friend or guardian however, the minor should not be denied the right to abortion if she chooses not to inform her parents (Government Gazette, 2005). The issue with this law is that most parents are against abortion and they would not allow their children to have abortion. One study reports that teenagers who continued with pregnancy mentioned that when they told their parents that they wanted to have an abortion, the parents were disapproving of their decision and forced them to have the baby (Family Planning and Contraceptive Research, 2011).

2.3. Experiences of motherhood among university student mothers

Research states that becoming a mother is a life-changing encounter regardless of how old a woman is during childbirth (Texas Comprehensive Center, 2012). Parenting responsibilities can sometimes be daunting especially for students (Texas Comprehensive Center, 2012).

Student mothers experience difficulties meeting the societal and cultural expectations of motherhood, as they put great emotional and physical distress on themselves, which is seen as blame, physical fatigue, and mental distress, and a strong wish to drop out of school in spite of the worth they attached to it (Funiba, 2011). One study found that student mothers do not get enough time to spend and bond with their children, as a result, they found it hard to form close relationships with their children (Manalang, Liongson and Bayubay, 2013). In the same study, student mothers also stated their social lives changed tremendously as they could no longer do the things that they used to do before they became parents (Manalang et al. 2013).

University student mothers appear to have more or less the same attitudes towards early childbearing. Although they appreciate the fact that they are mothers, some stated that falling pregnant while at school was not intended especially considering the difficulties related to being a student mother and raising a child simultaneously (Esia-Donkoh, 2014). In a study by Esia-Donkoh some of the students who are married reported that, becoming mothers was not planned but it was due to failed contraceptives ((Esia-Donkoh, 2014). The very same study revealed that some students became mothers before they were admitted to university ((Esia-Donkoh, 2014).

In a study conducted by Taylor, student mothers reported that being a student mother compelled them to grow up faster than their peers and look at things differently because, on top of being students, they also need to fulfil their motherly duties Taylor (2012). In the same study, one participant stated that she motivates young mothers to continue with their university education however, she would advise young women to wait to have children until they are done with their education because it is not easy juggling school and parenting at the same time. Another participant stated that she has no regrets whatsoever about being a mother but she admits that it is a huge responsibility and it leaves her physically and mentally exhausted all the time (Taylor, 2014).

2.4. Challenges experienced by student mothers and how they cope

Many student mothers have stated that caring for a child is a huge challenge, especially when combined with schoolwork (Esia-Donkoh, 2014). Apart from being student mothers, they still have domestic responsibilities that they need to attend to (Adofo, 2013). "The division of domestic work and childcare seem unchanged for women who continue to take on the majority of such responsibilities, even with the addition of a student role" (Lyonette, 2015, p. 5).

Another challenge that has been stated is that of time management or time constraints. In a study conducted by Moreau and Kerner, student mothers mentioned time contradictory demands of being a mother and a student, as some of them have to take on part time jobs as well, in order to care for other dependents (Moreau and Kerner, 2012). The same study also found that student mothers struggle with balancing their time between their academic work, family, other tasks and friends (Moreau, et al. 2012).

The dual role of motherhood and studying is challenging so much so that student mothers have to find ways to cope. One study found that some student mothers used the following as their coping tactics: they prayed a lot to ask for strength and guidance; they considered their children as an encouragement to beat all the difficulties; and positive thinking (Manalang et al. 2013). Despite the challenges presented by being a student mother, Draper and Sharp (2003), state that even though taking the responsibilities of being a mother and student at the same time may pose difficulties, some student mothers persevere because the opportunity to obtain an education present them with dissimilar drives, experiences and benefits. Lyonette (2015) states that almost all student mothers pursue education because their goal is to advance their career prospects.

2.5. Experiences with support systems

Family and friend are regarded as a significant source of support for student mothers (Watts, Liamputtong and Mcmichael, 2015). When student mothers do not receive the adequate support they need to do well in school, their academic performance suffers. Although most families permit student mothers to go back to school after giving birth, student mothers still encounter difficulties

with regards to motherhood and academic work (Funiba, 2011). According to Lyonette, Atfield, Behle, & Gambin (2015) there has been proof that student mothers are underperforming academically compared to other groups of university students and this is due to the fact that virtually every single life situations of student mothers adversely influence their academic performance. However, with the help from family and extended family, academic improvement of student mothers is anticipated (Adofo, 2013).

According to Lyonette et al. (2015), significant others and other family members differ in their reaction to females taking on the student role, and support from partners seems occasional, even though vital. Bosch (2013) states that, although their studies influence nearly all aspect of a woman's life, student mothers succeed in dealing with problems with vastly advanced organizational time-management skills, frequently with partner support, and through giving up sleep and recreation time. Although it is hard combining responsibilities of motherhood with that of academic work, the burden is lightened when the student mothers have enough support from their families, friends and particularly the father of the child (Manalang et al. 2013).

2.6. Form of support system put in place by the university for student mothers

There appears to be a lack of studies on support systems put in place for university student mothers by universities. Student mothers state that support systems are of vital importance both at university and at home in order for them to obtain good academic results (Hopkins, 2011). According to Hopkins, (2011), student mothers that do well in school are those that receive good support system from their universities as well as from their families. Most universities in South Africa have a policy that is designed to help out students with their academic work. For example, the University of KwaZulu Natal offers programs like mentorship, tutors and student academic counselling. However, these programs are not strictly directed to student mothers but they are provided for all students in the university. In other words, the specific needs of student mothers are not accommodated for. A study conducted at the University of Western Cape found that student mothers are not even provided adequate support on campus (Funiba, 2011). Despite the fact that there is a lack of support systems for student mothers in universities, a study by Berg et al. found that the lecturers are not very understanding of student mothers' situation (Berg et al. 2013).

27

According to this study, student mothers mentioned that lecturers were not willing to provide suitable guidance and support, which affected their academic performance negatively (Berg et al. 2013)

2.7. Impacts of early childbearing

2.7.1. Socio-economic impacts

According to Lee (2010), childbearing is said to impact badly on the socio-economic outcome of young mothers compared to those women who postpone having children. Lee (2010) argues that it is however uncertain whether the negative socio-economic outcomes are due to the occurrence of childbearing in itself or from the socio-economic disadvantage young women confronted prior to becoming mothers. According to Sik (2015), culture, family and the setting of the community determine the socio-economic outcomes of young mothers. A Tanzanian study found that in a culture that regards motherhood as a central facet of women's identity; early childbearing especially among married adolescents is highly anticipated and accepted, whereas it is a different story for unmarried young women (Sik, 2015). Sekiwunga (2010) elaborates that having a child at a young age and out of wedlock is regarded as a disgrace, and consequently, young women who find themselves in that situation are usually rejected by their families and kicked out of their homes, leaving them without any means of support for both the child and the mother.

2.7.2. Educational impacts

The impact of early childbearing on education of young mothers is usually the negative as it is said to lead to unsatisfactory academic performance (Hellerstedt, n.d.). According to Texas Comprehensive Centre (2015), young mothers have shown a decline in their academic performance and this is due to the absence of support from family and school before and after the baby is born. Having a child at a young age restricts girls from continuing with school and pursuing their dreams because some of these girls are compelled to quit school and seek employment in order to care for their children (Greene and Marrick, 2015). "Early pregnancy and childbearing also have negative effects on schooling, and as schooling becomes more widespread, the impact of school withdrawal increases" (Greene and Marrick, 2015, p. 17). According to Basch (2011),

women who become mothers at a young age are more likely not to complete school or varsity, but for those who be able to continue with school are faced with serious difficulties regarding their academic attainment.

2.7.3. Health impacts

The age at which a woman gives birth plays an essential role in determining the health of both the child and the mother (Eguale, 2014). Early childbearing has a number of undesirable health impacts on both the mother and the baby (Greene and Marrick, 2015). A study conducted in Busia, West Africa revealed that children born to women under the age of 20 years have high risk of mortality and morbidity (Sekiwunga, 2010). New-borns of young mothers are more likely than new-borns to older women to be underweight and underdeveloped (Greene and Marrick, 2015). Hellersedt (n.d.) states that it is however uncertain whether this is connected to the mothers' age or to the unfavourable socio-economic conditions into which these children are born. Eguale (2014) states that early childbearing is not exactly the determinant of infantile health issues, but the problem is that adolescent mothers are less educated, not in stable relationships and lack prenatal care services more than older women.

Eguale (2014) claims that early childbearing also affects negatively on the health outcomes of mothers as its results in weight gain and excessive high blood pressure. According to Sekiwunga, (2010), the negative health outcomes experienced by young mothers are caused by the absence of access to resources and family support. Financial hardships faced by young mothers as a result of rejection or abandonment by family leave these women more susceptible to malnutrition which then leads to negative health outcomes (Sekiwunga, 2010).   Adolescent mothers have a greater probability of experiencing clandestine induced abortions, HIV and STIs (Beguy, Ndugwa and Kabiru 2013).

2.8. Summary

This chapter provided a detailed explanation of the objectives of the study. Several researchers revealed that the determining factors of early childbearing include factors like peer pressure, socio-

economic status, parent-child communication, contraceptive knowledge and use, barriers to contraceptives, risky sexual behaviour, etc. The challenges faced by young mothers were stated. The main challenge was that of juggling school and parenting all at the same time. Most student mothers revealed that having a child at a young age is not easy and it holds them back as they are now restricted as to what they can and cannot do. Research also indicated that early childbearing has negative consequences such as negative health outcome and negative socio-economic hardships. Research also showed that young mothers are happy to be parents but they wish they waited a little longer before taking on that responsibility. The drivers of early childbearing include early marriage. Early marriage encourages childbearing and young women are not given a choice to decide whether they want to have children or at least at what age they are most comfortable on taking the motherhood role. It also turns out that the place in which one lives can also influence the time of childbearing.

CHAPTER THREE: METHODOLOGY

3.1. Introduction

For many years, sub-Saharan African countries have been experiencing high fertility rate as a result this lead to many researchers writing about fertility, especially that of young people. As explained in chapter one, the overall objective of this study is to shed insights on the perspectives and experiences of young mothers who are also university students and this was obtained through the use of semi-structured interviews. A qualitative research method was used for the purpose of this study. This chapter provides explanations of all types of research methods used in this study. This chapter also provides a discussion of the research design. The location of the study is discussed in this chapter. Ethical considerations are explained in this chapter. Data analysis, validity and reliability are also explained in this chapter. Finally, the limitations of the study are provided.

3.2. Study location

Figure 3.1: Map of University of KwaZulu Natal
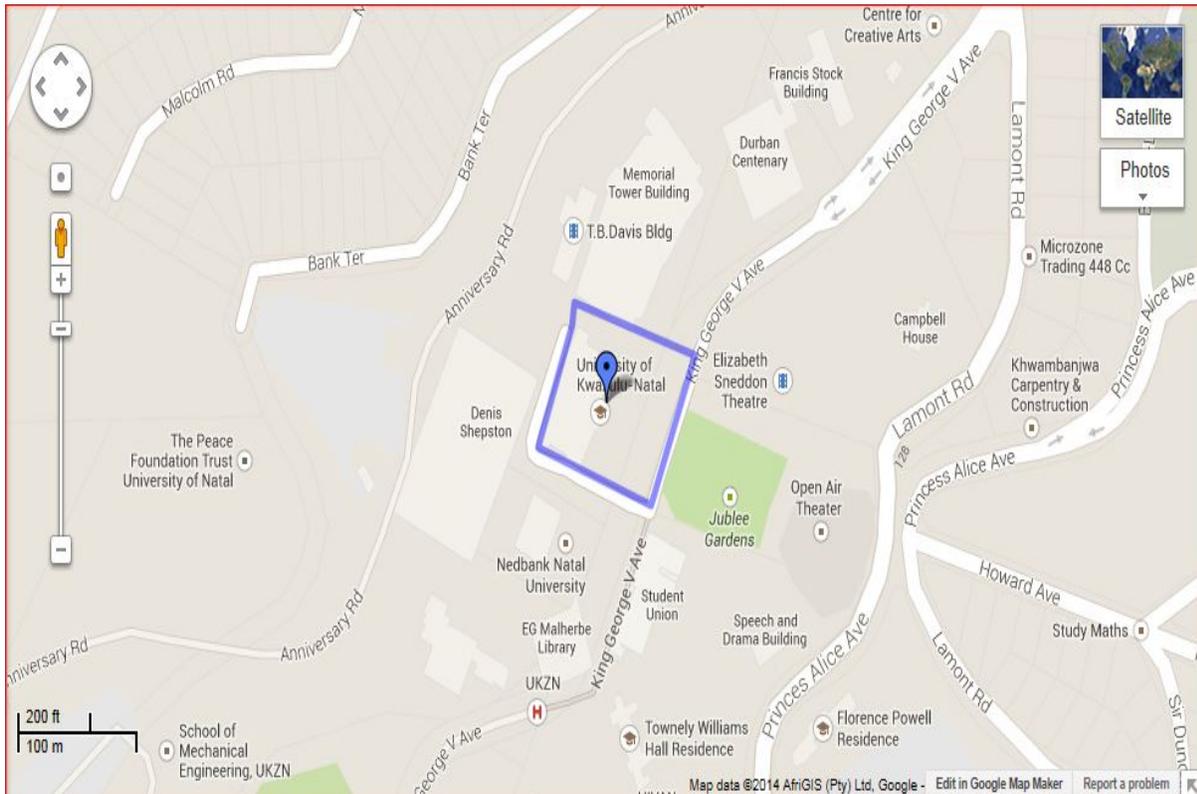
The study is conducted at the University of Kwa-Zulu Natal, Howard College in Durban, South Africa. Howard College is one of the five branches of the University of KwaZulu Natal and it is situated in Glenwood on Mazisi Kunene road. The University of KwaZulu Natal was established on 1 January in 2004 as a result of the merger between the University of Durban Westville and the University of Natal (www.ukzn.ac.za). The university comprises of students of all races: White, African, Indian and Coloured students, but for the purpose of this study, the focus is on African students. As mentioned above, South Africa's fertility rate has shown a decline over the years but the fertility rate of young people remains high. The study focuses on student mothers aged 18 to 24 years. UKZN is one of the biggest universities in South Africa and most students at UKZN are between the ages of 18 years and above, and it is for this reason that UKZN was selected for the study.

3.2. Demographic data

This study included 20 Black African participants who are young mothers. The participants were between the ages of 18 and 24 years. The participants come from different places around Durban and in surrounding areas.

3.3. Research design

A qualitative research method to conduct research was utilized for the purpose of this study. McCusker and Gunaydin (2015) state that qualitative research is distinguished by its objectives, which correspond to comprehending some aspect of social life and its approaches which mainly create words, rather than numbers, as data for analyses. McCusker et al. (2015) further elaborate that qualitative methods normally intend to understand the experiences and attitudes of people or the society. According to Hancock (1998), qualitative research is concerned with developing explanations of social phenomena. Qualitative research is defined as an approach that seeks to understand the naturalistic setting, or everyday life of a person (Hancock, 1998). Isaacs (2014) says that the aim of qualitative research is to aid people to comprehend societal events with the assistance of point of views and experiences of all people taking part in the research study.

Qualitative research has been greatly criticised by other scholars. Hammersle (2007), states that, following numerous years which qualitative research was extensively acknowledged, it worth has come to be questioned over again. Hammersle (2007) reports that, some people argue that abundant qualitative research is of sub-standard and there is an absence of evidently defined standards obtainable for judging it so that it is of indeterminate standard. Coates (2014) emphasizes that results attained from qualitative research are considered an inadequately vigorous form of evidence and therefore qualitative research is extremely faulty. For instance, Coates (2014) argues that the fact that the researcher is involved in the study means that one could easily argue that the results are subjective and less objective compared to those of a quantitative study. Coates (2014) further stresses that in qualitative research, the researcher is not detached in the research situation, which might lead to bias due to the researcher influence in data gathering.

This study focused on young mothers who are also university students. In this study, the qualitative approach methodology is used to understand young mothers' perspectives and experiences of motherhood. Qualitative research is most suitable for this study because it deals with peoples' experiences and the individuality of everyone's answers (Coates, 2014). In qualitative research, data are collected from people in their own environment, taking into account their own social and cultural situation (Coates (2014. p. 333).

An interview guide with open-ended questions was used as technique to collect data. Data was collected through the use of interviews (direct interaction- one on one basis). Interviews were held at the university's main library in the discussion room, since the interviews could not be done at the mothers' places of residence, as a way of avoiding disturbances from their babies or children. An interview is a useful way of obtaining large amounts of data quickly (Banister, Burman, Parker, Taylor & Tindall, 1994). In this study, semi-structured interviews were administered because they are open and enable new ideas to emerge during the interviews as a result of what the respondent says. Interviews can be done quite rapidly, with little cost, and are useful when a particular issue needs to be explored in depth (Law, Stewart, Letts, Pollock, Bosch, & Westmorland, 1998, p. 5). Interviews were tape-recorded and later transcribed for analysis. According to Cohen and Crabtree (2006), semi-structured interviews enable participants the right to convey their point of views in

their own words. Cohen et al (2006) also state that semi-structure interviews can give dependable, similar qualitative data.

The study comprised of 20 participants, aged 18 to 24 years old. Before each interview, the researcher explained the purpose of the study to the participants. In addition, the participants were asked to sign the informed consent form. Participants were also asked the permission to record the interviews.

Participants were recruited through the use of purposive and snowballing sampling technique. Purposive sampling refers to a non-random sample in which the researcher uses a variety of methods to locate all potential cases of a highly specific and difficult-to reach population (Neuman, 2009). Purposive sampling is suitable for this study because, although the University of KwaZulu Natal is a multiracial institution, this study only focused particularly on African women. Snowballing is a non-random sample whereby the researcher first interviews one participant and then from the information about acquaintances finds other people (Neuman, 2009).

The participants signed the informed consent form as a way of ensuring that they understood what the study entails and what their participation in the study means. Participants were asked for permission to record the interviews and they were also enlightened about the importance of recording their interviews.   Each interview lasted for about 15 to 20 minutes.

3.4. Ethical considerations

Ethical considerations are of vital importance in qualitative research. Ethical clearance to proceed with interviews was obtained from the Human Social Sciences Research Ethic Committee of the University of KwaZulu Natal. Soon after the ethical clearance was obtained, the researcher began with the interviews. During the interview process, the researcher first started by introducing herself and explained the purpose of the study. The researcher explained to the participants that their participation was entirely voluntary and that they can withdraw from the study at any point in time should they decide to do so and that there would be no repercussions for doing so.

If students find any questions distressing, they are told that they can withdraw from the study at any time. In addition, a health clinic is on campus that they will be directed to. Participants were also assured that the research data will be kept in a safe place where nobody can access it. Only the researcher and the supervisor will have access the data. In order to ensure anonymity and confidentiality, the researcher used pseudonyms as a way of protecting the participants' identity. Once the data had been analysed it was put away in a secure place and it was only reviewed for reference purposes.

The researcher provided contact details in case participants required feedback. Participants were also informed that after the research had been completed transcripts and audiotapes will be destroyed. The participants will benefit from this study and so the findings will be shared with them in the form of electronic copies if they request them. Since the interviews were conducted at the University of KwaZulu Natal Howard College, the researcher obtained permission to interview students on campus from the university. The discussion room at the main library was booked for the purpose of interviews.

3.5. Data analysis

Data was analysed and coded through the use thematic analysis. According to Alhojailan (2012), thematic analysis is used to analyse classifications and present themes or patterns that relate to the data. This allows flexibility in the researcher's choice of theoretical framework as it can be used with any theory that will be chosen (Orb et al. 2000). This will help the researcher to gain rich, detailed and complex description of data on what was heard through the interviews. The researcher familiarized herself with the data, immersing herself in the data through repeated reading, searching for meanings and patterns before coding it. In creating initial codes, data was coded into meaningful groups. Furthermore, data was sorted into different codes into potential themes, and collating all the relevant coded data extracts within the identified themes (searching for themes). Themes were then refined and renewed by reading all the collate extracts for each theme, and considering whether they appear to form a coherent pattern. The searcher then defined and refined the themes that she presented for analysis, and analysed the data within them, (Orb et al. 2000).

3.6. Validity and Reliability

Validity and reliability are concepts commonly used in qualitative research; however, the idea is most frequently used in every type of research (Long and Johnson, 2000). Reliability is descried as the degree of consistency or dependability with which a tool measures the attribute it is intended to measure (Polit & Hungler 1995). According to Long et al. (2000), dependability is rather a more suitable word than reliability for qualitative research (Sandelowski 1986; Hall & Stevens 1991; Robson 1993; Koch 1994).

According to Pilot and Hunger (1998), cited in Long et al. (2000), in the quantitative context, validity refers to the extent to which a measurement tool measures what it is supposed to measure. Although in qualitative research, validity is about avoiding type I and type II errors and Silverman (1993) argues that the refutability suggested by Popper (1999) is the

According to Ulin Robinson & Tolley (2005), the following four elements are used to ensure rigor in qualitative research: credibility, dependability, conformability and transferability. Credibility centres on the truthfulness of the results, as well as exact comprehension of the context (Ulin et al. 2005). Qualitative research corresponds with credibility, which is also referred to as the true value (Ulin et al. 2005). This is associated with validity. According to Ulin et al. (2005), reliability in quantitative research refers to the extent to which the results are replicable; however, dependability is an appropriate term for the qualitative study. Both the terms reliability and dependability focus on the dependability of the findings (Ulin et al. (2005).

Transferability, which is conventionally a qualitative term, is closely linked to the quantitative term, generalizability (Ulin et al. 2005). Transferability is vital in establishing whether the results of the research are transferable (Ulin et al. 2005). Confirmability, which is a qualitative term, is associated with objectivity in quantitative research (Ulin et al. 2005). "Confirmability thus means a way of knowing that, even as a coparticipant in the inquiry, the researcher has maintained the distinction between personal value and those of the participants" (Ulin et al. 2005). In order to ensure validity and reliability, the researcher will adopt these methods in the study.

3.7. Limitations of the study

This study focuses on young mothers who are also university students. The study only focuses on black Africans and does not apply to others races. There are many academic articles on early childbearing; however, very few of them focus on university students, especially in South Africa. And also, the little literature that is available is outdated. The goal of this study was to use recent literature, from 2010 to 2016, however it was very hard to get those articles. Another limitation with the study was that the study included young women ages 18 to 24 years old. The problem with this is that most studies on early childhood focus on teenagers or adolescents, which is young people from ages 10 to 19. A woman who is above 19 years old is neither an adolescent nor a teenager; as a result, it is quite confusing to categorize them because they are usually regarded as youth. The African Youth Charter (2006) defines youth as anyone who is between the ages 18 to 35

Early childbearing is a sensitive issue and because of this, it was very difficult to find participants. Most student mothers were not comfortable disclosing that they are mothers. Because of this, students who were interested to participate in the study were asked to go to the lecturer's office and provide their contact details. In this way, no one can identify the people who took part in the study. But even so, most students were still afraid to go to the lecturer's offices because they felt that the lecturer would know they have children. Most participants were obtained through referrals.

3.8. Summary

The research methodology of this study was explained in detail. The study used the qualitative research methodology as it is suitable for shedding insight onto perceptions and experiences of young mothers. The decision to use Howard College campus as the study location was based on the characteristics of students that are available on campus, such as race and age group. The semi-structured interviews were used in this study. Data was analysed and coded through the use of thematic analysis. Early childbearing is deemed a sensitive subject therefore this study was not without limitations. Ethical considerations were explained in detail as it is important for

participants to understand the study and know what their participation means to the study. Validity and reliability of the study was also explained.

CHAPTER 4: RESULTS

4.1. Introduction

This study aims to shed insight into perspective and experiences of motherhood among university students. The interviews were face to face and they were conducted on campus. This chapter will report on the findings of the study. It will provide the demographic information of participants. It will also discuss the perspectives and experiences of motherhood as portrayed by the participants paying more attention on the support systems put in place for student mothers both at home and at the university, the impact of motherhood on finances, the impact of motherhood on their social and academic life and the copying strategies.

4.2. Demographic details of participants

Table 4.1 shows the demographic information of the 20 participants that were interviewed. In order to ensure confidentiality of participants, pseudonyms are used. In other words, the names that appear on the table are not the real names of participants. All participants are African women and they are from places around Durban. All the participants live in the same household as their children. These participants travel to and from campus daily. The specific reason for choosing these participants is that, the experiences of student mothers who live in the same house as their children are different from those of student mothers who do not live with their children. This study is aimed at understanding the experiences of student mothers who are raising their children by themselves.

Some participants had children before they came to varsity, and others had children while at varsity. Table 4.1 shows the age at which these participants had their first child. Showing age at first birth was important for this study because some participants have more than one child. The participants' average age at birth is 19 years old. This indicates that most participants had their first child in their teens. As demonstrated in Table 4.1, 11 out of 20 participants had their children in their teens. Most participants are single parents. Only three participants are married. Some participants are undergraduates and other are postgraduates.

Table 4.1: A demographic profile of participants

Interview	Pseudonym	Age at interview	Age at first birth	No. of living children	No. of times pregnant	Level of study	Marital status	Place of residence
1	Nonku	23	18	2	2	Post-grad	Single	Umlazi
2	Pearl	23	23	1	1	Post-grad	Single	KwaNdengezi
3	Andile	24	21	1	1	Post-grad	Single	Ngonyameni
4	Mbali	24	20	1	1	Post-grad	Single	KwaMakhutha
5	Sli	24	24	1	1	Post-grad	Single	Umbubulu
6	Mpume	21	19	1	1	Undergrad	Single	Umlazi
7	Amanda	19	19	1	1	Undergrad	Single	Hammersdale
8	Sindi	24	15	2	2	Undergrad	Married	KwaMashu
9	Thulile	24	22	1	1	Undergrad	Single	Ntuzuma
10	Zandi	23	21	1	1	Post-grad	Single	Chesterville
11	Thando	23	20	2	2	Post-grad	Single	Glenwood
12	Dolly	24	22	1	1	Post-grad	Single	Adams
13	Zama	24	16	2	2	Post-grad	Married	KwaMakhutha
14	Philile	22	18	1	1	Undergrad	Single	Pinetown
15	Neliswa	21	17	1	1	Undergrad	Single	kwaMashu
16	Fikile	23	20	1	1	Post-grad	Single	EFolweni
17	Thabi	20	19	1	1	Undergrad	Single	Elovu
18	Noma	23	17	1	1	Post-grad	Married	KwaMashu
19	Phindile	24	16	2	2	Undergrad	Single	Welbedacht
20	Phumla	21	19	2(twins)	1	Undergrad	Single	Lamontville

4.3. Becoming a mother

Motherhood at a young age is said to be very challenging, especially when combined with school. However, although challenges exist, young mothers appreciate and embrace the experience of being mothers. Taking on the responsibilities of motherhood and academic work is very stressful and it requires hard work and dedication. One of the major challenges student mothers face is that of financial instability. This is partly because most of them are unemployed. Those who have jobs are working on a part-time basis and their salary is not enough for them to cover all their children's expenses. Although motherhood is challenging, participants reported that they find comfort in knowing that they can love and be loved unconditionally. Almost all the participants have positive feeling about motherhood. Feelings of joy and contentment were communicated. It came out several times during the interviews that becoming a mother gives meaning to their lives, in a sense that now they have someone to live for, someone who is fully dependent on them.

> *It is great, I am very happy. But sometimes there are challenges, especially since I am still a student (Sindi, 24 years old).*

> *Tt is a good feeling, but I will not lie its tough. Especially when you are young and unemployed. Sometimes I feel like I am not coping, but the child is already here, I have to be strong for him (Philile, 22 years old).*

> *It is a good feeling, you know. I love being a mom but it has its own challenges, however, it is nice to know that you have someone who loves you no matter what, just the same wat you love them, you know. But it is hard, especially when you are a single mom like me. But, overall, I am proud to be a mom. My children are my everything (Phindile, 24 years old).*

Although most young mothers find motherhood challenging, some turn to spirituality as a way of dealing with those challenges. For example, praying to God when things got tougher. One participant even went on to say that she believes God gave her the responsibility of being a mother because he trusted her with the responsibility.

Being a young mother is challenging, but I am a firm believer in God and I trust that he wouldn't give me more than I can handle. So whenever I feel like I can't cope anymore, I just talk to God and somehow I feel better (Andile, 24).

4.4. Changes due to motherhood

Most women say that having a child changes a person. The interviews revealed that when women become mothers, their priorities change and the way they perceive life also changes. They mention that being a mother comes with personal growth. For instance, it has made them more caring, mature, selfless and loving. Some participants claim that motherhood made them wiser and they had to grow up faster than their peers. Most of all they learned to be responsible. Becoming more responsible meant putting their children's needs before theirs and understanding that not everything is about them anymore. They also had to make many sacrifices, like quitting their old life habits, such as partying and going out with friends. Some participants observed changes in their relationships with their parents. For instance, their relationship with their parents was ruined. They experienced abandonment, rejection and silent treatment from their parents. Some parents even withdrew pocket money and told participants to find means to make their own money. These experiences made some participants more focused and eager to succeed.

Some changes included physical exhaustion, many sleepless nights and moods changes. This was caused by lack of sleep due to breastfeeding or taking care of the baby throughout the night.

My relationship with my mother changed. Well my mom and I didn't have a good relationship even before I had my kids, we've never been close, so when I fell pregnant, it went from bad to worse. My having a child really affected us to a point that we were not talking to each other anymore, she didn't even regard me as her child. I had to wake up, I had to decide what I had to do with my life (Nonku, 23 years old).

Not everything is about me. I have to think of another person who is 100 percent dependent on me. Sleepless nights and days have changed my moods and I am always tired (Pearl, 23 years old).

I could say that it changed for the best because then I learned to be more responsible and then I started looking at things and life in a different way. And I think I grew emotionally as well (Mbali, 24 years old).

My life has changed a lot. It is not the same as before, you know. You can feel it. I can't speak for other mothers but I can say that I am not a child anymore. There are things that I must compromise as a young person. I can feel that I am an adult now that I am a mother. I have people to think of. It is not the same as before when I had no children. I had to grow up very fast since I had my first child at 15 (Sindi, 24 years old).

4.5. Confusion, doubt and self-disappointment

Having a child at a young age is accompanied by feelings of confusion, doubt and self-disappointment. Young mothers experience these feelings because when pregnancy occurs, they are still in school, they are still trying to find out who they are as young women, and they are trying to pursue their dreams. Some of them were still children themselves when they fell pregnant and they can hardly take care of themselves, and now they have to face the reality of having to look after a child. The biggest issue for most participants was coming to terms with their pregnancy. When young women become pregnant, decisions have to be made. One of the decisions participants struggled with was whether they wanted to keep the baby or not. Most participants had mixed feelings. They reported feelings of uncertainty. Others wanted to have an abortion. One of the participants who felt the strong need to abort stated that she felt betrayed and let down by her partner when he denied paternity of the child. Situations like this lead to resentment of the child and even considering adoption. Other participants reported feelings of uncertainty because they thought that they were not ready to become mothers and they were not ready to give up their current lifestyle, such as partying, going out with friends, and so forth. Fear of parents' reaction and being judged also added to uncertainty. But, most of all, most participants reported feelings of self-disappointment, particularly because they felt that they let themselves down.

At first, I had a difficulty accepting it. I even thought about having an abortion, especially after the baby's father denied the child, but I could not do it. I was so hurt and disappointed in myself. When the baby was born, I resented it because of what the father did to me. I wanted to give her up for adoption but my mother set me down and talked some sense into my head (Thabi, 20 years old).

At first, I had mixed feelings about it. I was not sure whether to keep the baby because I was not ready but as time goes by, I accepted. Then when the baby was born again I had kind of mixed feelings because of not sleeping and you know… not having to do everything you liked to do before you were a mother (Sli, 24 years old).

I was really scared in the beginning because I didn't know what to expect or if I wanted to keep the baby. I was very disappointed in myself and I felt like I let myself down. I was scared of what my parents were going to say, and I was also afraid that people were going to judge me. There were times that I wanted to have an abortion but I could not because I am a Christian and I strongly believe that abortion is a sin (Amanda, 19 years old).

4.6. Aspirations for the future

Having a baby at a young age can be a motivation for many young mothers to achieve their dreams. Many participants reported being more focused and career drive since they became mothers. The urge to become successful stems from the desire to provide for and give their children a better future. Some participants reported that raising a child is not easy and therefore it is important to have a job. Education is their ticket to better paying jobs.

Motherhood is one of those things that encourages you to want to do better not just for you but for your child too (Mpume, 21 years old).

Once you become a mother, you have to make sure that your child has got each and every thing that he needs. That is why is so important to get a degree so that you can get a nice job and be able to do all these things for your baby. When you have a child, and that does

44

not wake you up, I do not know what will happen. As soon as you have a child, you know it is not just about you and what you need anymore, but it is all about that person that you brought in this world (Thulile, 24 years old).

My children make me want to be a better person. They motivate me to work hard because I want nothing but the best for them (Phumla, 20 years old).

4.7. Motherhood and women's status

Some woman perceive motherhood as an achievement of womanhood. For example, one of the participants stated that ever since she became a mother, she feels like a real woman. According to some participants, motherhood provided them with a sense of identity and acceptance within their communities and family. Motherhood provides a sense of identity in a sense that when a woman becomes a mother, especially in African societies; she is referred to as somebody's mother. People might not know a woman's name but if they know her child they call her by her child's name, for example, so-and-so's mother. When women become mothers, regardless of how young they are, they are expected to behave in a certain way, a way that is different from their peers. They are expected to instil morals and become role models to their children. They are no longer considered children, they are treated like adults. Married participants observe that having children provided them with respect and dignity in their communities and families. The main purpose of marriage is to start a family. When a woman gets married, she is expected to have children shortly after marriage. Failure to have children leads to being shamed and called names.

I enjoy being a mom. I really feel like, as married woman, having children is very important. When you have a child, even your in-laws gives you that respect because you gave them a grandchild and they respect you as a woman. I also feel like a real woman. If I did not have a child I would be very worried because sometimes when you are married and you do not have children, people call you names, oh poor woman, she is barren. For me being a mother is a great feeling and it gives me that dignity within the family (Zama, 24 years old).

I feel a sense of pride. Sometimes you get recognized as a woman when you are a mother and you have given birth and all. I feel like my grade as a woman has gone up, like I am on another level as a woman. So I feel proud to be a mother and have kids (Nonku, 23 years old).

I enjoy being a mother, it makes me feel like a real woman, knowing that I brought someone in this world (Dolly, 24 years old).

4.8. Support from parents

Most young mothers are single parents and they live in their parents' houses. Thus, they receive both financial and emotional support from their parents. It appears that most participants' parents pay for participants' tuition and do everything for the participants' children. Most young mothers are unemployed, as a result, they are unable to do anything for their children, particularly things that require money. The manner in which participants receive support from their parents differs. Some parents are fully involved in raising grandchildren. That is, they provide both financial and emotional support. In this case, the children's fathers are not involved in their children's lives in anyway, or they are there emotionally but they cannot afford to do anything because they are unemployed. Other parents only provide emotional support. That is, they look after participants' children when they are at school. In this case, the children's fathers are fully involved in their children's lives. Out of the 20 participants, 16 receive support from their parents and four receive no support from their parents whatsoever.

I'm still a student and I am unemployed. My mother helps with my half which is the nanny payments and stuff. And she also pays for my tuition fees (Nonku, 23 years old).

My parents provide emotional support and they help me at night when the baby is crying. They do the things I cannot do. It's like I co-parent with them, especially my mother (Pearl, 23 years old).

My mother looks after my baby when I am at school because she is unemployed and is always at home. My father is the one with a job so he does support my child financially. Actually, he does everything for my child (Mpume, 21 years old).

My parents are pensioners so I receive support because they are there, but financially I have to take my son to crèche and I have to pay all the costs that are due (Andile, 23 years old).

Some participants do not receive any form of support from their parents. The reasons for this are: they do not live with their parents because they are married; both parents passed away and they were kicked out of the house after pregnancy or they are cohabiting with their boyfriends.

Unfortunately, I do not receive any support from my parents. I do not stay with my family they are in Vryheid and I stay in Durban. (Sli, 24 years old).

My parents both passed away. Before I fell pregnant, I was living with my grandmother, but after she found out that I was pregnant, she kicked me out of her house. Then I moved in with my boyfriend, my child's father (Fikile, 22 years old).

4.9. Fathers' involvement

Most student mothers are unemployed and therefore child support from the children's fathers is very important. Because most young father do not live with their children, one of the ways they are expected to be involved in their children's lives is through financial support. Unfortunately, because of compelling circumstances, such as unemployment, some fathers are unable to provide their children with the support that they need. Out of the 20 participants that were interviewed, 14 participants reported that their children's fathers were assisting in raising their children, and six participants said that their children's father were not involved in any way. Amongst the 14 fathers that are involved, some of them are not fully involved. For example, some fathers only provide emotional support because they are unemployed. They do this by taking their children to visit their side of the family on weekends and on holidays. Some fathers are very involved. They do

everything for their children like paying for daycare, buying clothes and food, and everything else that the child needs.

I have two different baby daddies; they are both very involved. They both contribute financially and emotionally, where financially, they pay for everything that the children needs. And emotionally, they do visit the kids and my daughter, she's the oldest she goes back home {her father's house} and he {the father} is always there all the time. He tries his best to be there even though we are not together anymore. And the second child, his father, it's almost the same (Nonku, 23 years old).

He is involved in raising the child from afar. Not as us being together. But it was obviously better when we were together we would sit down and discuss and see where things go. But he is involved in his children's lives because he does come and fetch them. He spends time with them, he calls them (Thando, 23 years old).

He is in a way. We are no longer together but he knows that he has a child with me but he is a student like me so he does not support the child financially because he is unemployed. He usually takes the child to see his family especially on weekends. Sometimes he does piece jobs here and there and when he has money he does buy things for the baby (Mpume, 21 years old).

Some fathers are not involved in their children's lives. The reasons for this included death of the father, denial of paternity of the child and choosing not to be involved. When fathers deny paternity of the child and choose not to be involved in their children's lives, mothers reported feelings of humiliation, hurt and anger. They believe that the fathers were running away from their responsibilities and they made it seem like they were unfaithful in their relationships. But most of all, they were angry because they were worried that their parents were going to think that they are living a promiscuous lifestyle.

No. we broke up before my child's birth. He somewhat like distanced himself from us when I was still pregnant. So he doesn't support the child in any way (Andile, 24 years old).

No, he passed away when the child was like eleven months old (Fikile, 23 years old).

No. he denied that the baby was his, so we do not even communicate anymore. In fact, I want nothing to do with him (Thabi, 20 years old).

4.10. Type of day care

When student mothers go to school, they have to make arrangements as to where they are going to leave their children, or who is going to look after their children while they are at school. Participants reported that while they are at school, their children are taken care of by their grandmothers or nannies, others go to crèche and others go to school. Some children go to crèche because there is no one to look after them during the day. For student mothers who leave their children with nannies, it is either they or their parents can afford to pay for nannies. Some student mothers leave their children with their mothers because their mothers are housewives and they are always at home. It appears that the most reliable type of day care is the grandmothers, crèche and school. The nannies on the other hand, are said to be unreliable. Sometimes they do not come to work and sometimes they come late. And then the mother is forced to miss lectures or come to lectures late.

My mother is unemployed so she looks after the child when I am at school (Mpume, 21 years old).

The youngest goes to crèche and the older one is in primary school (Sindi, 24 years old).

The aunt or the nanny. I do not know how to put it; nanny just sounds so wrong. But yes, the aunt. But the aunties are very troublesome because like, you think this is like, okay obviously I chose aunt not because I wanted it that way, but because like, crèche, crèche is so expensive. Lilliput is like R2300 per month for one child and I have two, so it is only like half price if you are a student. But where are you expected to get the money from (Thando, 23 years old).

49

4.11. Family reaction

Having a child at a young age does not only affects the person who is pregnant, but it also affects the parents of the pregnant person. It causes conflicts within the family and as a result, there is family division. Some participants reported that they were kicked out of the house when parents learned about the pregnancy. Other parents had difficulty accepting the pregnancy. Feelings of anger and disappointment were also mentioned. But most parents were rather shocked because they were not even aware that their children had boyfriends since they fell pregnant at a very young age. Some participants reported that their relationship with their parents changed for the worst. However, after the child's birth, they were forgiving and they accepted the child. Some participants have more than one child. Parents were not happy with the first pregnancy but they soon accepted the situation and they welcomed the new member of the family. The second pregnancy on the other hand, was quite difficult. Parents were furious because they felt that the participants did not learn from their mistakes. It took some time for them to warm up to the idea. Although they love their grandchildren, they had difficulty trusting the participants. The reaction is however different for the married and engaged participants. It appears that having children at a young age and while in varsity is celebrated. Participants reported that having a child in a marriage is a priority, at least for the in-laws. The most important thing for the in-laws is having someone to carry on the family name. When asked about how their parents reacted after they found out about the pregnancy, they reported that:

> *I first got a lecture, it was hard for me. I felt abandoned by the whole family, but with time, when the baby came, things got better. It is like they were happy for a new life, a blessing, such that a baby is regarded as a blessing in my family. So as soon as the baby came into the world, things changed, they started offering support and they would buy stuff for me, but when I told them I was pregnant, it was emotionally stressful. I will get a lecture anytime of the day. My mother would even call me from work if she felt like she needed to take out that anger. When I got pregnant for the second time, my mother was so angry she even hit me. She did not hit me when I was pregnant for the first time but the second time, I guess she could take it and she could not hold herself she hit me (Nonku, 23 years old).*

My first pregnancy was hard. My mother was almost admitted to the hospital, because I was too young. I was only 15 years old. And she was not expecting it. She did not even think that I had a boyfriend, and even worse, sexually active. It was such a shock to her in such a way that she even thought that I was raped (Sli, 24 years old).

I was kicked out of the house. That is how bad it was. Even to this day, my grandmother has never called to ask about me or my child (Philile, 22).

The first one my mom was okay with it. My dad, for the first one, he cried. It was so sad. He could not believe it, obviously, besides, I was a virgin before I had a child, obviously that was understandable. But with my dad, the second one, he was okay with it. He was like no, he is grateful that I didn't have an abortion because most people my age, that's what they do, and it was so soon hence my son is 3 and my daughter is 2, so it was really too soon. So my mom, she wanted to kill me, you know. She wanted to throw me over the building (Thando, 23 years old).

4.12. Contraceptive use

Failure to use contraceptives may result in unplanned pregnancies. Most participants admitted that they fell pregnant because they did not use contraceptives. Their pregnancies were due to carelessness. They did not take precautions prior to or after sexual intercourse. Although they were aware that they were not using any method of contraceptives, they did not use a condom or the morning after pill to prevent the pregnancy. They stated that they knew about contraceptives but that wasn't enough to get them to use any method. The boyfriends played a role in the lack of contraceptive use as they fed them all kinds of inadequate information. Participants were told by their boyfriends that if they use contraceptives such as the injection or a pill, they will ruin their bodies. Boyfriends told them that their bodies will sag and will be filled with water.

I had sex for the first time and I feel pregnant. And at the time, I did not even think about contraceptives let alone falling pregnant. I do not know. I think I was just young and dumb to even think about using protection (Nkule, 23 years old).

51

I am well informed about contraception but I still went on and had unsafe sex. Thing is, when you are having sex you do not think about pregnancy and then when it happens you are like, what was I thinking. And even worse, we have a clinic at campus, I could have gone there and took an injection or pills, but I did not. It's not that I didn't know about contraception but, I guess it's no use crying about it now (Pearl, years old).

When I fell pregnant I wasn't using contraceptives. I heard people say all sort of things about them, that they change your body, they make it all jiggle, they make you fat and they make you wet. And I had no one to talk to about this at home (Amanda, 19 years old).

So, the second one, their father was the one who was like, no, don't use birth control, your body will get all tired. And there I was. He was like it will sag. He was like injection will make you wet and stuff (Thando, 23 years old).

4.13. Effects of motherhood on finances

Money plays a significant role in raising a child. Having a baby in the household can change the financial situation of the family, depending on the family's financial situation. Raising a child is expensive because children have different needs that those of adults. Raising a child can be financially strenuous on financially disadvantaged families. Most young mothers are unemployed and they depend on their families to assist with their children's needs. In cases where the family is struggling financially, some student mothers are forced to look for part-time jobs in order to be able to contribute towards their children necessities. Some participants reported that they have part-time jobs because their parents are unemployed and they cannot afford to assist. Other student mothers receive help from their parents but they still have part-time jobs because they feel that it is their responsibility, although their parents are covering most of the things. Participants claim that having children has really affected them financially because when they have money, they cannot just keep it for themselves but they have to contribute whenever they can. Those who get help from their parents use the little money they get from their part-time jobs to pay for crèche, nannies or lunches for their children. Those who do not receive any financial assistance from their

parents, all their money goes towards their children. They use it to buy nappies, formula, and so forth. Other participants do not do anything for their children; their parents take care of everything.

> *I went from being a cool kid, when I had money, latest phone, latest of everything. I went to wearing vintage, which is R5 shirts and everything else, because it was tough. I do not want to lie it really affected me because every cent that I get goes toward my kids. I mean, I have to think about formula, I have to think about nappies, I have to think about care, just in case they get sick. I mean kids do not eat everything that adults eat. I had to think about their things, their needs first before mine. Sometimes, obviously I would sacrifice my hair. You see the hair that I have, is so natural right now (Thando, 23 years old).*

> *Having a baby doesn't affect me because I didn't have money before the baby was born and I still don't have money even now. My parents do everything for the baby and me. So, they are the ones who are affected. Especially since the baby's father is also unable to contribute because he is a student and unemployed (Dolly, 24 years old).*

Some participants live with their boyfriends and others are married. These participants do not receive any financial support from their families; as a result, it has left them financially stretched. Their partners take care of everything. Their partners pay for children's school fees, crèche, formula, food and clothes. On top of that, the partners also take care of the mothers' needs, such as pocket money, and even tuition fees. Participants reported that they had to put some things on hold because of lack of finances

> *It does affect our finances; I do not want to lie. Okay, I am unemployed and my husband does everything that needs to be done at home. He pays the bills, my tuition fees, the kids' school fees and buys food for everyone. It affected us the most after I had given birth to my second child because now we have to buy pampers, formula and other things that the baby needs (Zama, 24 years old).*

4.14. Effect of motherhood on social life

It is expected of women to make changes in their lives after having a child, or at least the circumstances force them to make changes, especially changes that concern their social lives. One of the biggest changes may include cutting down on social activities. This means spending more time doing schoolwork and taking care of the baby. Having a child is demanding and time consuming. Student mothers have busy schedules and their schedules restrict them from hanging out with their friends or committing to social events. Most student mothers reported that now that they are mothers, they could not come and go as they please. If they have go somewhere they need to organize someone to look after their children in their absence and their reason to go anywhere has to be very good one. They can no longer do the things they used to do before they became mothers, and they cannot do the normal things their peers do. They also observed changes in the behaviour of their friends. For instance, some of the participants felt that their friends were pretending to be nice to them in their presence but when they were not there, their friends talked about them behind their backs. Other friends lost interest in the friendship; as a result, some friendships were lost. Participants reported that they lost some of their friends because their friends failed to understand that their priorities have changed. For instance, most young mothers prefer to do most of their schoolwork while they are on campus because when they get home, they have to take care of their children. So most of the time is spent at the school library or LAN doing schoolwork. Because of this, they do not even have time to socialize with their friends on campus. Even on weekends, some student mothers come to school just to do their academic work.

> *I cannot do things like that normal 23 year olds do. Maybe it's because I am not an outgoing person, but sometimes when I want to go out I have difficulties going out because I feel the need to stay at home because I am a mother to my kids and my social life has been really affected. Many things have changed (Nonku, 23 years old).*

> *My social life is on hold. To be honest it is pretty much on hold, until maybe my son is one-year-old. And for the fact that I am breast-feeding, I cannot just go anywhere. I am very shy to breast feed in public, so I spend most of the time in the house, you know. And just go out if I am going to go with him. I cannot just go out alone (Peal, 23 years old).*

I do not really have a social life. My baby is only 7 months old, so when I am not at school, all I do is take care of her. I do have friends on campus but I do not spend much time with them. When I am not attending you always find me at the LAN. I try by all means to do as much school work as I can when I am on campus because the minute I walk into my house, everything is about the baby (Amanda, 19 years old).

As soon as you become a mother, your relationship with your friends change and sometimes when you have a child, some friends do not want to be associated with you. It is like you have a contagious disease or something. Because I had a child in high school, I lost friends because apparently, I was a bad influence and if they befriended me, they were going to fall pregnant too (Philile, 22 years old).

4.15. Effect of motherhood on academic life

Motherhood is said to have a negative impact on the academic lives of most student mothers, particularly because there is hardly enough time to concentrate on academic work. Most participants reported that they could not do anything at home because their children are there and they demand their attention. Even when they are on campus, there is not enough time for school work because they spend half of their time attending lectures and when they are done with classes they have a few hours to do their work before they go back home. Most of them have to leave school by 4 o'clock in the afternoon so that they do not miss their transport and they can avoid long queues at the taxi rank or bus stop. Even when they are at home, they still cannot focus on their academic work because there are too many interruptions. They have to do chores and also pay attention to their children. The only time they get to do their work is when the child is sleeping. But, sometimes they are unable to do their schoolwork properly because the child has kept them awake the entire night and it is only when the child sleeps that participants try to do their work. Sometimes they would try to do their schoolwork, and then the baby would start crying, and then they are forced to drop everything they are doing and pay attention to the child.

My academic life was really affected. I think it because at the time I was not used to having a child, so it really affected me badly. Now all of a sudden, I had these new responsibilities

55

and I was clueless as to how I was going to handle everything. It felt a little bit too much. I had sleepless nights, and I was always tired. Sometimes I would fall asleep during lectures (Thabi, 21 years old).

Academically, it is hard, because I do not get enough time to focus on my work. I work well when I am at school because there are no distractions. Unlike at home, I try to do work and the child comes, he wants to play with you and he wants this and that. I always come home late because of public transport. If I want to be home by five, I have to leave at least at 3:30 to avoid long queues at the taxi rank. Then when I get home, I have to cook, feed the baby and wait for him to sleep before I can even start doing my schoolwork (Philile, 22 years old).

Academic wise, I cannot study at home. Because when I am there, one is pulling me this side and the other one is pulling me this side. I cannot focus at home because they want my attention. Obviously, I have to come to school. Even at night because we have so much work. I mean, I cannot really do my work properly because I have to give them my attention. I do not know how to explain this to you, but it is so complicated. Like, when I got them it was complicated because at the time I was not used to having a child and having schoolwork, so work piled up because I was a second year then and I was supposed to breast feed. You see? Imagine. So, I did not do so well. But now I am used to having children and when I want to do my work I come to school (Thando, 23 years old).

Some participants are lucky enough to have supportive parents, and consequently, their experiences are totally different than those who do not receive as much support. Student mothers who do not receive support from their family members tend to struggle academically. Some participants mentioned that when they are busy with schoolwork, their mothers are there to look after the child as a result they do not get distracted.

I am managing academically, because my mother is there and she is very supportive. So, when I am busy with my academic work, she looks after my baby (Dolly, 24 years old).

4.16. Challenges faced by student mothers

Student mothers face many challenges. Financial hardships and time management or time constraints are among the stated challenges. Student mothers barely have time to do their schoolwork, especially at home, because their children keep disturbing them. Some participants reported that even when they try to create their own study timetable; it does not work because of the disturbances caused by the children. Most participants said that they experience sleepless nights, and these sleepless nights have nothing to do with their schoolwork but everything to do with their children keeping them up all night.

> *Time for me is the major problem. I do not have enough time to do my schoolwork and I have too many responsibilities. If I have maybe a submission, I cannot even say that I will go to school to do research and then go home and do my assignment there because of the child obviously. And my boyfriend works hard for us, so when he comes home, I must have cooked. He must have clean clothes for when he goes to work the following day. And I have to make sure that the baby has clean clothes for crèche. I am always busy. I do not really get enough time to like really focus on my work (Philile, 22 years old).*

> *I cannot study at any time, I can only study at night. I also cannot make it for early lectures. Even the 8:45 am class is difficult for me to attend and I have it on Mondays. On Mondays I have tutorials and I have to squeeze in another group in another time for me to make up for the lost time because I have to wake up early and prepare myself and prepare my child to go to crèche and then go to take public transport which is just a nightmare. So I come to school at around 9, you know, which is quite late and I have to leave early as well (Zandi, 23 years old).*

Financial problems are also amongst the challenges that are faced by student mothers. Some participants stated that since they are unemployed, they experience financial hardships. Some mothers reported that they depend on their children's fathers for money but sometimes when they had a disagreement with the fathers of their children, the fathers tend to withhold child support. Participants find this situation very stressful because they believe that whatever happens between

them as parents, it should not affect the innocent child. Without child support, the child suffers because the child's needs are not met.

> *There have been times when the father of my first born has threatened to take away my allowance or maintenance when we fought or had an argument. So it does affect me badly because I can't concentrate when I know that I don't have any other source of income, especially since I am not under child support grant (Nonku, 23 years old).*

4.17. Managing parenting and academic responsibility

Juggling both school and parenting proves to be one of the hardest things to do for most student mothers. Some participants reported that during the day, since they are already at school, they focus on their schoolwork and when they are at home, they focus on their children. They mentioned that they have too many responsibilities at home that prohibit them from doing their schoolwork effectively. For some participants, it is all about time management and taking advantage of every time available. New mothers mentioned that it is impossible for them to even attempt to do work at home, because infants demand most of their time, and because of that, they go to school every day of the week. This is however different for student mothers with older children. They stated that they do their parental duties when they come home from school and as soon as their children go to sleep, then they do their school work and they do not get disturbed because their children do not wake up in the middle of the night and disturb them or demand their attention. Some student mothers do not have a working method; they do their schoolwork whenever they get a chance. Other student mothers manage to balance both school and parenting because they work according to a timetable that they have created for themselves.

> *I give too much attention to my schoolwork and I also give time to my parenting roles. I do not know how to explain it, but I manage to balance both (Sindi, 24 years old).*

> *While I am at school, or at work, my son is at crèche. So, in the afternoon, I would be with him so that I will take responsibility of him as a mother. When I am at home, I am fully responsible for him, so I make sure that I do most of the work at school and when I come*

home in the afternoon, I take care of him. Then when he goes to sleep I start doing my own school work (Thulile, 24 years old).

My children are almost 2 now. I have familiarized myself with the new setup. I know that during the day, I am a student and in the afternoon, I am a mother. Then at night when everyone is sleeping, I do my work. Somehow, I manage to juggle both. It was not easy in the beginning but now I have mastered my schedule. On weekends, I go to school because my mother is at home she looks after the kids (Phumla, 21 years old).

Families also appear to play a major role in decreasing the stress of being a student mother. Some participants mentioned that they are able to juggle both because of their supportive families.

I guess family plays a big role, because my family is so supportive. That is how I have actually managed to juggle being a mom and a student. Otherwise, if my family was not in the picture, I do not know how could I do it all. Firstly, financially, I do not work, I cannot buy anything. Secondly, school is demanding. I think they know that school is demanding. I think we all know school is pretty demanding (Thando, 23 years old).

4.18. Fellow students'/peers' attitudes towards student mothers

Participants reported that they are constantly judged by their peers for being mothers. Sometimes they are judged by their own friends. Participants mentioned that they have heard some of their friends and peers gossip about them. Some participants have been judged implicitly. Some participants observed that after becoming parents, their peer's attitude towards them changed. Some participants stated that some students that they were very close with suddenly treated them differently after having children. For example, one participants reported that some of the students that she used to study with suddenly did not want to study with her. After giving birth, she was really struggling with her academic work and whenever she needed help from her study mates, they would make excuses and refuse to help her.

Even with friends, they will be fine when they are talking to you but when they are talking with other people, it is like, and you know she has two kids. As if it's a bad thing (Thando, 23 years old).

With some friends, sometime a person does not even need to say anything, but their actions say a lot. They act a bit offish around you. Like this one time when I was still pregnant I caught some girls gossiping about me in class. I was really hurt because sometimes it is easy for people to pass judgement when something does not concern them and they do not even know what happened, you see. Some people look at you like you are the first woman in the world to ever have a baby at a young age (Dolly, 24 years old).

I was really slacking after giving birth to my baby and my guy friend, he is very smart and we used to be very close but after having a baby he literally avoided me. When I went to him to ask for help with something, he would make up excuses like, I am busy, or I do not understand that section (Phindile, 24 years old).

When you have friends who do not have children, you kind of like loose connection with them because your priorities change and you no longer view things the same way. When you become a mother, it is as if people look at you differently, even the people you consider your friends. They pretend to understand what you are going through, but as time passes by you start to feel that things are different. I quickly realized that it is only the people who are like me who truly understand (other student mothers). You know what they say. Birds of a feather flock together (Thabi, 20 years old).

4.19. Academic support from the university

Most student mothers state that it is hard for them to juggle both school and parenting simultaneously. They mentioned that they struggle academically. When asked if the university has any programs that are specifically designed to assist student mothers, they all stated that there are no programs that they know of. It was also revealed that some lecturers are very hard on student mothers. They fail to understand their circumstances, as a result that impacts badly on their

academic work. Some participants even mentioned that some lecturers are not very sympathetic or understanding of their situation. They stated that on top of the fact that there are no programs for student mothers, some lecturers give them attitude. Some participants reported they they would appreciate a little compassion from lecturers.

There are no programs that I know of. Like the teachers that I had, one of them was always on my case for being a mother. She had always just pointed it out the fact that I am a mother and I think I am better now because I am a mother, and so on and so forth. She always highlighted the fact that, everyone must know that I am a mother, and basically discriminated against me in class because I am a mother. I mean, everyone in varsity is so old; anyone can be a mother (Thando, 23 years old).

There are not any programs. I have never seen them or head of them. I feel like sometimes when you are a mother, some lectures complicate your life on purpose. I am married and when you are married, having children is normal and is expected of you anyway, but one of my lecturers literally gave me hell. She did not even try to understand what I was going though. I mean, I am a student, a mother and a wife and I am trying to juggle all these things all at once. Obviously, I am already overwhelmed and my responsibilities are challenging and demanding enough, but my lecture just would not budge. I ended up failing the module and I am repeating it now (Sindi, 24 years old).

4.20. Academic performance

Juggling motherhood and school has proven to be a hard task to do. It appears that having a child while a student impacts badly on the academic performance of many student mothers. Most participants mentioned that ever since they became mother, their academic performance has suffered greatly. They reported that their grades have dropped and this is because of the time constraints and the added responsibilities that come with being a mother and a student. Some participants reported that they could not finish their degrees on time because it was tough for them to juggle both school and parenting. Some participants reported heightened levels of stress. Some

participants' academic performance was however not affected because they were able to manage their time effectively.

> *I used to be an A student, but then after getting a child things went down. Stress doesn't treat me in a good way so as soon as I found out I was pregnant my academic performance went downhill, I almost failed the semester but I performed better after some time and my marks kind of picked up but they still weren't good. Thing is even if I tried my hardest it still wasn't my best anymore cos I have so many responsibilities and I have limited time, I try my best, I try my hardstand but it still feels stressful. Now I am just an average student II do not make it past 60s anymore (Nonku, 23 years old).*

> *I could not finish my degree on time; I literally failed some of my module. I had to redo some of my modules in 2014. Like I mentioned earlier that I could not do my school work at home, there just wasn't enough time for me to do my work and this whole parenting thing was new to me I didn't know how to cope with that. I was almost lost for the first year of my child's birth (Andile, 24 years old).*

> *It does not, not really, cos I allocate my time accordingly. I know I have these particular hours for school and these particular hours for being a mother. So my academic performance has not been affected that much (Mbali, 24 years old).*

> *Initially, it did affect my academic performance because I was doing five modules. I was doing eight credit modules and I failed two and I passed three, because it was so hard to juggle. Everything is demanding. Being a mother is demanding because of the attention and everything. Its demanding in every way hence you lose weight most of the time and school is also demanding (Thando, 23 years old).*

Most participants agree that it is not easy being a student mother and that shows in their academic performance. However, not all of them go through the same experiences. Some participants mentioned that their academic performance was not as affected because they have a strong support system at home. The interviews highlighted that with the appropriate support from families, some

62

student mothers are however not affected and they continue to perform well. In others words, a good support system is very helpful because it enables student mothers to focus on their schoolwork, therefore preventing them from performing poorly.

My performance was not that much affected because I have a very good support structure at home. Although I have I have more responsibilities now, I am still managing and it is all thanks to my caring family (Amanda, 19 years old).

It did not affect my academic life because like I said, my mother is very supportive and she gives me more than enough time to do my school work. Like when I have submissions or tests, she helps out with the baby and stuff (Dolly, 24 years old).

4.21. Summary

In conclusion, the study revealed the experiences of participants as they juggle both parenting and university. In their efforts to do both, they expressed the day-to-day challenges that they come across, such as financial hardships, social issues and academic issues. On top of the challenges participants face, some shared that they experience judgment from peers and even from some lecturers. Although the majority of participants encounter difficulties with regards to parenting and schooling, they all expressed positive feelings towards motherhood as most of them mentioned that they love being mothers and they would not trade it for anything. It appears that having a child at a young age encouraged some participants to work hard because they want to give their children a better future. Most participants mentioned that the reason they are able to juggle school and parenting is because of their supportive families. However, a few participants mentioned that they lost all the support from their families when they fell pregnant.

The interview also revealed that some fathers are one hundred percent involved in raising their children and those are the ones that live in the same house with the child's mother. Other fathers only provide financial support but they are not involved in the day to day raising of the child. Evidence from data analysis indicate that being a student's mother affects every aspect of the student's academic life, as most participants stated that their grades are not looking good and they

don't have enough time to focus on their school work. Participants voiced that there are no programs for student mothers offered by the university. Time management had proven to be the effective way for student mothers to stay on track with their schoolwork. Although participants enjoy being mothers and they love their children, feelings of disappointment were expressed. They mentioned that they wish they finished their schooling first before they had children.

Chapter 5: Conclusion and Recommendations

5.1. Introduction

This study looked at the perspectives and experiences of student mothers at the University of KwaZulu Natal. The objectives of the study were to describe the determining factors of early childbearing among student mothers, explore university student mothers' attitudes towards early pregnancy, investigate the experiences of motherhood among university students, describe challenges faced by student mothers as they juggle their studies and discover if there are any support systems offered by the university to student mothers. To achieve the objectives of this study, semi-structured interviews were conducted and analyzed through the use of thematic analysis. This chapter will provide a summary of the research findings and recommendations.

5.2. Summary

This study examines the experiences of participants through a conceptual framework coined by Eaton at al, which suggests that risky behaviour is influenced by factors at three levels, namely, personal; proximal context (which includes interpersonal relationships and physical and organizational environment); and distal context (which comprises culture and structural factors) (Eaton et al. 2003). This theoretical framework is relevant for this study because it tackles issue faced by young people and it provides insights into risky sexual behaviour that contributes to spreading HIV and STIs, which is clearly something that young people overlook when engaging in unsafe sex. The fact that young mothers fall pregnant in their early ages proves that the concerns raised in this theory are relevant.

Personal factors

According to Eaton et al. (2003), the personal factors comprise of beliefs and knowledge. The term beliefs is not an easy term to describe because it can be interpreted in different ways. It is therefore important to consider from what perspective classifying something as a belief or knowledge is being done (Osterholm, 2010). According to Osterholm, the term beliefs can be defined in two ways: firstly, within the social perspective, that is the truth that is negotiated and shared within the

community; and secondly, the individual perspective, that is what a person believes to be true (Osterholm, 2010). On an individual level, when it comes to early motherhood, young mothers have different perspectives as to how to handle childbearing. Some of these perceptions strongly influence decision-making. Decision-making is highly influenced by what young mothers believe or what is considered to be the right thing at that moment. The individual perspective does not necessarily have to be something that many people would consider to be true, but it is something that each individual strongly believes. Most student mothers made a decision to make changes in their lives after giving birth and these changes were not forced onto them but they were made voluntarily. A good example of this would be young mothers' future aspirations. Most young mothers made a personal choice to further their studies because they wanted a better life for themselves and their children. They strongly believe that education is important for them to achieve their dreams. Most young mothers believe that having a child forced them to grow up faster psychologically and emotionally.

Furthermore, young mothers made a choice to change their personal lifestyle choices because their old lifestyle no longer fit into their new lives as mothers. Seeing that juggling motherhood and studying is challenging, they decided to alter their social life and habits. For example, putting their children's needs before theirs took priority. The first step was to cut down on socialising that meant spending less time with friends or social activities and spending more time with their children and on their academic work. This study discovered that some participants choose to have no social life because there is no time to socialise and they would rather spend time with their children instead of going out and have fun with their friends. A study by Coutinho et al. (2014) found that some personal lifestyle changes are made to fit the schedule of the baby because the mother's lives revolve around that of the baby since the baby becomes the centre of attention.

With regards to the social perspective, evidence shows that some young mothers succumb to social belief systems when it comes to decision making. South Africa is a very religious country and this has a strong influence on the decision making process of some young mothers. Religion plays a significant role in directing the behaviours and values of some young mothers. This study discovered that although the decisions of some young mothers are personal, they were however connected to the belief system of their community, particularly the Christian community. This was

indicated in the issue of abortion, where some participants expressed that they wanted to have an abortion, but because of their religion, they decided to continue with the pregnancy. One of the stated reason was that Christianity forbids the practice of abortion. However, it is important to note that some Christian faiths allow abortion but only in circumstances where the pregnancy threaten the life of the pregnant woman on in instances of rape and incest (Pew Research Center, 2013). Some participants strongly believe in prayer, as it also came out that they find comfort in praying whenever they feel overwhelmed.

Proximal Context

The proximal context involves the interpersonal factors and the physical and organizational environment (Eaton et al. 2003). The interpersonal context involves the interpersonal relationships young mothers have with other people. It could be their partners, parents or even peers. Each of these relationships play a significant role as they each serve different purposes and are also very important to young mothers. Interpersonal communication can somehow influence others in some way (World Bank, 2010).

Interpersonal Factors

Communication about safe sex and contraceptive use among young sexually active partners is very important as it determines the outcomes of the relationship. Failure to communicate effectively can lead to misunderstandings and unplanned pregnancies. Research indicates that young people are knowledgeable about contraceptives but they choose not to use them (Mabele, 2010). According to the results of this study, the lack of contraceptive use among the youth originates from the wrong information young mothers receive from their partners. The lack of sufficient information among female students in institutions of higher learning leads to non-utilization of contraceptives (Coetzee and Ngunyulu, 2015). This study found that one of the reasons for low contraceptive use among university student is the fear of side effects. This study discovered that the side effects are exaggerated by the participants' partners or boyfriends. There are many types of contraceptives and they do not have the same effect on everyone, however young women do not consider all the alternatives, they just take what their partners tell them and go with it. When

it comes to decision-making about contraceptive use, it appears that the male partners have more influence or power over female partners. Some girls do not use contraceptives because their partners told them not to (Zaggi, 2014). This implies that love sometimes blinds young women from taking a stand and communicating what they really want. In other words, young girls would rather not use contraceptive just so to please their partners.

Peer friendships during adolescent years have proven to be of vital importance. Most researchers have confirmed this to be true, and this study was no exception as it also discovered the same thing. When young women become mothers, their relationship with their friends tend to be affected. According to most participants, this is because, immediately after having a child, a woman's perspective about life changes and old habits also change, which then leaves young mothers and their friends with nothing in common. Also, lack of understanding is a problem. Young woman who are not mothers fail to understand the changes that occur once a young girl becomes mothers. As a result, the friendship is challenged and even lost in some cases. Some participants in this study said that sometime they find it easy to make friends with other student mothers because they fully understand what they are going through and they share many things in common. The failure of peers to understand the mothers' new lifestyle make it difficult for mothers to maintain friendships and social activities (DeVit, 2010).

Having a child at young age can also affect the relationship of young mothers with their parents. The problem begins when parents learn about the pregnancy. Having a child at a young age is usually associated with negative reactions, especially by the parents of the pregnant girl. As a result, young girls find it difficult to disclose their pregnancy to their families. According to Konadu and Ankoma (2013), the difficulty in disclosing their pregnancy stems from the fear of how their parents might react. Almost all the participants in this study shared the same sentiment. This study discovered that most parents did not take the news very well, and that led to conflict. Studies indicate that fathers react differently than mothers in a sense that although both parents are hurt and disappointed by the pregnancy, mothers are quick to accept and forgive, whereas fathers find it difficult to accept the situation sooner (Konadu et al. 2013). Most parents are worried that the pregnancy would interrupt their daughters' future. In extreme cases, some parents kick their children out of the house when they discover that their children are pregnant. This was evident in

this study as some participants stated that they had the same experience. A South African study also indicated the same findings (Chauke, 2013). Parents abandon their daughters because of the belief that the pregnancy brought shame in the family (Chauke, 2013).

When the pregnancy interrupts the relationship of parents with their daughter, the consequences are displayed in the performance of student mothers. This study highlighted that young mothers who receive proper support from their families are able to cope with responsibilities of parenting and studying. A good support system is of vital importance for student mothers. It is through social support that student mothers are able to cope with school and parenting. A good support system may include friends, parents and even the community. Student mothers with appropriate social support have reduced levels of stress and they find it easy to deal with the demands of parenting (Butler et al. 2010). Most student mothers depend on their families and friends for support. However, families are the primary support for most student mothers. Most student mothers have no social life and this is partly because they struggle to make new friends or maintain the ones they already have due to their busy schedule. Loosing friends is very common for most student mothers as a result they experience feelings of loneliness.

Motherhood puts so much strain on student mothers' finances. Children are expensive and they require mothers to have some sort of income to be able to take care of their children. This is difficult for most student mothers because they are unemployed and they themselves are still dependent on their parents to take care of them financially. Research indicates that most student mothers face financial hardships and this has a negative impact on their academic work (Adofo, 2014). Financial difficulties have a negative effect on student mothers' academic progress because they struggle with time management and do not have enough time to dedicate to their studies (Funiba, 2011). This study found that the academic performance of some student mothers is negatively affected because on top of being student mothers, they also have part-time jobs, which makes it difficult for them to fully concentrate on their academic work. Having financial problems can result into anxiety and stress for some student mothers. "When financial resources were not sufficient to sustain them, students temporarily absconded from some educational activities such as lectures to source for funds and other essential materials" (Adofo, 2014, p. 88).

Parents appear to be the primary support system for most student mothers. Several studies have presented similar findings. For instance, studies by Butler et al. (2010) and DeVito (2010) indicate that most student mothers depend on their parents for support, especially their mothers, as they mentioned that it is though their mothers' support that they are able to cope with their new responsibilities. In this study, in cases where both parents are present, it was discovered that parents played different roles. Mothers are more hands on and they provide emotional support, in a sense that they look after the children when participants are at school, whereas fathers provided financial support. Most participants in this study felt that without their parents' support, they would not have been able to juggle their responsibilities as mothers and students

The greatest challenge about being a student mother is juggling both parenting and academic work simultaneously. Student mothers find it hard to cope with the additional responsibilities (Ngum Chi Watts et al. 2015). Student mothers who do not have the right support system are mostly affected. Most participants in this study cited time constraints as one of the major challenges they face. Lack of time interferes with not only schoolwork and parenting, but it also interferes with student mother's personal life.   School and parenting demand a lot of time, which implies that there is no time for engaging in social activities. Motherhood restrict student mothers from activities that they can and cannot engage in. in other words, being a student mother means making a lot of sacrifices for the benefit of the child. Sometimes student mothers have to miss lectures because of multiple demands (Lynette et al. 2015). A Ghanaian study found that student mothers miss numerous lectures and the reasons for this include, among other things, illness of children, fatigue and resolving other personal matters (Adofo, 2013). These challenges have compelled student mothers to adopt some coping strategies to help them keep up with their academic work. One of the common strategy was quitting procrastinating by creating a schedule or timetable to help them manage their time effectively.

The relationship between a father and a child is very important. Most young fathers do not live with their children, as a result, they do not get to spend enough time and bond with their children. Because of this living arrangement, it because difficult for young fathers to form a solid relationship with their children. Participants in this study mentioned that in most cases fathers

provide financial support as a way of making sure that although they do not live with their children, they are however involved in raising their children. This study found that in some cases, pregnancy creates tension between the mother and the father of the baby; as a result, their relationship ends. When the relationship between the mother and the father ends or becomes complicated, it gets in the way of both parents properly taking caring of the child cooperatively. Most young fathers are students and they are unemployed, so it becomes difficult for them to be fully involved in raising their children. However, one cannot run away from the fact that some fathers choose not to be involved in anyway, not because there are circumstances that force them to neglect their children, but mostly because they do not want to take responsibility. A study by the HSRC postulates that media represents young fathers as reluctant to be involved in their children's lives; however, the study found that a lot of young fathers are interested in becoming a part of their children's lives, but they face many obstacles that prevent them from carrying out their parenting responsibilities (Swartz, Bhana, Richter and Versfeld, 2013). In this study, the majority of participants stated that the fathers of their children are involved in raising their children, although they may not be fully involved because of unemployment and the fact that others are still in school. The lack of financial support is one of the obstacles that prohibit young fathers to take responsibility for their children. In cases where young fathers are unable to provide financial support for their children, their parents normally assume the responsibility. The end of their relationship before or after the child's birth is also another reason for the lack of father's involvement in their children's' lives.

Physical and Organisational Environment

The university has a clinic on campus and contraceptives and condoms are provided. Student mothers therefore cannot say that they fell pregnant because they lacked access to these things. However, it is important to note that some student mothers fell pregnant before they entered university. Therefore, it is important to consider the possibility of lack of access to contraceptives and condoms. Most studies indicate that misconceptions about condoms and contraceptive are the reason for failure to use condoms and contraceptives. Also in black communities, parents do not talk to their children about sexual matters and contraceptive use because it is regarded as taboo (Leseba et al. 2013). But most of all, the literature review above found that the biggest challenge for most young people is the lack of access to contraceptives and condoms. However, in this study, lack of access was not the issue, but the problem was negligence on the participants' side. And

also, some participants had children at a very young age and they knew nothing about contraceptives before they fell pregnant.

Distal Context

The distal context includes culture and structural factors. Culture plays a significant role in determining childbearing. There are many cultural factors that contribute to early childbearing, such as men proving their fertility before marriage; as well as women thinking that having a child is a significant part of womanhood; and power imbalances in sexual relationships. (Nkwanyana, 2011). "The discourse of motherhood, particularly since the Victorian Era of the nineteenth century, cements mothering as an essential task- the central achievement- of womanhood" (Tanner (2031, p. 29). The influence of culture in this study is indicated most especially among the married young mothers. These young women find themselves under pressure to conceive soon after marriage because they believe that having a child is regarded as one of the most important things that strengthen marriage. Even some unmarried participants in this study put emphasis on the fact that having a child made them feel like real women. Research highlights that in cultures that place high cultural value on fertility, early childbearing is well received and appreciated, and this is because marriage and birth are detached, as a result, young women are more likely to have children at an early age (Nkwanyana, 2011).

Structural Factors

Most studies suggest that location plays a significant role in determining childbearing. For example, it is expected that young women from rural areas are more likely to fall pregnant than girls from urban areas. The reason for this is because in some rural areas, there is a lack of health care facilities and young girls have to travel long distances just to get to the clinics. In urban areas on the other hand, young women have access to health care facilities. Participants in this study had no problem accessing contraceptives and condoms but they fell pregnant regardless. The stated reason for this outcome was their ignorance and carelessness. Another important issue to consider according to Eaton et al. (2003) is that young people from urban areas are more knowledgeable about reproductive health issues compared to those from rural areas, because urban youth are more exposed to media and the rural youth lacks access to media.

5.5. Recommendations

Findings from this study revealed that there is a lack of communication about sex between parents and their daughters. It is therefore important to find out from the parents why this is the case. Parents together with their daughter need to be taught about ways to talk about sex in a free and open manner. This way, children would not seek false information from their peers and they will be more informed from a young age. It is better for young people to learn from parents than to learn from peers who might also be misinformed. Girls who start engaging in sex at an early age are most likely engage in unsafe sex. It is therefore important to start interventions during the early adolescent stages.

Although this study focuses on university student mothers, it is important to consider the fact that some of them become mothers while in high school. Therefore, this means that there needs to be interventions that will be implemented for adolescents. Nowadays girls become parents in their early teens and this means that they need to be taught about reproductive health and contraceptives as early as possible. In order for this to be achieved parents and teachers should be included. Young women still find it difficult to talk to their boyfriends about contraceptives. Because of misconceptions about birth control, most young women find themselves falling pregnant at a young age. This implies that girls start engaging in sexual activities at a young age, which means that they should be taught about birth control at a young age, starting from grade 8. Lessons about contraception can be included in the school curriculum, perhaps in life orientation textbooks. In that way, students will have accurate information and when they find themselves in sexual situations, they would know how to protect themselves from unwanted pregnancies, HIV and STIs. Boys should not be left out on issues concerning contraceptives because they appear to be misinformed and they have a huge influence when it comes to deciding if a girl should use contraceptives or not.

The finding also revealed that student mothers are struggling academically because they lack support from the university. It is not the university's responsibility to make student mothers' lives easy. However, a little assistant from the university would go a long way. It is every student responsibility to make sure that they find ways of improving their academic lives regardless of

whether they are mothers or not. Since the majority of student mothers mentioned that they are struggling academically, they can help themselves by starting their own support group, like a student mother's support group where they can help one another. This support group would be useful because student mothers would be able to talk about the challenges they face as mothers and also help one another with schoolwork. Universities should be involved in promoting these support groups for student mothers as a way of showing support. If universities are involved students will take the support group seriously and it will be easy for them to attend. Student mothers' support group could help these students thrive in their academic performance.

This study also found that there are a number of reason for the no usage of contraceptives among young women. In this study, participants who did not use contraceptive stated that their partners did not want them to use contraceptives because of the fear that they will destroys the girl's body. Young women should be taught ways of communicating with their boyfriends and be empowered to make their own decisions. And most importantly, parents should be taught to speak to their children about contraceptives. Research has highlighted that black parents especially, do not talk to their children about sex out of fear that it will send the wrong message that parents are okay with their children engaging in sexual activities. However, it is better to be safe than sorry. If parents were open about these things, they would not find themselves having to deal with teenage pregnancy. In addition, research indicates that the clinic staff are not very welcoming to young women who are seeking contraceptives; as a result, young women find it hard to go to the clinic and ask for contraceptives. Nurses should be taught to be less judgmental and provide proper service to young women who need it. In order to ensure that nurses treat young woman who are seeking contraceptives with respect, there should be a way or a system that enables patients to lay their complaints to the right authorities.

There have been several complaints about lecturers who mistreat pregnant women or student mothers. This was highlighted in this study as some participants reported having gone through that experience. There should be a very strict policy that forbid lecturers from disclosing students' personal information. Some students do not feel comfortable displaying their personal lives. There should be mutual respect between lecturers and students. Student mothers complain that lecturers

are hard on them. Lecturers should be more understanding, not to say that student mothers should get special treatment but sometimes the situation is beyond their control.

Student mothers reported a number of challenges. These challenges may be stressful and promoting anxiety, thereby resulting in poor academic performance. Counsellors or psychologist should be provided for by the universities. This would help young mothers deal with their problems. This study discovered that some participants were disowned by their parent after finding out about their pregnancy. These students lack social support and they may feel isolated. Counsellors can help them deal with their personal issues, which will in turn enhance student mothers' academic progress.

This study also discovered that there is a high rate of adolescent childbearing. One of the most important steps in decreasing early childbearing is creating sex education programs not only in school but also in the communities. These programs should be designed in such a way that they accommodate both young people and parents. The program should be created in such a way that it allow parents and young people to be able to communicate about sex without one party feeling ashamed or embarrassed.

5.3. Conclusion

Student mothers face many challenges and these challenges include financial difficulties, academic problems and social problem. Having a great support system is one of the things that makes student mothers be able to cope with the demands of parenting and academic work. There is a lack of support by universities for student mothers. Motherhood has a negative impact on student mothers' academic performance. Motherhood challenges the friendships and relationships of young mothers. A lot still needs to be done in order to assist young mothers. Sex education programs for both parents and young people are of vital importance. Young woman need to be empowered to make their own decisions. Men themselves need to be educated about sex and contraceptives. Student mothers' support group are needed to help young mothers.

Drawing from the findings of the study, one can conclude that young women have no control over their sexual life. Most young women in this study allow their partners to make decisions for them as to whether they should use protection or not. It is therefore very important to assess the reasons for this observation. Young women are not motivated to seek information about sexual reproductive health; therefore, they end up listening to their peers and partners about things that concern their sexual life and health. Knowledge or being informed is very important because it helps young people to make sound decisions. Lack of knowledge leads to poor decision-making and the consequences are undesirable. The contraceptive issue is an important one. It is important to find out why young women are not using them and what can be done to promote contraceptive use. The biggest issue is however getting young girls to take control of their sexual lives and know about their sexual reproductive rights.

Combining parenting and studies is not easy, but with the appropriate support, it is doable. This study found that it is possible to be a mothers and also continue with educations. This is demonstrated in table 1.1. above as it shows that other student mothers are even enrolled for postgraduate studies. Although juggling motherhood and studies is challenging, parenthood encourages young women to fulfil their goals, not only for themselves but a;so for their children.

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88

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APPENDIX I: INTERVIEW SCHEDULE

Demographic questions

1. How old are you?
2. Where are you originally from?
3. What is your level of study? (undergraduate or postgraduate)
4. What is your marital status: Married; Single; Divorced or Widowed?
5. Are you currently employed or unemployed?
6. Do you belong to any religious group?
7. Which language do you speak at home?
8. How many living children do you have?
9. How many times have you been pregnant?
10. How old were you when your first child?

Interview questions

1. How do you feel about being a mother?
2. Did you have your child before or after you were accepted at university?
3. Is the father involved in raising the child?
4. Who looks after your child/children while you are at school?
5. Do you receive any support from your parents or guardian?
6. How is motherhood affecting your social and academic life?
7. Did having a child/ children affected you financially, please elaborate?
8. How has your life changed since you became a mother?
9. How involved is your family in raising your child/children?

10. How did your family react when they found out you were pregnant?

11. How did being a mother affect your academic performance?

12. Does the university have any programs that are specifically created to ensure that student mothers are not legging behind with schoolwork? If yes, what type of programs?

13. What challenges do you face as a student mother and how do you overcome them?

14. How do you manage schoolwork and your responsibilities as a mother?

APPENDIX II: ETHICAL APPROVAL

UNIVERSITY OF KWAZULU-NATAL

INYUVESI YAKWAZULU-NATALI

11 March 2016

Miss Lungisile Shange 209500376
School of Built Environment & Development Studies
Howard College Campus

Dear Miss Shange

Protocol reference number: HSS/1641/015M
Project Title: A qualitative investigation into perspectives and experiences of motherhood: A study of university students in Durban

Full Approval – Expedited Application

In response to your application received 3 November 2015, the Humanities & Social Sciences Research Ethics Committee has considered the abovementioned application and the protocol has been granted **FULL APPROVAL**.

Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach and Methods must be reviewed and approved through the amendment/modification prior to its implementation. In case you have further queries, please quote the above reference number.

PLEASE NOTE: Research data should be securely stored in the discipline/department for a period of 5 years.

The ethical clearance certificate is only valid for a period of 3 years from the date of issue. Thereafter Recertification must be applied for on an annual basis.

I take this opportunity of wishing you everything of the best with your study.

Yo

Dr   Chair}
Hu   ial Scinces Research Ethics Committee

/pm

Cc Supervisor: Professor Pranitha Maharaj
Cc Academic Leader Research: Dr Cathy Sutherland
Cc School Administrator: Ms Lindile Danisa/Ms R Naicker

APPENDIX III: INFORMED CONSENT

Hello participant

My name is Lungisile Shange from the University of KwaZulu Natal (Howard College).

You are being invited to consider participating in the study that involves research about the perspectives and experiences of motherhood: a study of university students in Durban. The aim of this study is to shed insights on the perspectives and experiences of young mothers who are also university students. Your participation in this study is of great importance, as it will help in obtaining greater knowledge and understanding on different experiences and perspectives of young mothers. Twenty participants will be interviewed at their university residences. Interview schedules will be used.

Your participation in this research is voluntary and your identity will be protected throughout the research process. You have the right to withdraw from participating at any stage should you decide that you do not want to continue and there are no penalties for doing so. The interviews will be recorded to ensure that the researcher does not miss important information and that the data was of good quality and also for the purpose of reference. Data collected will not be shared with anybody outside the research team.

If you have any queries please feel free to contact me (Lungisile Shange: 209500376@stu.ukzn.ac.za or call me on 0799557934 or my supervisor Professor Pranitha Maharaj at Maharajp7@ukzn.ac.za.

I…………………………… (the participant) have been informed about the study entitled perspectives and experiences of   motherhood: A study of university students in Durban. I have been given the opportunity to answer questions about the study ah have had answered to my satisfaction. I understand that my participation is voluntary and that I can withdraw from the study at any stage should I decide to do so and that my decision will not disadvantage me in any way. If I have any question about the research, I understand that I contact the researcher (Lungisile Shange) at 209500376@stu.ukzn.ac.za or 0799557934. If I have any further questions or concerns about my right as a study participant, or if I am concerned about an aspect of the study or the researcher then I may contact:

Govan Mbeki, Westville Campus

Research Office

Tel: 27 31 26004557 – Fax: 27 31 2604609

Email: HSSREC@ukzn.ac.za