



**Sexual and Reproductive health Issues: Exploring the Perceptions of Young
Women on Their Post-Teenage Pregnancy Experiences**

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Declaration

I, Chonco Nosipho, declare that this dissertation is my original research. I know that plagiarism is not allowed in any form; thereby, I have used citation and referencing to acknowledge other scholars, paraphrased contributions, and quotations in my dissertation. No one has submitted this dissertation.

Signature.....

Date.....

DEDICATION

I thank the Almighty God for making it possible for me to complete this Course. Without the grace of God, I am nothing. This dissertation is dedicated to my late Mother Ntombiziningi Bashilo Chonco of the blessed memory, my three siblings whose unconditional love and support kept me going in life and striving for more, my son Lungelo Nzuzo Chonco whose presence gives joy and my purpose in life. I have committed myself to work hard in my studies.

My genuine gratefulness and warmest regard are that I dedicate this work to the Almighty God
for making it possible.

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ACRONYMS

SRH	: Sexual Reproduction Health
HIV	: Human Immune Virus
AIDS	: Acquired Immune Deficiency Syndrome
STI's	: Sexually Transmitted Infections
STD's	: Sexually Transmitted Diseases
DSD	: Department of Social Development
SASSA	: South African Social Security Agency

ABSTRACT

Other literature on young girls' pregnancy reveals that young girls' early pregnancy has become a global social problem, affecting children as young as 12 years of age. Various research studies have been conducted on the issues surrounding early sexual debut, teenage pregnancy, and early childbearing and its consequences. Yet, little has been done to understand the experiences of young women in their post-teenage pregnancy. Adding on the above statement, little has been done to explore these young women's perceptions of their experiences, especially in the Umbumbulu area, KwaZulu-Natal. Early sexual debut among young people is one of the contributing factors towards the prevalence of teenage pregnancy and early childbearing. Where these young mothers face the consequences of teenage pregnancy and early childbearing compared to their male counterparts.

Teenage pregnancy and early childbearing are associated with various adverse outcomes for the young mother and the child. Therefore, this current research study aimed to explore and better understand young women's perceptions of their post-teenage pregnancy experiences in the Umbumbulu area. Furthermore, it looked closely at what could be done to improve the standard of living of young people with the sole aim to promote and enhance health social well-being. This research study found various factors considered to be the influencing factors in the increase of teenage pregnancy in this community. Namely: lack of communication, peer pressure, lack of knowledge and access to contraceptive methods, and alcohol drugs abuse.

This study also reports on the challenges that young women face. It further recommends that community stakeholders in alliance with other government sectors consider developing programmes that will help young people prevent early pregnancies and encourage young people to further their education. Social Learning Theory, covered the important part of the research study,

allowing the researcher to understand the social environment of the participants and how it has contributed to their experiences of early childbearing.

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CHAPTER ONE

INTRODUCTION

1.1. Introduction

This chapter presents the outline of the research dissertation report and consists of the following sub-headings; it will present the background and context of the study, the rationale, and significance of the study, statement of the problem under study. It will also include the location of the study and further state the aims, objectives, and questions of the study and the theoretical framework used to guide the research under study. In addition, it will define significant concepts used.

1.2. Background and context of the study

Teenage pregnancy is a major public health problem globally, with approximately 15 million adolescents aged between 15 to 19 years of age giving birth annually (Mphatswe, 2016). UNAIDS (2012) indicates that about 5.1 million people living with HIV/AIDs in South Africa. An estimated 2.1 million are adolescents ranging between the ages of ten and nineteen years, with 60 percent of the population being young women MacEntee (, 2016). South Africa is depicted as one of the countries with an increased number of cases of sexually transmitted diseases (UNAIDS, 2012). Young women seemed to make the highest percentage of people affected with HIV or AIDS.

Today, people are affected by various social challenges that lead to irresponsible behavior, not forgetting that we deal with issues differently as people. Despite the risk that young people are exposed to custom and age-related vulnerability, health effects vary for adults compared to young women (Zabin & Kiragu, 1998). Thus, vicious political, economic, and socio-cultural

factors hinder the delivery of adequate information and social services delivery to young people regarding their sexual and reproductive health issues.

About research study conducted by Morris & Rushwan (2015), which focused on the Adolescent Sexual and reproductive health pertaining global challenges, revealed that early pregnancy and parenthood, difficulties in accessing contraceptives and safe abortion, and high risks of sexually transmitted infections are challenges faced by adolescents across the world. The study's findings specified that young people are faced with innumerable health and social issues in all countries. Therefore, we need to improve our understanding of human development and behaviour, especially adolescents, for proper intervention (Morris & Rushwan, 2015). Therefore, the researcher was interested in understanding contributing factors to the increased number of inappropriate sexual risk behaviours among young people leading to unwanted and unplanned pregnancies, implications, and consequences caused by their early sexual debut.

Sexual Reproduction Health (SRH) issues, especially teenage pregnancy, are strongly influenced by various social, cultural, political, and economic factors and inequalities stipulated (Svanemyr et al., 2014). These abovementioned factors contributed to girls' increased risk of exposure to inappropriate sexual behaviours and reproductive health challenges, such as sexual coercion, gender-based violence, and poverty. This encouraged a tendency to have older sexual partners, which led to gender inequality within a relationship (Svanemyr et al., 2014). This further allows imbalance of power to negotiate safe sex, which increases their vulnerability to sexually transmitted diseases, such as HIV & AIDS, STI's, and STD's. As a result, they increase young people's vulnerability to SRH risks behaviours that include unsafe sex, sexual coercion, sexually transmitted diseases, and early pregnancies (Svanemyr et al., 2014).

Sexual and Reproductive health issues are increasingly perceived as the highest among young people, and it's the group that is most affected by such issues despite the intervention strategies implemented to prevent and decrease sexual and reproductive health issues (Syanyemur et al., 2014). Young people in the Umbumbulu area still suffer from many social challenges such as poverty, deprived socio-economic opportunities, oppressive social values and norms, unemployment, and insufficient resources and information. Yet, teenage pregnancy remains more prevalent among teenage girls and has a great impact on almost all young women who have been affected by teenage pregnancy, their families, and the community at large.

1.3. The rationale of the research study

Parents view social and sexual behavior differently compared to young people. Nussbaum (2003) stipulated that African values have a great deal to contribute to world consciousness, but Africa is deeply misunderstood in the western world for several reasons. Further, most African cultures and traditions are mostly live and narrated from generation to generation, with very little literature compared to the western world. This makes it difficult for young people to access and learn from it (Nussbaum, 2003).

According to Morris and Rashwan (2015), public health has focused on adverse outcomes of early sexual debut among young people as important factors of fertility patterns and transmission of sexually transmitted infections. Sexual behaviours contribute greatly to the burden of diseases and reproductive health issues (Nussbaum, 2003). My undergraduate studies in Bachelor of Social Work required students to perform all forms of social work methods involving case workgroup work; The group work was based on gender roles and stereotypes on the development of young women.

One of the sessions focused on sexual relationships, aiming to explore the concept of sexual relationships, discuss different types of sexual relationships, explore further what is meant by love in sexual relationships, how relationships can be unhappy, and how this is shown, to explore what we mean about love. Group members showed great knowledge of the subject based on their own experiences and subjects learned in school. Therefore, conducting this research study on sexual reproductive health increased knowledge and guidance on promoting healthy reproduction among young people provided the number of sexually active young people.

Therefore, the core purpose of this study was to discover and gain a better understanding of young people on reproductive health issues and their experiences on early childbearing. In addition, empirical evidence was needed to address myths regarding public perceptions of adolescents' sexual risk behaviours and how to accommodate different social contexts compared to our forefather's social environment could assist in enhancing positive behaviour among young people. Above that, it also aimed to tackle issues associated with reproductive health issues among young people. Root causes of risk sexual behaviours needed to be addressed appropriately in Umbumbulu area to decrease the rise in teenage pregnancy, mortality, and risk of sexually transmitted diseases.

1.4. Statement of the research problem

In recognizing the development of sexual reproductive health and human rights in South Africa, there is still interphase between traditional community and modernity regarding sexual and reproductive health issues among young people. The problem of increased sexual risk behaviour among young people increases in teenage pregnancy and exposure to sexually transmitted diseases, thus needing to be addressed (Morris & Rushwan, 2015). Nevertheless, the debate over early

pregnancy and childbearing on schooling and other outcomes is long and contentious (Cantet, 2019).

The researcher did not understand the perceptions and experiences of young people on sexual and reproductive health issues, focusing on teenage pregnancy and factors contributing to their behaviour and its impact on the wider community of Umbumbulu. The research study's focus was to understand better the lived experiences of becoming young mothers. It, therefore, assisted in suggesting useful strategies in integrating two worlds in promoting and empowering understanding between people of both new generation and old generation. In addition, to help youth establish the most sustainable and appropriate social and sexual behaviour. Early pregnancy of young girls is a growing issue since it involves and affects various domains of human development and decision-making; hence something needed to be done.

1.5. Location of the research study

The study focuses on the Umbumbulu area, a rural area under EThekweni municipality in KwaZulu-Natal, South Africa. Moreover, under the tribal authority of Chief Makhanya. The area is located near highway M30 and R603, about 13Kilometres of South-west Durban (AfriGIS, 2016).

Umbumbulu is a rural area heavily burdened by teenage pregnancy and reckless sexual behaviour. Umbumbulu area is characterized by gravel roads, tuck shops, and schools. Most house structures in this community comprise rondavels, with two or three-bedroom houses and outside toilets and taps. There is a high rate of youth unemployment and teenage pregnancy among young women. Most young people depend on their families and social grants for financial support. Government departments are also found within the community for social service delivery, which

includes, Department of Social Development (DSD), the Department of Social Justice (magistrate court), the South African Social Security Agency (SASSA), and the community clinic.

1.6. Aims and objectives of the research study

1.6.1. Aim

This research study aimed to explore young women's perceptions on their post-teenage pregnancy experiences as it is one of the sexual and reproductive health issues. This also assisted in better understanding the power dynamics that occurred between young men and women on sexual and reproductive health issues.

1.6.2. Objectives

- 1.6.2.1.** To explore the scope and nature of young women's understanding of teenage pregnancy
- 1.6.2.2.** To explore and better understand contributing factors to the increase of teenage pregnancy.
- 1.6.2.3.** To determine the impact of teenage pregnancy on young women.
- 1.6.2.4.** To discover and understand the social context on Sexual and reproductive health issues
- 1.6.2.5.** To make relevant recommendations

1.7. Research questions

- 1.7.1.** How are sexual and reproductive health issues perceived among young people?
- 1.7.2.** What could be the contributing factors to the increased of teenage pregnancy among young women?
- 1.7.3.** What are the effects of teenage pregnancy?
- 1.7.4.** How does the community respond to this issue?

1.7.5. What should be done to address this problem?

1.8. Theoretical framework

The theoretical framework that underpinned this study was the Social Learning theory. The core founder of Social Learning theory recently, which Social Cognitive Theory relabelled, is Albert Bandura. According to Rosenstock, Strecher & Becker (1988), expectations and incentives determine behaviour. This theory was best fitted for this research study because young people face many challenges, and the surrounding environment has major effects or influences on the attitudes and behaviour of young people through social learning. Meanings are socially constructed within communities through social norms, values, religion, cultures, and beliefs to guide appropriate behaviour of all ages, depending on the stage of development of an individual.

1.9. Organization of Chapters

This dissertation contains six chapters. The first chapter is the introduction of the research dissertation. It outlines the background context, the rationale of the study, problem statement, and the aim and objectives of the research study. The second chapter consists of a literature review relevant to the current study. Various articles were consulted to understand better different aspects of the experiences and consequences of teenage pregnancy and early childbearing. Chapter three discusses the methodology undertaken to address this research study, and it includes ethical considerations that gave direction to the participation of the participants. The fourth chapter describes the theoretical framework used to inform this study. Chapter five presents and discusses the findings of the study obtained through semi-structured interviews with young women. Lastly, Chapter six presents a discussion of the findings of the research study and outlines recommendations coming from the research study.

1.10 Conclusion

In conclusion, the above chapter demonstrated the background and context of the research understudy, which contributed towards this study, aiming to understand the dynamics of human interaction with their environment. Hence, the environment is the principal determinant of social learning. Furthermore, it illustrated the sole aim of the research study and outline research objectives and questions. It also provides a structure for this dissertation, and chapters were outlined accordingly. The following chapter is chapter two, consisting of in-depth literature reviewed relevant to the research study.

CHAPTER TWO

LITERATURE REVIEW

2.1. Introduction

There are numerous literature and research studies conducted focusing on the causes and consequences of early childbearing, policy, and program discussion of teenage pregnancy among young people worldwide. However, very little is known about their perceptions and post-teenage pregnancy experiences and the consequences of early childbearing. The researcher has reviewed a range of literature relevant to the research study. Therefore, this chapter presents a critical discussion of the literature on perceptions of young women on their post-teenage pregnancy experiences.

Firstly, it pays attention to the underlying causes of teenage pregnancy by understanding an individual's interaction and the social environment. It identifies the potentially influential factors to the increased unintended pregnancies among young girls. Further discusses the perceptions and experiences of teenage pregnancy among young people. Social issues associated with teenage childbearing were also considered, including the social and cultural environment. Above that, it discusses the challenges faced by young mothers and available opportunities.

Furthermore, it investigates the effects of teenage pregnancy on one's life. In addition, it explains measures put forward to decrease the increasing rates of teenage pregnancy. Lastly, to make relevant recommendations. Sources utilized for this literature review include online journal articles, scholarly articles.

2.2. Underlying factors influencing teenage pregnancy

James, Van Rooyen & Strumpher (2012) stipulate that teenage pregnancy is a global social issue affecting young women between 12 and 19 years old, especially in developing countries. According to Mkhwanazi (2010), the South African fertility rate remains low in sub-Saharan Africa, yet the high rate of early childbearing remains a course of concern Nkanku & Mash, 2010; Makiwane, 2010; Mushwana, Monareng & Muller, 2015). Teenage pregnancy continues to be the leading cause of public health and socioeconomic problems in many countries in the African continent, but more specifically in South Africa (Phaswana-Mafuya Takane & Dauds, 2006). Previous research studies have identified factors that might be associated with the prevalence of teenage pregnancy in South Africa.

Individual behaviour is influenced by various social factors visible within the surrounding environment of a developing person. Hence, the development of a human being goes through various stages to determine maturity and development, which is affected by varying contextual systems that form the person's environment (Johnson, 2005). Thereby, an individual is shaped by surrounding circumstances, events, timeframes, and human development is the product of an interaction among process, person, context, and time (Hannaway, Steyn & Hartell, 2014). Literature divulges several contributing factors to the increased rate of teenage pregnancy. Therefore, the experiences of these young girls need to be understood in a social context as the meanings of life are formulated through social interactions. Falling pregnant at a very young age does affect not only the young girl but also the family and the community at large since they do not have sufficient knowledge about parenthood and resources to sufficiently cater to the needs of their children. However, we cannot stipulate that all these young women who fall pregnant at a

very young age are affected by the same factors, provided that they come from different backgrounds financially and socially.

“Previous South African research on teenage pregnancy has identified lack of contraceptive knowledge; lack of self-esteem; poverty; absence of a father figure; desire for love; domestic violence; child sexual abuse; dysfunctional family patterns; poor health services; the breakdown of cultural traditions; and the cultural value placed on children, as some of the causes of teenage pregnancy” (Mkhwanazi, 2009).

These above-mentioned underlying factors confirm that the life of a young woman is influenced by various factors, resulting in undesired behaviour that has great consequences over the lives of young women. About Ecological Systems Theory by Bronfenbrenner (1992) seeks to understand and define human development by looking at systems of relationships that form a part of a person’s development (Johnson, 2005). Sexual behaviour is also influenced by several factors, resulting in unintended pregnancies and a high risk of obtaining sexually transmitted infections (HIV, STIs, STDs), which tends to be more problematic for young women than their older counterparts.

However, provided the prevailing gender norms and ideals, young girls in Umbumbulu are still expected to prevent conception. However, they have insufficient knowledge regarding prevention methods implemented to reduce the increased rates of teenage pregnancy across the country. It is said that human behaviour is influenced at three levels of human development. Shishane (2016) has identified that behaviour is influenced within the Persona (Individual), within the proximal context (interpersonal relationships, physical and organizational environment), and within the distal context (culture and structural factors). Adolescent sexual and reproductive health is strongly

linked to their particular social, cultural, and economic environment. Therefore, causes of teenage pregnancy range from individual factors to social factors (Morris & Rushwan, 2015).

Macleod (1999), in line with the findings of Bhandari & Joshi (2016), specify that peer influences, dysfunctional families, poor health and Socioeconomic status, low educational achievement, the breakdown of traditions, and the cultural value placed are the main contributory factors of teenage pregnancy. Teenage years are characterized by limited freedom and sexual experimentation for both genders. However, a lack of communication between parents and children is visible; as a result, most young people receive much information on sex from their peers and tend to be lacking and incorrect (Jewkes et al., 2001 & Sathiparsad, 2010). Therefore, parents tend to uphold the ideal of not talking to children about sexual and reproductive issues, which creates a platform for teenage pregnancy.

2.3. Other influential factors

An additional issue is the lack of sex and sexuality discussions within the home environment. It is considered taboo by parents due to the prevailing social norms, values, and beliefs. According to Taylor et al. (2014), Lack of gender equity is also a contributory factor in how the pregnant teenager is labelled and stigmatised by peers, educators, family, and the community. Madlala, Sibiya & Ngxongo (2018) emphasize that young men are usually not involved in reproductive health programs to prevent teenage pregnancies. For instance, father and son's poor communication on sex and teenage pregnancy issues contributes a lot to unprotected sexual intercourse resulting in teenage pregnancies.

Parents find it difficult to communicate with their children about sexually related matters, especially puberty. They may believe that informing them about contraceptives will encourage

them to engage in sexual activities (Runhare, Mudau & Mutshaeni, 2016 & Mkhwanazi, 2009). Besides, peers play a significant role in sharing sexual knowledge amongst each other. Hence, this kind of information they obtained from peers promotes certain myths about sex and relationships. Mkhwanazi (2009) defines Sexual intercourse as an expression of love and not using condoms as an expression of fidelity. Therefore, lack of adequate information on sex education, contraception, conception, and reproduction is also a major contributing factor to teenage childbearing. Umbumbulu is a black traditional-dominated community with various cultural principles, making it difficult for parents to create a conducive environment to have such discussions with their children. However, other life circumstances might contribute to the increased rate of teenage pregnancy in the Umbumbulu area. Namely:

In addition, there are other risk factors for teenage pregnancies, such as the abuse of alcohol and drugs, poor socio-economic background, cultural and traditional practices, peer pressure, intergenerational relationships. According to Madlala et al. (2018), culture plays a role in preserving the values and norms of society yet offers an important opportunity for creativity and change. Traditionally, abstinence is a worldwide practice. Therefore, teenage pregnancy is associated with sexual intercourse without reliable contraception, sexual abuse, and negligent behaviour (Nkanku & Mashu, 2010).

Umbumbulu is characterized by poor socioeconomic conditions, including high youth unemployment rates, poverty, government grants or old-age pension, and limited opportunities for young people. Generally, a child support grant is assumed to influence a teenage girl to become pregnant to receive money from the government. In other cases, pregnancy may secure financial support from older men. However, Literature reveals that early childbearing in South Africa is influenced by different social, economic, and physical factors. Based on research studies, teenagers

who become pregnant are more likely to be poor and more likely to perpetuate the cycle of poverty (Madlala et al., 2018). Most of the young mothers within Umbumbulu are unemployed, and they do not secure any financial support from the fathers of their children. Such situations contribute a lot towards the challenging experiences of becoming a parent at a very young age.

The increased rate of teenage pregnancy, unemployment, poverty, domestic violence, inadequate educational facilities, and social service delivery are the challenges faced by the Umbumbulu community. Swanepoel et al. (2011) state that unemployment is the cause of poverty. It is visible that unemployment within this community resulted in poverty situations and deprived socio-economic backgrounds in which people find themselves. Hence, they are not affording to cater to the necessities for their children. Therefore, the socio-economic background can lead children to have. To commit deviant behaviours such as entering an intergenerational relationship means getting money in exchange for sex, resulting in unintended pregnancy, physical health problems, poor academic performance, school dropout, and most emotional and behavioural challenges.

2.4. Perceptions and experiences of teenage pregnancy

Teenage pregnancy is perceived as a socially embedded phenomenon; the experiences of young mothers on their pregnancy and motherhood are affected by the changes in people's ideas and how they perceive early childbearing (Mkhwanazi, 2014). It is also associated with adverse health and social outcomes for young women in adjusting to the responsibility of parenthood (James, Van Rooyen & Strumpher, 2012; Mphatswe, Maise & Sebitloane, 2016; Mphaswana-Mafuya, Takane & Dauds, 2006). Medical complications can occur during pregnancy and childbirth, including anaemia, hypertensive disorders, pre-term births, caesarean delivery, low birth weight, and a higher risk of death and maternal death (James et al., 2012). Besides the medical

complications associated with teenage childbearing, they also negatively affect the future career possibilities and education of the young mother.

South Africa is a multi-diverse community with various cultures and traditions, constituting varying social norms, values, and belief systems that form the teenage mother's immediate environment. Teenage childbearing can be viewed or experienced differently by different people in different communities. Based on the South African context, marriage is relatively late; thereby, premarital sexual activity is the norm, and pre-marital childbearing and pregnancy are socially accepted (Jewkes et al., 2001).

Teenage pregnancy comes from the complexity of relations, particularly sexual relations between young men and women. Sathiparsad (2010) postulates that there are hierarchical social power relations between young men and young women. But the social norms, values, and gender roles within the Umbumbulu community still fulfill the function of maintaining unequal relationships between the genders. This reality may offer partial persistence of gender discrimination, despite changing gender roles. Hence, young men are more privileged compare to young women while they all right to equity, but the consequences of teenage pregnancy are on females rather than the male partner

In most communities' teenage pregnancies commonly occur in women who are still at school. The Umbumbulu area is often described as disadvantaged, lacking resources to enhance successful social development. Bhana (2010) adds that, vulnerability of young women and girls in Umbumbulu results from the gendered social inequality occurring in their community. In Umbumbulu gender inequality between young men and young women still exists, as it is promoted by the unequal social interaction and cultural practices. According to Bhana (2010), customary

practices come together with material realities to produce gender and age hierarchies putting young girls in their place despite the political environment that promotes gender equality.

Some communities view early childbearing as a misconduct of the teenage girl, yet young men are not considered responsible for such results. Hence their support is also limited. Based on a research study by Sathiparsad (2010), which focused on the attitude, beliefs, and behaviours of school-going young males, it is evident that sexual experimentation for young men is acknowledged and expected. Yet, the consequences for males may be the same non-existent or minimal. Thus, females tend to be blamed for losing morals, securing a marriage partner, and seeking easy access to money through the child support grant. Yet, male counterparts are excluded from the consequences of being involved in irresponsible sexual intercourse, and these young mothers tend to face early childbearing alone.

Mkhwanazi (2014) explained that some families continue to punish the teenage mother by giving a little support making it difficult for the teenage mother to juggle school, parenting, and school, while others have a pool of resources to ensure that the mother returns to school as soon as possible. Therefore, the experiences and challenges associated with early childbearing will differ from community to community. The family also plays a crucial role in how the teenage mother experiences their pregnancy, through the reaction and support that one receives from both their families and community at large, also assist the teenage mother with coping strategies in dealing with the challenges that come along with early childbearing.

In South Africa, various programs and policies have been developed and implemented to support and protect pregnant teenagers in schools and society (Bhana, Morrel, Shefer & Ngabaza 2010). The Educational Policy provides a great opportunity for pregnant teenagers to further their

education despite everything. In South Africa, the Schools Act (Department of Education 1996) regulates the support of pregnant teenagers and teenage mothers in schools. This policy permits pregnant teenagers to remain at school, allowing for their re-entry as young mothers after giving birth. According to Bhana, Morrel, Shefer & Ngabaza (2010), South Africa's liberal policy that allows pregnant girls to remain in school and return to school post-pregnancy has protected teen mothers' educational attainment and helped delay second birth.

The reaction of society, communities, friends, peers, and teachers cannot be assured since the South African community comprises adverse people from diverse religious and traditional backgrounds. Research shows that family responses to teenage pregnancy and the implementation of the educational policy in schools vary depending on the prevailing social norms and school management structure. James, Van Rooyen & Strumpher (2012) described that the struggle of teenage mothers to raise their child leads to a situation where the biological parents of the teenage mother ultimately accept this responsibility, even though they may be earning low income themselves or have no income at all. In Zulu African culture, there is a saying, "*Alikho ithuna lendlala*," which means that regardless of the situation a child is born into, they will still grow up despite the challenges their families face. The Zulu people tend to identify with other black or African cultures in not accepting illegitimacy easily and they inclined to be angry and to severely judge the family (James, Van Rooyen & Strumpher, 2012). As a result, some families resent their own daughter.

According to James, Van Rooyen & Strumpher (2012), the effects of teenage pregnancy, such as stigma and family destabilization, are even more severe as they are culturally and traditionally related. Based on personal experience, becoming pregnant at a young age becomes one of the most challenging experiences yet a very educational life experience since one is

stipulated as having no morals and values. However, the reaction of the family and community may be different in other situations. Parents are bound to be angry at the young people, as they are expecting too much from us, given that we have greater opportunities to succeed in life than them. Hence, education is highly valued by young people in South Africa, and educational aspirations are high (Bhana, Morrel, Shefer & Ngabaza; 2010). Therefore, Stigmatisation can sometimes be so severe that the teenager and her family could be segregated from the community and lose the community's respect causing further embarrassment for the family.

In addition, the extent of embarrassment to the family can be so severe that the pregnant teenager is rejected or even thrown out of her Home (James, Van Rooyen & Strumpher, 2012). The loss of parental support for teenage mothers during pregnancy and childbearing could affect the teaching and learning of parental skills, which are crucial abilities and responsibilities that teenage mothers need to learn (James, Van Rooyen & Strumpher, 2012). Falling pregnant at a young age is a challenging experience for young mothers compared to their adult counterparts.

Having to transmit from being a teenager to becoming a parent at an early age comes with many responsibilities and expectations. Most of the time, teenage childbearing is associated with negative socio-economic outcomes. Some families and communities show positive support towards the teenage mother and her child, social and financially, to assist with maintaining the positive well-being of the teenage mother and helps her strive to be a better person in life regardless of the situation. Whereas negative support received by the teenage mother greatly contribute to an individual making poor decisions, for instance, dropping out of school can result to earning menial employment, poverty, and social exclusion of the teenage mother along with the family.

2.5. Transition from teenage to parenthood

Being prepared to take on the life-long responsibility of rearing a child requires not only physiological and psychological maturity, but also the immediate environment of the individual to offer great support necessary to make a successful transition. According to Research Council & Institute (2005) cited in Jewkes, Morrell, & Christofides (2009), transition is much difficult for young people since they grow up in a changing global context and having the responsibility of shaping the outcomes of the next generation.

In the rapidly changing global context with newfound opportunities and risks, the benchmarks for young people's successful transition to adulthood have changed (Jewkes, Morrell, & Christofides 2009). The stages of human development undergo various stages characterized by different roles, expectations, challenges, and responsibilities to stimulate development. During the adolescent stage, teenage mothers receive conflicting messages about sexual activity, while sexual exploration is considered normal and expected characteristic of the adolescent stage of development.

In many cases, teenage mothers are viewed as deviant for having sex and fallen pregnant (MacLeod, 2001). Young mothers are described as being ambivalent or covertly rejecting their children (MacLeod, 2001). Based on the above statement, social circumstances that include family backgrounds come into play in how the young mother responds to becoming a parent. Lot is expected from them; they are expected to master the phase of becoming parents yet. There are no adequate support systems to assist these young mothers except that some are lucky enough to have supportive families to help them through the process. Research shows that teenage mothers seem to be inadequate mothers compared to the older women in their community catering for their children (MacLeod, 2001).

According to Barrat (1991), teenage mothers provide fewer stimulating experiences than older mothers, whereas Osofsky et al. (1992) state that teenage mothers do not provide opportunities for affectional exchange or share conflicting emotions as they show high levels of stress less responsive or sensitive interaction with their children than older mothers (Passino et al., 1993) cited in Macleod (2001). Many research studies compared teenage and older mothers without considering other influential factors involved, such as the individual's socioeconomic status. For instance, MacLeod (2001) postulates that parent-to-child interaction is influenced by the range of factors feasible in their environment, such as financial, emotional, and social support available to the mother.

The literature review shows that most of the teenage mothers in this area appear to lack parenting skills, knowledge concerning their children's emotional needs, and having negative thoughts and feelings concerning their children. There are certain beliefs about teenage pregnancy that these young mothers are incompetent and unable to be good mothers. Yet, they try their best to provide for their children. Still, some of them solely depend on the child Support Grant to cater to the basic needs of the child provided the increased rate of unemployment among young people and insufficient financial supports.

2.6. Social issues associated with teenage childbearing.

Several social issues are associated with an increased rate of teenage pregnancy, such as deprived socio-economic background, poverty, and unemployment. Teenage pregnancy itself has been linked to an increased risk of adverse social outcomes (Cook & Cameron, 2017). Research shows that individuals differ in how they process information available in their social environment. According to Dykas & Cassidy (2011), social information related to parents, peers, and romantic partners is often processed with varying degrees of accuracy, objectivity, and positivity. Thus, the

differences in social information processing are considered to play a significant role in development because they affect individuals' social and emotions throughout the course of their development.

Psycho-social support forms an integral part of young girls, whether pregnant or not. Since they undergo major biological changes in hormone levels, physical growth, and brain development, parents should be more concerned about the social function or place their children participate (Granic, Dishion & Houenstein, 2006). Responsive parenting during adolescence includes encouragement of independence, negotiation through verbal “give-and-take,” warmth, and support. Therefore, proper monitoring is crucial for minimizing problem behavior, in which the adolescent has learned what is expected of her, and parents generally trust that these expectations will be met (Granic, Dishion & Houenstein, 2006).

Teenage pregnancy is extremely common in South Africa, stated Jewkes, Vundule, Mafora & Jordaan (2001). According to Miriri, Ramathubaand & Mangena-Netshikweta (2014) & (Sedgh et al., 2014), as stated above that, teenage pregnancy is associated with poor social and economic conditions and prospects and have adverse outcomes, of which poverty and adverse life circumstances are the underlying causes. Furthermore, Education, women’s employability opportunities, marital status, and family structures greatly impact adolescent knowledge, attitudes, and practices of contraceptives. Most young people in the adolescent years tend to be involved in an unstable relationship that results in unplanned and unwanted pregnancies. Various studies have been conducted that highlight potential social factors influencing teenage pregnancy.

According to Cook & Cameroon (2017). Teenage pregnancy rates vary significantly between different countries, and similar social factors associated with teenage pregnancy also vary. In South

Africa, a research study focusing on social factors contributing to teenage pregnancy in Makhado Municipality, Limpopo Province by Miriri, Ramathubaand & Mangena-Netshikweta (2014) revealed that as many as (41%) of the respondents never used contraceptives, engaged in risky sexual practices, and sexuality information was limited. In rural South African communities, poverty contributes to adolescent pregnancy, and adolescent pregnancy contributes to the perpetuation of poverty (Miriri, Ramathubaand & Mangena-Netshikweta, 2014).

In addition, Lower educational levels, being unemployed, and lower socioeconomic status of the families are important risk factors for adolescent pregnancies (Miriri, Ramathubaand & Mangena-Netshikweta; 2014). Given the above consequences, both teenage girls and boys need information on biological changes, sexual issues, and reproductive health services to use protection when having sex. Therefore, it is important to understand better how young people early sexual intercourse and the factors have associated with such behavior.

Macleod (1999) further state that ignorance concerning sexuality, contraception, and reproductive biology is the major contributing factor in teenage pregnancy. Adolescence is defined as the development phase in the human life cycle situated between childhood and adulthood (Mushwana, Monareng, Richter & Muller; 2015 & Cook & Camron, 2017). Whereby, this stage is characterized by rapid physical growth and development, notable emotional and social change. In that way, this indicates that young people are highly vulnerable to risky behaviours in exploring their identity and power as women during this stage of development. Therefore, during this stage of development physiological and behavioural changes that takes stage can greatly contribute to an increased risk of contracting HIV and other sexually transmitted infections (STI's) and experiences unintended pregnancies (Doyle, Mavedzenge, Plummer & Ross 2015; Fearon, Wiggins, Pettifor & Hargreaves, 2015).

Environmental factors may also facilitate or prevent teenagers from fulfilling their intentions. Social values, norms, and belief systems play an important role in maintaining good social conduct and interaction among community members. Thus, gender inequality between young women and young men is feasible when it comes to sexual debut and responsibility in the child's maintenance. Research reveals that there is a lack of communication between parents and their children. Provided that during the adolescent stage, teenage girls are at risk of obtaining STI's, HIV & AIDS, and unwanted pregnancy, given the physical, psychological, social, and emotional changes that took place in this stage, and they want to maintain the social stigma with their peers.

According to Mkhwanazi (2014), young women willingly engage in multiple or concurrent sexual relationships and transactional sex. However, sometimes it is not the same situation for every individual. Research studies reveal that young women find themselves in situations where they are subjected to gender-based violence, unable to negotiate the use of condoms, or coerced into having sex for the first time. Furthermore, culture and traditional practices prevent mothers from providing their teenage girls with sufficient information concerning issues related to sexual and reproduction and prevention methods.

In a patriarchal family structure, mothers usually blame their teenage childbearing and perceive it as a failure in teaching the young girl. Cook & Cameroon, (2017) identified that teenage mothers have higher risks of living on lower incomes, lower educational achievements, and difficulties with housing and family conflicts compared to their peers. Young people living in poverty and socio-economic deprivation are highly associated with the increase of teenage childbearing and the outcome of teenage pregnancies. Cook & Cameroon (2017) defines Social Deprivation as a composite measure that includes various indicators, including the teenage educational level, health and employment status, and their parent's income and occupation.

2.7. The social and cultural environment

There is a high proportion of unintended pregnancies of young women in South Africa, and it remains a serious problem that needs to be addressed (James & Abieyuwa, 2013). According to James & Abieyuwa (2013), Adolescent pregnancy is a complex issue with many reasons for concern; it is an important public health problem and a socio-economic challenge to society. Pregnant teenagers face serious health, socio-economic and educational challenges. The research study aimed at understanding the perception of young women regarding sexual reproductive health issues through tackling their Social, economic, political, and cultural, and various religious perspectives. Socialization takes place through significant others who mediate the objective reality of society, render it meaningful, and in this way, it is internalized by individuals (Berger & Luckmann, 1991).

A community of practice can be viewed as a social learning system. Arising out of learning exhibits many systems characteristics, more generally, emergent structure, complex relationships, self-organization, dynamic boundaries, ongoing negotiation of identity, and cultural meaning (Wenger, 2010). There, an individual develops through socially constructed meanings and turns to participate towards those meanings. Some knowledge is socially and culturally constructed, which includes values, beliefs, and norms.

Young people from Umbumbulu are obliged to comply with socially constructed meanings formed years ago, without considering the evolution our country has undergone, provided the history of South Africa. They are raised by people who grew up in a different arena while growing amid a modernized world. Therefore, there is a gap of communication between parents and young people about the responsible way of living regarding sexuality and reproduction.

The researcher viewed how the social and cultural context and career thinking (negative and positive career thoughts) are associated with challenges and opportunities created within their environment to deal with such issues. Teenage pregnancy has great consequences on the lives of the teenage mother, the child, the family, and the community, about their social, biological, socio-economic, and cultural context. There is a conflict between the old tradition community and contemporary community regarding young people's social and sexual risk behaviours. This conflict came into action due to the rise of sexual and reproductive health (SRH) issues and challenges among young people and the high increase of teenage pregnancy.

Umbumbulu is a rural area dominated by black South Africans who are faced with many social challenges, which have a massive impact on the development of both young and adult people. People within this area are subjected to the rule of Chiefs and Indunas, and their main source of employment is nature itself. In Umbumbulu, the social and cultural environment promotes inequality in gender roles and gender stereotypes among the sexes. A certain stereotypical view is associated with being women or men, what is expected. For instance, gender inequality occurs in a relationship, since most men are seen as dominant in a relationship while women have no say in this same relationship.

2.8. Challenges associated with teenage childbearing

Becoming pregnant can be a positive and life-enhancing experience for some teenagers and for others a life-changing experience. Teenage childbearing is associated with several adverse or social outcomes (Cook & Cameroon, 2017). The transition to parenthood is a major event in the lifespan of any individual. Still, it takes on special significance when it precedes the transition to

education, work, citizenship, and marriage that collectively offer the skills, resources, and social stock necessary for individuals to succeed as a parent (Cunningham & Boulton (1996) & Jewkes, Morell & Christofides (2009).

Cohen (1975) defines a challenge as the situation of being faced with something that needs great mental and physical effort to be done successfully. Therefore, it tests a person's ability. In South Africa, Reproductive health issues inform all aspects of the development of young women (Lesch & Kruger, 2005), especially young women from low-income and historically disadvantaged communities. Teenage childbearing poses great challenges not only to the community but also to the global society. It is said that most teenage pregnancies are unplanned, which results in certain challenges. As stated, before that there are greater challenges associated with teenage pregnancy and childbearing.

Challenge is something new and difficult that requires great effort and determination (Cohen, 1975). Reflecting on the background of young women within the Umbumbulu Area can significantly influence their resilience or whether they can maintain an optimistic mindset or resort to drugs or alcohol. Umbumbulu is one of the disadvantaged communities with limited services or resources and information addressing sexual and reproductive health issues affecting young people. This area is also faced with poor educational facilities, which hinders young people from finding perfect career opportunities.

The high rate of youth unemployment is also high in this community, including teenage mothers. According to Beck (2016), unemployment has been rising in South Africa over the past decade; the rise has been largely attributed to the black African population. This is very valid and evidential in the South African Context. The teenage mother decides to drop out of school about

teenage pregnancy, resulting in having poor education and lack required qualification or skills, therefore subjected to unemployment, depending on social support grants or earning menial jobs. Involuntary unemployment is an unfortunate experience for the individual and family (Beck, 2016). The researcher believes that there are many opportunities despite the difficult situation young women find themselves in.

2.9. Opportunities associated with teenage childbearing

While teenage pregnancy is associated with various adverse socio-economic outcomes for teenage mothers and tends to face great challenges during teenage childbearing, Becker (2016) communicated that resilience is an umbrella term used to characterize general processes of successful stress management, adaptation, or combination of personal or social characteristics that allows an individual, relationships or social groups to deal with serious stressors or unexpected events in a manageable way. According to a study conducted by Galambos et al. (2004), over half of the examined participants stated that spirituality/religion is central to people during stressful or destructive events.

The resilience of teenage childbearing ecologically processes and affected by multilevel attachments involving families, school, and communities. Thus, the researcher emphasized family support as one of the key coping strategies during difficult times. Concentrating on the strengths of teenage mothering, MacLeod (2001) posits that in some cases, becoming pregnant can stimulate positive changes in the adolescent's life, thus fostering joint ego development between the mother and the child. For instance, placing the teenage black pregnancy in a cultural and political context in which early childbearing mobilizes extended family resources and, therefore, does not deteriorate future circumstances.

Additionally, research reveals that poor or unsupported teenagers make bad parents while middle-class or supported ones make adequate parents (MacLeod, 2001). The ecology of human development is the scientific study of the progressive, mutual accommodation throughout the life course between an active, growing human being and the changing properties of the immediate settings in which, the developing person lives (Johnson, 2005). Therefore, social support plays a crucial role in a teenager's behavioural change, and it is related to other mediating variables, such as self-esteem, optimistic expectations resilience and being able to spot opportunities out of the box

2.10. Effects of teenage pregnancy and teenage childbearing

Teenage pregnancy is an international concern in both developed and developing countries. They are seeking solutions to address this issue to provide young women with better future opportunity and their children with adequate care (Taylor et al., 2014). Teenage pregnancy has negative effects on young women, such as increased chances of dropping out of school, increase risk of contracting Sexually Transmitted Infections (STI's), preterm birth, mental health problems, and economical family burden. The research paper by Mkhwanazi (2010), which focused on the findings of the Ethnographic research study conducted in Nyanga East, reveals that parents were disappointed when their daughters became pregnant, peers laughed at pregnant teenagers, nurses ridiculed them. Teenagers reported that they felt ashamed of having become pregnant.

Though becoming a parent can be a positive and life-enhancing experience for some teenagers. Teenage childbearing is associated with several negative social outcomes (cook et al., 2017). Because teenage pregnancy is a problem that increases stereotyping and social stigma felt by teenagers who are pregnant (Cook & Cameroon, 2017), further stated that, in areas where teenage childbearing is socially accepted, usually there is more familial and social support for the teenage

mother, which make it easier for the teenage mother to cope with the expectations and responsibilities of early childbearing.

Moreover, viewing teenage childbearing as undesirable conduct ignores that some teenage mothers want to become good and responsible parents and find parenthood happy and rewarding. As stated above in this chapter, teenage pregnancy has a massive impact on the development of both the mother and the child. It is mentioned that these effects could be physical, psychological, social, and economical. The evidence for the effect of teenage births on schooling, however, is mixed and inconclusive. Most of the papers find a negative effect of teenage pregnancy, but the extent has varied widely. Some studies have even found null or positive effects (Cantet, 2019)

Based on the research study by Nkanku & Mash (2010), shows that most teenage mothers perceived falling pregnant as a negative event with consequences such as unemployment, loss of boyfriend, blame from friends and family members, feeling guilty, poor academic performance, complications during pregnancy or delivery, risk of contracting HIV, secondary infertility if abortion is done and not being prepared for motherhood.

2.11. Relevant policies and legislation

Adjetey (1991) defines Reproductive rights in terms of the legal notions generally used to express the principle that women and men are entitled to control their reproductive lives. A woman's right to control her reproductive life is intimately connected to other rights in civil, political, economic, and social areas. To be able to control her reproductive life, a woman requires reproductive autonomy. Reproductive autonomy involves an individual's ability to make decisions concerning sexuality, pregnancy, childbearing, and the formation of families. Therefore, young

people within this area need more educational programs on how to acquire both healthy sexual and reproductive satisfaction. After the apartheid regime in 1994, the policies and legislation were reformed to protect women's rights, especially young women in schools who find themselves amid teenage pregnancy and early childbearing.

2.11.1. Child Support grant

The Child Support Grant was implemented in 1998. Makiwane (2010) identified the major difference between the old State maintenance Grant and the child support grant. The difference is that the latter is for all socially and poor children for all types of families, specifically neglected communities, especially in rural areas (Makiwane, 2010). Though, eligibility for the Child Support Grant is determined based on specific demographic and socio-economic criteria.

Across the world, teenage pregnancy is a social concern for several reasons. Early childbearing comes with many life challenges to the mother, child, family, community, and the wider society. Firstly, there is the possibility of physiological risks to both the mother and child. Secondly, social and economic disadvantages tend to be strongly associated with teenage pregnancy. It is believed that teenage fertility sets the young mother and her child on a line of lifetime poverty state (Makiwane, 2010). The South African Educational Policy allows adolescent mothers to attend school during and after birth (Makiwane, 2010). However, some young women eventually drop out of school after falling pregnant, which contributes greatly to the high rate of school dropouts, youth unemployment, and poverty.

According to Runhare et al. (2016), Sex education may also be described as sexuality education which means that it encompasses education about all aspects of sexuality, including information about family planning, reproduction, body image, sexual orientation, sexual pleasure, values,

decision making, communication, dating, relationships, sexually transmitted infections and how to avoid them, and birth control methods. Makiwane (2010) mentioned that the introduction of the Child Support Grant in South Africa sparked the debate about the relationship between the Child Support Grant and the patterns of teenage pregnancy in South Africa. In general, most cases of teenage pregnancy incidents are associated with child support grants; they usually say adolescents get pregnant because they want to receive this money without thinking about other consequences of bearing a child at an early stage of life.

The Child Support Grant inherits the State Maintenance Grant, which was initially designed for whites but later extended to other racial groups (Makiwane, 2010). The child support grant is made available to every child considered vulnerable and in need of care. Today, teenage childbearing usually takes place mainly outside marriage, which is a phenomenon that raises religious, cultural, and practical concerns such as socio-economic background, educational progress, social values, norms, and poor support from the father of the child. According to Makiwane (2010), the discussion of teenage fertility for South Africa and other Southern African countries is concerned about non-marital childbearing. However, researchers do not consider the contribution to teenage fertility rate by the currently married teenagers. Taylor et al. (2016) outline that South Africa has progressive social and health policies that permit young women from 12 to decide on contraception and abortion independently. These services should be free and available at local health facilities.

2.11.2. The Choice on Termination of Pregnancy Act, 1996 (Act No;92 of 1996)

Historically, South Africa was governed by the apartheid regime. The ruling government-stipulated rules, and nothing much supported the women's reproduction autonomy especially established in South Africa after the 1994 elections, were characterized by a climate of reform that

black people. According to Mojapelo-Batka & Schoeman (2003), the political dispensation created an enabling environment to recognize women's reproductive autonomy.

Bill of Rights states that everyone has the right to access health care services, including reproductive health care (Constitution of the Republic of South Africa, 1996). These include, among other services, the right to abortion and contraception. Hence contraceptives are freely available at public health facilities in South Africa (Patel & Kooverjee, 2009). In South Africa, the Termination of Pregnancy Act of 1996 provides free public sector abortions on request within the first 12 weeks of pregnancy and for certain conditions after that (Patel & Kooverjee, 2009). However, within the South African context, where pregnancy often results in young women dropping out of school, abortion may be one of the options accepted.

South Africa's Choice on Termination of Pregnancy Act 1996 (Act No; 92 of 1996) (Republic of South Africa 1996), which came into effect on the 1st of February 1997, marked a fundamental shift from the restrictive conditions of the legislation that governed abortion in the country under apartheid (Vincent, 2012). South Africa's democratic constitution affirms the right of people to make their own decisions concerning reproduction and to have security in and control over their bodies (Constitution of the Republic of South Africa 1996). However, people hold various attitudes, beliefs, and ideas around the termination of pregnancy, given an individual's social background. Traditions and religions have different views on abortion, which could impact the decision-making regarding terminating a pregnancy.

2.11.3. Children's Act 38 of 2005 and Sexual Offences and Related Matters Amendment Act, No 32 of 2007.

The Act is there to help keep families together and make sure a child is cared for by family or parents or is placed in alternative care when there is no family (Children's Act 38 of 2005). The Act talks about protecting children from abuse, harm, and neglect, and to do this, many different services and resources need to be made available for children. Some young women are victims of gender-based violence stimulating from their surrounding environment, which contributes greatly towards their irresponsible behaviour, which they tend to develop especially after being sexually assaulted.

Thereby, the Sexual Offences and Related Matters Amendment Act, No 32 of 2007 assist in enacting comprehensive provisions dealing with the creation of certain new, expanded, or amended sexual offenses against children and persons who are mentally disabled, including offences relating to sexual exploitation or grooming, exposure to or display of pornography and the creation of child pornography, despite some of the offenses being similar to offenses created in respect of adults as the creation of these offences aims to address the particular vulnerability of children and persons who are mentally disabled in respect of sexual abuse or exploitation. However, people from rural areas like Umbumbulu are not fully informed about these acts and what they are intended for. Such information needs to be made available to the people for them to have access to required social services when they are in need.

2.12. Conclusion

In conclusion, various studies have addressed the issue of teenage pregnancy around the world. This current research study aimed to address the frequency of teenage pregnancy in the Umbumbulu area and identifying means that could assist in decreasing the incidents of teenage

pregnancy among young people provided the challenging experiences faced by young mothers in catering for the need of their children and limited possibilities associated with early childbearing compared to the young women who do have any children. Reviewed literature also assisted in gaining a better understanding of teenage pregnancy, adverse outcomes associated with it, and the different community reactions in cases of teenage pregnancy. It is visible that there are a lot of challenges associated with their experience of early childbearing.

CHAPTER THREE

THEORETICAL FRAMEWORK

3.1. Introduction

In a discussion on the above chapter, various theoretical frameworks are relevant and well suited for the research study presented in this chapter. The current study was underpinned by the Social Learning Theory of Bandura (1997), which allowed a better understanding of young women's perceptions and experiences on their post-teenage pregnancy within their social environment. Therefore, sources utilized to conceptualize the context and the research problem under study include books, online journal articles, and scholarly articles.

The social learning theory was used to inform the current study (Bandura, 1977). The current research study focuses on the perceptions and experiences of young women on their post-teenage pregnancy and consequences in the Umbumbulu Area. The researcher is aware that Bandura has made changes and recently relabelled the social learning theory into Social Cognitive theory. The social learning theory has been widely employed in current social behaviour research, although numerous revisions of the theory have been made (Hogben et al., 1998). This theory has been of great use, more relevant to this current study of human sexuality and reproduction.

This theoretical framework has both strengths and weaknesses associated with its application into a different social context. Learning takes place in different forms, whereby people can learn from one another and face the outcomes associated with that learning process. Literature refers to social learning as a frequently used concept to facilitate social learning along with the conditions. Reed et al. (2010) identified three witnesses associated with the social learning theory:

“Firstly, learning should be viewed as an intentional process of collective self-reflection through interaction and dialogue among diverse groups of people. Secondly, there is conflict or frequent confusion between the concepts themselves and potential outcomes. Thirdly, despite conceptualization of social learning as social or political change, there is often a little distinction made between individual and wider social learning” (Reed et al., 2010).

The strength of social learning theory to the problem of teenage pregnancy and early childbearing is based on its ability to explore and understand human behavior because of socialisation and interactional processes of a variety of systems of the individual’s external environment. Various studies, like Nabavi (2014) & Banyard & Grayson (2000) that have used the theory of social learning, reveals that social learning can be explained in multiple ways and include various domains of human development.

According to Reed et al. (2010), social environment is the principal determinant for social learning for every individual located in a specific community. Teenage pregnancy and early childbearing result from young people's irresponsible sexual behavior, which could be prevented through effective behavioural changes, subjective social norms, values, attitudes, and opportunities. Yet, the irresponsible behaviour may result from the challenging social life, whereby family socio-economic background, community, peer pressure and social/cultural pressure to marry and lack of communication between parents/guardians and their children.

The weakness of this theoretical framework is that it was formulated on the notion of gender roles inequality existing within the social environment (Reed et al, 2010). Reed et al (2010),

Further adds that the imbalance of power between gender it either female or male create different perspective about that certain gender. It also hinders self-expression and individual strengths.

“Men may learn to work together and help each other as they strive for financial resources to help their families. On the other hand, women learn to help each other in carrying out household chores” (Reed et al., 2010).

Thereby, social learning theory is a theoretical framework cantered on universal notions of gender that has the strength of helping society maintain law and order (Reed et al., 2010). This theory considers the tradition and cultural differences feasible with the social context and its role in the experiences and knowledge enhanced by these teenage mothers through their difficult situations.

3.2. The social learning theory

In Bandura (1977), Rotter's social learning theory was initially developed in the mid-1950s, with major contributions soon from Bandura. Thereby, the current research study will pay attention to the writings of Albert Bandura (1977), a social science researcher who dominated the field of psychology. Reed et al. (2010) define social learning as a process of achieving concentrated action in uncertain situations. Hence, social interaction between individuals and their social environment promotes learning (Kim, 2001 & Reed et al., 2010).

In agreement with the definition mentioned above, most social meanings and identities are socially constructed through the dynamic interaction between people and their social environment. This indicates that social learning occurs as an individual learning process in a social environment and is influenced by the prevailing social norms. Therefore, social learning theory describes social learning within the context of an individual and social environment.

Learning occurs in various ways or modes: formal, informal, non-formal directed, self-directed, open, or distant. Reed et al. (2010) stipulated that learning consists of acquiring new knowledge or skills and communication. Hence, to ensure that social learning has taken place, firstly, the individual should demonstrate a change in understanding. Secondly, demonstration of this change goes from individual-based to society, and lastly, it occurs through social interactions (Reed et al., 2010). However, this study is more concerned with exploring the learning processes of the young mothers from their experiences in a social perspective aspect.

The concept of knowledge has been of great significance to researchers. According to Jarvis (2012), it is significant that knowledge is being suggested here at least a product of learning since some of the classified definitions of learning in psychology have omitted the process altogether. For instance, change in attitudes, behaviour, and social norms results from understanding and knowing how to interpret the information available through communicating with other people. Kim (2001) defines Knowledge as a human product that is socially constructed through interactions with each other and the environment they live in, influenced by the culture and religion of the community.

Learning a social process that does not take place within an individual only but considered as the development of behaviours that are often shaped by the external environment. According to Kim (2001), culture and the historical background of a certain community plays an important role in the construction of knowledge.

“Intersubjectivity of social meanings refers to a shared understanding among individuals whose interactions are based on common interests and assumptions that form the ground

for their communication. Social learning is based on specific assumptions about your reality, knowledge, and learning” (Kim, 2001).

In addition, social meanings and knowledge are shaped through interactions between social groups (Kim, 2001). The social learning theory views learning, and behaviour as environmentally determined. According to Bandura (1977), Social Learning is a process where people learn by observing others. As people, we learn through interaction with other people and the developed systems of the surrounding environment. Meanings of life are socially constructed and visible through social norms, values, and belief systems created through traditions and cultures feasible in the community, which aims to govern social interaction among people and promote appropriate behaviour of all ages feasible within that specific environment. Therefore, this theory is the best fit for this study as young people face many challenges, and the surrounding environment has major effects or influences on the attitudes and behaviour of young people through social learning.

3.2.1. Learning by direct experience

Young women within the Umbumbulu community face varying situations they must deal with in one way or another. Bandura (1977) states that the more fundamental method of learning is through direct experiences, which is mainly ruled by the rewarding or punishing consequences that follow any given action. Using the social learning theory about the current study of perceptions and experiences of young women on their early childbearing. It is feasible that new behaviour can be learned through direct experiences or by observing other people and consequences. People usually look down upon them if you are a young girl in your teen years and do not have a child. It is even worse for those in their twenties and has a child; they usually get insulted, saying they have

had an abortion before. Bandura (1977) believed that responses are automatically and unconsciously strengthened by immediate consequences.

In addition, Reed et al. (2010) describe social learning as a process where people have experienced and continue learn as they reflect upon these experiences. Bandura (1977), suggests that acquiring new knowledge or skills, understanding and reinterpreting knowledge, where an inspection of underlying assumptions leads to change in attitudes and behaviour are indicators that learning has occurred. According or Bandura (1977), “an internal motivator can possibly account for the marked variation of the incident and strength of a given behaviour in different situations, in different times and in different social roles”. By this, the researcher means that, South Africa is a diverse country, with various social norms, values, beliefs, religion, and cultural systems influencing the behaviours of people differently.

Literature reveals that other traditional theories generally depict behaviour as the product of directly experienced response consequences (Bandura, 1977). Virtually all learning phenomena resulting from direct experiences can occur on a second-hand basis through observation of other people’s behaviour (Bandura, 1977). Therefore, learning can be acquired through direct experience of observing other people (Bandura, 1977) and imitating the role models' behaviour (Bandura, 1977 & Reed et al., 2010). Further to that, emotional or pleasurable experiences can trigger emotional reactions to those who are observing.

Thus, the environment is the principal determinant of social learning. Hence people are conscious of occurrences in their environment, whether good or bad. These occurrences form part of their behaviour through observational learning. We learn by observing and listening to people

around us. Engaging in certain behaviour might be one's way of adapting or surviving under physical, social and, psychologically trying conditions. In addition, within the social learning context or systems, reinforcements of behaviour as the primary informative or incentive function to stimulate behaviour (Bandura, 1977). The informative part of reinforcement is that consequences accompany various actions, and people perform behavior and observe outcomes from other people. Prior experiences influence human behaviour resulting from immediate social reinforcements.

Bandura (1977) specify that People come to expect those certain behaviours such as safe sex life, the capability to reproduce freedom to decide if, when, and how often to do so will gain them outcomes they value, others will know appreciable effects and still others will produce undesired effects. The socialization process within a specific environment includes language, morals, customs, educational, religious, and political practices of a culture taught to each community member.

Kim (2001) states that environment plays a major role in constructing knowledge, as learning does not occur in isolation from human interaction. Wenger (1998) views learning as a production of social structure. Wenger (1998) further adds that identity and cultural meanings are formed through the social learning systems that comprise complicated relationships, community dynamics, and boundaries formulated within the immediate environment. Therefore, meaningful learning requires both participation and ratification to be interplay. Through *participation*, an individual engages in activities, conversations, reflection with other forms of participation in social life and with ratification. Individuals produce physical and conceptual artifacts that reflect our shared experiences and organize our participation (Wenger, 1998). Hence, the process of social learning is dynamic and alive.

According to Hogben et al. (1998), sexual pleasure and expectancy about sexual intercourse are among the most potent of all reinforcers. However, adolescent sexual behavior and early childbearing involve a range of behaviours, feelings, and attitudes. Hogben et al. (1998) state that most teenagers are sexually conscious, and sexual behaviour is likely to occur without strong inhibitory or sometimes despite them. The environmental cues yield different unforeseen events that interact with the individual's competencies, producing behaviour that differ from person to person (Hogben et al., 1998). Social learning can occur without external reinforcement; such learning cannot be predicted without reference to cognitive. Hogben et al. (1998) stipulated that social learning focuses on the cognitions about and imitations of other sexual behaviour.

In addition, the application of classical and operant conditioning into sexual behaviour helped the researcher place social learning into the historical context of research participants. For instance, Skinner's Operant conditioning constitutes of reinforcements or punishment of initially unconditioned behaviour (Hogben et al., 1998). Thus, the sexual behaviour of adolescents can be modified by the biological and social environment. As a result of that, the sexual and reproductive health can be situated within numerous scientific disciplines in the social sciences which contribute to our understanding of human behaviour. Therefore, social learning theory has clarified human development from a combination of psychological and environmental possibilities that stimulate human growth.

Teenage mothers do not have sufficient financial means compared to older parents, and pregnancy can disrupt schooling for teenage mothers. According to Hogben et al. (1998), early childbearing includes three components that formulate the learning environment for teenage mothers and their children. Namely, environmental context, cognitive influence, and behaviour execution constraints. The child's acquisition of adult moral development standards is, to a considerable extent, considered a gradual process of imitating the observable values and behaviours (Bandura & Cowen et al., 1969).

Hence, social learning theory considers the negative implications associated with the developmental stages where they altered with the provision of adult modes (Cowen et al., 1969). The experiences of teenage pregnancy and early childbearing are affected by multiple systems of the social environment. Social learning also occurs through gender inequalities and courtship violence situated within the cultural and social context. (Tontodonato & Crew, 1992). Thus, the current research study paid attention to the possible gender differences in the underlying causal structure of such violence among partners or family members, prevalence of teenage pregnancy, and issues associated with adolescent sexuality and reproduction.

According to Albert Bandura (1977) and Bobo doll experiment (1961), this theoretical framework considers behaviour learned through social observation and imitation. Based on this research study focusing on perceptions and experiences of young women on their post-teenage pregnancy. Also focused on courtship aggression and structure the problem in terms of predisposing factors (contextual component and situational predictors (the situational component). For example, observing interparental aggression affect boys and girls differently, depending on which parent is the aggressor, and the recipient of aggression is. Women and men resort to physical aggression for different reasons, due to a large part of differences in socialization (Tontodonato & Crew, 1992).

The research study by Hines & Douglas (2009), which focused on women's use of intimate partner violence against men, reveals that women are violent towards men and this topic has

received little attention, both within the scholarly literature and the popular media. Most women use physical force in intimate relationships appears to be self-defence. At the heart of life itself is the process of learning (Jarvis, 2012). Jarvis (2012) defines social learning as relatively a change in behaviour that occurs because of practiced behaviour learn through the interaction in the immediate social environment. The similarities of these definitions are to be found in their behavioural nature; both are concerned to note that a change in behaviour has occurred. Some criticism regarding the behavioural definition has appeared. Some specified that learning is the product of a particular process (Jarvis, 2012), whereas learning is both a process and a product. At some point, there can even be some situations where the learner knows and wishes to change a behaviour pattern due to some learning that occurred.

In addition, failure to act does not deny that learning has occurred. In the illustration, learning has occurred in many ways, including recognizing what would be acceptable behaviour within the social setting. Suppose a person can be taught to think critically and be autonomous. It is difficult to maintain that what is going on within a person is subsequently situations merely the result of the environment and determined by previous experiences. Jarvis (2012) stated that human learning is both an experiential and a reflective process. Literature suggested that learning is the transformation of experience into knowledge, skills, and attitudes and recognizes that this occurs through various processes (Jarvis, 2012).

It is important to recognize that there are different forms of learning than the biological differences alone, but learning can result from schooling and cultural practices. Learning is not just a psychological process that happens in isolation from the world in which the individuals live, but that is ultimately related to that world and affected by it. It is important to explore the social dimension of learning to understand the psychological mechanisms of the learning process.

Therefore, every person is born into a society that has already established its own culture. This concept may be regarded as the subtotal of knowledge, values, beliefs, and attitudes of the society. This culture appears to be objective to the individual as in part acquired by everyone in the society through their socialization process and other similar processes, such as formal education. Learning may be regarded as something that occurs throughout the lifespan, whenever new experiences occur and new interactions take place.

3.3 Conclusion

In conclusion, As the individual grows and matures within the context of social living, the person becomes the reflection of the sum of experiences that the individual has in society. Culture varies by socio-economic class, ethnic community, by region and even by gender. The following chapter is chapter four, which contain methodology that was employed to address the research under study.

CHAPTER FOUR

RESEARCH METHODOLOGY

4.1. Introduction

This chapter presents and describes the research methods that were used to collect and analyse data. Mouton et al. (2006) define methodology as the means or methods of doing something. According to Burns and Grove (2005:581), "methodology includes the design, setting, sample, methodological limitations and the data collection and analysis techniques in a study." It was necessary to engage qualitative research methods. Qualitative research provided the opportunity for participants to articulate their understanding, perceptions, and experiences around issues associated with their pregnancy. Therefore, the following seven headings of methodology strategies were undertaken to conduct and collect data for the research study. This includes the research paradigm, research design, sampling strategies, data collection methods, data management and analysis, the trustworthiness of the research study, ethical considerations and lastly limitations of the study.

4.1.1. Research Paradigm

The research paradigm that underpinned this research study was Qualitative Research Paradigm. Neuman (2014), describes Qualitative research as an approach based on the holistic and individual aspects of the human experience and attempts to capture those experiences entirely within the context of those experiencing them, through the spoken or written word and observable behaviour. Therefore, this study utilized the explorative research approach to understand young people's perceptions of sexual and reproductive health.

According to Babbie & Mouton (2001), in a qualitative approach, the researcher aimed at studying human actions, where the goal of the research focuses mainly on understanding. Furthermore, it provided the participants with an opportunity to articulate their perceptions, understandings, and experiences around teenage pregnancy and early childbearing. Therefore, this research approach was well suited for the study. It has enriched the researcher with a better understanding of the subject under investigation through probing questions and thus gives the participants an in-depth description.

4.1.2. Research design

Burns & Grove (2001) define research design as the clearly defined structures the study is implemented. The research design comprises the entire plan for collecting and interpreting the collected data and obtaining answers for the research problem. The current study undertook the **explorative research design**. According to Babbie & Mouton (2001), Exploratory Research Design is Conducted when the researcher examines a new area of interest or a new subject and seeks to develop new insights on the study at hand compared with other similar differently explored phenomenon. And so, this research design provided instruction on the guidelines to be followed when addressing the research problem.

A lot of research studies have been done concerning sexual and reproductive health among young people across the world. This study intended to explore and better understand the perceptions of young women on their post-teenage pregnancy experiences, as it is one of the social issues affecting young women within Umbumbulu. The researcher also aimed to explore the dimensions of the research problem through literature and semi-structured interviews with young women faced with teenage pregnancy.

The theory of social learning postulates that meanings of life are socially constructed within communities through social norms, values, religion, cultures, and beliefs to guide appropriate behaviour of all ages depending on the stage of development of an individual. Information was accumulated through open-ended questions in semi-structured interviews involving 12 participants obtained through a purposive sampling strategy. Originally the researcher targeted 16 research participants who have experience teenage pregnancy and who are single mothers. Unfortunately, only obtained 12 young women participate in the research study. In addition, the researcher aimed to gain new insights into the full nature of the matter under study. Therefore, exploratory research provided the researcher with basic familiarity with the topic and assisted in obtaining required information and developing a thick description of the study.

4.1.3. Sampling strategy

According to Mathews and Ross (2010), the population in statistical terms refers to the total number of people or cases that can be included as research subjects. Mathews and Ross (2010) further state that population can be defined as the target group a researcher wants to study. A sample is part of a whole or a subset of measurements drawn from the population. It refers to a smaller group of people representing the larger population (Van Rensburg, 2010:151). Hence, sampling refers to the process of selecting participants who provided the required data to achieve the purpose of the research study (Babbie & Mouton, 2009). Based on the current study, participants were recruited using a purposive sampling strategy (Babbie & Mouton, 2009), which is defined as the following:

The sampling procedure for this study was a Purposive sampling strategy. Young women are aged 18-24 years, currently residing in the Umbumbulu area, KwaZulu-Natal. Van Rensburg (2010) postulates that judgment is made based on the available information or the researcher's

knowledge about the population. Purposive sampling is done when the researcher selects a sample that can be judged to represent the whole population. It includes the selection of cases that can shed light on the object of study. The targeted population of the research was young women between the ages of 18-24 years of age and who have become young mothers at a very early stage of life. The researcher is familiar with the Umbumbulu area since she grew up there and recognized some of the participants who were affected by early childbearing. Hence, we are same age group. Other participants referred to other participants since they know one another, making it easier for the researcher to obtain participants.

According to Terreblanche, Durkheim, and Painter (2006), purposive sampling is the involvement and the selection of participants based on their ability to provide the required information. The researcher used this sampling method to get more information from participants who seemed to have the ability to provide rich information. Whereby, the openness and disclosure level of participants were observed during the interview to obtain more information. Therefore, semi-structured interviews of 12 participants using purposive sampling were conducted. Thereby, the researcher used those successfully selected individuals to meet the requirements of the research study.

LoBiondo & Haber (1998) defines population as a group of people conform to a specific population or social group, to which one intends to generalize the findings of the research study. The population for this study comprised young women in the Umbumbulu area due to the increased rate of teenage pregnancy. The sample of this study was made up of 12 young women from adverse socio-economic backgrounds and who have experienced teenage pregnancy. The researcher targeted single mothers only who resided within the Umbumbulu area, in ward 96.

As a result, it is impossible to include and study the whole population; therefore, a representative sample from the population is extracted because of the same characteristics they display of the targeted population. Runahre (2016) indicates that sampling is a procedure that involves the selection of elements from a targeted population. Therefore, the purposive sampling method was more relevant to the current study in recruiting participants.

4.1.4. Methods of Data Collection

The research designs influenced the methodology undertaken to collect data. Data collection is defined as a series of interrelated activities to gather high-quality information to answer emerging research questions (Creswell, 1998). According to De Vos et al. (2002), Researchers use semi-structured interviews to gain a detailed picture of a participant's perceptions of a particular topic. Therefore, this study has used Semi-Structured interviews to collect data.

Barriball & While (1994) specified several advantages of using personal interviews in collecting data as it prevents possible poor response rates from a questionnaire survey. Thereby, for this study, semi-structured interviews were selected to collect data because of this main consideration. They were well suited for exploring the perceptions and opinions of the participants regarding the sensitive issue focusing on their teenage pregnancy experiences and enabling probing for more information. The researcher asked open-ended questions to different participants, with an expectation of their different views. Probing questions were asked depending on the direction in which the conversation was leading to.

In-depth face-to-face interviews were conducted as means of collecting data. Interviews were tape-recorded, and field notes were taken during the interviews with participants. These were in-depth interviews prompting and probing were used during the interview to reduce the anxiety

for both the researcher and participants and search for more elaboration, meaning, and reasons (Hollway & Wheeler, 2002). Direct conversations were not easy because the recordings were in isiZulu and had to be translated to English first. Some of the recordings were not very clear. I constantly referred to my field notes that I had written down to ensure accuracy.

The researcher further chose this method because the advantage of interviews is that it helps yield rich information. Each interview took approximately 1 hour. An interview schedule was used to guide the interview process. The gatekeeper's letter was obtained from Chief Makhanya to conduct the study within his area. Participants were allowed to choose an environment where they could feel comfortable speaking. Most of the participants chose to be interviewed in their homes and while others preferred an open space, where we used one of the local sports grounds to maintain Covid-19 social distancing regulation. However, Sobonakhona Tribal Authority Hall was opened to be utilized whenever we wanted to, but research participants wanted a different setting. The interview was started with an introduction and clarification of the purpose of the current study. Permission was obtained through informed consent at the beginning of the interviews with participants and allowing them to decide their participation in the study. Therefore, this method was well suited for exploring young women's attitudes, values, and beliefs. It allowed the researcher to evaluate the validity of the participant's answers by observing non-verbal cues, which are particularly useful when discussing such issues.

4.1.5. Methods of Data Analysis

This research study undertook Thematic Content Analysis to analyses the collected data. Braun & Clarke (2006) defines thematic analysis as a technique used for identifying and analyzing reported themes in the collected data. This technique of data analysis can produce insightful, analysis that answers specific questions of the research study. According to Powell et al. (1996),

analyzing results is a time-consuming and difficult research study stage. Therefore, the researcher used the five steps of thematic analysis to analyze the data, and they are well described by Terreblanche et al. (2006), namely, Familiarization and immersion; inducing themes; coding; elaboration; and interpreting and checking.

Familiarization and immersion - during this phase of analysis, the researcher familiarized and immersed herself in the data collected to identify useful data to form part of the finding of this research study. This was achieved by thoroughly re-reading the raw data (Terreblanche et al., 2006) collected and repeating the recorded data to ensure that accurate information was obtained. Through re-reading the raw data collected, the researcher was able to induce the four main themes that will form part of the research findings.

Inducing themes - the researcher induced themes from the data collected during interviews with the participants. This was accomplished by organizing data which eased the induction of themes, and themes were divided into different topics covering a different aspect of the research aim. Four main themes were developed: theme one: dynamics of human development, theme two: effects of teenage pregnancy, theme three: transitioning from adolescence to parenthood, and lastly, theme four: effects of early childbearing. All the themes mentioned above have subheadings to elaborate more on the findings of the research study.

Coding themes, the researcher coded the data into coding frames by allocating different colors to data fragments and then identifying themes across subjects. In the interview, transcript words were labeled that constituted activities differenced in opinions and deemed relevant because they appeared from different participants in data analysis. **Elaboration** one provided more details about the themes in chapter four that were identified during the stage of data

analysis. According to Terreblanche et al. (2006), the purpose of elaboration is to capture the finer nuances of meaning in the coding system through data that has been collected.

Lastly, **Interpreting and checking** - In interpreting qualitative findings, the researcher paid careful attention to the trustworthiness of the research study that comprises four sections that work together: credibility, dependability, confirmability, and transferability. This ensures the validity of the research study. The collected data was analysed through the thematic content, based on the interviews' views. Data were analysed by identifying patterns and themes in the data collected and drawing certain conclusions from them (Mouton, 1998 & Creswell, 2007). Therefore, the collected data was interpreted against literature review, context, and theoretical framework that informed this current study.

4.2. Trustworthiness of the Research Study

According to Babbie & Mouton (2008), trustworthiness is another approach to clarifying the notion of objectivity as it is manifested in qualitative research. Babbie & Mouton (2008) further state that the key to good qualitative research is the notion of trustiness and neutrality of its findings. Babbie and Mouton (2008) stipulate that a qualitative study cannot be called transferable unless it is credible and cannot be deemed credible unless it is dependable.

Hallway & Wheeler (2002) refers trustworthiness to the methodological accuracy and adequacy in qualitative research. The research study was well marketed to the participants, and informed consent was obtained at the beginning of the interviews. The researcher allowed sufficient time to establish a good rapport with research participants. Participants were given time to think and respond to questions being asked by the researcher. The researcher reported visiting the research participants to their homes because Sobonakhona tribal community hall is far from

where they reside. Some of the participants could not leave their children behind, then decided that I would make means to come to them.

4.2.1. Credibility

According to Streubert & Carpenter (1999), Credibility is demonstrated when participants recognize the reported research findings as their own experiences. Lincoln & Guba (1985) state that credibility is achieved by taking data and interpretations back to the participants to review the findings, which is referred to as **member checking**. Therefore, Member checking and **peer debriefing** were conducted to ensure honesty. Credibility addresses whether the research has established confidence in the truth of the results and deals with the question of how the results of the research match the reality within the context of the study (De Vos, 2002).

To ensure the credibility of the study findings, the Prolonged researcher engagement with the participants, whereby each interview lasted for about an hour and enabled enough time to probe for depth information. Participants were given enough time to express themselves in both English and their home language (IsiZulu), of which the researcher was familiar with both languages. The researcher repeatedly listened to the interview recordings to make sense of and understand the meaning behind the participants' statements, allowing the researcher to translate all the interview recordings into English.

4.2.2. Dependability

According to Lincoln & Guba (1985), Dependability is met by securing the findings' credibility. Bobbie and Mouton (2002) indicate that the study's dependability should provide its audience with evidence that if it were to be created with the same participants in a similar social context, the findings of the study would be the same. It was achieved by giving the research work

to my supervisor for reviewing and recommendation purposes (Bobbie and Mouton, 2002). Moreover, she examined the process of the research, which describes how data was collected and analyzed. Therefore, the data was collected through semi-structured interviews, taped recorded, and analyzed through Thematic Content Analysis.

4.2.3. Conformability

According to Bless et al. (1995), conformability requires the researcher to obtain similar findings by following a similar research process in a similar context. Above that, Bobbie, and Mouton (2002) mentioned that to ensure conformability, the study's findings should result from the study's main content, not the researcher's biases. Conformability was achieved through peer debriefing, where the research reports were given to the supervisor, an experienced expert, for constructive criticism. According to Babbie & Mouton (2001) & Klopfer (1995), this entails to which degree the result of the study is the product of the inquiry. An expert supervisor will be involved in the auditing of the research to ensure confirmability.

4.2.4. Transferability

Data descriptions are essential to enable the transferor the application of one study's findings to similar situations. Streubert & Carpenter (1999) stipulate that the potential user, not the researcher, determines whether the findings are transferable. Based on Bless et al. (1995), Lincoln & Guba (1999) & Babbie & Mouton (2005), transferability refers to the extent to which results apply to other similar situations in a different context. This was achieved by providing a detailed description of the context (Lincoln & Guba, 1985) in which the data was collected. All details of the study are provided, such as background, location, the number of participants, and reasons for the study are highlighted (see chapter one). Therefore, the transferability of findings was ensured by comprehensive presentation, descriptions, and in-depth provided the prevalence of teenage

pregnancy international and national. The findings of the research will be reported back into the community to enhance positive participation and make major recommendations that can be done to improve the standard of living of young people.

4.3. Ethical Consideration

Neuman (2011) defines ethics as a set of moral principles suggested by an individual or group that is widely accepted and offers rules and behavioural expectations about the proper conduct towards research participants. Thereby, data should not be obtained at the expense of human beings. Permission to conduct the study within the Umbumbulu community was obtained from the University of KwaZulu-Natal Research Ethics Policy and the rightful stakeholders of the Sobonakhona Tribal Authority. Therefore, to ensure ethical considerations, the following ethical principle was adhered to:

Non-Maleficence - according to Burns and Grove (2003), risks that may be encountered in social research include physical, psychological, emotional, social, and financial ones. The researcher did not observe any discomfort during the interviews and did not cost the researcher since she resides within the same area of the research study. Based on Bless et al. (1995), It is important to be aware that harm may occur unintentionally during a research study. Hence, the researcher was aware of possible adverse events that were likely to occur since the topic under study consists of sensory experiences. To ensure that there was no harm or repeat of trauma done to the participants, the researcher checked with them during the interviews and was able to create an eased environment as she referred to her personal experiences of becoming a young mother and put into play the social work skills of building a positive rapport with the participants. Therefore, participants were safeguarded against doing anything that can harm them during the research study. Participants were adequately informed about the potential impact of the research study.

Informed consent is one of the fundamental principles in a research study. De Vos (2002) stipulates that obtaining informed consent implies that all possible or adequate information on the goal of the research study and the possible advantages and disadvantages to which participants may be exposed to it must be rendered to the research participants before conducting the study. Thus, before conducting the study research proposal, the research questionnaire was sent to the Humanities Social Sciences Ethics Administration, where it was screened and approved.

According to Nueman (2011), sometimes, people may give consent when not well informed. The researcher ensured that research participants were well informed and had sufficient information about the study's main goal to avoid such an incident. Written informed consent forms were given to all the participants. This form informed participants more on what the research is about, the duration it will take to complete the interview, who will have access to the information they have provided, given an opportunity to ask questions before giving consent and decided to participate. Written and signed informed consents forms were obtained from all participants. This also assisted participants in making an informed decision on their participation.

Anonymity and Respect- according to Brink (2006), certain steps should be taken to ensure participants' anonymity by excluding identifying details that may reveal their identity. De Vos (2002) defines privacy as not intended for others to observe and analyse. The principle of anonymity can be violated in various ways, and the researcher needed to maintain the importance of protecting the privacy and identity of the participant. Names and addresses of the participants were not collected, so that the project cannot link the responses with participants' identities.

According to De Vos (2002), ***confidentiality*** indicates the handling of the information in a confidential manner. Lobiondo-Wood & Haber (1997) maintain that confidentiality protects

participants and that information shared will not be publicly divulged. The research participants shared very sensitive information about themselves and how they have failed to progress after giving birth to their children. Family dynamics came into play during the interviews and how disadvantaged socio-economic background contributed towards their pregnancy. The researcher understood that it is the responsibility and obligation of the researcher to keep information received from participants confidential and sensitive. However, the research participants were informed that the researcher and researcher's supervisor would access their information. The researcher granted participants voluntarily informed consent forms for them to make an informed decision about their participation.

Release and publication of findings – According to De Vos et al. (2011), the final report must be clear, explicit, and contains all necessary information. The final research report will be reported back to the research participants and the community large as the manner of restoring human dignity as well as instilling the spirit of meaningful sharing of information while seeking new ways towards prevention of teenage pregnancy by highlighting the role social service professions including social work in dealing with this pandemic.

In conclusion, Qualitative research allowed the researcher to expand her understanding through non-verbal and verbal communication, process information (Marriam, 2009), check with participants for accuracy, and explore unanticipated responses. This chapter outlined the overview of qualitative methods used to collect data. Participants were purposefully recruited, with the initial plan of recruiting more than 20 participants. Still, only 12 remained, which imposed certain research limitations in the amount of data that might have been collected.

Semi-structured interviews were the chosen research instrument used to collect data since the main objective was to gather participants' views in a narrative form. The participants were only asked to discuss their knowledge and experiences on teenage pregnancy and their experience with early childbearing. Different ethical considerations were employed to safeguard and protect participants from harm or trauma that may result from participation in the current study. The study aimed at understanding the perspective of young mothers and their experiences on early childbearing. The next chapter presents the findings of the study concerning the objectives stipulated in chapter one. Recommendations and anticipated value of the study are also outlined.

CHAPTER FIVE

PRESENTATION AND DISCUSSION OF FINDINGS

5.1. Introduction.

This chapter presents and discusses the main findings on experiences of young women on their post-teenage pregnancy, from the analysis of the data that has been collected to meet the required end-goal of the research study. Data was collected using semi-structured interviews to enable the participant to elaborate more on their lived experiences and analyzed through thematic content analysis, whereby themes were then established to formulate the study's findings.

Themes will be discussed in the relevant literature review and theoretical framework, Social Learning Theory, to understand the person within their immediate and surrounding environment. For this study, younger people were invited to participate in the research study; about 20 people were invited but, only 12 participants remained. Hence, people were not forced to participate since they were recruited purposefully, given that the content of this study is sensitive. Thereby, this study contained 12 young women recruited through a purposive sampling strategy (see Chapter 4). The main aim of the research study was to explore and better understand the perception of young women on their post-teenage pregnancy experiences.

5.2. Young Women Demographic characteristics

Name	Age at interview	Age at childbirth	Number of children	Occupation	Social circumstances
Participant 01	24	15 Years	02	Unemployed	Unstable
Participant 02	19	17 Years	01	Unemployed	Student
Participant 03	23	17 Years	01	Employed	Stable and employed
Participant 04	21	16 Years	01	Unemployed	Stable
Participant 05	20	16 Years	01	Unemployed	Stable
Participant 06	22	17 Years	01	Unemployed	Stable
Participant 07	24	16 Years	02	Unemployed	Unstable
Participant 08	22	17 Years	01	Unemployed	Student
Participant 09	23	15 Years	01	Unemployed	Stable
Participant 10	24	16 Years	02	Employed	Stable
Participant 11	23	15 Years	01	Employed	Stable
Participant 12	24	16 Years	02	Unemployed	Stable

Various factors are the root causes of teenage pregnancy associated with social interaction dynamics that take different aspects of the social environment. The research participants of the current study revealed various factors that they believe are the causes of the prevailing teenage pregnancy within the Umbumbulu community. Namely are peer pressure, poverty, deprived socio-economic background, lack of communication, lack of supervision and monitoring of children, domestic violence, and drug and alcohol abuse. All the causes mentioned above are accompanied

by the consequences or outcome of the behaviour, of which this study relates to them as the experiences lived by these young women.

Teenage pregnancy hurts the lives of young women, their recommendations on how to assist young women in the Umbumbulu area to prevent teenage pregnancy. Therefore, these factors, effects, and recommendations will be explored and described in the following themes and subthemes relating to the data collected. The study aimed to explore young women's perceptions of their post-teenage pregnancy experiences.

5.3. THEME ONE: Underlying roots causes of teenage pregnancy

5.1.1. Dynamics of human development

As children develop, they pass through series of sensitive periods in which their lived experiences can have a disproportionate and lasting impact on their future (Pachuki, Ozek, Barrat & Cattuto, 2014). Therefore, during this stage of human development, their social relationships and cognitive development change greatly. The research participant showed a great understanding of human behaviour. Especially those committed by young people, since they can easily relate to them.

“There are different kinds of behaviour among us as young people; it differs to the person's personality and how she views life. Some young people tend to love things that are beyond their control and not good for their lives and health” (Participant 01).

“.....that your behaviour changes totally. Even at home you tend to be the person they no longer know since they lost control over your behaviour” (participant 02).

The statement mentioned above by participants shows that dynamics associated with body changes lead to massive changes in adolescent behaviour. Parents' teachings and guidance are easily dismissed or disregarded since they have developed a sense of independence.

“Such as drinking alcohol, smoking and going to parties, and the mere fact that we tend to love boy’s way too much which leads us in failing to pinpoint the dangers we are putting ourselves in” (Participant 02)

“.....other young people end up using drugs which leads you to start stealing from your parents or community because you want to sustain your drug addiction” (participant 02).

5.1.2. Peer pressure

Participants stated that most young people commit deviant behavior because they want to maintain social status among their peer groups. This shows that parents or caregivers are not part of their child’s development. Most young people commit such behaviour to want social inclusion, on the condition that they come from different family backgrounds.

“Peer pressures have a huge role, and we as young people tend to want to fit in with the rest of the group by doing what they think is correct and as I had mentioned before that our parents do not talk to us about these kinds of the things and it makes difficult to ask certain questions” (participant 02).

“Peer pressure has a major role on how we make our decisions because you want to fit in and get approval from your partner without thinking about the effects of such behaviour” (Participant 05).

“The social environment has as a major role in the increase of teenage pregnancy in our community because there are no precautions undertaken to address this issue” (Participant 04).

“Pleasing our partners, peer pressure, drinking alcohol and taking drugs and incorrect information” (Participant 03)

5.1.3. Alcohol and drug abuse

Most of the participants showed a great understanding of human behaviour, especially young people. Deviant behaviour was associated with the leading causes and could have negative consequences over their lives; they are not aware. Hence, parental influences decrease as they express a heightened desire for independence and seek inclusion in peer groups. Research participants raised different views on the causes of teenage pregnancy, of which drinking was one of them, and they made practical examples.

“Obsession with drugs and alcohol is one of the factors that may influence them because they are not in their right state of mind to make an ethical decision.....contributing factors could be lack of self-control from us as young people and not having a positive direction in life. Drinking alcohol and drug use also plays a major role in decision making” (Participant 07).

5.1.4. Lack of communication between parents/guardians and their children

During adolescence, young people usually develop an attitude of independence weighing off the teachings and guidelines they receive from their parents. Other participants stated that they do not have such conversations with the parents due to their family and community's prevailing social norms, beliefs, and values. Umbumbulu is a traditionally dominated environment. Hence it

falls under Makhanya Tribal Authority. The cultural aspect within the Umbumbulu area does not promote such discussion between parents and their kids.

“When you are reaching the stage of teenagerhood, there are a lot of things that take place that you need to be guided through them when the time comes” (Participant 08).

“Some of the things could be peer pressure and lack of communication between yourself and parents. That leads to wrong seeking information from your friends, of which you perceive as correct information while that is not the case, then you end up acting based on this incorrect information” (participant 02).

“Young people do not have sufficient information or knowledge regarding the consequence of early sexual engagement” (participant 01).

“Lack of communication between us as young people and our parents which leads us seeking incorrect information among our peers” (Participant 05).

“Traditionally, young women are encouraged to attend virginity testing just to assure the community and parents that they are still virgin, but it does not fully address issues associated with our sexuality” (Participant 09).

“Unfortunately, I do not have parents, I lost them at a very young age, and I was left under the care of my older siblings, who could not handle to have such conversation with me” (Participant 03).

“The Nazareth (Shembe) religion, virgins’ girls are isolated from old women and those who have a before marriage they are no longer considered as innocent young people because you have sinned already, they usually call you (intombi yesihlahla) as you given a second chance” (Participant 06).

In addition, even other religious groups do not promote premarital sex and childbearing.

“It does not, such act is declared as wrong “sin” which I believe it has got something to do with a background of humanity. Such as the dos and don’ts list” (Participant 09).

5.1.5. Gender-based Violence

According to Jewkes et al. (2009), some young women remain sexually active because they experienced the first sexual sex. Others face forced sexual intercourse, and it is common. Participants showed that they are aware of other people's adverse situations and contribute to their present behaviour.

“We normally engage in sexual intercourse for different reasons because some are victims of rape and sleeping with a man could be their coping mechanism due to trauma they had faced during the incident of rape” (Participant 03)

“Another thing is having too much pressure from a nonwarmed kind of family environment, where one has fought for their fulfilling livelihood. As a result, a teenager tries to survive within her means, looking for love in wrong places”.

Family dynamics play an important role in how ought to behave and progress in life. Gender-based violence it’s one of the social problem’s dominant across South African communities. Thereby, most young women who have been victims of gender-based violence are vulnerable to responding negatively to the outcome of abuse.

“..... the intergenerational sex, social issues faced by an individual young person might have a great impact on their decision making”.

“.... hence that time you still young and the person you are in a relationship with, maybe older than you. Thereby, you are scared to ask certain questions, and because he is older than you, he can easily manipulate your mind (participant 02).

“I fell in a relationship with a person who is older than me (10 years gap), already securing a good-paying job, he was able to provide for my antenatal care and after birth. He was physically, emotionally, and financially when I needed him the most. He also did the cleansing ceremony and paid all the required damages by my family” (Participant 07).

“The issue of receiving social grants as one of the things that promote early sexual engagement among young people as means of getting this money.”

Most people believe that the young usually get pregnant to access the child support grant without exploring other factors that might be the leading causes for teenage pregnancy. Children are very expensive, and the child and the child support grant is only R440, making it impossible to cater to the child's needs adequately. Almost all of them complained about the child support grant that is not enough at all.

5.1.6. Lack of condom usage/ Contraceptives

Most of the research participants reported challenges they are facing in terms of accessing services. Those challenges included a lack of information about adequate services available. Accurate information about services to prevent pregnancy is more of importance to their understanding of sexuality and reproduction. Further highlighted lack of knowledge about what is expected from them since they have come to age (Ukuthomba) created by lack of communication between them.

“laughing’, I do not remember myself using it, and I have never used it in my life (participant 01).

“No, we do not talk about sex, and we never reached a point where we talked about those at all” (Participant 01).

“..... I even dropped out of school after I fell pregnant with my second child. After one year, I gave birth to my firstborn. My family could no longer allow me to go back to school since I had two children to cater for” (Participant 01).

“As I had stated before that we used it when we remembered to use one that time, but it is not something we usually consider when having sex, and that I have one partner, I do not see the need of using it and that I need to assure him that I am only dating him no one else is involved and earning his trust” (Participant 05).

“.....I am using a three-month injection just because I do not see myself falling pregnant again. Even when I see them pregnant, I feel so bad and sad because I know what she is going through (participant 01).

5.2. THEME TWO: Experiences of early childbearing

Becoming pregnant and having a child is a major transformation experience and requires courage and support since it greatly impacts one's life, especially when one is still young. They are also in need of guidance from older people. The choices that young women make sometimes get influenced by the pressure they receive from men, constraining women's agency.

“Falling pregnant at a young age has many challenges and changes a person has to undergo to accommodate their pregnancies. One person can drop out of school due to the situation that they cannot cope with pregnancy and that when you are still teenage, you do not know anything about being a parent and what is expected of you since you are going to have a child” (Participant 03).

“Being a parent is a challenging experience, especially when you are still young and have no means to provide for your children. Most of the time, you are emotionally drained due to your stress over the new responsibility you have adopted. You tend to depend on the social support grant, and that you cannot secure a good-paying job because you never got a chance to finish your education. But it an amazing thing that could have ever happen to any human being, becoming a parent is a good thing” (participant 07).

5.2.1. Acceptance

“They encourage and allowed me to go back to school to finish my grade 11 so that I can proceed to matric; I guess they saw the potential in me of doing good in life. They provided money for me to attend Antenatal care up until I gave birth. They were there physically, emotionally, socially and financially to assist through everything” (Participant 03).

“Some of us do not have sufficient support system or even end up losing that little support you have from your family, resulting in being chased out of your home by your parents.”

“Unfortunately, I do not have parents, I lost them at a very young age, and I was left under the care of my older siblings, who could not handle to have such conversation with me”
(Participant 03).

5.2.2. Challenges associated with early childbearing

Many teenage girls do not plan to get pregnant, but many do. Teenage pregnancy carries extra health social problems to both the mother and the child. Often teenage mother does not get prenatal care soon enough which can lead to problems later. Risks for the baby include mortality. Teenage mothers face many challenges such as High school dropout, unprepared motherhood and inability to control their lives, and social stigmas from the community. Every individual has opinions regarding teenage pregnancy.

“According to culture, bearing a child at a young age is viewed as shameful and embarrassing for you and your family. Especially your mother is considered a failure in raising you, as you are considered a child with no morals. You no longer qualify for certain rituals (Umhlonyane) that are done when you are still a virgin as means of indicating your growth to womanhood” (Participant 0).

“Falling pregnant and then losing my child straight after birth affected me so badly because I did not know what to do at that moment, but I got through everything with the support of my family” (Participant 06).

No, I could not go back to school because I had no one to look after my children. All my needs required money, and the children were my burden, that why I had to let go of my dreams and look after my children” (Participant 0).

5.2.3. High School Dropout

Not having sufficient support from their families usually leads pregnant teenagers to drop out of school. Others result in committing illegal abortions, resulting in long-term psychological effects such as depression, post-traumatic stress disorder, guilt feelings, sleeping problems, and anxiety disorder. Teenage pregnancy is pregnancy in females under the age of 20 years; the research participants for this current study were young women between 18-24 years of age who were victims of teenage pregnancy.

“I could not focus in school and decided to drop out of school because everything that was happening around me was too much; I could not handle the pressure that was with the pregnancy” (Participant 07).

“In terms of school, I used to forget to do all the required work or homework; then I decided to drop out of school because of that. At home, they were angry against me for over a month, but they ended up accepting the situation” (Participant 02).

“I dropped out of school, had a second baby immediately after having my first child, and that I could not give birth in a normal way as other women; whenever I have to give birth, I had to go for cesarean section, and my health changed a lot” (Participant 07).

5.2.4. Opportunities

Various challenges associated with early childbearing make it hard for the teenage mother to master motherhood responsibilities. However, many opportunities are available to assist and improve their lives after giving birth to their children. For instance, the South African Educational Policy allows pregnant teenagers and teenage mothers to return to school to further their education. This shows that even if you unintentionally made a mistake by falling pregnant, you are given a second chance to redeem yourself and work towards a brighter future.

“My sister is the one who suggested that I should continue with school regardless of my situation and it because she saw the potential in me, of which I did not let them down. I obtained my matric certificate with flying colours and went to the university to further my education” (Participant 03).

“Re-joining the school was the best thing ever because I knew that to reach greater higher grades, books are the way to go and price to pay for my future.... Currently, I am doing my second year in Technology Field System Engineering Course” (Participant 04)

“Currently, I am a qualified and practicing teacher” (Participant 03).

5.3. THEME THREE: Effects of Early Childbearing

Early childbearing has rearing effects on each individual, and it is also experienced differently. The experiences of these young women differ from one another, and how their families also differ.

“For the time being, I performed badly academically that led to much stress, but I was able to regain my strength and encouraged to work hard to earn better grades through my friends and family. I started to isolate myself from other kids in school because I thought I

do not deserve to mingle with them, and I was a judge of my character by the kids and my teachers because they were not expecting me to fall pregnant, as I was one of the smartest pupils in my grade. However, it taught me how to be a responsible individual and take accountability for my actions” (Participant 03).

“There are a lot of things that can be associated with early sexual engagement among young people, given that we are now living in a modernized world with formally developed human rights. Young people tend to know their human rights very well, and no one can change them when they have put their minds to something they want to do. I can name few factors that I think they influence young people towards having sex. Firstly, doing things to please your friends, drinking alcohol and doing illegal drugs and lastly, lacking supervision from your parents” (Participant 03).

My educational progress was interrupted because I could not continue with school because of my health issues during my pregnancy. I had to stay home to look after myself” (Participant 03).

5.4. Summary

This chapter has presented data collected from young mothers, focusing on their experiences of early childbearing through in-depth semi-structured interviews. It is clear on the factors contributing to the increased number of young mothers. Interestingly, these young mother presents different experiences, yet; they do have common experiences, especially negative stigmas they faced from their community during their pregnancy. Young mothers expressed their reasons for early childbearing. They explained their experiences regarding the challenges they encountered in their social life, education, finance, and transitioning from childhood to parenthood. This chapter has attempted to show a deep understanding of the young mothers' lived experiences.

CHAPTER SIX

DISCUSSION AND CONCLUSION

6.1. Introduction

This chapter presents the discussion of the findings of the study and the conclusion reached. Teenage pregnancy and early childbearing have been a great focus globally and became social problems that needed to be addressed. The literature revealed that intervention methods to decrease the prevalent teenage pregnancies had been implemented worldwide. However, young people still find themselves with unplanned pregnancies. This research study aimed to explore the experiences of young mothers on their post-teenage pregnancy and making a relevant recommendation on how to prevent the high rise of unplanned pregnancy among young women of the Umbumbulu community. This study used qualitative research methods to collect data. In that, semi-structured in-depth interviews were conducted to fully describe the experiences of 12 young women on early childbearing. This chapter will also outline the findings resulting from the interviews conducted. It will present recommendations from the research study and the conclusion.

6.2. Discussion

The findings of this study suggest that there was little difference between the research participants' experiences on early childbearing. The research participants revealed that teenage pregnancy is quite something that has become common in their community and that has been socially accepted. Several South African research studies indicate that adolescents from underprivileged communities and often rural areas are at greater risk of adolescent pregnancy

(Carin, Lundren & Bergbom, 2011). Umbumbulu is one of the underprivileged communities if it is a rural area.

The experiences of these young women should be taken seriously as we try to address teenage pregnancy, given the negative consequences resulting from early childbearing. The onset of the adolescence stage occurs between the ages of 9-12 years of age, and it is associated with hormonal transformation, accompanied by reorientation of motivation, decision-making, and risk-taking behaviors (Pachuki et al., 2014), and they are said to be more responsive to peer interaction and social influence.

Parents' teachings and guidance are easily dismissed or disregarded since they have developed their sense of independence. Research participants highlighted that deviant behaviour is common among young people, which sometimes results in negative outcomes. Some touched on the partying lifestyle that has dominated young people's lives as they seek to maintain that status quo and reputation processes associated with their peer groups membership. Hence, these kinds of behaviour have negative consequences over their lives, given that other behaviors are addictive.

It was clear that it starts as minor behaviour, hoping they will stop doing it, but it exceeds addiction. They usually get involved in drugs due to the influence they get from friends. This indicates that, during this stage, young people tend to develop sophistication in their interpersonal relationships, which could create difficulties in relationships they have with other people. However, throughout the changes occurring in the adolescent stage, young people still need

guidance from older people in their social environment for them to be able to sustain healthy lifestyles.

According to Pachuki et al. (2014), social interaction behaviors occur alongside complex physiological transformation at the onset of adolescence. At this stage, everyone develops heightened sensitivity to social influences, interpreting threats, self-perception, and seeking inclusion in the peer group. It is evident that most of the information about early sexual debut comes from friends, and they usually encourage one another without thinking about the consequences of early sexual debut. One should not forget the age gap between young people and their parents. It creates barriers to discussing their sexuality and reproduction to acknowledge the prevailing social norms and values.

According to the research participants' views, the community is aware of the increasing teenage pregnancy of young women in their community. Still, nothing has been done to address such issues. Community members should take it upon themselves to address teenage pregnancy, not ignoring other deviant behaviour that could damage the lives of young people. Nowadays, human rights have been formally developed and addressed, but it does not state that they should forget old ways of teaching young people how to behave. There is an African saying that says, “it takes a village to raise a child,” meaning that community leaders and community members should work together in enhancing the social well-being of the young people and promote development.

This shows that some teenagers do not have plans to have sex but, their decision is influenced by alcohol. Pachuki et al. (2014) indicated that young women are victims of sexual abuse in other cases, making it difficult to negotiate condom use and get pressure from their partners and others, especially their social peer groups. Most of the research participants were

aware of the contraceptives methods available. Still, they cannot use them when necessary, resulting in them facing unintended pregnancy and other social issues associated with it. Steady alcohol and drugs abuse among young people may result from a lack of proper supervision and monitoring from their parents or caregivers.

Thereby, the research participants lacked adequate knowledge to guide them through the life processes and prevent steady dating, leading to unintended pregnancy and illegal activities. The absence of adequate supervision and monitoring of the children creates many problems for parents to track their children's development. According to Jewkes et al. (2009), social relationships and peer groups play a huge role during the teenage years. Hence, it is a period of exploration, especially their sexuality. Absent parents also come into play in the issue of increased teenage pregnancy (Jewkes et al., 2009). Teenage girls are more likely to get pregnant if they have limited or no guidance from their parents. Participants revealed that when they came to age, nothing was said to them except the minor things. Whereas women consider relationships very important in their lives as they assess their femininity and power.

Despite gender inequalities and dynamics within relationships, boys and girls are generally active and willing to participate in their sexual relationships. Teenagers who are uneducated about sex are more likely to have an unintended pregnancy. Based on the research interviews, culture and religion are vital in inhibiting fruitful communication between parents and children about their sexuality and reproductive life. Cultural practices prevent teenage pregnancy, such as virginity testing (ukuhlolwa kwezintombi) and other religious forms that do not promote premarital sex.

For instance, there are traditional festivals such as reed dance. Once a year, young women from different communities gather together in traditional attire and present before the Zulu King Zwelithini (Jewkes et al., 2009). They also referred to the Shembe Nazareth religious group and promoting virginity testing to abstain from early sexual engagement. However, it discriminates against those who find themselves young mothers, which lowers the young mother's self-esteem and promotes self-hate. When you have a child, you are automatically separated from your peers; since you are a mother, you no longer fit in with your peers and should know your position within the worship space, of which you are supposed to sit with older women.

Above that, life challenges usually affect how individual views and understand life. According to Jewkes et al. (2009), the experience of rape contributes to young women's lack of ability to exercise their power. Hence, abuse conveys messages about gender power dynamics in relationships. They usually look for coping mechanisms in the wrong places rather than help and resources to address these issues. Moreover, some may lack knowledge of service users to assist them in dealing with the consequence of such abuse. As stated above, research participants mentioned that they normally engage in sexual intercourse for different reasons. Hence, Socioeconomic backgrounds come into play.

Participants touched on being in a relationship with older male partners to gain money, not knowing the aftermath of their behavior. Others were impregnated by a local taxi driver, which is one of the indicators of the age gap between a teenager with someone who is working. Intergenerational relationships are widespread nowadays, and they are usually heightened by norms that extended from provisional gifts by male partners to open economic transactions in exchange for sex (Jewkes et al., 2009). Other young people agree to intergenerational relationships given their poor socio-economic background. Their sole aim is to provide for their own families;

however, being in these relationships does have its challenges and effects. According to Jewkes et al. (2009), gender power inequalities may limit women's ability to negotiate the timing of sex regarding their bodies. Conception resulting from rape may be related to practices that show gender hierarchy of masculinity (Jewkes et al., 2009). Therefore, having multiple sexual partners, abuse of alcohol and drugs, and lastly, payment for sex may result from being the victim of sexual abuse.

Based on the African perspective, when a young woman has come to age/ reached the adolescent stage. During her first menstrual cycle, the young woman must receive guidance from older women on how to carry themselves as young women, prevent early sexual debut, and behave in front of men. Due to diverted societal beliefs, values, and norms, such discussions are no longer occurring; young people usually learn more about social media and their peers. Several participants indicated that they did not know contraceptive methods they should have used to prevent themselves from getting pregnant at that time. Yet, some of them still do not use any contraceptive method to prevent falling pregnant again. The ignorance of using contraceptive methods after giving birth to their first children contributed to the repetition of pregnancy by these young women.

The participants were aware of the importance of using contraceptive methods, especially condoms, during sexual intercourse since it can protect them from sexually transmitted infections and diseases. However, they receive a lot of pressure from their male counterparts not to use condoms. However, failure to negotiate condom use, they also wanted to prove their loyalty to their partners. Having one partner does not protect oneself from contracting sexually transmitted infections and diseases from their partners whenever they engage in unprotected sexual intercourse. Hence, it does not determine whether the other partner only has one partner, and they might have multiple partners that one does not know of. Therefore, condom usage should be encouraged and provide adequate information about contraceptive methods available.

This highlights the subordinate position of women and explains why and how they carry the bulk of blame in cases of teenage pregnancy (Jewkes et al., 2009). social reactions to teenage pregnancy show diversity; changes occur at different points during and after birth depending on the pregnancy's circumstances and the social environment the teenager lives in. According to Jewkes et al. (2009), traditional African ideals are that pregnancy should be confined in marriage, but social norms have changed, and teenage pregnancy has been accepted. Teenage pregnancy has become common across all communities and accommodated to enhance health social well-being for both the child and teenage mothers.

The research study conducted by Jewkes et al. (2009) focused on empowering teenagers to prevent teenage pregnancy: a lesson from South Africa. Revealed:

“Some South African teenagers reported that their mother and grandparents are pleased when they get pregnant and even encourage it as babies are highly regarded in families. However, family responses vary across families, and most teenagers fear the reaction of their families to their first pregnancy. Some are even punished for it and experience stigma in the community “(Jewkes et al., 2009).

Families react differently towards teenage pregnancy. Other family finds it easy to accept the situation and look for a solution towards the matter at hand. They allow the teenage mother to focus on other things to improve their lives and further their education. Only a few participants confirmed that they do receive support from the father of their children; it could be emotional, physical, and financial support where needed. However, those who do not receive any support from the father of their children become the financial burden of their families. Participants revealed other aspects that formulate their different experiences as reactions from families and communities

vary. Early childbearing comes with many responsibilities, and each teenager must take accountability for their actions. The experience of becoming a parent at a very young age comes with many severe challenges, affecting the social life of these teenagers and their education.

Based on the above revelations made by the research participants, they had failed to juggle pregnancy and early childbearing with their school. Not all of them had the choices to choose, but some were forced by the situation and life challenges to drop out of school. Dropping out of school adds to the challenges associated with teenage pregnancy since they cannot obtain proper paying jobs without maturing. Therefore, this further adds to the cycle of poverty. Some of the research participants were able to return to school to further their education. This was all possible through the positive support they received from their families. Some of them have obtained degree qualifications, and others are working toward completing their education. However, one should not forget that not all the research participants who returned to school had different family backgrounds.

As much as childbearing is a challenging experience for most teenage mothers, in other cases, becoming a parent can enhance positive change in the individual and enable them to grow up from the situation they are in. Family support plays an important role in helping the young mother deal with the difficult time and helps them with their upbringing by providing parental guidance to the teenage mother. By doing so, they also enhance the healthy development of the child.

Umbumbulu is a traditional community and the most dominant culture and religious form to regulate social interaction. Teenage pregnancy is considered an embarrassment to the family name, where others ended up being disowned by their families until necessary damages (Inhlawulo) have been paid by the child's father as means of showing respect and recognizing that

you have done something wrong. Unforeseen life events create challenges for young people especially, growing up without parents, which contributes towards having no guidance. Hence people lack humanity nowadays. Other participants were required to drop out of school because they had no one to look after their children when they went to school.

As stated above, tradition and culture play a vital role in displaying guidelines of human conduct in the social interaction among people within the Umbumbulu area, as most of the learning takes place in their social environment. As much as teenage pregnancy has become something common and accepted, the teenage mother still faces massive discriminating stigmas from the community. Their characters as humans are being judged against their situation, which can greatly destroy an individual psychotically and emotionally as they are still confused.

6.3. Self-esteem and internalized oppression.

Self-esteem and internalized oppression are concerned about how one's internalized oppression tends to hurt one's self-esteem. Mullaly (2010) defines internalized oppression as "self-hate," it is when a member of an oppressed group believes and acts out the stereotypes created about their group to be true (Baron, Branscombe & Byrne, 2006). According to Mullaly (2010), "oppression is associated with social conditions of discrimination, powerlessness, subordination, exclusion, exploitation, and scapegoating low social status and blocked opportunities are bound to have an impact on the psyche of a dominated person. Teenage mothers face a lot of stress since they were taking upon a role of being a parent they were not prepared for, accompanied by a lot of responsibilities, while facing various social challenges as they must accommodate their pregnancy.

Internalized oppression or controls are the keys to the maintenance of oppression (Mullaly, 2010). The nature of oppression infiltrates all aspects of life. Individuals feel that they cannot make

a change and they are powerless. Self-esteem refers to one's overall attitude about the self (Baron, Branscombe & Byrne, 2006). People have various ways to respond to unfortunate life events. According to Pachuki et al. (2014), self-esteem is considered an important indicator of personal resilience, defined as adaptability in the face of adversity, risk exposure, or disadvantage. Therefore, Teenage pregnancy imposes great difficulties upon the lives of young women. Participants raised how falling pregnant at a very young age impacted their lives. Young mothers with high Self-Esteem are less vulnerable when experiencing the same life events than those with a lot of self-esteem.

6.3. Recommendation

Future research is needed to find ways to fully address the experiences of both young fathers and mothers and their challenges. There is also a need for research studies that will inform ideas on decreasing early childbearing in the Umbumbulu area provided the research participants' experiences. Research participants pointed out different suggestions to be taken into consideration to address teenage pregnancy and how to prevent it, given the adverse outcomes associated with early childbearing. One of the participants recommended that local municipalities should consider opening a Community Based Centre that aims to empower young people and promote healthy well-being in the community, where classes will be held, talks about sex and reproduction of young women and the precautions implemented to assist young girls in preventing teenage pregnancy. Doing so would help decrease unwanted teenage pregnancies, decrease the cycle of poverty promoted by increasing teenage pregnancy, and promote the significance of education among people. Parenting skills programs should also be facilitated to improve communication between children and their parents or caregivers. Adequate information and social services accessibility

should be accurately provided to young people, especially the accessibility of available contraception methods.

6.4.Conclusion

In conclusion, this report has provided the historical background and context of the research study along with the problem statement addressed by the study's findings. Relevant literature was reviewed, and the study undertook the qualitative research paradigm, where data was collected through semi-structured questions to explore and understand the experiences of young mothers on early childbearing. The data collected were thematically analysed, and the findings of the study were presented and discussed. The discussion of the findings was integrated with relevant literature and the theoretical framework underpinning this study.

The study's findings reveal that in most cases, girls face the consequences of having children than their male counterparts, and the child becomes the financial burden of their families. However, in South Africa, efforts have been made to empower women. The increase in teenage pregnancy also has implications for the social work profession, as children become solely dependent on the state child support grant. Another thing, it increases the number of cases of children that must be put into the foster care system, as they will be identified as children in need of care and protection according to the Children's Act no. 35 of 2005. Sometimes restless behaviour and irresponsibility lead to the repetition of pregnancy, so stipulated precautions should also include young men as they are sexually active, encouraging them to do better. Therefore, it is important and possible to empower young women to prevent pregnancy before marriage.

6.5.The anticipated value of the study

The research study aimed to discover and thoroughly understand the challenges faced by these young mothers. Above that is to contribute towards improving the quality of life of the poor, the vulnerable group of people within Umbumbulu and South African society at large, through an integrated and caring system and knowledge. To provide holistic social service delivery to the people, to help people depend on social security and learn to stand on their own two feet and do things for themselves. Enhance the quality of life and social well-being of teenage mothers while promoting healthy upbringing and development of the child.

7. Reference list

Babbie E. & Mouton J. (2001). *Research Design & Problem Formulation*. The Practice of Social Research. Cape Town: Oxford University Press South Africa.

Babbie, E., Mouton, 1. (2002). *the practice of social research*. South African Editions, Cape Town: Oxford.

Babbie, E., & Mouton, J. (2005). Qualitative studies. *The practice of social research*, 269-311.

Bandura, A. (1961). Bobo doll experiment.

Bandura, A. (1978). Social learning theory of aggression. *Journal of communication*, 28(3), 12-29.

Bandura, A., & Walters, R. H. (1977). *Social learning theory* (Vol. 1). Englewood Cliffs, NJ: Prentice hall.

Banyard, P. & Grayson, A. (2000). Revised and expanded. *Introducing Psychological Research*, 2.

Baron, R. A. (2006). *South African supplement to social psychology*. Pearson South Africa.

Barriball, K. L., & While, A. (1994). Collecting data using a semi-structured interview: a discussion paper. *Journal of Advanced Nursing-Institutional Subscription*, 19(2), 328-335.

Brink, H. (2006). *Fundamentals of Research Methodology for Health Care Professionals*. Cape Town: Juta.

Beck, G. A. (2016). Surviving involuntary unemployment together: The role of resilience-promoting communication in familial and committed relationships. *Journal of Family Communication, 16*(4), 369-385.

Berger, P. L., & Luckmann, T. (1991). *The social construction of reality: A treatise in the sociology of knowledge* (No. 10). Penguin Uk.

Bhana, D., Morrell, R., Shefer, T., & Ngabaza, S. (2010). South African teachers' responses to teenage pregnancy and teenage mothers in schools. *Culture, health & sexuality, 12*(8), 871-883.

Bhandari, S. D., & Joshi, S. (2016). Perception and perceived experiences about prevention and consequences of teenage pregnancy and childbirth among teenage mothers: a qualitative study. *Journal of Advanced Academic Research, 3*(1), 164-172.

Burns, N., & Susan, K. Grove. (2001). *The Practice of Nursing Research: Conduct, Critique, and Utilization*.

Burns, N., & Grove, S. (2003). Understanding nursing research (ed.). *St Louis: Wb Saunders Company*.

Burns, N. & Grove, S. K. (2005). *The Practice of Nursing Research: Conduct, Critique, and Utilization*. Philadelphia: Saunders.

Cantet, N. (2019). The Effect of Teenage Pregnancy on Schooling and Labour Force Participation: Evidence from Urban South Africa.

Cohen, W. J. (1975). Lifelong learning-A definition and a challenge. *Educational Leadership, 33*(83), 83-84.

Cook, S. M., & Cameron, S. T. (2017). Social issues of teenage pregnancy. *Obstetrics, Gynaecology & Reproductive Medicine*, 27(11), 327-332.

Creswell J.W. (1998). Qualitative inquiry and research design: Choosing among five traditions.

Cunningham, P. W., & Boulton, B. E. (1996). Black teenage pregnancy in South Africa: some considerations. *Adolescence*, 31(123), 691-701.

Doyle, A. M., Mavedzenge, S. N., Plummer, M. L., & Ross, D. A. (2012). The sexual behaviour of adolescents in sub-Saharan Africa: patterns and trends from national surveys. *Tropical Medicine & International Health*, 17(7), 796-807.

De Vos, A. S., Delport, C. S. L., Fouché, C. B., & Strydom, H. (2011). *Research at grassroots: A primer for the social science and human professions*. Van Schaik Publishers.

Dykas, M. J., & Cassidy, J. (2011). Attachment and the processing of social information across the life span: Theory and evidence. *Psychological Bulletin*, 137(1), 19.s

Fearon, E., Wiggins, R. D., Pettifor, A. E., & Hargreaves, J. R. (2015). Is the sexual behaviour of young people in sub-Saharan Africa influenced by their peers? A systematic review. *Social Science & Medicine*, 146, 62-74.

Hannaway, D., Steyn, M. and Hartell, C. (2014). *The influence of ecosystemic factors on black student teachers' perceptions and experience of early childhood education*. South African Journal of Higher Education, 28(2), pp.386-410.

Hines, D. A., & Douglas, E. M. (2009). Women's use of intimate partner violence against men: Prevalence, implications, and consequences. *Journal of aggression, maltreatment & trauma*, 18(6), 572-586.

Hogben, M., & Byrne, D. (1998). Using social learning theory to explain individual differences in human sexuality. *Journal of Sex Research*, 35(1), 58-71.

Holloway, I., & Wheeler, S. (2002). *Qualitative research in nursing*. Wiley-Blackwell.

James, S., Van Rooyen, D., & Juanita Strümpher, D. (2012). Experiences of teenage pregnancy among Xhosa families. *Midwifery*, 28(2), 190-197.

Jarvis, C. (2012). Fiction, empathy, and lifelong learning. *International Journal of Lifelong Education*, 31(6), 743-758.

Johnson, E.S., 2008. Ecological systems and complexity theory: Toward an alternative model of accountability in education. *Complicity: An International Journal of Complexity and Education*, 5(1).

Jewkes, R., Morrell, R., & Christofides, N. (2009). Empowering teenagers to prevent pregnancy: lessons from South Africa. *Culture, health & sexuality*, 11(7), 675-688.

Jewkes, R., Vundule, C., Maforah, F., & Jordaan, E. (2001). Relationship dynamics and teenage pregnancy in South Africa. *Social science & medicine*, 52(5), 733-744.

Kim, B. (2001). Social constructivism. *Emerging perspectives on learning, teaching, and technology*, 1(1), 16.

Lesch, E., & Kruger, L. M. (2005). Mothers, daughters, and sexual agency in one low-income South African community. *Social Science & Medicine*, 61(5), 1072-1082.

Lincoln, Y.S. and Guba, E.G. (1985). *Naturalistic inquiry* (Vol. 75). Sage.

Lobiondo-Wood, G & Haber, J. (2002) *Nursing Research: Methods, Critical Appraisal, and Utilization*. 5th Edition. St Louis: Mosby.

Kanku, T., & Mash, R. (2010). Attitudes, perceptions, and understanding amongst teenagers regarding teenage pregnancy, sexuality, and contraception in Taung. *South African Family Practice*, 52(6), 563-572.

MacEntee, K. (2016). *Girls, Condoms, Tradition, and Abstinence: Making Sense of HIV Prevention Discourses in Rural South Africa*. In Mitchell C. & Rentschler C. (Eds.), *Girlhood and the Politics of Place* (pp. 315-332). NEW YORK; OXFORD: Berghahn Books. Retrieved from <http://www.jstor.org/stable/j.ctt14jxn16.23>

Macleod, C. (1999). The 'causes' of teenage pregnancy: Review of South African research—Part 2. *South African Journal of Psychology*, 29(1), 8-16.

Madlala, S. T., Sibiya, M. N., & Ngxongo, T. S. P. (2018). Perceptions of young men at the Free State School of Nursing with regards to teenage pregnancy. *African Journal of Primary Health Care & Family Medicine*, 10(1).

Makiwane, M. (2010). The child support grant and teenage childbearing in South Africa. *Development Southern Africa*, 27(2), 193-204.

Mathews, B & Ross L. (2012). *Research Methods*. Pearson Education. The University of Leeds.

Mkhwanazi, N. (2009). Teenage pregnancy and HIV in South Africa. *Body politics and women citizens: African experiences*, 83-92.

Mkhwanazi, N. (2010). Understanding teenage pregnancy in a post-apartheid South African township. *Culture, health & sexuality*, 12(4), 347-358.

Mkhwanazi, N. (2014). “An African way of doing things”: reproducing gender and generation. *Anthropology Southern Africa*, 37(1-2), 107-118.

Mojapelo-Batka, E. M., & Schoeman, J. B. (2003). Voluntary termination of pregnancy: Moral concerns and emotional experiences among black South African adolescents. *South African Journal of Psychology*, 33(3), 144-153.

Morris, J. L., & Rushwan, H. (2015). Adolescent sexual and reproductive health: The global challenges. *International Journal of Gynecology & Obstetrics*, 131, S40-S42.

Mphatswe, W., Maise, H., & Sebitloane, M. (2016). Prevalence of repeat pregnancies and associated factors among teenagers in KwaZulu-Natal, South Africa. *International Journal of Gynecology & Obstetrics*, 133(2), 152-155.

Mushwana, L., Monareng, L., Richter, S., & Muller, H. (2015). Factors influencing the adolescent pregnancy rate in the Greater Giyani Municipality, Limpopo Province–South Africa. *International Journal of Africa Nursing Sciences*, 2, 10-18.

Nabavi, R. T. Bandura’s Social Learning & Cognitive Learning Theory.

Neuman, L.W. (2011). *Social research methods: Qualitative and quantitative approaches*. 7th Ed. USA, Person International.

Neuman, W. L. (2014). *Social Research Methods: Qualitative and Quantitative Approaches: Pearson New International Edition*. Pearson Education Limited.

Nussbaum, B. (2003). African culture and Ubuntu. *Perspectives*, 17(1), 1-12.

Osaikhuwuomwan, J. A., & Osemwenkha, A. P. (2013). Adolescents' perspective regarding adolescent pregnancy, sexuality, and contraception. *Asian pacific journal of reproduction*, 2(1), 58-62.

Powell, R. A., & Single, H. M. (1996). Focus groups. *International journal for quality in health care*, 8(5), 499-504.

Reed, M., Evely, A. C., Cundill, G., Fazey, I. R. A., Glass, J., Laing, A., & Stringer, L. (2010). What is social learning? *Ecology and society*.

Rosenstock, I. M., Strecher, V. J., & Becker, M. H. (1988). Social learning theory and the health belief model. *Health education quarterly*, 15(2), 175-183.

Runhare, T., Mudau, T. J., & Mutshaeni, H. N. (2016). South African teachers' perceptions on the integration of sex education into the school curriculum. *Gender and Behaviour*, 14(3), 7638-7656.

Sathiparsad, R. (2010). Young rural males in South Africa speak on teenage pregnancy: "It's her problem." *Journal of Psychology in Africa*, 20(4), 537-546.

Sedgh, G., & Hussain, R. (2014). Reasons for contraceptive nonuse among women having an unmet need for contraception in developing countries. *Studies in family planning*, 45(2), 151-169.

Shishane, K. (2016). *Predictors of condom use behaviour and intentions of African migrant youth in South Africa* (Doctoral dissertation, University of Cape Town).

Smith, C. H., & Bless, C. (1995). Fundamentals of social research methods. *An African*.

Streubert, H.J. Carpenter, D.R. (1999). *Qualitative Research in Nursing: Advancing The Humanistic Imperative* (2nd Ed) Philadelphia: Lippincott.

South Africa. (1994). *Constitution of the Republic of South Africa, 1993* (Vol. 343, No. 15466). Creda Press for the Government Printer, Pretoria.

Terre Blanche, M., Durkheim, K. & Painter, D. (eds.) (2006) *Research in Practice. Applied Methods for the Social Sciences, 2nd Edition*. Cape Town: University of Cape Town Press.

Terre Blanche, M. & Durrheim, K. (2006). *Histories of the Present: Social Science Research in Context*. Research in Practice: Applied Methods for the Social Sciences. Cape Town: UCT Press, Pp.1-17.

Tontodonato, P., & Crew, B. K. (1992). Dating violence, social learning theory, and gender: A multivariate analysis. *Violence and Victims*, 7(1), 3-14.

Van Rensburg, T. (2013). *Research in Social Sciences*. Only study guide for RSC2601. The University of South Africa. Pretoria.

Wenger, E. (2010). *Communities of practice and social learning systems: the career of a concept*. In Social learning systems and communities of practice (pp. 179-198). Springer, London.

World Health Organization. (2012). WHO, UNODC, UNAIDS technical guide for countries to set targets for universal access to HIV prevention, treatment, and care for injecting drug users—2012 revision.

Zabin, L. S., & Kiragu, K. (1998). The health consequences of adolescent sexual and fertility behavior in sub-Saharan Africa. *Studies in family planning*, 210-232.

8. APPENDIX A (Information Sheet and Consent Form)

Social Sciences, College of Humanities

University of KwaZulu-Nata

Howard College

Information Sheet and Consent to Participate in Research

Date:

Greetings

My name is **Nosipho Chonco**; I am a Social Work Masters Candidate at the University of KwaZulu-Natal, Howard College, student number (214557543). I am currently conducting a research study on Sexual reproductive health issues: Exploring young women's perceptions on their Post-Teenage Pregnancy experiences in Umbumbulu Area, KwaZulu-Natal.

You are being invited to consider participating in this study. The main purpose of this study is to explore and better understand the perception of young people on their post-teenage pregnancy experiences about Sexual and reproductive health issues faced by young women in the Umbumbulu area. The study is expected to have approximately 12-15 participants. Data will be

collected in Semi-Structured interviews, where questions will be asked that are relevant to the study, and an audiotape will be used to record interview sessions. If you choose to enroll and remain in the study, the duration for each session is expected to be an hour or less. The study will provide no direct benefits to participants.

In the event of any problems or concerns, you may contact the researcher at 073 825 0146 or Research Supervisor Miss B. Zengele at 031 260 2141 Or the UKZN Humanities & Social Sciences Research Ethics Committee; contact details are as follows:

HUMANITIES & SOCIAL SCIENCES RESEARCH ETHICS ADMINISTRATION

Research Office, Westville Campus

Govan Mbeki Building

Private	Bag	X	54001
Durban			
4000			

KwaZulu-Natal, SOUTH AFRICA

Tel: 27 31 2604557- Fax: 27 31 2604609

Email: HSSREC@ukzn.ac.za

Please know that your participation in this research study is voluntary and that you may withdraw participation at any point. The interview will be kept strictly confidential and will be available only to members of the research team. Findings from the interview's discussion will be made part of the final research report.

CONSENT

I Have been informed about the study entitled Sexual reproductive health issues: Exploring young women's perceptions on their Post-Teenage Pregnancy experiences in Umbumbulu Area, KwaZulu-Natal, by Nosipho Chonco.

I understand the purpose and procedures of the study).

I have been allowed to answer questions about the study and have had answers to my satisfaction.

I declare that my participation in this study is entirely voluntary and that I may withdraw at any time without affecting any of the benefits that I usually am entitled to.

I have been informed about any available compensation or medical treatment if an injury occurs to me due to study-related procedures.

If I have any further questions/concerns or queries related to the study, I understand that I may contact the researcher at 073 825 0146 or Research Supervisor Miss B. Zengele at 031 260 2141.

If I have any questions or concerns about my rights as a study participant, or if I am concerned about an aspect of the study or the researchers, then I may contact:

HUMANITIES & SOCIAL SCIENCES RESEARCH ETHICS ADMINISTRATION

Research Office, Westville Campus

Govan Mbeki Building

Private Bag X 54001

Durban

4000

KwaZulu-Natal, SOUTH AFRICA

Tel: 27 31 2604557 - Fax: 27 31 2604609

Email: HSSREC@ukzn.ac.za

I at this moment provide consent to:

	Willing	Not willing
Audio equipment		
Photographic equipment		

Signature of Participant

Date

Signature of Witness

Date

8. APPENDIX B: Interview Schedule guide

1. To explore the scope and nature of young women's understanding of teenage pregnancy

- A. Are you a permanent resident of the Umbumbulu area?
- B. What kind of common behaviour patterns have you observed among young people?
- C. How do you view sexual behaviour among young people?
- D. What do you think are the factors influencing early sexual engagement among young people?
- E. How do you perceive teenage pregnancy among young women?

2. To explore and better understand contributing factors to the increase of teenage pregnancy

- A. What do you think could be the contributing factors to the increased teenage pregnancy among young women?
- B. What is your attitude towards condoms?
- C. Do you trust that condoms will reduce the risk of you getting pregnant again?
- D. Do you think that condoms can reduce the risk of getting HIV?

- E. Are you confident in your ability to use condoms all the time you engage in sexual intercourse?
- F. Do your friends encourage you to use a condom during sex?
- G. Do your parents talk to you about sex?
- H. Are there any programs implemented in your area to address such issues?

3. To discover and understand the social context of Sexual and reproductive health issues

- A. How does the community respond to this issue?
- B. Does your religion condone sex before marriage?
- C. How does your culture view childbearing before marriage?
- D. How does the community view childbearing before marriage?
- E. What are the social stigmas associated with teenage pregnancy?

4. To determine the impact of teenage pregnancy on young women.

- A. What was your reaction when you first found out that you are pregnant?
- B. What were the effects of teenage pregnancy?
- C. Did you get any support from your family throughout your pregnancy?
- D. Did you get any support from your family after giving birth?

- E. What are your experiences of being a parent?
- F. Does the father of the child support you and the child?
- G. Are you financially stable to provide for the basic needs of the child?
- H. Were you able to go back to your dreams after giving birth?
- I. Career-wise, what are you doing at the moment?

5. To make relevant recommendations

- A. What do you think should be done to address this problem?

SOBONAKHONA TRADITIONAL COUNCIL

INKOSI KS MAKHANYA

P.O BOX 148

Imibuzo KG MAKHANYA

UMBumbulu

TEL / FAX : 031 915 0015

4105

CELL : 072 433 5814

08-04-2019

TO WHOM IT MY CONCERN

A PLEA FOR A RESEARCH IN THE AREA OF UMBUMBULU

I wish to ask your permission to conduct a research in your area, focusing on

- Health on gender issues and hereditary birth
- Focus on young girls and their way on living within Umbumbulu and more issues.

All these research has been made possible by the University of Kwazulu natal under the protocol: H55/1583/018M.

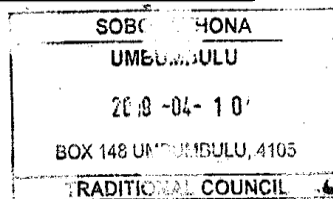
All the research will be done by NOSIPHO CHONCO from (HOWARD COLLEGE).

I WISH THAT WE ARE ALL GOING TO PARTICIPATE AND MAKE THIS POSSIBLE

Thank you

Yours Faithfully

INKOSI K.S. MAKHANYA



26 July 2019

Ms Nosipho Chonco 214557543
School of Applied Human Sciences
Howard College Campus

Dear Ms Chonco

Protocol reference number: HSS/1583/018M

Project title: Sexual reproductive health issues: Exploring the perceptions of young women on their Post-Teenage Pregnancy experiences in Umbumbulu Area, KwaZulu-Natal.

Approval Notification - Full Committee Reviewed Application

With regards to your response received on 12 May 2019 to our letter of 28 September 2018, 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 1 year 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 .

Yours faithfully



Dr Rosemary Sibanda (Chair)

/ms

cc Supervisor: Ms P Bongzi Zengele
cc Academic Leader Research : Professor Ruth Teer-Tomaselli
cc School Administrator: Ms Ayanda Ntuli

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