

**An ethnographic study of teenage pregnancy:  
femininities and motherhood among pregnant  
teenagers and teenage mothers at school in Inanda.**

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**Submitted in the fulfilment of the degree of Doctor of Philosophy  
in the Faculty of Education, University of KwaZulu-Natal,  
Durban.**

**September 2012**

**‘As the candidate’s supervisor, I approve the submission of this thesis.’**

**Signed** .....

**Name** .....

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## **DEDICATION**

**I dedicate this thesis:**

- 1. To my daughter, Thabisa. Thank you, *Nana* for your love, support and understanding that I had to spend much of my time working on this thesis. You did not complain even when I could not spend time with you during holidays.**
- 2. To my Lord, my Saviour for giving me strength to move forward even though sometimes I had felt like giving up.**

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# Abstract

This study has focused on pregnancy and parenting of 10 African young women between the ages of 16 and 19, from one of Inanda schools. Drawing from ethnography, the study explores these young women's choices of boyfriends, the circumstances that led to their pregnancy, the socio-cultural influence during pregnancy and at childbirth, kind of support they receive at home, school and boyfriends and experiences of pregnancy and motherhood. An examination of how they balance their varied roles as mothers and learners as well as the effects of pregnancy and parenting to their schooling.

Although the South African Schools Act (Department of Education 1996) regulates the support of pregnant teenagers and teenage mothers in schools, the data reveal that pregnant teenagers and teenage mothers still experience challenges in schools. These challenges range from being stigmatised, discriminated and humiliated by teachers and peers, lack of support from teachers, decline in academic performance as well as the inability to participate in school's extra-mural activities. However the study reveals that there is some degree of institutional support which accounted for the teenage mothers' overall performance and achievement; there are some teachers and learners who provide some kind of support to the pregnant teenagers and teenage mothers. The thesis further argues that motherhood is very demanding, challenging and very disruptive of the young mothers' schoolwork; but the young mothers indicate self-determination and resilience to find ways of successfully juggling motherhood and schooling. On the other hand, the young fathers understand their social role as that of being a provider for the child and the care giving is only for womenfolk. Some of the young men acknowledged the importance of the young mothers' completing their schooling and realized that they needed support other than financial provision. The young men, however, do not provide the childcare themselves; they shift the caring responsibility to their own mothers. The focus on the pregnant and teenage mothers draws attention to possible ways of providing more support in order they fare better in their education for better chances of employment and gender equity.

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## **ABBREVIATIONS AND ACRONYMS**

<b>AIDS</b>	<b>Acquired Immune Deficiency Syndrome</b>
<b>CEPD</b>	<b>Centre for Education Policy Development</b>
<b>CINDI</b>	<b>The Children in Distress Network</b>
<b>CSG</b>	<b>Child Support Grant</b>
<b>DoE</b>	<b>Department of Education</b>
<b>DOH</b>	<b>Department of Health</b>
<b>GBV</b>	<b>Gender based violence</b>
<b>HIV</b>	<b>Human Immunodeficiency Virus</b>
<b>HSRC</b>	<b>Human Science Research Council</b>
<b>RAPCAN</b>	<b>Resources Aimed at the Prevention of Child Abuse and Neglect</b>
<b>SASA</b>	<b>South African Schools Act</b>
<b>TOP</b>	<b>Termination of Pregnancy</b>



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# **Chapter One: Introduction**

## **1.1 Introduction to the study**

On 12 May 2011 in the High Court in Bloemfontein, South Africa (SA), a judgment was passed in favour of two schools in the Free State Province - Harmony and Welkom High - whose policy restricted access to young mothers wishing to re-enter school after pregnancy (Case No. 5714/2010, Free State High Court). According to the Department of Education (DoE) and the South African Human Rights Commission, this was in direct contravention of the South African Schools Act of 1996 (SASA). The SASA provides a legal imperative that ensures that pregnant teenagers remain in school and are permitted to re-enter after giving birth. Restricting access to pregnant learners and young mothers means that they are unfairly discriminated against and leads to gender inequality. Harmony and Welkom High Schools sought declaratory orders concerning pregnant learners. They argued that the DoE did not have the authority to instruct or compel a school principal to act in a manner that was against the policy of the school governing body (SGB).

One of the learners was Ncedisa Michelle Dlutu, born on 14 November 1994 and a learner at Welkom High School. She fell pregnant in January 2010 and was completing Grade 9 at the time. On 16 September 2010 she was instructed by the principal to stay away from school and to remain at home until the end of the first term in 2011. Therefore she was denied the opportunity to learn for two consecutive school terms. The other learner was Katleho Mokoena, who was born on 21 January 1993 and had attended Harmony High School since 2007. She became pregnant around October 2009 while completing Grade 10. She continued attending school and wrote her Grade 10 final examinations, which she passed. At the beginning of 2010 Katleho resumed her schooling to do Grade 11, and attended school for both the first and second terms. She then gave birth on 12 July 2010, during the winter holidays. She went back to school at the beginning of the third term and attended for the whole term and most of the fourth term. On 16 October Katleho was barred from attending school and told to come back at the beginning of the following year (January 2011). The reason given for her being prevented from schooling was her pregnancy. She was not only

restricted from attending lessons, she was also barred from writing the final examinations. This meant that she was going to have to repeat Grade 11.

Parents of both learners reported the matter to the DoE, who intervened on 20 October 2010. The DoE directed the school principals of Harmony and Welkom High to withdraw their decisions and to allow Katleho and Ncedisa back to their respective schools. As a result, Katleho went back to school, sat for her Grade 11 final examinations, and passed Grade 11 to proceed to Grade 12. Ncedisa gave birth on 27 October 2010 and on 1 November went back to school, wrote examinations and passed Grade 9.

The decision of the two schools to act in this way was based on the Learner Pregnancy Policy which was guided by the *Measurement for the Prevention and Management of Learner Pregnancy* (DoE, 2007) and adopted by the schools' SGBs. In 2007, the Department of Education (under Naledi Pandor the then Minister of Education) introduced guidelines for the prevention and management of learner pregnancy motivated by a concern for teenage pregnancy in schools, (DoE, 2007). The guidelines acknowledge the responsibility and influence of the partnership between education system and the community to prevent and manage teenage pregnancy. It emphasises a prevention focus to reduce pregnancy, HIV and other sexually transmitted infections (DoE, 2007:3). The formulation of these guidelines was an attempt to balance the right of pregnant teenagers to education and equality against the rights of the newborn child to care and support. Key in these guidelines is the suggestion that pregnant learners exit the schooling system for a period of up to two years in the interest of pre- and postnatal care as well as parenting responsibilities. Section 22 of the guidelines states that:

Learners must be sensitised to the fact that there are no medical staff to handle the delivery of babies at school and the potential health risks and trauma to the mother, if the new-born child is delivered at school. The learner may therefore request, or be required to take a leave of absence from school, including sufficient time to address both pre- and post-natal health concerns, as well as the initial caring for the child. No pre-determined period is specified for this purpose, since it will depend entirely on the

circumstances of each case. However, it is the view of the Department of Education that learners as parents should exercise full responsibility for parenting, and that a period of absence of up to two years may be necessary for this purpose. No learner should be re-admitted in the same year that they left school due to pregnancy.

Using these controversial DoE guidelines on learner pregnancy of 2007, the schools argued that no learner should be readmitted to school in the same year that they had left due to pregnancy. In view of these guidelines and anomalies in the interpretation of them, it was ordered that within 24 months the national DoE should produce nationwide regulations on Learner Pregnancy Policy in keeping with the spirit of gender equality and empowerment of women, as specified in the SASA and the Bill of Rights.

Katleho and Ncedisa at Harmony and Welkom High are behind the order to produce new guidelines about teenage pregnancy in SA. In this case the court handed down a decision against the DoE for failing to provide proper guidelines for management and support of pregnancy in schools. The 12 May 2011 case represents a watershed jurisprudential moment in understanding teenage pregnancy and parenting in South African schools. In fact, this case ruled that the DoE had to regulate the Learner Pregnancy Policy within 24 months as from the case date.

In SA teenage sexuality has been broadly explored within the reproductive health domain, particularly teenage pregnancy as is one of the major concerns is that it disrupts schooling of young women and also threatens HIV and AIDS prevention and regulation programmes. Thus the prevalence of teenage pregnancy in South African schools has been largely published by media. In 2008 the media reported that in one school district in the province of Mpumalanga, 1052 young women from 110 high schools and 58 primary schools had become pregnant. The official report by the DoE put the number of learners who became pregnant in 2007 at 49 636. The highest proportion of those learners becoming pregnant was in KwaZulu-Natal (14 246 learners), which has major implications for the province since teenage pregnancy and early motherhood present a serious threat to gender parity in education. No fewer than 17 260 pregnancies were recorded in KwaZulu-Natal schools in



2010 (SAPA, 2011). The above statistics illuminates the localised variation of pregnancy among school-going young women in the provinces of SA, with over 59% of all pregnancies in South African schools located in the province of KwaZulu-Natal. Furthermore, it indicates that teenage pregnancy is related to broader social issues such as race and class, since it largely occurs among African teenagers, who belong to the most disadvantaged communities in SA that are generally from informal settlement, rural and poorly resourced schools. According to research conducted by the Centre for Education Policy Development (CEPD) (2008) KwaZulu-Natal had more rural schools than both Limpopo and Eastern Cape. For example in 2007 KwaZulu-Natal had 2 956 rural schools with 1 097 499 learners. Thus one of the key factors contributing to the high prevalence of teenage pregnancy in KwaZulu-Natal is the contextual factor.

The majority of learners in KwaZulu-Natal come from a poor background set in the rural areas (HSRC, 2009). Rural areas in SA, especially those which were previously located in the former homelands, are under-developed and poverty-stricken because of unemployment - which is at its worst in the rural areas. Gardiner (2008) argues that lack of development in these areas was because of the previous government's emphasis on urban development. Unemployment and growing economic agricultural failure exacerbate poor living conditions, and these are worse for young women because of fixed gender roles that result in high levels of gender inequalities. Young women are not expected to become migrant workers as young men do; instead, they remain behind and take care of the family. When they face challenges caused by poverty the majority of these young women resort in exchanging sex for money and food in order to survive.

In addition, life in the rural areas is characterised by strong patriarchal traditional practices with gender power inequalities (Harrison, 2008; Jewkes & Morrell, 2010; Hunter, 2010). Cultural gender norms and roles often locate women in a powerless position where they have to show respect to men and adults, leading to their being dominated by men. Young women's submissiveness to men leads to their inability to choose to practise safe sex and often having to give in to experiences of sexual coercion and violence (Jewkes et al., 2009; Petiffor et al., 2004). Poverty, culture, male hegemony and women's subordination enmesh to produce

tighter relations of power invested in male hegemony and power to control sexual relations (Hunter, 2010; Jewkes et al., 2005).

Research reported that at least one-third of teenagers in schools are sexually active (Reddy et al., 2003). However, teenage pregnancy in SA is still framed as a moral problem, especially since it mostly occurs outside marriage, in school, and requiring solutions grounded in morality and ethics. Teenage pregnancy is situated within a discourse of sexual stigma and violation of age and generational hierarchies (Bhana et al., 2010). It is further argued that there is a familiar understanding of children as sexually innocent and chaste. School is viewed as a place for innocent children (Epstein & Johnson, 1998). Teenagers' sexuality is constructed as problematic, and promiscuity and sexual activity are blamed on pregnant learners because of their visibility as they are not supposed to be engaged in adult-like behaviour (sexual intercourse) (Macleod, 2001; Cunningham & Boulton, 1996).

In addition, it is argued that since teenage pregnancy occurs outside marriage, it leads to dependency on others (Rolfe, 2008). Thus programmes focusing on moral behaviour (e.g. virginity testing and abstinence) are encouraged by some communities in order to change the moral behaviour of young women (Panday et al., 2009). Therefore most recent newspaper headlines indicate entrenched attitudes of moral panic, with dramatic headlines. Among others are: 'School pregnancy shock' (*Sowetan*, 2010, July 21); 'Pregnant pupils, please bring your own midwives to school' (*Sunday Times*, 2010, November 28); 'Teen mums shock MEC' (*Daily News*, 2011, January 3); and 'Pregnant teens 'pose problems' (*Daily News*, 2011, February 9).

So far the favourable constitutional victories in relation to the SASA and Bill of rights that explicitly stipulate that every child or learner has the exclusive right to education thus allowing pregnant teenagers and teenage mothers to continue with their education has had little practical impact on pregnant teenagers. Many continue to face the ignominy of struggling to access schools and face problems once there. If anything, the case of 12 May shows the ultimate plight of those pregnant teenagers and teenage parents face, and the illusory nature of SASA and gender equality laws in SA. There have been cases where some

school principals barred pregnant learners from attending school because of pregnancy (see Nkani & Bhana, 2010). Moreover, in Mzuvele High School in KwaMashu, KwaZulu-Natal, more than 13 pregnant learners, most in their matric year (Grade 12) were allegedly expelled from school. The principal said he was giving them a two-year maternity leave (Ndlovu, N. 'Expulsion' of 13 pregnant pupils to be investigated. *The Mercury*, 2008, May 8). Unfortunately, many pregnant teenage learners wait in vain for laws to be implemented and their rights to be safeguarded.

The 12 May 2011 case is the most recent example of how the *Measures for the prevention and Management of Learner Pregnancy* (DoE, 2007) has undermined pregnant teenagers and teenage parents' right to school and education. This thesis makes a contribution towards addressing new regulations on Learner Pregnancy Policy that are in line with the spirit of gender equality and empowerment of women as specified in the SASA and the Bill of Rights. The legal victory for Harmony and Welkom High undermined the progress made constitutionally towards gender equality, and therefore the court ordered new guidelines from the DoE within 24 months. My thesis is situated within this unfolding crisis around teenage pregnancy and parenting in South African schools. Teenage pregnancy is viewed as a social problem by both the community and school because of its adverse impact on the education of young women. The dominant discourse of schooling pregnant teenagers is that in most instances pregnancy leads to school dropout or disruption of schooling which impact negatively on the school performance of the young women. Pregnancy and parenting of learners also can lead to poor performance and becomes one of the reasons why young mothers are unable to successfully complete their schooling. This ultimately leads to gender inequality as it mostly affects the performance of female learners.

## **1.2 Pregnant teenagers/young mothers and education in South Africa**

Teenage pregnancy and schooling has been given much attention in SA, because it is viewed as a social problem that hinders the educational success of young women. Before the South African Government was democratically elected, pregnant teenagers faced various challenges of being discriminated against and stigmatised, and were legally excluded from attending school because of being pregnant (Cunningham & Boulton, 1996; Macleod, 2001;

Mokgalabone, 1999). They dropped out of school, and those who re-entered the schooling system after giving birth changed schools because they were afraid of discrimination.

After 1994, with the adoption of national policy, pregnant teenagers and teenage mothers have been given deserved attention in the education system of SA. The South African Schools Act No. 84 of 1996 abolished the exclusion of pregnant learners from school, and promoted re-entry of young mothers back into school in order to promote gender equity. It therefore became illegal for any school to exclude learners from their right to education because of being pregnant. After being given the opportunity for equal education opportunities, there were reports that pregnant teenagers' and young mothers' overall achievement frequently exceeding that of their peers (Kaufman, de Wet & Staedler, 2001). However, there were also reports that pregnant learners were still barred from attending schools, because teachers indicated that they were not skilled enough to deal with pregnant learners, and in some instances purely due to prejudice against pregnant learners (*The Mercury* May 08: 2008). The gains of pregnant learners to have equal educational opportunities have been reversed by introduction of controversial guidelines by the DoE (2007) that make it possible for some schools to demand that pregnant learners take a leave of absence of up to two years.

This thesis explores the experiences of pregnant teenagers and teenage mothers in Khanya Secondary School, KwaZulu-Natal, and provides insights into the struggles, vulnerabilities and agency of young women who come from a disadvantaged background. It further argues that gender is the key to understanding the experiences of pregnant teenagers and young mothers. Gender inequalities have significant bearing upon all aspects of the participants' experiences although they show determination to complete their schooling. Furthermore the teenagers' sexual behaviours are located within unequal relationship dynamics putting young women at risk to unwanted pregnancy. Social and cultural factors exacerbate these inequalities. The experience in school is such that it is pregnant teenagers and young mothers who are ridiculed and the management of schooling and having a baby is made difficult by the absence of any support from schools. Fathers' involvement in supporting the pregnant teenager and young mother is lacking and the work of caring and nurturing the child is overwhelmingly the responsibility of the young mother.

My experience of being an African woman who was also a young mother and from a poverty-stricken background has given me insight into the struggles faced by these young mothers. They do not only face stigma for being pregnant at a young age and at school, they also struggle financially to buy formula or to send the child to crèche in order to continue with their schooling. There is a high unemployment rate in SA, with recent statistics released by the South African Chamber of Commerce and Industry (SACCI) indicating that the unemployment rate was 25.3% in the first quarter of 2012, and the situation is worse for unskilled young people who have failed to complete their schooling. It is therefore imperative that these young women should continue their schooling with very limited disruption, since completing their education could put them in good standing for acquiring skills for better job opportunities. In addition, one of the objectives of both the DoE and educators is that all learners should have equal opportunity to successfully complete their schooling. Furthermore, the economic growth and redistribution of any country depends on a more educated population of both men and women (Harrison, 2008).

Secondly, there is still limited research on the experiences of pregnant teenagers and teenage mothers in school. This is an ethnographic study of the experiences of pregnant teenagers and teenage mothers and how these young women explain and make sense of their position as learners, pregnant, mothers and young African women. The study is located within the context of the debate about pregnant teenagers/young mothers and education and a feminist framework of perspectives of teenage motherhood and a commitment to gender equity. In examining the constructions of 10 pregnant learners and learner mothers between the ages of 16 and 19 years in an attempt to continue with their education this study is shaped by social constructionist theoretical framework. These young women come from the African working class community in Inanda which is an informal settlement area north of the city of Durban in the province of KwaZulu-Natal.

The teenagers' sexuality and constructions of motherhood have been explored within their social and cultural context. I have also taken into consideration a variety of forces that are at play in and outside the school setting, in order to shed light on how gender plays a role when these young women interact with family members, boyfriends, peers and teachers. Hence all these people have a major influence on the teenage mothers' constructions. Moreover, there are expectations or practices based on cultural beliefs that the individual young woman has to live up to. However, one of the biggest influences is how the young women relate to the socio-

cultural expectations that help them construct their own personalities, and how their experiences both at home and at school shape their self-perceptions.

### **1.3 Key research questions**

- How do pregnant teenagers/young mothers experience school where they are both learners and mothers or in a state of becoming mothers (being pregnant)?
- How do the young women experience the attitudes and conduct of teachers and fellow learners?
- What kind of support do these young women receive from their families, friends and boyfriends?
- What forms of femininity do the pregnant teenagers/teenage mothers evince/perform?

### **1.4 General overview of teenage pregnancy and teenage motherhood**

Teenage pregnancy or young motherhood causes much concern as it has had and continues to have negative effects on young women's development. It begins a lifelong trajectory of poverty for young mothers and their children through negative impact on educational opportunities, especially if the pregnant teenager or young mother does not receive the necessary support in order to complete schooling so as to stand a better chance of employment opportunities. South African studies (Panday et al., 2009; Chigona & Chetty, 2007, 2008; Bhana, Clowes, Morrell & Shefer, 2008; Bhana, Morrell, Shefer & Ngabaza, 2010) have indicated that the high prevalence of teenage pregnancy and early motherhood has been one of the major hindrances to the educational attainment of young women, as most of these young mothers are the primary caregivers. This resonates with the findings from this study, where the young mothers pointed out that childbearing had impacted negatively on their schooling as they struggled to balance motherhood and their school work. Instead of support from the teachers, they are mostly ridiculed, marginalised and seen as if their school re-entry would do them no good. The teachers also view teenage mothers as contributing towards the high failure rate in school.

According to Grant and Hallman (2006), one out of five 18-year-old women have given birth. In order to try to prevent and mitigate the high prevalence of teenage pregnancy in SA, a number of initiatives have been implemented. These include introduction of life skills in

schools in the form of Life Orientation (LO), and a funding programme such as Lovelife, which is a multi-media HIV education and awareness campaign. Furthermore, the *Choice on Termination of Pregnancy Act of 1996* was passed, which provides young people with the option of terminating early and unwanted pregnancy (Makiwane, 2008). It is shown here that the effectiveness of all these interventions is hugely influenced by various socio-economic and cultural factors. Firstly, young people could only learn about sexuality in school through LO lessons or from their peers because, according to the research, they do not talk about sex or their sexuality with their parents (see Mayekiso & Twaise, 1993; Buga, Amoko & Ncayiyana, 1996; Leclerc-Madlala, 2002; Mkhwanazi, 2007, 2009, 2010). Parents believe it is improper to talk about sex with their children. Sex is regarded as for mature adult and married people, although there is a very low rate of marital settings among the African communities (see Harrison, 2007). There are recent findings by Bhana (2011) that South African children are having sex for the first time when they are between the ages of 14 and 15 years, and it is suggested that parents need to talk to their children about sexuality from the age of five.

The research further showed that silence on sexual issues by key figures generates misconceptions and myths learnt from peers, further contributing to risky sexual practices. It also reveals that among the children that are sexually active, barely half used a condom when they last had sex. Instead of parents talking to their children about sexuality, many parents prefer their daughters to join virginity testing, which is known as *ukuhlolwa kwezintombi* in isiZulu language. Young women join the virginity testing in their early teens, some as young as seven years. This cultural practice is largely practised by isiZulu-speaking people and was revived in the 1990s because it is believed to be the answer to curb teenage pregnancy and the spread of HIV/AIDS (Leclerc-Madlala, 2001, 2003; Vincent, 2006). It promotes that young women should keep their virginity until they get married and undergo a virginity test. The virginity tester checks the external genitals to assess virginity (Leclerc-Madlala, 2001). It is through this cultural event that young women's parents believe their daughters are learning about their sexuality, and that this protects them from getting infected from HIV and getting pregnant. However, the only contraception emphasised at this cultural event is abstinence from having sex; the use of condoms or any other contraception is discouraged.

In Khanya Secondary there are teenagers who attend virginity testing and who during the month of September attend the annual Reed Dance Festival<sup>1</sup> in KwaNongoma, and there were four teenagers among the participants of this study who used to attend virginity testing and the reed dance before becoming pregnant. The cultural reed dance, which is known as *Umkhosi woMhlanga* in IsiZulu, is a custom practised by IsiZulu speaking communities that celebrates the coming of age of women. This four-day event takes its name from the riverbed reeds, and is a four-day event dating back before the days of King Shaka. It has been celebrated by countless generations, where young Zulu maidens celebrate their virginity and their preparation for womanhood. On the day of the festival the young women, dressed in loincloths and beads, go to the riverbed to gather and select their reeds, taking only the longest and strongest. They then carry them towering high above their heads, and march in a procession to present them to the royal residence. It is believed that if a young woman who is not a virgin takes part in this event, her reed will break and embarrass her in full public view. Thereafter they celebrate by dancing for the assembled guests.

Participation in the reed dance is a source of pride to the young women themselves, their parents and their communities, as it signifies purity and virginity as well as acceptance of traditional Zulu values and culture. It is during this festival that a king may choose one of the maidens to be his future bride. In recent years the occasion has been used by King Goodwill as an opportunity to educate the Zulu nation, particularly the youth, on social and moral issues such as traditional morality and the importance of observing behaviour patterns that prevent teenage pregnancy and lower the risk of contracting HIV and AIDS and other sexually transmitted diseases.

However, virginity tests are associated with negative reports of corruption and bribery whereby young women pay the virginity tester to be awarded a certificate of purity, and George (2007) argued that some of the young women who have been pronounced as virgins have given birth a few months later, indicating that they were pregnant at the time of the test.

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<sup>1</sup> The Annual Reed Dance Festival is a cultural event that happens every year in September where over 25 000 Zulu maidens gather at the Zulu King's royal palace '*eNyokeni*' KwaNongoma for the Zulu Reed Dance known as '*uMkhosi woMhlanga*' in isiZulu language. It is a colourful and cultural celebration that promotes respect for young women, and preserves the custom of keeping girls as virgins until marriage. <http://www.eshowe.com/article/articlestatic/24>



Since the young women who attend these tests regularly know that the virginity testers are checking for something resembling a white veil in the vaginal canal, some young women resort to inserting toothpaste or freshly cut meat into their vaginas in order to make the vagina appear 'tight' and so evince the white veil effect. Other reports suggest that the virginity testing attracts older men seeking out virgins with low HIV risk status (Simbayi, Chauveau & Shisana, 2004). On the other hand, having sexual relationships with older men increases the risk of HIV infection for the young women. Another concern raised with respect to early pregnancy is the fact that it indicates unprotected sex among mostly unmarried teenagers, and therefore risk of HIV infection. From antenatal surveys conducted over the last 10 years, it appears that the HIV prevalence among 15-19- year-old women has stabilised at about 16% (compared to 30% for 20 - 24-year-old women). Rutenberg, Kaufman, Macintyre, Brown and Karim (2003) suggest that concern about the danger of HIV infection has become part of young women's perceptions of the desirability of pregnancy.

The rate of pregnancy in the schools around the area indicates that young women do not use contraceptives (see Nkani & Bhana, 2010) and do not heed the call of using protection against HIV and AIDS. Considering the interventions by the department of education and NGOs through life skills and other programmes of trying to reduce teenage pregnancy and bringing awareness about HIV and AIDS have little or no effect. On the other hand other studies argue that media's more emphasis on the use of condoms over oral contraception has exacerbated the rate of teenage pregnancy (Macleod & Tracey, 2010). This resonates with MacPhail, Pettifor, Pascoe and Van Rees's (2007) findings that there has been more emphasis on the use of condoms, especially male condoms, and HIV prevention to the detriment of contraceptive services. It is further highlighted that there is little or no mention of female condoms. The male condom use is largely presented as a challenge, because this form of contraception is heavily reliant on male compliance (MacPhail et al., 2007). All of the participants in this study had much older boyfriends, which made it difficult for the young women to enforce the use of condoms; furthermore their boyfriends had financial power over them. The participants mostly did not exercise their choice on the use of condom; instead they waited to see how their boyfriends responded on condom use because they are afraid to be abandoned by their boyfriends (Varga & Makubalo, 1996; Wood & Jewkes, 1997). Moreover, Jewkes, Morrell and Christofides (2009) posit that the existence of gender power inequalities limits young women's sexual choices, thus finding themselves coerced to engage

in unprotected sex. This exacerbates the vulnerability of young women to pregnancy and HIV/AIDS. Studies also found that other young women had poor understanding of the ways in which contraceptives work and often believe myths that contraceptives have negative effects on their health; for example, they believe that they will gain weight, their body will become loose and they will become infertile (Ehlers, 2003; Wood & Jewkes, 2006).

This research has also identified that young women sometimes give in to peer pressure to compete in acquiring material items. Most learners do not want to have sexual relationships with boys their own age; instead, they prefer working, older boyfriends who are going to be able to afford to buy them presents and give them money. The ‘sugar daddy’ syndrome and transactional sex in relation to young South Africans, especially young women, is well known (Hunter, 2002; Petersen, Bhana & McKay, 2005; Dunkle et al., 2007; Leclerc-Madlala, 2001; Jewkes et al., 2009; Bhana & Pattman, 2011). Teenagers, especially from disadvantaged backgrounds, prefer older working men because these men provide for them financially. Some young women are forced by circumstances to engage in transactional sex because of poverty caused by HIV/AIDS, where young women without families to protect and support them are engaging in ‘survival sex’ to feed themselves and their siblings (Peacock, 2003). However, while some young women are driven to transactional sex because of poverty, using sex as a way of acquiring food and basic essential items, others are motivated by the desire for material items, for example fashionable clothing, designer items and cell phones or air time (Bhana, 2007; Stavrou & Kaufman, 2000; Hunter, 2010). Thus Arai (2009) points out that growing awareness of the age gap between the teenage mothers and their partners has helped to raise knowledge of sexual health and other risks associated with teenage girls having older partners.

Many studies reveal that most teenage pregnancies are not planned (Jewkes, Vundule, Maforah & Jordaan, 2001; Macleod & Durrheim, 2003; Morehead & Soriano, 2005; Macleod & Tracey, 2010). For example, it was found that pregnant teenagers were more likely than controls to have experienced forced sexual initiation; they were also beaten more often by their boyfriends and particularly feared being beaten if they refused sex, which might lead to unplanned pregnancy (see Spiezer et al., 2009). Although it is commonly known that most of the pregnancies are unplanned, most teenagers do not opt for termination of pregnancy (TOP)

for various reasons. A study by Ehlers (2003) and Harrison (2007) found that some pregnant young women had wanted to terminate their pregnancies but did not know how to go about it or had been unable to access abortion facilities. Some pregnant young women have the fear of being stigmatised. The other factor is the religious and cultural beliefs the young women have about TOP. The idea that fertility plays an important role in the construction of the identity of African women (Preston-Whyte, 1988) still plays a significant role in the construction of the identity of today's young women. The participants did not choose TOP because of fear of the idea that they might be aborting the only child they will have. One of the participants wanted to access abortion facilities, but was informed that her pregnancy had progressed beyond 12 weeks and that she could no longer have TOP.

## **1.5 The policy framework and teenage pregnancy**

South Africa is one of the countries in sub-Saharan Africa that has taken steps to protect pregnant teenagers and teenage mothers' right to education. An accommodating policy has ensured that these young women remain in mainstream schooling or return to school after giving birth. The SASA (DoE, 1996) makes it illegal to exclude young women from school for being pregnant or to deny re-entry of teenage mothers (Bhana et al., 2008). According to the Bill of Rights of SA, everybody has the right to basic education, and it is improper to deny young mothers from continuing their schooling if they are ready to do so (Kaufman, de Wet & Stadler, 2001). The DoE provides only a legal imperative that ensures that pregnant teenagers remain in school and are permitted to re-enter after childbirth; however, various studies reported that upon school re-entry, the young mothers experienced many challenges in balancing motherhood and the demands of schooling (see Chigona & Chetty, 2007, 2008; Grant & Hallman, 2008; Bhana et al., 2010). Bhana et al. (2008) argued that school disruptions are mostly experienced by young mothers from poor backgrounds because of financial constraints; they could not afford to have hired help for taking care of the child while busy with school work or attending school. They further argued that young mothers from middle-class backgrounds experienced minimal school disruption as they could easily afford paid childcare. However, as has been mentioned above, the bulk of pregnant teenagers come from disadvantaged and poor backgrounds. Thus, it becomes very difficult for the young mothers when they also experience a lack of support from teachers, who are supposed to provide care (Chigona & Chetty 2008; Jewkes, Morrell & Christofides, 2009).

## **1.6 Learning, pregnancy and motherhood**

Teenage motherhood has a negative effect on both the teenage mothers' social life as well as on their studies (see Arlington Public School, 2004). The same sentiment is echoed in this study, where it became a challenge to be able to look after a child properly and devote enough time to school-related tasks. Bhana et al. (2010) state that without back-up structures both in and out of school, teenage mothers are left with limited resources to navigate the world of learning and parenting. Thus, supporting pregnant teenagers and teenage mothers in schools is important (Chigona & Chetty, 2008) but remains a formidable task (Panday et al., 2009). Recent research has seen the emergence of a more qualitative and theoretical understanding of the experiences of teenage pregnancy and teenage mothers in schools, and illustrates some of the challenges facing young women at school (Chigona & Chetty, 2008; Bhana et al., 2010; Nkani & Bhana, 2010).

Both pregnant learners and learner mothers are being discriminated against, marginalised and ridiculed at school by their peers and the teachers. In some cases teachers expect the worst from the young mothers, and when they continue schooling they are "described or assumed to be poor or incapable" (Pillow, 2004, p. 111). Thus most young mothers lack self-esteem and experience emotional problems (Chigona & Chetty, 2007; Arai, 2009). The teachers view them as underperforming, which is caused by being repeatedly absent from school. The school managers blame these young women for contributing towards the high failure rate at school, and some even openly go against the SASA by encouraging the pregnant learners to stay away from school until after childbirth (see Nkani & Bhana, 2010).

Studies have affirmed that most schools do allow pregnant learners to continue with their schooling, but there is no support provided and the teachers blame large enrolment and the DoE's lack of guidelines on how teachers should manage and support pregnant learners and young mothers. On the other hand, these young women feel ashamed to talk about the challenges they face to the teachers. Because of the stigma attached to early childbearing, the

young mothers mostly try to keep the challenges faced because of motherhood as private as possible. They deal with ridicule and prejudice rather than support from the teachers. Chigona and Chetty (2008), in a study conducted among teenage mothers in Cape Town, report that teenage mothers face many challenges when they return to school after childbirth; in order to meet these challenges they need the support of their teachers. This often does not happen, as Bhana et al. (2008, p. 82) argue in a study looking at teachers' narratives on teenage mothers that teachers found it difficult to override their own beliefs about generational hierarchies, reproduction and gender. As the teachers come from the same community who views teenage pregnancy as a social problem and blames teenage mothers themselves for their predicament instead of providing support, teachers face challenges of balancing their role of providing support for gender equity and that of overcoming their prejudice against teenage pregnancy. They are still very moralistic when it comes to pregnant learners (Bhana et al., 2010). The above evidence suggests that schools' support is critical for increasing the educational aspirations of young women, as well as addressing gendered poverty and women's marginalised position in society - all key to SA's developmental agenda.

## **1.7 Gendered nature of motherhood**

Motherhood is highly gendered as it is largely women who bear the consequences of taking care of the children. Teenage mothers, especially those coming from poor backgrounds cannot afford to hire help and instead rely on help from their mothers or other female kin. It becomes very challenging if they do not co-reside with an adult female (Macleod & Tracey, 2009). In addition, when woman is unmarried the young mother and her family shoulder the financial burden of taking care of the child (Jewkes & Christofides, 2008). The additional member puts a strain to the budget of the family, especially when the young mother comes from a low socio-economic background. Early motherhood does not only pose challenges of transition to motherhood, it also brings social and economic challenges to the young woman and her family (Jewkes et al., 2009). This presents a serious threat to gender parity in education as it sometimes leads to absenteeism, which in turn could lead to dropping out of school.

Most learners who have returned to school after childbirth find it difficult to balance mothering and schooling (Chigona & Chetty, 2007, 2008; Bhana et al., 2008). South African society remains highly gendered with respect to normative roles for mothers and fathers, where the work of care giving, including cooking, cleaning, taking care of children and other domestic roles, has been shown to be the domain of women and girls (Bozalek, 1999). The young mothers' school work suffers as they tend to focus more on childcare; Tronto (1989) argued that providing care sometimes demands the caring person to be attentive to the needs of the cared, and in the process the one providing care forgets her needs. In this case schooling young mothers focus more on taking care of the child and pay less attention to school work. Due to migration, most young mothers from informal settlement have left their grandmothers or relatives who might have stepped in to help in taking care of the child in the rural areas (Preston-Whyte et al, 1993; Mkhwanazi, 2005). Most of the young mothers cannot sort their own mothers' help as they are working in order to provide for the family. Therefore, young mothers struggle to have someone to look after their children while they are at school. In addition, the young mothers are not only in charge of taking care of their children, they are also taking care of the whole household, cooking for the whole family, and cleaning and doing washing for siblings while their own mothers work in order to provide for the family. In this case having a child is an additional amount of unpaid care work for the young women. Some of these teenage mothers could not get support from their own mothers as they are working as domestic workers providing care work for the middle class. Budlender (2010) asserts that the burden of care work in a household is taken care of by women. During the day the baby is kept in crèche and collected by the mother after school. In most cases the young mothers do not expect any involvement of their partners in taking care of the baby besides financial support, as they are neither married nor living together. As already mentioned, these young women are socialised to accept that child-rearing is the responsibility of the mother.

Another major factor is that of the availability of someone to look after the baby while the learner mother is at school or to give financial support so that the baby can attend a crèche. For some of the young mothers giving birth can also mean dropping out of school due to lack of social and institutional support (see Crouch, 2005). Research highlights that most of the young mothers' challenges in school are arguably strongly related to the financial

disadvantages and gendered nature of parenting. According to the statistics, there were about 71 000 teenage girls in 2006 that reported pregnancy as the main reason for not attending an educational institution (Lehohla, 2007). The teenage mothers' educational success is determined by a number of factors, such as socio-economic status and support from parents, the baby's father and teachers. It further illustrates that there is very little support received by schooling teenage mothers from social development.

Grant and Hallman (2008) assert that the continuation of schooling is facilitated by the availability of support in caring for a baby. This heightens the importance of the State's developmental welfare role in support of teenage mothers in the form of the Child Support Grant (CSG). Access to a CSG could help a young mother to send the baby to a crèche and allow the mother to attend school. On the other hand, there is a belief that the CSG becomes an incentive to young women to fall pregnant, because they receive financial support when they bear children (Dawson 1997; Bullen & Kenway 2000; Matyu, *The Herald* 2005, October 18; Makwabe, *Sunday Times*, 2007, May 20). However, the HSRC report of December 2006 revealed that there is no relationship between teenage fertility and the CSG, since only 20% of teenagers that bore children were beneficiaries of the CSG (Makiwane & Udjo, 2006).

SA's CSG was introduced to effectively target poor children no matter their household status (Lund, 2008). Lund further argues that the CSG was to improve nutrition in the early years and to be able to scale up relatively easily to large numbers of recipients. Roll-out began in April 1998, and by 2000 a grant of R100 per child was effectively being distributed for children below the age of 7 years, subject to a means test of R800 per month in urban areas and R1100 per month in rural areas (Eyal & Woolard, 2011). The means test included the income of the child's caregiver and their spouse. Initial take-up was low, estimated at only 10% in 2000, but increased to 63% by 2005 (Samson et al., 2008). The CSG was extended in 2003 to 7- and 8-year-olds, and increased to R160 a month. In 2004 it was again extended, to 9- and 10-year-olds, and increased by R10 to R170. In 2005 the age eligibility cut-off was raised to 14 years, and the grant increased to R180. In 2008 14-year-olds obtained access to the grant, set at a level of R210. 2010 saw a final extension, to all children under the age of 18, and an increase to R250 a month. In February 2010 it was announced that all children under the age of 18 would gain access, conditional upon the means test.

The value of the grant in October 2008 was R220 a month, approximately US \$50 at purchasing power parity (Delany, Ismail, Graham & Ramkissoo, 2008), and in 2011 the value increased to R260 a month. The grant is paid to the child's primary caregiver, and is paid into bank accounts, at post offices, supermarkets, and welfare pay-points. The CSG may help to ensure food security, aid parents in buying school uniforms and paying school fees, and thus support enrolment and attendance, increase access to credit by raising individual's trustworthiness, alleviate poverty in the household, raise women's bargaining power in the household, and possibly fund a day-care or crèche for the beneficiary, enabling the young mother to attend school (Eyal & Woolard, 2011). However, there are administrative delays in the application of CSG that impact negatively on the teenage mothers, whereas receiving the CSG in time could help in the school attendance of young mothers as they could afford to send the baby to the crèche and buy formula while they are at school.

This study also explores the role played by the child's father in the support of young mothers with childcare from the perspectives of mothers. Most fathers of young mothers' children are depicted as absent fathers because they are not involved in their children's lives. As has been mentioned, most teenage pregnancies occur out of wedlock so it becomes difficult for the young fathers to be involved in taking care of the child. Another factor is that the young fathers have been brought up to believe that childcare is the responsibility of womenfolk. The young fathers are mostly providing financially (whenever they can afford it) for the child, and some tried to minimise the schooling disruptions of the young mothers owing to motherhood responsibilities by taking the child to their family (Mcambi, 2010). Usually the young men provide the material support, which is what they think is expected of them.

Dover (2001) argues that in many parts of Africa a man commands respect when he is able to provide for and maintain his household. On the other hand, Barker (2009) states that social class and educational attainment have an influence in men's participation in the child's care giving, arguing that low-income men spent less time with their children than middle-class men. Furthermore, young men feel pressure to prove their manhood by proving virility, both by fathering a child and by providing adequate financial support for a household. Hunter



(2010) concurred when he talked about commodification of a relationship, whereby the young man has to work very hard in order to pay *ilobolo* for a young woman and subsequently to support the wife. In return, the wife contributes by giving birth to children, taking care of the children and maintaining the marital household.

## 1.8 Conclusion

This chapter aimed to provide an overview of the research on teenage pregnancy/teenage motherhood and their experiences in school. This is located within the broad research landscape that teenage pregnancy is a social problem that largely contributes towards school disruption of young women, which ultimately contributes to gender inequality. It also reviews the high degree of research attention upon the factors associated with teenage pregnancy, sexualities and sexual practices of South African teenagers. In addition the chapter introduced the key questions that this thesis sought to answer, and highlighted the framework within which the questions are answered. It also provided a brief section on the involvement of the fathers in the children's lives.

**Chapter Two** examines the theoretical framework and lens through which the data are analysed and interpreted. It also examines the literature in SA and abroad and points to the gaps in South African studies of teenage pregnancy and teenage motherhood and schooling. An exploration of teenage pregnancy and motherhood in SA contextualises the thesis in contemporary debates, with a view to providing an understanding of the meanings the young mothers attach to their own experiences in school. The chapter further explores various feminist theories and perspectives on motherhood, highlighting how these have come to shape debates on motherhood.

**Chapter Three** locates the thesis in its methodological framework and outlines the methodology executed in this study, with a detailed description of the research site and biographies of the participants. I present detailed description of the ethnographic process, paying attention to me as a researcher and how my position as a member of the management

of the school might have influenced the data collection process. The limitations and ethical implications of the study are discussed.

**Chapter Four** investigates the factors that shape the experiences of pregnant teenagers, looking at the dominant social, cultural and class factors that propel teenage pregnancy. This chapter draws attention to the circumstances surrounding teenage pregnancy by giving a detailed analysis of the reported experiences of pregnant teenagers, both at school and at home. The chapter also explores the young women's constructions with reference to the use of contraceptives and HIV and AIDS. An outline is given on pregnant teenagers' experiences and reactions of the parents, community and school to their pregnancies.

**Chapter Five** discusses the experiences of mothering and schooling. The chapter indicates the ability of teenagers to cope with both mothering and schooling under extremely difficult circumstances. Teenage mothers' experiences are illustrated within differentially gendered environments, where interaction produces tension, conflicts and insubordination. It also shows that rather than simply remaining victims of these environments, young mothers find resources and strategies to cope, despite the overwhelming difficulties. The chapter focuses on several areas of interrelated experiences. The chapter first draws on the disruption of schooling, and then focuses on relationships between learners and teachers and the ways in which school work and responsibilities are negotiated. Loss of friends also features as important in young peoples' experiences. The chapter goes on to show how culture, body image and sexuality impinge upon teenage mothers' experiences of pregnancy and parenting.

**Chapter Six** focuses on boyfriends' and young fathers' involvement with pregnancy and parenting. This chapter traces the ways in which gender plays out in the sexual relationships, contraceptive use and boyfriends' involvement with the young mothers. The chapter also explores the young women's relationships with boyfriends. In addition, the chapter draws attention to how the boyfriends respond to the news of the pregnancy. The chapter then explores the young men's support during pregnancy and after the birth of their children.

**Chapter Seven** presents the conclusion based on the findings of this thesis presented in Chapters Four, Five and Six, together with the implications of the study. Recommendations are specified based on the potential of the findings of this study for both policy intervention programmes as well as educational strategies.

## **Chapter Two: Literature Review**

### **2.1 Introduction**

Pregnancy and parenting are very challenging for an individual woman, and worse for a schooling teenager coming from a disadvantaged background. Teenage pregnancy has caused much concern in SA and abroad as it poses risks for educational success of female learners, ultimately causing gender inequality in educational achievement. The main aim in this study is to explore the experiences of pregnant teenagers and teenage mothers in school and how they negotiate the challenges of balancing mothering and schooling. This chapter examines the theoretical framework in which the thesis is located, that is a social constructionist framework guided by feminist principles. It also examines the literature on teenage pregnancy and teenage motherhood and schooling.

Research on teenage pregnancy posits that childbearing while still in school may cause school disruptions. Most of the disruptions are gendered, as it is largely young mothers who bear the consequences of taking care of the children. Pregnancy becomes more challenging when the woman is unmarried, as the young mother and her family shoulder the financial burden of taking care of the child (Jewkes et al., 2009). The additional member puts a strain on the budget of the family, especially when the young mother comes from a low socio-economic background (Chigona & Chetty, 2007, 2008; Macleod, 2001, 2003; Bhana et al., 2010). Early motherhood does not only pose challenges of transition to motherhood, it also brings social and economic challenges for the young woman and her family. This presents a serious threat to gender parity in education, as it sometimes leads to drop-out and shatters the young women's life chances (Panday et al., 2009; Crouch, 2005; Grant & Hallman, 2006).

The chapter continues with a focus on teenage sexuality, exploring factors that influence teenage pregnancy, teenage pregnancy and gender power imbalances caused by having sexual relationships with much older men, and teenage pregnancy and motherhood in SA. It contextualises the thesis in contemporary debates, with a view to providing an understanding within the family, community and school. The chapter further explores various feminist theories and perspectives on motherhood, highlighting how these have come to shape debates

on teenage motherhood. The following perspectives are discussed: that teenage pregnancy or teenage motherhood is a moral shame that leads to the discourse of contamination; teenage pregnancy leads to school disruptions that impact negatively on the young women's education and later work prospects; and the transition from childhood to motherhood and changing perceptions of femininity and how the identity of young women changes during the process of getting pregnant, having a child and becoming a mother. Lastly, it is impossible to explore teenage pregnancy in isolation - it is also imperative to explore the nature of teenage sexuality and the idea of childhood and sexual innocence.

The exploration of teenage pregnancy and teenage motherhood cannot be conducted in isolation; it includes investigation into the young women's sexuality and their conceptions of femininity in their social and cultural contexts (Preston-Whyte & Zondi, 1989, 1992; Mkhwanazi, 2010). There is a noticeable absence of investigation of fathers in this study, because all of the men who impregnated these pregnant learners were much older than them, were no longer schooling, and were mostly employed either temporarily or permanently. However, this study presents the young women's perspective on their boyfriends who later became fathers of their children.

In trying to highlight the challenges faced by pregnant teenagers and young mothers at Khanya, I consider what has already been postulated by South African scholars. Teenage pregnancy has long been viewed as a social problem, as it is a major setback to addressing gendered poverty and women's social and economic progress (see Varga, 2003; Macleod, 2003, 2006; Grant & Hallman, 2006; Panday, Makiwane, Ranchod & Letsoalo, 2009). Teenage childbearing leads to disruptions of schooling, drop-outs, and limits young women's development and empowerment (Crouch, 2005). According to the Human Sciences Research Council (HSRC, 2009a, 2009b), the high rate of pregnant and parenting learners is related to school drop-out, as some learners fail to balance parenting and schooling and this could lead to the young women's life chances being shattered. Nevertheless, teenage fertility (which results in a live birth) in SA is lower than the overall rate in sub-Saharan Africa; however, in SA teenage pregnancy tends to take place out of wedlock and is less likely to result in marriage than previously (see Macleod & Tracey, 2010). Within South African teenage pregnancy statistics, African and coloured teenagers have the highest pregnancy rates and

whites and Indians the lowest (Kaufmann, de Wet & Stadler, 2000). Even though the media have presented an alarmist picture of the rate of teenage pregnancy, current statistics appear to point to a decrease (HSRC, 2009a)

Another concern is that the high prevalence of teenage pregnancy compromises the intervention programme attempting to combat the HIV and AIDS pandemic through promotion of abstinence and condom use. Statistics indicate that the prevalence of HIV among women is heightened in their late teens, almost five years before men (HSRC, 2009a). Of the 15 - 24-year age group in SA, 10.2% are infected, and estimates suggest that 15.5% of young women aged 15 - 24 years are infected compared to 4.8% of men of the same age (Pettifor et al., 2004). Therefore the moral panic presented by the media calls for intense intervention by various sectors of the Government, particularly the DoE and Department of Health, as teenage pregnancy is located in the ideology that it leads to school disruptions and to teenagers being susceptible to HIV/AIDS.

The concern about teenage pregnancy is not confined to SA; internationally teenage pregnancy is also regarded as a social problem. Most international researchers highlight the association between class or socio-economic status, educational level and teenage pregnancy, and argue that teenage births in the United States of America and United Kingdom mostly occur among socio-economically disadvantaged young women (Geronimus, 1997; Coley & Chase-Lansdale, 1998; Darroch, Singh & Frost, 2001; Coleman & Cater, 2006; Harden et al., 2006; Morehead & Soriano, 2005). Hence policy makers stigmatise and marginalise teenage mothers as welfare dependants or scroungers on the State (Coleman & Dennison, 1998). Poor, working-class teenage mothers become the target of marginalisation and stigmatisation because they do not follow the normative life trajectory of the middle-class (white) pattern of higher education, establishment of a career and then starting a family. This life trajectory of middle-class young women conforms to the current governmental objectives of economic growth through higher education and increasing female work participation (Wilson & Huntington, 2005).

## 2.2 Social and cultural factors that influence teenage pregnancy

Teenage pregnancy has long been perceived negatively and this leads to the stigmatisation and marginalisation of pregnant teenagers and young mothers (Pitje, 1950; Mayer, 1961; Bradford, 1991, 1994; Carton, 2000; Mkhwanazi, 2010). Historically among black South African communities, teenage sexuality was celebrated and encouraged, however pregnancy at any age out of wedlock was not acceptable and it was frowned upon. This section examines literature on how social and cultural factors influence teenage pregnancy. Studies posit that among African communities teenagers' exploration about sex was open and encouraged, because it was perceived as healthy and natural (Delius & Glaser, 2002; Jewkes et al., 2009). Delius & Glaser (2002) assert that in other ethnic groups grown-up people talked openly about sex in the presence of children. In the past, once a young woman reached puberty she joined a youth structure which was an indication that she was ready to be proposed to and get married. In these structures younger women were monitored and managed by older women called *amaqhikiza* (Krige, 1950). Any young man interested in courting a young woman first talked to the *iqhikiza*, and if the young woman was interested to *qoma* (accept) the young man to become her boyfriend (*isoka*) she had to report to the *iqhikiza* first, and they were brought together. These older women were in charge of regulating and managing courtships (Delius & Glaser, 2002; Mager, 1999; Jewkes et al., 2009).

Although the young people explored and celebrated their sexuality, sexual activities were heavily monitored and penetrative sex was not allowed; only thigh sex (*ukusoma*) was allowed. A young man who transgressed received punishment and ridicule from his peers and it became worse for the young woman when she ended up being pregnant - the couple had to face the elders' wrath (Delius & Glaser, 2002). According to Krige (1950) the young women were not only monitored by *amaqhikiza*, their mothers also checked their virginity.

The influence of Christianity brought about the idea of morality through which all the social institutions were undermined and underwent change, and sex became viewed as shameful and only reserved for married people (Delius, 1996; Carton, 2000). The migration of people from rural to urban areas exacerbated circumstances. Delius and Glaser (2002, p. 37) argue that the growing influence of Christianity helped shape an inter-generational silence on sexual

matters that became damaging as other forms of sexual education withdrew. Young people started to look down on all the cultural sexual teachings. They stopped practising thigh sex and preferred penetrative sex, and those who were still practising thigh sex were seen as backward and were ridiculed. They further assert that many young people were engaged in sexual activities outside of the gaze of their parents (Delius & Glaser, 2002; Bhana et al., 2008).

Glaser (2000) posits that sex was highly visible and curiosity was aroused, yet parents did not want to talk about it to their children. The young people's sexual encounters were no longer regulated and monitored, the virginity testing was also no longer conducted in most of the areas, and premarital pregnancy started to increase. It was when the HIV and AIDS pandemic began to take hold that some communities started to call for the revival of the practice of virginity testing. According to Leclerc-Madlala (2001, 2003) and Vincent (2006), it was in the mid-1990s when the virginity test was revived. African communities thought that going back to the cultural practice of virginity testing would be one of the answers to reduce the high rate of teenage pregnancy, at the same time fighting against the spread of the HIV and AIDS pandemic (Wickström, 2010). Virginity testing is gendered as it is used as a surveillance form of controlling and monitoring young women's sexuality. Studies indicate that parents have difficulty in talking about sex to their children (Mayekiso & Twaise, 1993; Buga et al., 1996; Leclerc-Madlala, 2002; Mkhwanazi, 2009, 2010). Traditionally it was not acceptable for parents to talk about sex with their own children. It was the responsibility of aunts, older female relatives or *amaqhikiza* to teach sexuality to the female teenagers and uncles and other male relatives had responsibility of talking to male teenagers about sexuality and manhood. Due to migrant labour that eroded family structures, most communities residing in informal settlements have left their female relatives who could have talked to their daughters about sex in rural areas. Furthermore, although teenagers receive sexuality education at school, media and NGOs it seems as if it falls on deaf ears as there is still high rate of teenage pregnancy in informal settlement and rural areas. Most first time pregnant teenagers expressed shock at being pregnant and refer to the pregnancy as a mistake (Harrison, 2008). To some communities virginity testing is seen as the possible way to change the behaviour of teenagers and brings about good morals of young women. Therefore parents believe that in order to protect their daughters from getting pregnant and contracting HIV and AIDS virginity test is the answer where their daughters would be taught about sexuality and moral behaviour.



The findings of this study resonate with the above idea, since participants indicated that they had never talked to their parents about sexuality or sex (see Chapter Four), and instead were introduced to the practice of virginity testing. What is emphasised in the virginity testing is only abstinence; young women are not encouraged to have sex with men, and that is why contraceptives are discouraged. Some black South African communities especially from the province of KwaZulu-Natal and some parts in the Eastern Cape, virginity testing becomes a form of contraception for their daughters; the parents still strongly believe that by maintaining this cultural practice their daughters are protected from falling pregnant and from contracting HIV and AIDS (Macleod & Tracey, 2010). However, there are reports from media that some young women cheat on the virginity test or bribe the virginity tester, these communities still see the virginity test as the possible way to change the behaviour of their daughters (Wickström, 2010). Although the total rate of fertility in SA is much lower than in other sub-Saharan region of Africa, the number of teenagers who are becoming parents is high and remains a concern (Mkhwanazi, 2010).

Grant and Hallman (2006) assert that the numbers of teenagers who are becoming pregnant in SA indicate that one out of five 18-year-old women has given birth. The high rate of teenage pregnancy, however, indicates that whatever these communities thought they are going to achieve through the virginity test does not work. Leclerc-Madlala (2002) posits that young women who attend virginity testing become vulnerable to sexual violence, as older men who are afraid of contracting HIV and AIDS prefer having sex with virgins. The virginity test does not arm young women enough to handle sexual coercion from men, as the emphasis is only on abstinence. Thus, the teenage pregnancy has also become a threat in the fight against the HIV and AIDS pandemic. The high rate of pregnancy among the teenagers provides evidence that in spite of the number of HIV and AIDS intervention programmes, the youth do not heed the call to practice safe sexual behaviour (Harrison, Xaba & Kunene, 2001).

Qualitative research has shown that there are strong social and cultural forces that shape teenage sexual behaviour and help to explain why intervention programmes against HIV and AIDS are often not enough to change the sexual behaviour of young people in order to reduce the prevalence among them, especially the young women. In particular, such work helps us to understand why some HIV prevention programmes have been ineffective, and how they might be improved.

### **2.2.1 Use of contraceptives and TOP**

Studies indicate that many teenagers have little knowledge about utilisation of contraceptives, for example, they mostly know about use of condoms as there has been more emphasis on HIV prevention to the detriment of contraceptive services (Ehlers, 2003; MacPhail et al., 2007). However, the problem with the use of male condoms links to gender power dynamics as it is heavily reliant on the boyfriend's compliance – which exacerbates the vulnerability of young women to pregnancy and HIV and AIDS (Jewkes et al., 2010). Harrison et al. (2001) posit that looking at the social status of women, they are in a powerless position to men, and therefore emphasis on the use of condoms is inappropriate for women. The sexuality and fertility of women is controlled by men in African culture; they cannot exercise their choice on the use of contraceptives. On the other hand, the responsibility for pregnancy in many instances rests largely with the female (Morrell et al., 2009). For instance, teenage pregnancy is blamed on young women and why they do not use protection, while the men who impregnate them are free from blame.

In addition, as teenagers are still in their developmental stage, they are curious about everything in life and sexuality is among the things they want to know and learn about. Since their parents do not want to talk about sex, or talking about sex to their children is perceived as inappropriate, teenagers tend to listen to their friends about things pertaining to sex instead of talking to their parents. Their friends tell them that sex is best without the use of a condom, and then they want to try that (Harrison, 2008). Furthermore, a study by Ehlers (2003) of 250 young mothers found that 76% did not know about emergency contraception; a total of 55.6% of the sample knew about contraceptives, and 46.8% had used them before. Reasons cited for not using contraceptives included being ignorant, scared, scared of gaining weight, becoming infertile, or afraid to go to the clinic (Mkhwanazi, 2010). The young women in this study stated that they were using contraceptives (injectibles) and stopped because of health reasons.

Wood and Jewkes' (2006) findings echo those of Ehlers, in a study conducted in the Limpopo Province in SA, that young women are against the use of contraceptives because of the myth

that contraceptives are not good for their health and they destroy their chances of conceiving by ‘rotting the woman’s eggs’. In some cases young women are forbidden by their boyfriends to use contraceptives. Once a young woman gets a boyfriend, he assumes the dominant position in that he controls even the fertility of his girlfriend to a certain extent. This was evident in a study conducted by O’Sullivan et al., (2007) among 50 sexually active rural young men about their girlfriends and use of contraceptives; the boyfriends indicated that they decide whether their girlfriends should use contraceptives or not.

Previous studies indicated that there was high rate of denial of paternity for various reasons (Varga, 2003). However, in contrast Swart and Bhana (2009) reported in their findings that young fathers indicated pride in fathering a child, such that they wanted to be involved in the life of the child. The study further reported that in most cases young fathers reported that they were shocked and scared to find out that they had impregnated a young woman, but did not deny paternity (Swart & Bhana, 2009). In cases where the young men are not sure that they have fathered the baby, they wait until the baby is born in order to identify resemblance of the baby to him or his family. However, the young fathers acknowledge the challenges of being a young father, in that they are mostly not involved in bringing up their children or become absent from their children’s lives because of cultural and financial constraints. In some families, the young fathers are barred from seeing the baby if they have not yet paid *inhlawulo* or they are viewed as beneath the social standing of the young mother’s family (*ibid*, 2009). Furthermore, Morrell (2006) posits that African men generally view fathering a child with pride; as this symbolises sexual virility and promotes the status of a young man (Varga, 2003; Albertyn, 2003; Hunter, 2005; 2010; Wood & Jewkes, 2006). In most cases young women compromise their health status just because they want to please their boyfriends since they financially support them and young women are also afraid of being abandoned by their boyfriends (Varga & Makubalo, 1996; Wood & Jewkes, 1997). Either their boyfriends wanted to have a child as their peers already had children, or they did not want to use protection (i.e. condoms) when having sex.

The *Choice on Termination of Pregnancy Act of 1996* provides young people with the option of terminating early and unwanted pregnancies (Makiwane, 2008). Although it is commonly known that most of the pregnancies are unplanned, most teenagers do not opt for the TOP for

various reasons. A study by Ehlers (2003) and Harrison (2007) found that some pregnant young women had wanted to terminate their pregnancies but did not know how to go about it or had been unable to access abortion facilities. Some pregnant young women feared being stigmatised. Another factor is religious and cultural beliefs the young women have about choosing TOP.

Among African communities a child is always welcome, no matter how s/he is conceived, since reproduction is very important to supply agricultural labour (Hunter, 2005). Thus Mkhwanazi (2010) asserts that the TOP is rooted within particular cultural practices and among many Africans is considered to be a cultural violation. Moreover, the idea that fertility plays an important role in the construction of the identity of African women (Preston-Whyte, 1988) still plays a significant role in the construction of the identity of today's young women. This study found that participants did not choose TOP because of fear that they might be aborting the only child they could have, and a woman who cannot have a child is pitied, scorned and called names e.g. *inyumba* (barren). Having a child confirms a woman's identity. Reproduction is viewed as an important element of social respectability, indicating the ability to have a long-term relationship with the child's father and confirming femininity (Varga, 2003; De Villiers & Kekesi, 2004; *IRIN*, 2007, April 3). On the other hand, lacking enough information about TOP led to one of the participants waiting too long before she went to the health centre to inquire about it. She was informed that her pregnancy had progressed beyond 12 weeks and that she could no longer have a TOP.

### **2.2.2 Teenage pregnancy and gender violence**

SA is known as an extremely violent society and Inanda is one of the areas that is known about cases of violence. According to the Crime Report of 2010/2011 (South African Police Service, 2011) there were 66 196 reported cases of sexual offences, and the Inanda Police Station also recorded a high number of sexual offences (605) in the 2008/2009 report. The rate of rape in SA is 3.65 per 100 000, which is 10 times higher than that of the United States of America. Abrahams et al. (2008) and Moffett (2006) argue that rape/sexual violence in SA needs to be understood as predominantly an issue of patriarchal control and domination over women. Reza et al. (2009) in a survey of 1244 women and teenagers found a sexual abuse prevalence rate of 33.2% before the age of 18 years. The sexual abuse of teenagers was also

associated with lifetime reports of high incidences of sexually transmitted diseases (STDs) and unwanted pregnancies. Thus sexual violence/rape has an influence in the increase of teenage pregnancy and HIV and AIDS.

### **2.2.3 Older boyfriends**

Young women with much older boyfriends have been directly linked with the high rate of pregnancy and high incidences of HIV infection (Leclerc-Madlala, 2001, 2002; Hunter, 2002, 2010; Dunkle et al., 2007). Young women prefer having sexual relationships with older, working boyfriends in which money, gifts and food are exchanged for sex. Having sexual relationships with older men makes young women vulnerable to HIV and AIDS, since these older men have an extensive sexual history and might be infected with the virus. Moreover, the nature of transactional sex allows the young women a limited choice of negotiating about safe sex (Chadwick, 2010), so the young women end up being pregnant.

Although some women are driven to transactional sex because of poverty, using sex to acquire basic needs and food, others are motivated by the desire for commodities such as fashionable clothing, designer items and cell phones (Hunter, 2010; Bhana & Pattman, 2011). Most of the participants' relationships were dominated by older and working boyfriends, who financially provided them with whatever they could not get at home; for example, cell phones, spending money and clothing; they also took them out to the movies (Leclerc-Madlala, 2001, 2002; Hallman, 2005; Marston & King, 2006; Bhana & Pattman, 2011). Studies reveal that during dating and courtship between young people of similar age, exchanges of gifts are common and often expected (Kaufman & Stavrou, 2002). However, young women have started to commercialise sex, in that sexuality is conceptualised as a resource that can be drawn upon for material or economic advantage (Luke & Kurz, 2002).

The pregnant teenagers' relationships reflected complex gender power dynamics as the boyfriends were older than them by an average of six years, and they had financial standing (Shefer, 1999; Varga, 1997, 2003); therefore, the young women compromised their power to negotiate about sexual matters and the choice of using protection. The participants also felt

that they were obliged to please their boyfriends in return for the support they received. They were afraid to be left for other young women. They were desperate to keep their relationship with their boyfriends, because the boyfriends provided financially for them (pregnant teenagers). A sexual relationship with a man is a necessary requirement in their construct of womanhood (Leclerc-Madlala, 2002).

#### **2.2.4 Teenage pregnancy and payment of *inhlawulo* (damages)**

Research indicates that when a young woman in the African community gets pregnant out of wedlock, she is taken by her family to the family of the man who has impregnated her in order to formally acknowledge the paternity of the unborn child. If the man accepts the paternity, that means he assumes both the social and financial obligations for the child (Preston-Whyte & Zondi, 1992; Kaufman et al., 2001; Swartz & Bhana, 2009). The child's father has to pay the damages, '*inhlawulo*', as he has brought disgrace to the household; he must also contribute to the support of the child. The father is then socially responsible for the child. In some instances, after the payment of the 'damages' the child assumes her/his father's name and rituals are conducted to introduce the child to the father's ancestors. In some instances young men deny paternity because they do not want to assume the financial obligation because of being poor or unemployed (Varga, 2003; Mkhwanazi, 2007; Jewkes & Christofides, 2008). Denying paternity leads to the young woman's stigmatisation, humiliation and being insulted as if she has been sleeping around and does not know who the father of her child is.

It is not all of the fathers who could afford the payment of the 'damages', because of poverty and unemployment, therefore in some family they are not allowed to see or visit the child. Thus, non-payment of *inhlawulo* affects the teenage mother negatively as she cannot get support from the father in caring for the baby (Swartz & Bhana, 2009; Mkhwanazi, 2010).

## **2.3 Men and children**

African men view fathering as a matter of pride and evidence of masculinity. This does not necessarily mean that paternity will be formally accepted or responsibilities of fatherhood will be assumed when paternity is accepted; however, research suggests that many young men seek the opportunity to father a child (Morrell, 2006). Young women are always pressured by their boyfriends to prove their love, by letting their boyfriends make choices for them around issues of contraceptives and controlling the young women's fertility. Moreover, research has found that teenage women often report their partners forbidding them from using contraception and begging them to get pregnant to 'prove love' (Wood & Jewkes, 2001). Indeed, seeking a teenage pregnancy on a man's part appears to be one of a group of related practices that are indicative of a very gendered hierarchical ideal of masculinity, including having multiple partners, with payment for sex, controlling behaviour towards female partners (with violence if necessary) and alcohol abuse (Jewkes & Christofides, 2008). Some of the participants highlighted that they could not choose TOP as their boyfriends indicated that they wanted to have children.

## **2.4 Teenage pregnancy and young motherhood as a social problem**

Research on teenage pregnancy has identified early child-bearing as a social problem, since teenage pregnancy is constructed as a site of alarm, fear and scorn (Pillow, 2004) because it brings about shame within the discourse of sexuality and the idea of childhood innocence (Murcott, 1980; Bhana, 2007; Mkhwanazi, 2010). This discourse leads to pregnant teenagers being stigmatised and marginalised as they are viewed as deviant and it is held that they may contaminate other innocent young women. The discourse of contamination is understood as a matter of social pollution, located at the intersection of ideologies of reproduction on one hand and of childhood on the other (Murcott, 1980). Murcott further adds that reproduction or conception is appropriate for grown up and married women. Teenage pregnancy is then viewed as deviance to the social order that it is only adults who must engage in sex. Even the teachers in schools do not know how to handle issues around teenage pregnancy, because they are within the premise that the teenagers are still children and are not supposed to engage in sex and end up being pregnant (Bhana et al., 2008; Pillow, 2004). Thus pregnant

teenagers are stigmatised, marginalised and ‘othered’ because of fear of contaminating the innocent ones since they have already transgressed the discourse of childhood innocence (Bhana, et al., 2008; Nkani & Bhana, 2010).

There is an association between teenage pregnancy and class or socio-economic status and educational level, because the highest level of teenage births occurs among the most socio-economically disadvantaged young women (Coley & Chase-Lansdale, 1998). Hence policy makers stigmatise teenage mothers as welfare dependants or scroungers on the State (Coleman & Dennison, 1998). Poor working-class teenage mothers become the target of marginalisation and stigmatisation because they do not follow the normative life trajectory of the middle-class (white) pattern of higher education, establishment of a career and then starting a family. This life trajectory of middle-class young women conforms to the current governmental objectives of economic growth through higher education and increasing female participation in the workplace (Wilson & Huntington, 2005).

South African studies categorised teenage pregnancy according to race and socio-economic status. There is a high prevalence of teenage pregnancy among Africans and coloured communities, who happen to be the majority of the poor and working class. It is argued that teenage pregnancies are usually unplanned (Macleod & Durrheim, 2003), which mostly leads to the young woman’s parents taking the full responsibility of taking care of the baby. As a result, the additional member puts a severe strain on the budget of the family (Jewkes et al., 2009). This could mean a struggle for food, clothing and health care for the baby, and the CSG is unlikely to be enough.

## **2.5 Pregnancy/motherhood and schooling**

Teenage pregnancy is blamed for disruption of schooling, which is linked to low educational attainment and unemployment or low job opportunities, ultimately leading to poverty (Ehrlich & Vega-Matos, 2000; Letourneau, 2004). However, other studies argue that the age at which the pregnancy occurs has little effect on social outcomes, but is largely dependent on race, class, ethnic background and income level, disadvantage or lack of opportunities even before the pregnancy (Bissell, 2000; Geronimus, 1991). In addition, Davies et al., (1996), as cited by Coleman and Dennison (1998, p. 308) argue that many pregnant teenagers and



school-going teenage mothers lose out because of limited resources, rigid policies, or outright prejudice against teenage parenthood.

In SA the high prevalence of teenage pregnancy and parenting has been one of the major hindrances to the educational attainment of young women, and becomes a serious threat to gender parity in education (Panday et al., 2009). Recent research has shown that by the age of 18, more than 30% of teenagers have given birth at least once (Mahy & Gupta, 2002; NRC-IOM, 2005). Chigona and Chetty (2007) argue that four out of 10 girls become pregnant at least once before the age of 20. Pregnancy and childbearing are among the most serious causes of school disruption, especially in secondary school, and pose risks for educational success among female learners (Grant & Hallman, 2006). Education is important for these female learners in order for them to break the poverty circle in which most of them are trapped, and the SASA provides a legal imperative that ensures that pregnant teenagers remain in school and are permitted to re-enter after giving birth (Bhana et al., 2008; Bhana et al., 2010). According to the Bill of Rights of SA, everybody has the right to basic education and it is improper to deny young mothers from continuing their schooling if they are ready to do so (Kaufman, 2001). The DoE provides only a legal imperative that ensures that pregnant teenagers remain in school and are permitted to re-enter after childbirth, besides the controversial policy of the DoE (2007), the *Measurement on the Prevention and Management of Learner Pregnancy*, which gives a directive that no young mother should be allowed school re-entry before the end of two years after giving birth and that no learner should be readmitted in the same year that she has given birth. This policy is in contradiction to the Constitution of SA Africa as it impinges on the rights of young mothers.

Moreover, studies assert that the social and cultural environment surrounding school brings challenges to the access and success of young mothers (Mkhwanazi, 2010). Moreover, literature on teenage pregnancy and teenage motherhood in schools suggests that pregnancy is situated within the domain of sexual shame and stigma (Bhana et al., 2008, 2010), and pregnant learners and young mothers are viewed through the discourse of contamination through which gender inequalities are reproduced (Nkani & Bhana, 2010). Therefore the majority of pregnant teenagers and young mothers experience many challenges in school because they are mostly being marginalised and discriminated against by their teachers and

are perceived as contributing towards the failure rate (Nkani & Bhana, 2010). Most of the teachers are not ready to give any support as they uphold a moral discourse towards teenage pregnancy. However, support from teachers can increase the life chances and economic prospects of pregnant teenagers and young mothers (see Chigona & Chetty, 2007, 2008; Panday et al., 2009; Bhana et al., 2008, 2010).

The subject of teenage pregnancy is gendered, since parenthood has a disproportionate impact on young women and involves a change in femininity. Post-birth, usually the baby is looked after by the mother and most of the time the baby's father is only expected to provide financial support (if he is working). This could have a huge impact on the young mother's lifestyle and development, which is linked to gender-based inequities. Taking into consideration changes in the family life and structure of people living in informal settlements, a young mother who is a primary caregiver to her baby is more likely to drop-out from school than the one who shares childcare responsibilities with her family. Most teenage mothers face challenges of taking care of their babies, since some of their mothers stay at their workplace and some teenage mothers live in child-headed families. This may lead to a lot of educational disruption and initiates a trajectory of lifetime poverty for the teenage mother and her child (Grant & Hallman, 2006; Varga, 2003; de Visser & le Roux, 1996). They find themselves facing challenges of not having someone within the family to look after the baby or money to pay for the day-care of the baby while they are at school. Thus teenage motherhood is gendered and becomes a contributory factor to the pregnant teenagers and teenage mothers dropping out of school (Crouch, 2005; Jewkes et al., 2009).

With the SASA stating that teenage mothers should be allowed school re-entry after giving birth and not be discriminated against (Bhana et al., 2010), there is an indication that they are not given adequate support to balance both motherhood and schooling. Chigona and Chetty (2008) state that even though teenagers who become mothers before completing school consider academic qualifications to be very important, they may not be able to succeed academically if the support they need both at home and at school is insufficient. On readmission into schools teenage mothers endure misunderstandings and pressure instead of the support required (Chigona & Chetty, 2007). The data corroborate the above reports that the teenage mother receives negative attitudes and uneven support from the teachers. Lack of

teacher support may impede teenage mothers' ability to succeed, thus condemning them to the vicious circle of unemployment and poverty (Macleod, 2004). On the other hand, the teenage mothers themselves conform to the perception that they are morally shameful by feeling embarrassed to talk to their teachers about challenges they face. Mkhwanazi (2010)'s findings confirm that is often perceived negatively among parents, while peers laughed at pregnant teenagers and the pregnant teenagers themselves feel ashamed of their circumstances.

Most international research on teenage pregnancy has previously identified early child-bearing as a social problem which is an association between teenage pregnancy and class or socio-economic status and educational level because the highest level of teenage births occurs among the most socio-economically disadvantaged young women (Coley & Chase-Lansdale, 1998). Hence the policy makers stigmatise teenage mothers as welfare dependants or scroungers on the State (Coleman & Dennison, 1998). Poor working-class teenage mothers become the target of marginalisation and stigmatisation because they do not follow the normative life trajectory of the middle-class (white) pattern of higher education, establishment of a career and then starting a family. This life trajectory of middle-class young women conforms to the current governmental objectives of economic growth through higher education and increased female participation in the workplace (Wilson & Huntington, 2005).

In addition, the socio-economic status of a young mother has an influence on her success in school. Young mothers from low economic backgrounds suffer more than those from the middle class because they also do not get support from their parents, who might have dropped out of school below the level of education of their daughters or working very hard to have time to support their daughters in their school work. Furthermore, parents from the working class mostly cannot afford hired help and the baby is exclusively taken-care by the young mother. On the other hand, young mothers from the middle class receive a lot of support from their parents, which could be financial, academic and emotional. Bhana et al. (2010) confirm that most young mothers from the middle class have limited disruption in their schooling since their parents can afford hired help for the young mother so that she can dedicate her time to her school work. Research also views teenage pregnancy negatively as it becomes an obstacle to a young mother's completion of schooling and finding a well-paying job (Mkhwanazi 2007, 2010; Crouch, 2005). Statistics South Africa reported pregnancy as

the main reason for 71 000 young women not attending educational institutions in 2006 (Lehohla, 2007).

A major factor in the school re-entry of young mothers is availability of someone to look after the baby while the learner mother is at school, or to give financial support so that the baby can attend a crèche. For some of young mothers giving birth can also mean dropping out of school due to lack of social support, especially if the teenager mother does not co-reside with an adult female (Macleod & Tracey, 2009). Crouch (2005), researching the dropout phenomenon in SA, argued that about 13% of females reported pregnancy as the reason for dropping out of school. In this study, nine out of 10 participants re-entered school after giving birth, and one teenage mother dropped out of school because she is an orphan, did not receive financial help from the baby's father, and had not yet received the CSG because of delayed application for an identity document. The study conducted by Masuku (1998) revealed that most pregnant teenagers drop out of school not because they are expelled, but because of being marginalised by other learners, especially boys, who think that these young mothers are supposed to stay at home and look after their babies. This leads to delay in their educational attainment. Eloundou-Enyégué (2004) found that although pregnancy is not the source of drop-out for all young women in Cameroon, it is the greatest contributor to the gap in educational attainment, particularly at secondary level.

## **2.6 The child and the father's care**

Teenage mothers' understanding of motherhood is influenced by the social belief that as the mother who has given birth to the baby, it is the mother's responsibility to ensure the day-to-day care for the child; they see the support of the baby's father only in terms of being a financial provider. Men who fathered the children of teenage mothers are mostly depicted as absent fathers who do not take part in the life of their children. However, Hunter (2010) asserts that young fathers are prevented by unemployment from fulfilling their social role of being providers for their families. Young fathers believe that childcare is the responsibility of womenfolk. Their responsibility is to support the young mother financially. Young fathers are mostly provide financially (whenever they can afford) for the child, and some try to minimise

the disruption of schooling of the young mothers owing to their motherhood responsibilities by taking the child to their family (Mcambi, 2010).

Usually the young men provide the material support, which is what they think is expected of them, as Dover (2001) argues that in many parts of Africa a man commands respect when he is able to provide for and maintain his household. Young mothers (as this study will show) indicated that the baby's father provides financial support whenever he can, since most fathers were temporary employed. Although the young father does not take part in caring for the baby, he sometimes relieves the young mother by taking the child to his mother or his female siblings. Barker (2009) states that social class and educational attainment have an influence in the man's participation in his child's care giving, and further argues that low-income men spend less time with their children than middle-class men. Furthermore, since they are not staying with the young mother, the young men find it difficult to support the young mother in taking care of the child. A contributing factor is the high rate of unemployment, since in the African culture when a man impregnates a woman he has to pay damages (*inhlawulo*). If the young man is not employed it becomes difficult for him to pay for the damages, and in some families he is barred from taking part in the life of the child until he does so. The young mothers indicated that the baby's father is not allowed to see his child until he pays for the damages.

## **2.7 The young mother's perception of motherhood**

Some international studies argue that teenage pregnancy may be more of an opportunity for young women than a catastrophe, as childbearing provokes positive life changes for most teenage mothers, whereby their self-esteem improved, e.g. getting off drugs and alcohol (Arenson, 1994). Duncan (2007) argues that many teenage mothers describe how motherhood makes them feel stronger and marks a change for the better. In addition, most teen mothers get support from their babies' fathers as the fathers also seek to remain connected with their children. For both partners, parenting seems to provide an impetus to take up education, training and employment to be able to provide for the baby. In the South African context, most of the children born to young mothers are brought up by their mothers in the absence of their fathers (Mkhwanazi, 2007). Young mothers indicated that although they did not plan the

pregnancy, motherhood had brought positive change to them. They are more responsible than they were before they got pregnant. They listen to and respect their mothers and try by all means to support them in doing the household chores. The young mothers are more serious about their school work and work hard to pass in order to get good qualifications for better job opportunities.

When looking at motherhood there are numbers of factors which have to be considered such as context, historical factor, race/ethnicity, cultural factor and age (Katz-Rothman, 2000), because all these factors contribute towards multiple perspectives of motherhood. According to the Western perspective, early pregnancy is associated with young women's poor educational attainment or a lack of engagement with education. Therefore this understanding means that young mothers missed educational and career opportunities and teenage motherhood is constructed as a limiting condition on the young mothers appropriately participating in an economic society (Cherrington & Breheny 2007). The only trajectory on offer for the pregnant teenagers is parenting. Haelyon (2006) reported that amongst young women she studied that motherhood is perceived as the passage to adulthood and it affirms womanhood as pregnant teenagers mostly leave school and could move out of their parents' household. The young mothers could cohabit with the child's father and bring up their children without the help of their parents. In this case the young mother gains her independence from her parents and could either forms family even before marriage. For instance in developed countries like USA and UK, young mothers can have an access into social or council housing where they live in their own or cohabit with the child's father (Arai, 2009). However among the African communities it does not matter how much the pregnant teenager's parents are angry and disappointed when they discover that their daughter is pregnant, once the baby is born it is embraced by the family, assumes the name of the family and is provided for financially by the young mother's family (Jewkes et al., 2009; Preston-Whyte, 1992). The young mother's position in the family does not change. For a young African woman begetting a child is not a passage to adulthood. Traditionally, African societies were strongly hierarchical and distinguished between young and old, junior and senior and the homesteads were led by senior male (*umnumzana*) of the house. The social hierarchies were embodied by the acts of respect that were maintained, typically from the young to old (Hunter, 2010). It was only when the young men could become a migrant workers in order to accumulate enough to pay *lobolo* and got married could establish their own homestead that they gain their independence of their parents. Same thing applied to

young women, *lobolo* had to be paid first so she could get married and be regarded as an adult. Being pregnant out of wedlock, a young woman has transgressed and brought shame to the household and has to show humility and listen to her parents regardless of her experiences of motherhood. As long as the young mother lives in her parents' household and being supported by them she is still perceived as a young person. This view is reiterated by Macleod (2001) when she argues that South African studies present teenage pregnancy as power relations between parents who are expects and who always take dominant position because of their experiences with being parents.

Some researchers have noted that teenage childbearing has become institutionalised and is a “fairly typical stage in the domestic lifecycle of families” (Jewkes et al., 2001). It is argued that teenagers are encouraged to become pregnant by their partners and grandmothers (Richter 1996; Varga & Makubalo, 1996; Wood et al., 1997). Teenagers are also pressured by their peers that if they do not get pregnant they are going to get the reputation that they are infertile (Preston-Whyte, 1992), which will tarnish their identity as women. Therefore some young women often welcome pregnancy for various reasons; for example, because it affirms their femininity and inducts them into womanhood. Pregnancy also increases the chances of marriage or having a long-term relationship with the father of the child (Varga, 2003; De Villiers & Kekesi, 2004; *IRIN*, 2007, April 3). In addition, Leclerc-Madlala's (2001) study of university students indicates that having a steady relationship with a boyfriend and being able to keep it is vital among young women, since that defines their identity. However, Varga (2003, p. 165) argues that nowadays adolescents acknowledge the importance of remaining at school in order to get a good education for job opportunities:

although motherhood or proof of fertility at some stage in life was paramount, in the context of adolescence it was viewed as a major setback and associated with school disruption, economic strain, limited job prospects, emotional stress, and even a social stigma

In this sense, nowadays proving fertility competes with economic opportunities and ultimately independence from dominant men.

## **2.8 Transition from childhood to adulthood and changing perceptions of femininity**

The teenager's parents become very disappointed and angry when she becomes pregnant. However, when the young woman gives birth, her mother or an older female kin steps in to help the young mother for an easy transition to motherhood (Mkhwanazi, 2010). In the African community, after childbirth a new mother only comes into contact with female relatives as she observes a seclusion period for about a month or until the stump of the umbilical cord has fallen off. In former times it was believed that coming into contact with a woman who had just given birth would weaken men; even the baby's father would wait for a month before he saw his baby. Thus the seclusion period was observed in order to protect men from getting weak (Brindley, 1982; Magubane, 1998; Mullick, Kunene & Wanjiru, 2005). Later on the seclusion period was mainly observed for the health of both mother and baby. Even today the seclusion period is still widely observed by many Africans, although the period is little shorter than previously (Mkhwanazi, 2010). About 80% of the participants in this study observed the practice for about two weeks. During the seclusion period the new mother learns from her mother or female relatives how to take care of the baby. Furthermore, Mkhwanazi (2010) asserts that this period provides a chance for the mother to impart cultural values of motherhood to her daughter.

## **2.9 Changes in the life of a pregnant teenager and a young mother**

The birth of a child could bring about dramatic changes in the life of a teenage mother. Research suggests that most pregnant learners are marginalised and a teenage mother loses friends because her peers do not want to be associated with her or she is busy taking care of the baby. Therefore in most cases, pregnant teenagers or young mothers experience loneliness. During pregnancy, they mostly hide from the public because of shame and after giving birth their time is occupied by caring for the baby. They either very busy taking care of the baby or they have lost friends because of pregnancy. This is confirmed by Mcambi (2010)'s study of young mothers that the young mothers indicated that they lost friends due to pregnancy and their friends' parents discourage their daughters to associate themselves with a pregnant teenager or a young mother.



Studies in SA (Panday et al., 2009; Chigona & Chetty, 2008) indicate that the high prevalence of teenage pregnancy and early motherhood has been one of the major hindrances to the educational attainment of young women, since most of these young mothers are the primary caregivers. According to Grant and Hallman (2006) one out of five 18-year-old women have given birth, and cases of pregnancies in school reported by media are alarming, even though overall the national rate is falling. These numbers of teenage mothers require policy development that will provide financial support to young mothers in school for childcare, so that they can complete their schooling for better job opportunities.

Most of the teenage mothers are caught in the dilemma of a double burden: caring for an infant without adequate assistance from fathers and insufficient support from the education system to improve their academic qualifications.

## **2.10 Body image**

Young women mostly construct their gender identity within the premise of heterosexuality. Being in a relationship with a man is paramount in their life, as it affirms their femininity and they also have pressure to maintain the relationship (Luttrell, 2003). They also have pressure from society and the media to look a certain way. Physical changes presented by pregnancy and giving birth leads to body image dissatisfaction. Research has focussed on several aspects of female sexuality, including how body image affects sexuality. Most pregnant women or mothers reported dissatisfaction with physical changes in their body, for instance having a big tummy and stretch marks makes them see themselves as no longer beautiful (Cash, Maikkula & Yamamiya, 2004; Gillen, Letkowitz & Shearer, 2006). Beauty and style (clothing) means a lot to the construction of who they are and how they are seen by others in the community and their boyfriends (Luttrell, 2003; Weedon, 2004).

The above is reiterated by the findings in this study, where the participants saw themselves as no longer appealing to their boyfriends because of changes in their body. In addition, since

the boyfriends' sexual relationships are characterised by multiple partners, the participants were worried that their boyfriends would find other girlfriends with a 'beautiful' body. Furthermore, out of ten participants, only two continued with breastfeeding by the end of data collection, eight having stopped breastfeeding mostly because of teasing for having leaking and big breasts.

## **2.11 Conclusion**

This chapter outlined research conducted internationally and nationally on teenage sexuality, pregnancy and motherhood. It is highlighted that when investigating the experiences and constructions of pregnant teenagers and teenage mothers there are contextual, social and cultural factors which need to be taken into consideration. According to social science literature young women from a disadvantaged background face many challenges of balancing mothering and schooling. The young women's experiences have been investigated through the lens of social constructionist theory guided by feminist inquiry.

The scholarship draws on the literature around discourses on teenage pregnancy and teenage motherhood. The chapter has highlighted the fact that globally teenage pregnancy is perceived as a social problem and South African studies on this phenomenon mirror to a large extent those in developed countries. However in SA the exploration of teenage pregnancy is according to racial groups emanating from apartheid racial classification, whereby most research is conducted amongst the African teenagers. The explanations for the occurrence of teenage pregnancy amongst Africans are socio-cultural in nature. A concern about teenage pregnancy is that it disrupts schooling of young women or cause school dropout which leads to the perpetuation of poverty caused by not fully participating in the production of economy. The pregnant teenager or teenage mother is depicted as pathological because of her immaturity and economic dependency. Furthermore, teenage pregnancy is explored within the context of HIV and AIDS, as teenage pregnancy is a threat to the attempts to combat HIV and AIDS. Literature was reviewed on how social and cultural factors influence the prevalence of teenage pregnancy, including the sexuality of young women and the kind of

power dynamics in their relationships with their boyfriends, and how boyfriends respond on the use of contraceptives, also looking at young mothers' choices in their fertility. The chapter sketched the debate that teenage pregnancy brings about gender inequality, as taking care of the baby is the burden of the teenage mother and her family. It further explored how the teachers support the young mothers in making sure that they receive minimal school disruptions in order to realise equal educational opportunities for better employment prospects.

Research on teenage pregnancy and teenage motherhood suggests that although the policy of the DoE states that no learner should be barred from attending school because of pregnancy, when the young mothers re-enter school they face challenges and a lack of support from the teachers. Teachers have negative attitudes towards pregnant teenagers and young mothers. These learners need a lot of support from the teachers in order to succeed in their endeavour to acquire education. The literature also highlights that teenage mothers from lower working-class communities face more challenges than young mothers from the middle class, who get more support from their family since they can afford to employ somebody to look after the baby and the young mother can then concentrate on her school work.

In the next chapter I describe the methodological process of ethnography which was used in the collection of data for this study.

## **Chapter Three: Methodology**

### **3.1 Introduction**

In this chapter the methodological focus used in examining the experiences and constructions of pregnant teenagers and teenage mothers in a secondary school in Inanda, Durban is outlined. This study sought to understand the meanings and interpretations that the pregnant teenagers and teenage mothers in school give to their experiences. As such it required approaches that not only allowed inclusion of the young women's voices, but were also sensitive to the discursive spaces in which this meaning was constructed and mediated. Therefore, in exploring these young women's experiences in school the social constructionist approach offered me the ability to acknowledge and value the participants' voices and how they make sense of their experiences.

This chapter outlines the methodological orientation, context of the study, sample, methods of data collection, process of data analysis as well as ethical considerations that were taken into account.

The social constructionists argue that the proper focus of our enquiry into social practice should be people and their interactions with one another. It is through the daily interactions between people in the course of social life that our versions of knowledge become fabricated (Burr, 1995, p. 4). It is interactive processes that take place routinely between people that gives us explanations. In addition, Grbich (2007) asserts that the social constructivist research paradigm aims to explore how people interpret and make sense of their experiences. Thus knowledge is contextual and depends on social, cultural and class factors of the individual human being. Contemporary forms of social constructionist turn to the language through which meanings are made, and that there are no identities or essences like male or female only world and a category which language produces and forges.

Burr (1995) posits that social constructionists focus on discourse theory as the language takes the centre stage, and that there are no pre-existing structures which determine patterns of

behaviour, only language through which we breathe life into ourselves and produce our very identities. The social constructionist approach allows this study to observe the pregnant teenagers and teenage mothers as actively constructing meaning to their experiences given the linguistic and cultural resources available to them. They are not simply the products of their culture, but negotiate their cultural or social lives. This idea was very useful to explore how young women used the resources available to them while at the same time being constrained by broader material forces, for example, social, cultural, racial and economic circumstances. For example, the social constructs of race, class, and gender intersect to impact on the experiences of the young mothers (Kruger, 2006).

In exploring gendered experiences of school-going teenage mothers, social constructionists would emphasise that these experiences are always historically and socially located in discourse and in principle open to change. In every discourse, subject positions are made available to us, and those subject positions that we take up ultimately affect and determine our constructions. In speaking and acting from a certain position, the pregnant teenagers and young mothers bring their history as a subject to a particular situation. This is called subjectivity, which refers to our individual consciousness or perception about actions, events and ideas. Subjectivity is also defined as a way to describe our ways of knowing about ourselves in our world (MacNaughton, 2000). It describes who we are and how we understand ourselves consciously and unconsciously. Davies and Banks (1995, p. 46) further explain subjectivity by saying that:

By subjectivity we mean the particular ways in which a person gives meaning to themselves, others and the world. Subjectivity is largely the product of discursive networks, which organize and systematize social and cultural practices.

The social constructionist paradigm does not only consider the participant's constructions, it also acknowledges that the researchers' own lived experiences have influence on their interpretation of data gathered from research participants, so the researchers' subjectivity due to their own experiences contributes to the construction of research knowledge (Grbich, 2007).

Similarly, Wetherell and Edley (1999) contend that gender identities are enacted and embodied by practices that occur at the level of social discourse and subjective processes.

Edley and Wetherell (1997) argue that identities are plural and contextual. Through interacting with their families, boyfriends, teachers and peers, school-going teenage mothers constructed meaning of themselves as young women, taking into consideration their experiences both inside and outside the school, through the lens of social constructionist theory. As much as constructions are voluntarily developed, they may also be socially, culturally and institutionally assigned, as in the case of gender where social and cultural practices produce discourses within which gendered subjectivity is constituted (Weedon, 2004). Looking at teenage pregnancy, it is highly gendered as it is socially blamed on women, either the mother of the pregnant teenager for failing to bring up her daughter according to the socially acceptable way (Mkhwanazi, 2010) or the pregnant teenager for having loose morals.

### **3.2 Context of the study**

The research site that is Khanya Secondary School (pseudonym) is situated in an informal settlement area in Inanda. Inanda constitutes one of the largest conglomerations of low-income residential areas in the whole of SA. Its closest boundary is over 20 km from the city centre of Durban (Evarett and Smith, 2008). In the early part of the nineteenth century the area known as Inanda had limited settlement, and the most important group of people living in the area at the time were the Qadi people and their chief Mkhwene (Hughes, 1987). In the 1830s three farms were carved in the area for sugar estates (the Piesangs Rivier, Groeneberg and Riet Rivier) by the short period of the Boer Republic in Natal (Natalia Republic). Inanda location, which shared its borders with the three farms and the stretch of Colony between the location and the sea, was known as the Inanda Division of Victoria County and was gazetted as the Inanda Location in 1847 (*ibid*, 1987). The south-eastern edge of the Inanda location was given over to the American Board Church as a mission reserve. It was occupied by Reverend Daniel Lindley, who became the first missionary to come and live among the people of the Inanda area in 1857. Inanda Mission was established in the hope of converting many people to Christianity and Inanda Seminary was later established in 1869. After Lindley's departure the mission was handed over to one of the very first African ordained priests in Natal, Reverend James Dube, father of John Langalibalele Dube who was born and raised at the mission, later establishing the Ohlange Institution in 1901. He was elected as the first National President of the African National Congress when it was formed in 1912.

Hughes (1987) further suggests that many of the African settlers who had been farming in the area began to be displaced by Indian workers who had been indentured to the farms in the area upon their arrival in the Colony, and continued living and farming in Inanda after completing their indenture in the 1860s. By the 1870s all of the farms in the area were held by individual or company speculators rather than producers, and African people in the area experienced some changes whereby independent producers became tenants, paying cash as rent (Hughes, 2007). At first Indians became producers who were tenants, and later on became landowners; in the early 1900s they constituted about 52% of the population of Inanda. Therefore the land in Inanda was later distributed among the Africans, Indians and the missionaries.

The African landowners in the Inanda area outside of the mission land in the then Piesang Rivier farm area were the Matiwane family and Dube family (Dr J.L. Dube), and in 1910 the *Amanazareth* religion was established by Isaiah Shembe. The population of Indians was large enough to attract Mahatma Ghandi to establish Phoenix Settlement in 1904. The three farms were later set aside by the Colonial Government for exclusive occupation by the Africans, and were officially designated as 'Released Area 33' in 1936. Forced removals from other parts of Durban led to a gradual increase in settlement in Inanda. Later on there was a decline in agricultural productivity, and the landowners started leasing their land and buildings to tenants. According to Loftus and Lumsden (2006), landowners in Inanda changed from being agricultural farmers to being 'shack' farmers, and movement of people into the area and the demand for accommodation supported this. Also exacerbated dense population of the area was introduction of The Native (Urban Areas) Amendment Act of 1952, which controlled the influx measures and restricted the movement of people in urban areas such as Durban. Inanda continued to grow because of people who were displaced from other areas like Cato Manor.

The increasing demand for land led to the emergence of subletting, whereby existing tenants began to lease out portions of their land or dwellings to people moving into Inanda. This trend reduced the control of the legitimate landowners. Government viewed settlement taking

place in Inanda as illegal and temporary, and there was no development whatsoever in the area and also no local authority. As a result, growth was occurring without any formal infrastructure in place and lack of essential services such as water was becoming particularly problematic (Hughes, 1987).

In summary, the situation in Inanda at the end of 1984 was that it was densely populated and hazardous to health because of lack of infrastructure and cohesive formal administration (Hughes, 2007). In 1985 there were uprisings in parts of the city of Durban provoked by the murder of the United Democratic Front (UDF) activist Victoria Mxenge. In Inanda these uprisings took the form of intense clashes which appeared to be between the UDF and Inkatha militias (Loftus & Lumsden, 2006). However, many attacks were targeted at Indian landowners, with houses and businesses looted and burnt, and the vast majority of the Indian population of Inanda was driven out of the area, fleeing to Phoenix. Violent clashes continued between UDF and Inkatha supporters even after the Indian population had left the area.

After the political changes in the 1990s there were reforms that served to provide efforts to address the poor conditions and needs of the residents of Inanda, and the Natal Provincial Administration assumed administrative control of the area in 1992 (*ibid.*, 2006). The place continued to serve as a reception area for migrant workers from rural areas including people from other provinces in SA and neighbouring countries, for example, Lesotho and Swaziland, who seek employment in Durban, which is encouraged by the affordable lifestyle of the inhabitants. These migrant workers have two options for accommodation: they either rent a place to stay on monthly basis or acquire a piece of land from the land owners to build their own informal houses and pay some sort of a rent for the land every year. Growing of informal settlement in Inanda became the testimony that the majority of people find it difficult to secure formal housing (Hunter, 2010). The reason why the young mothers attending school mostly have the challenge of finding someone to look after the baby while at school was because their grandmothers or other family members are left behind in the rural areas.

The area has limited basic service infrastructure. Residents do not pay for water as they get water from communal taps beside the road using containers. There is no sewage system and



the community is still using the pit toilet system. In some households there is no electricity; they are still using paraffin stoves to cook. The high rate of unemployment is visible all over the place, as young people are always seen standing in groups on the street corners, at bus shelters or shops. Violence is the order of the day, with house burglary, mugging, stabbing, rape, sexual harassment and shooting common occurrences, and people being murdered on weekends. Female learners experience sexual coercion, so are always advised to walk in groups when going to school or on their way home. Sometimes violent actions take place within the school premises, with learners threatening to beat, stab or shoot other learners, since some of the male learners belong to gangs. The school has organised random searches for weapons with the nearest police station, because some learners carry weapons in school. Lately the school has experienced drug-related problems in addition to the existing challenges.

There are inadequate recreational facilities both in the school and the community. Although the school buildings are permanent structures the school is under-resourced, with an empty library structure and a computer room which started to be fully functioning in May 2011. The school falls under the 'non-paying school fee' category, and the feeding programme started in 2011. Outside the school gates there are households in various forms of construction. Few households are built from cement blocks and roofed with asbestos, corrugated iron or tiles. The area has largely informally built households made from mud with wattle and stones and roofed with corrugated iron. There are those households which are makeshift structures, having corrugated iron walls and roof. The majority of learners attending the school come from this most disadvantaged background, ravaged by social ills including poverty, high rates of unemployment and crime, drug abuse and a high prevalence of HIV and AIDS. Very few learners use public transport coming to or from school, most walk to school with some walking as far as 5 km each way.

According to Everatt and Smith (2008), the rate of unemployment in Inanda was 64.6% in 2008. They further assert that KwaZulu-Natal had the highest prevalence of HIV and AIDS, and Inanda node was one of the areas with the highest prevalence. In 2008 the adult HIV prevalence rate for the provinces ranged from 28% in Kwazulu-Natal (see Nicolay, 2008). The South African Department of Health (2010) estimated HIV prevalence among antenatal

attendees by province as 39.5% in KwaZulu-Natal in 2009. Many learners attending school in the area are orphans, some owing to HIV and AIDS; they are either raised by their grandparents, who survive on an old-age pension (R1010 per month in 2009) or living within child-headed families. A crime report for the Inanda Police Precinct from April to March 2008/2009 indicated a high prevalence of crime in the area; criminal cases recorded were as follow: murder 227, sexual crime 506 and assault with intent to inflict bodily harm 952. Inanda Police Station recorded 462 rape cases in the year 2006/07, ranking second highest in KwaZulu-Natal following KwaMashu (see South African Police Service, 2006/2007, p.248)

The school has a high rate of pregnant learners and this has been a pattern for the last 10 years. Providing statistics for the last four years, in 2007 Khanya recorded 32 out of 501 female learners becoming pregnant, 28/487 in 2008, 31/519 in 2009, and 27/530 in 2010. Gender inequalities caused by teenage pregnancy are largely found in the senior grades (Grades 11 and 12), with far fewer female than male learners. For example, in 2009 out of 129 learners in Grade 12, 54 were females, and in 2010 this figure was 58/131. While previously pregnancy was largely concentrated in the senior grades, for example, from Grade 10 upwards, lately the school has had pregnant learners even in Grade 8 (the first grade in secondary school). Most of the young women who get pregnant in Grade 8 have a second child before they complete Grade 12 (the last year of their schooling). The school abides by the SASA by allowing pregnant learners to remain in school and to re-enter after giving birth. However, there are no support structures available for pregnant learners who also become young mothers, except for support from few individual teachers who are sensitive to the needs of these learners and acknowledge the aspirations of gender equality.

Khanya Secondary School was established in 1992 and used temporary structures for 16 years. It was moved to the permanent structures in 2008. The population of the school was 1010 in 2008, of which 487 were female and 524 male learners. The staff complement of the school was 42, of which 27 were female and 15 male teachers. The reason for choosing this school was that I had been working as a teacher in the school for 19 years, and my observations suggested that the level of teenage pregnancy there was high. In addition, I had chosen the school because of its convenience. The young women in the area face many challenges that are exacerbated by their low socio-economic status, the high rate of

unemployment in the area and extreme poverty. The majority of the young women lack the support of their parents because most of their mothers are domestic workers who either live at their workplace and come back home on weekends or month ends, or leave home very early and come back very late. These young women become responsible for the household chores and taking care of their siblings; they therefore have very little or no time for their schoolwork. Some teenage mothers come from child-headed families and are unable to call on the support of their mothers or grandmothers to look after their babies. Without familial support some teenage mothers do not perform well or complete their high school education. The school managers therefore have to be sensitive to the challenges faced by the pregnant teenagers/teenage mothers, in order to make sure that they complete their schooling.

In order to provide an overview of the wider context within which teenage pregnancy in the area occurs, the preliminary investigation of recorded number of pregnant teenagers was conducted in the three secondary schools (Khanya, Bheka and Isolezwe) within a radius of 18 km in Inanda. The findings of the preliminary investigation were published in 2010 (see Nkani & Bhana, 2010).

### **3.3 Methodology**

Methodology enables the researcher to describe the process and the product of enquiry in a systematic manner (Cohen, Marion & Morrison, 2000). In order to study the experiences and constructions of pregnant teenagers and young mothers, a close, focused examination through observation, individual interviews and focus groups was necessary. Ethnography was the methodology deployed in navigating the lives of the pregnant learners and teenage mothers. Ethnographic inquiry afforded me the opportunity to navigate through the lives of schooling young women from pregnancy and post-birth. I observed and interacted with them through interviews for an extended period of time in their natural environment (Hammersley & Atkinson, 2003; Fetterman, 1998; Pole & Morrison, 2003). I chose this methodology because it afforded me to get a deeper understanding of the experiences of pregnant teenagers and teenage mothers in school whereby I spent long time with the participants through observations and interviews. Observation of the participants' interaction with other learners and educators were conducted. Johnson (2000, p. 111) defines ethnography as “a descriptive

account of social life and culture in a particular social system, based on detailed observations of what people actually do". Ethnographic inquiry afforded the researcher the opportunity to observe and interact for an extended period of time, in their natural environment, through interviews with the schoolgirls at the stage of pregnancy and after the birth (Hammersley & Atkinson, 1995, 2007; Fetterman, 1998). Through ethnographic research this study also tapped into everyday meanings that young women made in negotiating their lives as pregnant teenagers, as parents, as learners, from their point of view; their voices were heard through their narratives and from the field notes taken during observations. Although Gobo (2008) argues that the ethnographic methodology gives priority to observation as its primary source of information, ethnographies also provide the researcher with an important window into understanding the social world from the vantage point of those residing in it. Ethnographies also provide the reader with an in-depth understanding of the goings-on of those who inhabit a range of naturally occurring settings (Hesser-Biber & Leavy, 2011:222). The nuanced meanings that the young women gave to their lives were explored through detailed overviews of the experiences and constructions of pregnant teenage learners and young mothers in Khanya Secondary in Inanda, their backgrounds and the kind of support they received from their families, boyfriends, peers and teachers.

This study took just over one year, from October 2008 to November 2009. The ethnography is located within the framework of a qualitative inquiry. Qualitative research allows a researcher to "explore a wide array of dimensions of the social world, including the texture and weave of everyday life, the understandings, experiences and imaginings of the research participants, the ways that social processes, institutions, discourses or relationships work, and the significance of the meanings that they generate" (Mason, 2002, p. 1). Through ethnography this study was able to tap into everyday meanings that the young women made in negotiating their lives as pregnant teenagers, as parents and as learners from their point of view. Their voices are heard through their narratives and from the field notes taken during observations.

Ethnographers do not see people as a neutral medium through which social forces operate. Instead, they hold that people create and define the social world through their interactions (Neuman, 2000). Time was spent with these young women in their school environment, from their last trimester to three or six months after the birth of the baby, interacting with them and

becoming a participant observer among them on how they were interacting with other learners, peers and teachers. The period spent with these young women before birth varied, because some joined the study with only one or two months to go before giving birth, while others had three months to go. At least four months were spent with all the young mothers after they had given birth. Ethnography afforded the opportunity of having several informal conversations with the young women in order to minimise the distance between me as the researcher (who was also an authoritative figure) and the participants.

My role shifted from that of an outsider to that of an insider during the time in the field (Hammersley & Atkinson, 2007; Guba & Lincoln, 1989). Through repeated interaction with the participants and through sharing my experiences of being a young mother from a similar background, trust was developed between me and the participants. They were able to see me as someone who was not judging them but who was ready to listen to their experiences, while showing an interest in their well-being. Health concerns were discussed and how the young mothers were coping with their schoolwork before the baby came and also about their babies after they were born. No matter how gloomy their lives, the sparkle in their eyes whenever they talked about their babies was evident. Most of the participants started to feel free to elicit advice or discuss challenges they faced without waiting for the interview sessions.

### **3.4 Sampling**

For qualitative research the ability to generalise the work to the whole research population is not a goal. Instead, a qualitative researcher seeks to describe or explain what is happening within a smaller group of people for in-depth investigation (Neuman, 2000; Dawson, 2002). In order to obtain the richest possible source of information to answer the research questions the sampling was purposive, because a small sample size of learners who were pregnant and also willing to participate was used. Purposive sampling allows the selection of available participants according to the purpose of the study (Cohen et al., 2000). In addition, Maree (2007) argues that purposive sampling decisions are not only restricted to the selection of participants but also involves the settings, incidents, events and activities to be included for data collection. The sampling was purposive because the study needed a small sample size of 10 pregnant learners aged between 16 and 19 years from about the third trimester stage of pregnancy until at least three months after giving birth. The number of participants was

chosen because it was manageable; the number of participants in qualitative research is not an important factor (van Rensburg, 1999). All the participants were selected from one school in the area, which was used for in-depth research. All the young women were African, isi-Zulu language speakers because the school in which the research work was conducted was monolingual.

After incidents where some pregnant learners nearly gave birth at school, Khanya Secondary School then introduced a teenage pregnancy policy. The school policy acknowledges that the pregnant learner have equal rights to education as with any other learner; however, it is not safe for the pregnant learners to remain at school up to the last day before giving birth because the school does not have a professional nurse and it is far from the clinic/hospital. The school authorities recommended that the learner should remain home for a few days before the estimated date of giving birth.

The pregnant learners are encouraged to talk to the LO teacher or their class teacher, especially at the stage when they are about to give birth, but some learners approach the LO teacher once they start showing that they are pregnant. After the learner has talked to the LO teacher or the class teacher, the learner's parents are then invited to the school by the senior management dealing with pregnant teenagers to discuss how both the school and the parents can best support the pregnant learner during the time of her absence from school. I happen to be appointed to deal with explaining the school policy to both the pregnant learner and her parents. On these meetings I discuss on how the learner receives her schoolwork during the period when she is about to give birth or after giving birth when she is not yet fit to come to school. I then used this opportunity to approach the pregnant learners to participate in the study. However it was not easy as not all pregnant learners follow this procedure. Some conceal their pregnancy up until they give birth and they are reported as being sick by their parents or their classmates.

Sampling was difficult at first, as I had to wait for three months before I found my first participant. Some of the learners only reported after they had already given birth. I also observed that the pregnant learners often tried to avoid being identified by the teachers by coming to school very early and remaining in their classrooms as much as they could, even during break time. These learners wore baggy clothes such as jerseys or tracksuit tops even

on hot days to avoid being identified as pregnant. As a member of the school management team I had the advantage of receiving information about a learner who was reported to be pregnant. After a long wait there was a pregnant learner who was reported by her father to her class teacher, and thereafter was sent to talk to me about the school policy. I took the opportunity of inviting her to be involved in the study, and she agreed. After few informal conversations with the first participant she started to open up and helped me a lot in getting other participants.

Learners obviously know about each other's pregnancies very early, but conceal this from the teachers. The first participant informed me about the other pregnant learners. I then approached them to be involved in the study; some refused to be involved and I respected their decision. It was not possible to begin research with 10 participants at the same time, since the learners did not all fall pregnant at the same time. At the end of October 2008 the process of data collection began with four participants. Two of the participants aged 16 and 17 years were seven months pregnant and in Grade 11. The other two participants were brought to the office by their class teachers; one had just turned 16, was in Grade 9 and was nine months pregnant, while the fourth participant was 18 years old, six months pregnant and also in Grade 11.

When the participants were approached it was explained that they were not obliged to agree to participate in the study, and they were given the chance to decide whether they were willing to participate or not. Providing them with enough time to decide made them feel that they were given the chance to exercise their choice. After the pregnant learners had agreed to take part in the study came the difficult task of gaining their trust. Informal conversations about their background, family and friends could not make them feel relaxed enough to talk about their personal lives. It was only after I had talked about my life as a young woman who was also brought up in Inanda from a disadvantaged background like them that they started to open up. I was brought up by my aunt (my mother's sister) after I lost both my parents. My aunt was living in an informal settlement area called Amaotana in Inanda, on a part previously known as Riet Rivier Farm. My aunt and her husband had five daughters and were the tenants of a Zulu family, renting a plot on which they had built a two-bedroomed house made from mud and stones with a corrugated iron roof. The only person who was formally

employed was my uncle, and my aunt was selling second-hand clothes in order to supplement his income.

As I have already mentioned, the area was not developed and had no form of infrastructure. We used to draw water from the nearby streams and used a paraffin stove to cook. After five years with the family my aunt lost her husband and our circumstances got worse. In order to make ends meet my aunt started to brew sorghum beer and selling both sorghum beer and second-hand clothes in order to support us. After completing Form III (Grade 10) I registered to study a Secretarial Course, but could not complete it because I fell pregnant and had to drop out to look for a job, which I found in a mail order company. When I found out that I was pregnant I panicked, thinking about how my aunt would react, and I tried to seek information about backstreet abortions from my friends, and failed. When I spotted an advert from an old *Ilanga* newspaper about the non-governmental organisation Birthright that I hoped I would get help to get rid of the pregnancy. When I arrived at their offices I was disappointed to find that they talked me out of abortion and promised to support me through my pregnancy until I could stand on my own two feet. The NGO helped by providing me with the maternity clothes which I had to take back after giving birth, and clothing for the baby from birth up to one year.

I did not experience that much marginalisation from the community because I successfully concealed the pregnancy since I was no longer wearing a school uniform. However, I experienced much disappointment and anger from my aunt. What made things worse was that my boyfriend only verbally acknowledged the child's paternity. My aunt stopped talking to me for a long time and could not eat meals that I had cooked. Even my cousins were scared to talk and laugh with me in her presence, but when the baby arrived they secretly supported me. Bringing up the child alone was very difficult as I was struggling financially. Although the baby had enough clothing, that was not enough as I needed money to buy formula. I struggled without my aunt's support and with little help from the child's father (whenever he felt that he had cash to spare). When I went back to work one of my neighbours helped me to look after the baby until he was seven months old. Thereafter I took him to my great-aunt in the Eastern Cape (Transkei) to look after him while I looked for a better-paying job in order to support him. It was after five months that I received the news that he had passed on when



he was one year old. Two years later I decided to go back to school in order to complete matriculation, even though I was much older than most of my classmates.

After sharing my story I gained the trust of the participants. On the other hand, they also took advantage of being involved in the study by expecting me to talk to the teachers on their behalf whenever they experienced challenges pertaining to pregnancy or taking care of the child. At first they avoided reporting to the teachers about anything pertaining either to the pregnancy or the baby whenever the baby was not feeling well. For example, when they were going to be absent to attend the antenatal clinic or were taking the baby to the doctor, they reported to me hoping that I would talk to their teachers on their behalf. I had to remind them about the procedure of the study – that whatever I discussed with them during interview sessions stayed between us. They still had to report their being absent to their respective class teachers.

Among the participants there were those who were more vocal than others and not inhibited to divulge information about teachers ridiculing them; others said less about the teachers and more about being marginalised by other learners and the challenges they faced as pregnant teenagers and learner mothers.

Before the data collection process I explained everything pertaining the interviews, that during school hours I would remain a member of staff like any other member, and that it was only during the interview session that I would be a researcher. By the end of data collection the participants used to make jokes about which hat was I wearing and could they talk to me as just a teacher or as a researcher.

I understand how power relations between myself as a deputy principal and the learners can impact on the research, but I had approached the research as a female and a mother who had been once a young mother from a similar disadvantaged background. I have insight into the struggles the schooling pregnant teenagers/young mothers face. Moreover I had continuously engaged in informal conversations in order to build trust with the participants and I

maintained confidentiality. One of my responsibilities is to manage the curriculum and I always interact with the parents of pregnant learners to arrange for a person who will be in charge of collecting schoolwork or submitting it for marking whenever the pregnant learner is away from school during the time of giving birth. These learners mostly stay away from school for about two weeks unless they have complications. I am also responsible for making sure that they have a smooth school re-entry, by arranging a meeting with their respective class teachers for catch-up programme if there are any missed lessons.

However, the interviews were delayed because of school disruptions caused by striking learners who were demanding to move to the newly built school. The school was completed in July but for technical reasons had not yet been handed over to the DoE. The classes were suspended before the September holidays and were resumed in October. The researcher could not start the interviews because the school community had to move to the new building; consequently she started working with the four participants in early November 2008. After one individual interview and a group interview, one of the participants who was in Grade 9 lost her child at birth and asked to be withdrawn from the study.

At the beginning it seemed that the sampling was going to be easy; however, it was soon discovered that most pregnant learners or their parents did not report the pregnancy. They concealed the pregnancy from the teachers, who often only learnt about the pregnancy after the birth of the infant. The first group of participants came to the rescue by referring me to other pregnant learners. In mid-November another learner, who was eight months pregnant, came forward. When she first came it was surprising to see that her uniform still fitted her; no one could see that she was pregnant. She was 16 years old and in Grade 10. Therefore by the end of the year there were only four participants.

At the beginning of 2009 a report was received that the fourth participant was no longer coming back to Khanya Secondary School because she had been sent to live with her grandmother in the rural area. Further pregnant learners were needed in 2009 in order for the study to research 10 participants. From February 2009 other participants gradually entered the programme, and by the end of May 2009 there were 10 participants, four of whom had

already given birth. Those who joined the study in 2009 were a 19-year-old learner who was 7 months pregnant and in Grade 12, and a 17-year-old who was doing Grade 11 and 7 months pregnant. The other participant was 18 years old, 7 months pregnant and in Grade 10. Lastly there were two participants who were both in Grade 9, and 16 years old; one was six months pregnant and the other 7 months pregnant. All the participants had given birth by the end of July. There were eight natural births, one who gave birth prematurely and one by caesarean section.

**Table 3.1: Participants' pregnancy record**

<b>Name</b>	<b>Age</b>	<b>Months of gestation upon entry</b>	<b>Birth</b>	<b>School re-entry</b>
Sthembile	17	07	Natural	–
Khulile	16	09	Natural	2 weeks and withdrew
Futhi	17	07	Natural	–
Hloniphile	19	08	Natural	–
Busi	16	08	Caesarean	1 month
Slindile	18	06	Natural	2 days
Buhle	18	07	Natural	2 weeks
Lindiwe	16	07	Natural	–
Simphiwe	18	07	Natural	Dropped out
Sihle	17	08	–	Relocated
Nelisiwe	16	08	Premature	1 month
Zanele	17	08	Natural	2 days

Mandy	18	08	Natural	1 week
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The periods for which the participants stayed away from school in order to give birth varied, except for four participants who did not lose out on lessons because they gave birth during the holidays. One participant gave birth during the December holidays, one during the Easter holidays and the last two during the winter holidays. Four young mothers stayed away from school for about one or two weeks, depending on various factors. Some stayed away from school after birth because they were observing the culture of exclusion of the new mother after giving birth. Others stayed away because of ill-health or the distance they had to walk to school. Two participants stayed away from school for a month since one had given birth by caesarean section and the other gave birth prematurely and had to remain in hospital for a month.

### 3.5 Biographies of the participants

A brief background of each participant is documented below so as to present an overview of their lives; real names are replaced with pseudonyms so as to maintain anonymity.

#### 3.5.1 Sthembile

Sthembile was 17 years old and was the youngest child, with two brothers and a sister (who was 25 years old and did not have a child). She had both parents who were receiving the old-age grant and her family was largely relying on the pension received by her parents because one of her brothers and her sister were unemployed. Her father came to school to report her pregnancy to her class teacher when she was 7 months pregnant and doing Grade 11 in 2008. She was being *lobola*(ed) by a 24-year-old young man who lived in Empangeni; he work in a

firm in Richard's Bay. He was her first boyfriend. Sthembile grew up taking part in virginity testing until 2007.

### **3.5.2 Khulile**

She had just turned 16 on 28 September 2008 and lived with her mother and stepfather. She was the eldest, having two brothers and a sister. She was 9 months pregnant and in Grade 9. Her mother was invited by the Life Orientation teacher to talk about her pregnancy. The baby's father was 21 years old and still at school doing Grade 11. They started the relationship when she was 14. He was her stepfather's half brother and used to have sleepovers at her home until her mother found out about the pregnancy. A month later the researcher received a letter from Khulile's mother. She reported that Khulile would only return to school two weeks later because of complications which arose when she gave birth to a baby boy, who survived only a day. When Khulile came back, she asked to be withdrawn from the study; she was at liberty to do so.

### **3.5.3 Futhi**

She was 17 years old in 2008, living with her mother, stepfather, and a sister who was older than she and had a four-year-old child. Futhi also had a brother, who was younger than her. In her family at first it was only her stepfather who was working. Her stepfather's income was supplemented by a CSG that was received by her mother for Futhi's brother who was 12 years old and the CSG received by her sister. A month after Futhi gave birth to her child, her mother found a job. Her mother worked as a domestic worker. The baby's father was 23 years old and was her second boyfriend. He was working casually. She was 7 months pregnant and in Grade 11 when she entered the study.

#### **3.5.4 Hloniphile**

She was 18 years old, did not have parents and lived with her boyfriend. She was 8 months pregnant with the second child from the same father. She had her first child when she was 15 years old and doing Grade 9 while living with her two uncles and a grandmother, who passed away in 2007. When she became pregnant for the second time her uncles could not let her stay at home. She then moved in with her boyfriend, who was permanently employed, and she was receiving the CSG for her older child. She was in Grade 11 in 2008.

In November the learners started to write examinations and only attended school on the days when they were going to write. Hloniphile told the researcher about her friend Busi who was pregnant and wanted to talk to her. After talking to Busi, the researcher included her as another participant.

#### **3.5.5 Busi**

She was 16 years old and in Grade 10. She lived in an extended family with her mother, two brothers, two aunts and three cousins. She was attending virginity testing and the reed dance. Her older brother was 21 years old and the younger brother was five years old. She was 8 months pregnant when she joined the study and her mother was working as a domestic worker and was also receiving the CSG. Busi and her mother were sleeping in a separate two-roomed building a few metres away from the main house. Busi was left with her younger brother one night when her mother attended a night vigil for a passed on relative. On that night she was raped by her relative (her mother's half-brother) who disappeared after the incident. The case was reported to the police but the perpetrator had not yet been found.

### **3.5.6 Sihle**

Sihle was 17 years old, living with her mother (working in a clothing factory) and sister who was 23, did not have a child and was unemployed. She also had two brothers younger than Sihle. Her father had been shot dead in 2005 when coming from work. She was living very close to the school and had repeated Grade 8 for three years because she was dropping out of school in the middle of the year and came back at the beginning of the year. In 2008 Sihle was doing Grade 9. Her mother's salary was supplemented by the CSG she received for Sihle's two younger brothers. She was 6 months pregnant and her boyfriend was 20 years old and was permanently employed. She did not come back to school in 2009.

At the beginning of 2009 the researcher was introduced to Slindile, Buhle, Lindiwe, Simphiwe, Zanele and Mandy by those who were already taking part in the study.

### **3.5.7 Slindile**

Slindile's mother had never married and came from KwaNongoma to look for work in Durban. She was renting a place with electricity in Inanda. Slindile later joined her from KwaNongoma in 2006 when she came to do Grade 8 at the research site (Khanya). She was 18 years old and living with her mother who was working as a domestic worker, and was an only child. She was 6 months pregnant and her boyfriend was 25 years old and working as a taxi driver. This was her second boyfriend and she was in Grade 12. When Slindile was nine months pregnant her grandmother came to Inanda to take care of her. One month after giving birth Slindile took her child to Ulundi where he was looked after by her boyfriend's mother.

### **3.5.8 Buhle**

She was 18 years old, living with her mother who had never married and her uncle, who were both unemployed. At first they were only being supported by her uncle who was receiving a disability grant, and after two months Buhle's mother got employment and worked three days a week as a domestic worker. The family lived in a four-roomed structure made of wattle and daub roofed with chipped pieces of asbestos, without electricity. Buhle was 7 months pregnant. Her boyfriend was 20 years old and working as a casual worker in one of the clothing factories in Verulam. She was in Grade 11.

### **3.5.9 Lindiwe**

She did not have both parents; she was taken care of by her brother and was 6 months pregnant. She was 16 years old, and had been attending virginity testing and the reed dance. She stopped once she had engaged in sexual intercourse with her boyfriend. Her boyfriend was 22 years old and was fully employed. He was her first boyfriend and she was in Grade 11. When Lindiwe realised that she was pregnant, she ran away from home to her grandmother's home and came back home after her boyfriend had paid *inhlawulo*.

### **3.5.10 Simphiwe**

Simphiwe was 18 years old, in Grade 10 and was 7 months pregnant. She had lost both parents. She lived with her five brothers who were older than her in a wattle and daub two-roomed house roofed with corrugated iron, without electricity. Her family relied on her eldest brother for survival because he was the only one who was permanently employed, in the long-distance trucking business. When Simphiwe was nine months pregnant she lost her eldest brother in road accident. After her brother's death the family struggled and Simphiwe could only have something to eat because she was responsible for cooking for the family. Her boyfriend was 24 years old and was casually employed at Spar.



### **3.5.11 Nelisiwe**

She was 16 years old and living in an extended family with her mother, grandparents, two uncles, aunt, five cousins and a younger sister. She was attending virginity testing and the reed dance. Her grandparents were responsible for the survival of the family through the old-age grant, because her uncles and aunt were unemployed and her mother was working as a domestic worker and receiving the CSG. She was doing Grade 9 and was 8 months pregnant. Her boyfriend was 22 years old and he was her first boyfriend. He was working casually as a garage attendant. After Nelisiwe gave birth she sometimes left her baby with her teenage cousin who also had a child, but had dropped out of school because of complications that she had while she was pregnant.

### **3.5.12 Zanele**

Zanele was 17 years old, had a sister who was 5 years older and also became a teenage mother at 18 and was unemployed. She also had a younger brother who was 10 years old. Zanele's mother had never been married and was working three days a week as a domestic worker and supplemented her salary with the CSG she received for her son and that was received by her older daughter. The family lived in a four-roomed structure made up of wattle and daub and roofed with corrugated iron. They had no electricity. Zanele was 8 months pregnant; her boyfriend was 23 years old and employed as a casual worker.

### **3.5.13 Mandy**

She was 18 years old and living both parents who were unemployed. Mandy had a younger sister. Her family was struggling for survival, depending on casual jobs they could get. When Mandy was doing Grade 9 she was given support by her class teacher once she noticed that she was wearing a tattered uniform, and she used to take her home during holidays to spend time with her family. The teachers supplied her with lunch, a uniform and all the necessary

school requirements. Mandy stopped spending holidays with the teacher's family after she got pregnant. Her boyfriend was 23 years old and was casually employed in one of the wholesalers in the area. She was in Grade 12 and was 8 months pregnant.

Nine participants had minor complications during pregnancy and there were not many interruptions to their school attendance, with the exception of Simphiwe. She was not coming to school regularly and complained about not being well. She tired easily and was therefore often absent from school. Out of the 10 young women eight had natural births, staying away from school for one to two weeks, depending on a number a of factors, for instance an episiotomy, duration of pain and the distance they walked to school. Some of the young mothers walked a distance of about 4 km to school. Nelisiwe gave birth at seven months (prematurely) and had to stay in hospital for a month in order to breastfeed her baby. She had the support of her friend who was also a classmate and her sister in Grade 12. Busi had a caesarean section; she also stayed home for a month. No matter how long they stayed home, they only received support from the teachers through marking of assignments collected either by their friends or their siblings. If no schoolwork was collected or submitted, these learners had to devise their own methods of how to make up the missed schoolwork.

Simphiwe gave birth in early June 2009 and disappeared from school at that stage. She did not write the June examinations and it was suggested that it would be a good idea for the researcher to continue working with her in order to learn about other reasons that force pregnant learners to leave school, even though the school sanctions the inclusion of pregnant teenagers and young mothers. I tried to get into contact with her using the cell phone number she gave. Eventually she was traced. She had moved in with her boyfriend in an area far from where she had lived. One day in July I was fortunate enough to meet her on the way from school; she agreed to be interviewed. At the first appointment she was not there; a young woman from next door reported that Simphiwe had gone to her baby's father. She told me that she could not contact her telephonically as Simphiwe had lost her cell phone. Having waited for 1 hour 20 minutes, feeling dejected I left after giving a message that I would arrange another appointment. Ultimately an appointment was made for 29 July 2009; her baby was about to be two months old. On arrival at her home on the day of the appointment I found the door closed. I wondered whether anyone was home, when I knocked on the door until it was opened. There was a young woman having a bath in a dish who was later

introduced as her niece; she was 16 years old. I stood near the door waiting to be seated and I was eventually offered a small bench next to the door.

The house was a two-roomed wattle and daub house. One could detect small holes in the old corrugated iron used as the roofing. There was no electricity and there was no sign of any cooking happening on that day. Simphiwe was sitting on an old bed with her baby on her lap in a room which was used as a kitchen, sitting room and a bedroom. The second room was the bedroom for her brothers. Simphiwe had given birth to a baby boy; she had lost weight but the baby seemed healthy. I spent about 1 hour and 20 minutes with her, asking about how she and the baby were. Simphiwe talked about her experiences of being a young mother, mentioning support from the baby's father and her family, reasons why she was no longer attending school and about her plans for the future. It appeared that a month before, she had lost her eldest brother, who was the only permanently employed member in the family and was responsible for providing for the family. None of the four remaining brothers had permanent employment. In addition, Simphiwe could not access the CSG because she did not have an identity document. She had applied for it in July and she was told at the Home Affairs offices to check for it in December. A second appointment was scheduled a month later. At this appointment, I discovered that she had been moved to a neighbour's house because she was very sick; no one could look after her at her home as her niece had run away. It was not appropriate to continue with the interview as she had difficulty in breathing and was very weak. It was difficult for her even to be in a sitting position on the bed. I then spoke to the woman who was looking after her. Apparently, she started becoming ill two weeks after the last interview; she had been admitted to hospital for 10 days. In the meantime, her baby had been taken by the baby's grandmother (paternal) as it was difficult for Simphiwe to look after him. The woman who was looking after her had reported her case to the social workers in the area who then promised that they could only provide food parcels in order to help out.

### **3.6 Participant observation process**

As mentioned, ethnographic methodology gives priority to observation; observations of how the pregnant teenager or young mother interacted with the teachers and other learners during class visits and in the playground during break time were conducted. As I was carrying on

with my daily duties of the school I also recorded observations. During observations, if others learners taunted the pregnant learner I reported the act to the teacher in charge. I had to change my prejudice on how I had been viewing teenage pregnancy in order to gain a better understanding of experiences of pregnant teenagers and teenage mothers who are at school. Everything observed was recorded. Hammersley and Atkinson (2007) define field notes as traditional means in ethnography for recording observational data. In accordance with ethnography's commitment to discovery, field notes consist of relatively concrete descriptions of social processes in their context. In addition, Seal, Gobo, Gubrium and Silverman (2004) argue that field notes consist of a running description of events, people, things heard and overheard, conversations among people and conversations with people. A direct relationship with the participants was established by interacting with them in order to understand the meaning of their actions (Gobo, 2008).

### **3.7 Interviews**

I occasionally held repeated informal conversations with individual participants in order to develop a relationship and trust in between formal interviews. Five individual semi-structured interviews which each lasted for an hour were conducted in which the participants talked about their experiences during pregnancy and how they balanced the life of motherhood and that of being learners. Four focus groups which took one hour each session were also conducted with the young women; two were during pregnancy and the last two after giving birth. I explored how they handled friendship with their peers and with their boyfriends. The participants talked freely about the challenges brought by the pregnancy and motherhood, but not about their sexuality per se. They were reluctant to talk about their sexual experiences and almost never spoke about sex in relation to themselves. Leach (2006) connects this to an imperative of femininity to appear modest and innocent.

In addition, Leach (2006, p. 1133) argued that interviews and questionnaires are an "adult form of inquiry" with which children may not be comfortable. Furthermore, all efforts must be made to ensure that children do not feel compelled to participate, particularly if the research is conducted within an educational context where authority relations become a major issue. In her experience, Leach (2006) found that young women in particular are often not

relaxed or comfortable with individual interviews, while young men tended to be more frank and informative.

The choice of semi-structured interviews owes much to their yielding rich data; one-on-one interviews afforded the researcher an opportunity to explore more about things which the participants could not feel comfortable talking about in the presence of other participants. The emphasis is placed on attentive listening to the responses of participants so that the researcher can identify new emerging lines of inquiry that are directly related to the phenomenon being studied and thus explore and probe these (Maree, 2007).

The time and venue where the interviews were held provided enough privacy for the participants. The interviews were conducted at school; a room had been selected which was designated for computer lessons but which was not yet used for lessons as the school had not yet purchased computers. At first in late (November) 2008 I held interviews after school in order not to interfere with the participants' lessons, but at the beginning of 2009 I was compelled to hold interview sessions only on Fridays after school as this was the only day when there was no after-school study period. On the days of the interviews conversations were held while the participants were having their refreshments and they were relating news about the day's events; I also took notes of how they interacted with each other. The interviews were in a form of conversation which took about an hour for each session and were conducted in isiZulu as both the researcher and participants are first language speakers of the language. The individual interviews were recorded using audiotape with permission from the participants. The recordings were done in order to create meaning from the viewpoint of the participants and it also reduced the possibility of misinterpretation of participants' views (Graham & Hughes, 1990). I wrote detailed notes after every interview when every memory was still fresh in my mind, ensuring that the participants received undivided attention.

At first I felt that my age, being a teacher and the position held at school (deputy principal) were limiting factors for the individual interviews. Most of the participants were not comfortable talking to someone in authority (as a teacher and also a deputy principal; who is in charge of inviting parents to school if there is something questionable pertaining to the

academic performance of the learners). My position as an adult was marked by age and gender hierarchy and learners regarded me as in a dominant position like their mothers; that made it difficult at first for them to talk about their personal issues; it was rather like talking about their boyfriends and their sexual encounters. Jewkes, et al., (2005) argue that studies of childhood in SA show that there is a dominant expectation; South African children are usually submissive to parental and adult control and they themselves feel out of control. It was as if I was intruding on their private lives and would have to reveal what was not supposed to be known by an adult person, yet they could not refuse to talk to an adult who was also in a management position in the school. Yet I did not consider using a research assistant because of financial constraints and it was also going to be difficult to bring someone outside the school because of the changing schedule of the school. Usually they looked at their hands or through the window and spoke very softly, rubbing hands and answering mostly in monosyllables. It was clear that the amount of time spent with the participant does not determine the amount of data one receives by means of probing. Sometimes learners laughed nervously and shook their heads and their shoulders rather than talk. This body language reflected embarrassment. It seemed as though they felt that they had done something wrong and were expecting some sort of punishment taking into consideration the marginalisation they receive from educators and learners in school. I tried to create a relaxed mood by repeatedly having informal conversations in between formal interviews. The formal interviews were also conducted as a form of conversation; learners later realised that whatever they said was taken seriously and they were not judged.

All the participants except one had older boyfriends who were no longer at school. Some of the boyfriends were working full-time and others were working part-time. The reason for their having working boyfriends was that they could provide them with whatever could not be provided by their parents; for example spending money at school, cell phones/air time, etc. This relationship leads to difficulty in negotiating with their boyfriends about the choice of using condoms during their sexual encounters, because of gender power inequities of age and financial standing that their boyfriends had over them (Wood, Maforah & Jewkes, 1998; Jewkes, Vundule, Maforah & Jordaan, 2001; Varga, 2003). Most of the girls indicated that they were anxious about being infected by HIV and AIDS and were still waiting apprehensively for the results when they were still pregnant; however, only three of the participants talked about their relief at finding out that they were HIV negative. The researcher did not feel that it was appropriate to ask the other participants about their status as

the study is not about HIV and AIDS. They said that their boyfriends refused to test for HIV; they were waiting for the girlfriends' results and argued that if the participants tested negative it would mean that the men were also negative.

Not all the pregnancies were planned and the participants did not use any contraception because they did not expect to fall pregnant. One participant indicated that she suggested her boyfriend use a condom, but her boyfriend told her that it was going to be very painful for her if he used a condom as it was her first sexual intercourse and she let him make the choice because she thought he knew better; he was more experienced than she was. It seemed as if the participants were not aware of any other form of contraception besides condoms, and they expected their boyfriends to be the ones who had the choice of whether to use them or not.

While talking about their families' first reaction to their pregnancy, the young women were very emotional. They said the pregnancies were not welcomed by their families at first. Their parents were very disappointed and hurt when they found out that their daughters were pregnant. One participant's mother threatened to take her out of school and she was helped by her aunt who convinced her mother to let her complete her matric in order to stand a better chance for better job opportunities. It was worse with four of the participants because they felt that they had made their families a laughing stock in the community as they had taken part in virginity testing. These parents were using virginity testing as a form of protection for their daughters from being infected by HIV and AIDS as well as from falling pregnant. One participant's mother was even admitted to hospital with high blood pressure because of shock; the participant cried when she related the story. One of the young women, Sthembile, felt as though she was better off than other participants as she kept on mentioning that her baby's father had started paying '*lobolo*' for her.

All the young women knew about the option of abortion, but did not choose it because of fear of the reaction of members of the community. It was also against their religious beliefs. They were also worried that, should they have an abortion, they might have aborted the only baby they could ever have. They felt that they would end up not having any children and would not feel as feminine if they spoilt their chances of having children in the future. The young women also mentioned that in their community, it was better to give birth to a child than have an abortion, so the participants' right of choice had virtually been taken away from them by the community.

When the participants were talking about how their classmates responded to their pregnancy, they became very emotional about being teased in class. On the other hand they felt they deserved to be treated the way they were treated by the young men at school, and did not think about reporting them to the teachers; they would say, “Boys in my class like to tease me, but I don’t pay much attention” or “I am used to it now”, “I don’t mind”, or “Boys like to crack jokes about me when I feel sleepy in class; I’ve learned not to show them that it hurts by laughing along with them at their silly jokes”. One of the individual interviews had to be suspended because the participant was crying when she was talking about how boys were teasing her in her class. She cried because she felt hurt when the boys generalised that teenagers fell pregnant because they wanted to access the CSG or that they slept around. She felt angry that people did not bother to get their facts straight about things. She said “I sometimes feel like screaming to the whole class and telling them that I didn’t become pregnant because of what you think, I was raped while I was at home”. The participants showed that they valued the interview session, because some of them did not have anyone to talk to about their experiences, not being on speaking terms with their parents.

Most of the participants realised that how they felt during pregnancy was nothing compared with what happens after giving birth. They felt that when they were pregnant they were only concerned about themselves and how they felt, but once the baby was there everything shifted to the baby; even their parents concentrated on the baby. They complained that whenever they asked for something from their parents or their baby’s father, they were told that the money was going to be used for buying baby’s necessities. Although they were all excited about their babies, they acknowledged the difficulties involved in raising a child. They felt that there were a lot of responsibilities involved and that the bulk of these rested on their shoulders and on those of their families. Most young mothers showed appreciation of the support from their parents and realised that the baby’s father only supplied financial support. They all talked about their sleep being controlled by their babies; time for studying depended on how the baby felt, they were always busy taking care of the baby and did not have time for friends.

They talked about how they lacked concentration on lessons in school when the baby did not feel well. The girls who were no longer breastfeeding talked about how they became concerned when the baby formula was about to be finished and the baby’s father had not yet



supplied them with money. Most of the time the argument between them and their boyfriends emanated from financial support and they started to argue a lot with their boyfriends. Nevertheless, they could not hurry enough after school to go to their babies and were excited about the time they spent with their babies when they were breastfeeding or feeding them. It was discovered that although the teenage mothers did not plan the pregnancy, they welcomed their babies and enjoyed talking about them and even brought photographs of the babies to show to the researcher.

Group interviews, which were an alternative to individual interviews, were also held. The group interviews added a dimension that is normally absent in one-on-one interviews; there was interaction between the participants. Group interviews help to provide a more natural environment; the participants were influenced in what they said by the presence of others, whom they met again in their everyday lives and with whom they shared similar experiences (Neuman, 2000; Seal et al., 2004). The first group interview was with four participants who were still pregnant. In the second group interview there were two groups, one with six pregnant learners and one with four young mothers. After all the participants had given birth, the group interviews were determined by the area where the young mothers lived. Within the group there were participants who lived within a radius of about 3 km of each other were grouped with participants in their areas in order to be transported home easily. (After school all the learners are advised to walk home in groups because of the high rate of violence in the area. As the interviews were held after school participants had to be transported home for their safety.) After a few sessions it was suggested that the participants kept journals as sometimes they could not be given a long interview; for instance, when they were writing tests they preferred not to be kept behind. When they were asked to keep journals while they were pregnant, they complained that they had a lot to do because even at the antenatal clinic they were asked to monitor and record the baby's kicks. They did, however, start journals after giving birth, and kept records of what they did after school until they went to sleep and when they woke up before coming to school.

In the group sessions the interaction between the participants helped them in recalling similar incidents. After a few sessions of group interviews, a kind of rapport among the participants was developed. They started to help each other, for example when they met for the next session I would learn from them that 'so and so' had a problem. Those who were in the same

grade started to form a study group, began supporting each other and were collecting or submitted projects for those who were absent from school.

### **3.8 Ethical issues**

In any qualitative research ethical issues have to be seriously considered in order to avoid complications that might arise. Ethical issues pertaining to qualitative research include informed consent, confidentiality, and emotional safety (Hisada, 2003).

For all human research, it is important to gain informed consent from the participants in order to ensure that they understand what they are getting involved in. Details of the study were explained to the participants; the study was not going to interrupt their schooling and interviews were conducted during break time or after school. Participants' safety was ensured by transporting them home after every session. The participants were also made aware that participating in the research was voluntary and that they were free to withdraw if they felt they no longer wanted to participate in the study. They also fully comprehended the research project (Cohen, Manion & Morrison, 2007). Permission to conduct the research was obtained from the DoE and then from the principals of the participating schools. The informed consent of the participants and their parents was sought and all of the stakeholders were presented with an outline of the research. Permission was sought for the recording of the interview sessions (Cohen et al., 2007). Confidentiality is a vital requirement for credible research, and the principals and participants were informed that confidentiality and anonymity would be safeguarded.

One of the ethical challenges confronting this study was the difference in status between the researcher - who was a teacher at the school and who had formal authority and power - and the participants, who were learners and much younger than the researcher and formally under her authority. Throughout the study as a researcher I was conscious of this power inequality; I consistently reminded the participants that they could withdraw from the study or could elect to avoid certain questions that they felt were intrusive. This was a delicate task, hinging on developing a relationship of trust. One of the participants confided that she became pregnant because she was raped by her uncle; she had laid charges, but the perpetrator had

disappeared. After the discussion she agreed to go for counselling as she had never before had the benefit of this facility. Her case was treated with the sensitivity it deserved.

### **3.9 Reflections on the research process**

A research journal is a detailed record of the researcher's experiences during field work; field notes do not only include observations made about material researched, they also include the researcher's reflections on his/her own misconceptions, bias, reactions and attitude (see Herbert & Beardsley, 2002). Looking at the power relationship between the participants and the researcher might have made the participants felt obliged to take part in the study because of fear of condemnation. What could have intimidated the pregnant teenagers was that I was a member of the school management team and in charge of absenteeism. This could have influenced the research process and data analysis. Initially the participants mostly answered in monosyllables; prodding had to be applied to elicit responses. On the other hand, I was also tense as I was still fighting against my own prejudices about teenage pregnancy, that after all the exposure through various intervention programmes from media and school about sexuality and how to protect themselves from pregnancy and being infected from HIV and AIDS they still have sex without using protection. I was also wondering why they did not opt TOP or was the pregnancy for cash on CSG. Furthermore, as I have been working in the area for quite a long time, I have experienced poverty most of the learners come from and adding another member exacerbates the situation. Conversations about their families and how they handle schoolwork were real ice-breakers. Once they began to be comfortable talking about their experiences, a keen interest in the welfare of the participants gave me access to rich data.

It was observed that the participants viewed the interview sessions as therapeutic; most of them did not have an adult to talk to because they were not on speaking terms with their parents as the parents were angry with them. The interviews provided them with the opportunity to talk about their emotions, such as shame, fear, joy, pain, etc. The group sessions provided them with support from each other. After giving birth, when the participants talked about their children their love for them was palpable. The study altered many perceptions previously that I held. I realised that these young women needed not only a policy of inclusion, but also someone to talk to; that someone should listen in order to give

the appropriate support needed by these young women. Teachers mostly provide support only during pregnancy because of its visibility, and we forget about the much-needed on-going support for teenage mothers.

### **3.10 Data analysis and interpretation**

In this section I discuss and justify the data analysis process and methods employed. My analysis necessitates viewing these young women as social actors who act in the social world. In qualitative research data are analysed as the research progresses, continually refining and reorganising questions in the light of the emerging results. Coffey and Atkinson (1996, p. 2) suggest that in qualitative research:

We should never collect data without substantial analysis going on simultaneously. Letting data accumulate without preliminary analysis along the way is a recipe for unhappiness, if not total disaster.

Holliday (2001) advises that the analysis process should become more of a writing process, explaining all the steps taken while one is in the process of analysis. Data analysis is described as a transformational process in which raw data is transformed into sights about a social phenomenon under study (Wolcott, 1994). In this study, the social phenomenon under study is pregnant teenagers and teenage mothers' experiences of schooling. The first level of data analysis started at the beginning of the study after every day of the data collection whereby I transcribed and translated all the data for the day.

Since this was an ethnographic research, data were obtained through various methods – observation, individual and focus group interviews – in order to describe the context and meanings of pregnant teenagers' and teenage mothers' everyday social situations (Shaughnessy et al., 2000). I had to employ content analysis to illuminate issues that were deeply embedded in the social/structural organisation of the school which cannot be interpreted in the form of words or language. In analysing observations I drew from my field notes about how the participants behaved when interacting with me as a researcher, interaction between the participants and other learners, and between the participants and the teachers, driven by my research questions as an analytical framework (Davies, 2007). I also

identified any open expression of feelings and how individual participants behaved when interviewed alone or in a group.

Thematic analysis was also employed in this study. Data were sorted and categorised according to the identified themes, and experiences of the young women both in the school and at home were put into categories. Thematic analysis is a method for identifying, analysing and reporting patterns or themes within data (Braun & Clarke, 2006). Thematic analysis can be used in many forms of qualitative data analysis, and is considered the foundation for qualitative methods searching for patterns or themes, such as conversation analysis, discourse analysis and narrative analysis. Other scholars argue that it cannot be regarded as a method in its own right (Holloway & Todres, 2003; Ryan & Bernard, 2000). However, Braun and Clarke (2006) argue that it should be considered a method, and that the only difference from other qualitative methods is that thematic analysis is not tied to a particular theoretical position. They further argue that thematic analysis has a clear theory and procedure.

I collected large amounts of data and personally transcribed data from recorded individual and group interviews as well as observations. The observation notes were the primary data set for analysis. As I had conducted interviews in isiZulu, after transcription they had to be translated into English. An attempt was made to retain the words of the participants so that their meanings were not distorted, and where meanings could not be clearly translated into English, the word or the phrase was written in IsiZulu. This process afforded me the opportunity to familiarise myself with the data. Although it proved to be very laborious, it became easy to identify the voices of the participants. I reviewed my material for clarification where necessary. Once the transcriptions were ready, they were read repeatedly in the search for discourse markers, for example, the choice of word, phrases and metaphors and how they were used. This helped to illustrate themes that supported or contradicted conventional assumptions about teenage pregnancy/motherhood. It also became easy to pick up the inconsistencies, avoidances, silences and defensives (see Holloway & Jefferson, 2005).

I then started with the open-coding, where I coded data using highlighters and writing notes in the margins. Coding involved repeatedly reading and recoding in order to identify data that reflected ideas about the understandings and experiences of pregnant learners and learner mothers. According to Braun and Clarke (2006) coding is a critical stage in data analysis as it

helps the person who analyses to organise the data into meaningful groups and finally leads to categorising themes. Codes from the data set were then categorised in order to generate various themes and how these themes were threaded in reflecting the experiences of pregnant learners and schooling mothers (Maree, 2007; Cohen et al., 2007). I also checked whether the themes worked in relation to the coded extracts and the entire data set, and coded any additional data within the themes that had been left out (Braun & Clarke, 2006). Lastly, I defined and named the themes generated. In order to keep the voice of the participants alive I involved them in the process of data analysis; I went back to them during or after every session of interviews for clarification, since Lather (1991) and Reinhatz (1992) assert that this makes analysis more collaborative and meaning is negotiated.

Analysis of the data involved explicit interpretation of meanings and teenage mothers' actions, the product of which mainly took the form of verbal descriptions and explanations. Themes were sought from descriptions of field observations and interviews; these were analysed to unravel the discourses emerging as constructions of school-going pregnant teenagers and teenage mothers.

### **3.11 Conclusion**

Reflecting on this experience, the researcher was conscious of the multiple positions she held and the role she was expected to fulfil as a researcher. She became an ally during the challenging period in the young women's lives, a confidante, an advisor, a counsellor and a mother figure to the participants, managing the research while being aware of the participants' expectations: this was challenging. By the end of the research, although these young women still saw her as a person in authority, they felt free to discuss challenges they encountered.

The description of the findings of the research is divided into the next three chapters. Chapter Four is centred on the factors that shape the experiences of pregnant teenagers at school; Chapter Five relates to exploration of the experiences of the teenage mothers' mothering and schooling; and Chapter Six focuses on the young mother's relationship with the child's father.

## **Chapter Four: Factors that shape the experiences of pregnant teenagers**

### **4.1 Introduction**

This thesis argues that gender is the key to understanding the experiences of pregnant teenagers and teenage mothers. Becoming pregnant is not a decision the teenagers willingly make, but sexual behaviour is located within unequal relationship dynamics, putting teenagers at risk of unwanted pregnancy. Social and cultural factors exacerbate these inequalities. This chapter draws attention to the circumstances surrounding teenage pregnancy by giving a detailed analysis of the observed and reported experiences of pregnant teenagers.

The chapter begins by developing the factors that led to the pregnancies, looking at the dominant social, cultural and class factors that propel teenage pregnancy. The social construction that teenage pregnancy is a problem is explored within the framework of risky sexual relationships among teenagers. The chapter then outlines the pregnant teenagers' constructions and experiences of pregnancy with reference to the use of contraceptives, and the reactions of the parents, community, school and their peers to their pregnancies.

### **4.2 Dominant social and cultural factors**

Although there are reports that there is a trend showing that contraceptive usage has increased significantly (Simbayi et al., 2004; Katz, 2006, Moultrie & McGrath, 2007; Dinkelman, Lam & Leibrandt, 2007), the data illustrate that the use of contraceptives depends on the dynamics of the relationship and power. All participants had boyfriends on average five years older than them (Jewkes, Watts, Abrahams, Penn-Kekana & Garcia-Morena, 2000). They indicated that they all had information about the use of contraceptives, but had never thought of using them (Ehlers, 2003) because they did not think that they were going to fall pregnant (HSRC, 2009b). On the other hand, some of the participants were hoping that their partners

would use protection; however, they indicated that they were afraid to suggest this to their boyfriends because of fear of rejection.

The power dynamics in the relationships of these young women and their boyfriends limit the young women's choice of using contraceptives as they have much older and working boyfriends. Secondly, the participants' parents regarded the cultural practice of *ukuhlola* (virginity testing) as a form of keeping the female teenagers under surveillance and controlling them from getting sexually involved with boys and falling pregnant or contracting HIV. Abstinence is the only form of contraception taught to female teenagers during these meetings. This study illustrates that socio-economic status, pressure from boyfriends and abuse emerged as other contributory factors in teenage pregnancy.

#### **4.2.1 Virginity testing as contraception**

It emerged that the issues of teenager's sexuality had never been discussed within the family situation (Mayekiso & Twaise, 1993; Buga et al., 1996; Leclerc-Madlala, 2002; Mkhwanazi, 2007). Parents still find it difficult to talk to their children about their sexuality or sex:

My mother never talked to me about sex, she took me to the virginity testing when I was 10 years old. I have a sister who is 25 years old; she also had never talked about sex and boys with me. I only talk about boys and sex with my friends here at school.  
(Sthembile)

They shifted the responsibility of talking to their daughters about sexual matters to the '*umama ohlodayo*' (the woman in charge of the virginity testing) in the area. The virginity tester has the responsibility of supplying all the necessary information on sexuality and sexual relationships; young women are taught about the importance of self-control. This practice is encouraged as it gives power to the parents to monitor and control only female teenagers' sexuality, whereas young men are free and encouraged to explore their sexuality; they are not as heavily monitored as the young women. According to the teenagers'



narratives, the virginity tester only emphasises abstinence from having sexual relationships with boys, but does not give any other option for contraception.

Most of the participants' parents preferred this cultural practice as they still feel uncomfortable talking to their daughters about sexuality:

I joined the virginity testing after my parents died in a taxi accident. I think my eldest brother took me there because he did not know how to talk to me about girls' stuff.  
(Lindiwe)

Parents thus lose a valuable opportunity to engage with their daughters in a way that may protect and equip them with life-saving skills, such as how to negotiate consensual and safe sex. Virginity testing becomes a form of contraception; the parents still strongly believe that by maintaining this cultural practice their daughters are protected from falling pregnant and from contracting HIV and AIDS (Macleod & Tracey, 2010). Studies argue, however, that this cultural practice is accepted although it violates women's personal privacy (Maluleke, 2003). It also helps the young women's parents in monitoring and controlling their daughters from being sexually involved with boys. By making sure that the young woman remains a virgin, the mother is gaining respect and the dignity of good parenting from the community. It is not only the pregnant teenager who is marginalised by the community; the mother is also blamed for bad parenting if her daughter becomes pregnant (Mkhwanazi, 2007, 2010). On the other hand, young women who attend virginity testing become more vulnerable to the gaze of heterosexual men, who value being the first to have a sexual relationship with a virgin. In addition, there are reports that suggest that the procedure attracts older men seeking out virgins with low HIV risk status (Simbayi et al., 2004).

The participants illustrated that they also enjoyed taking part in this cultural practice as they gained respectability from their peers and the community in that they were having virginity testing and could attend a reed dance. Their participation in these events indicated that they were confirming their identity with 'Zuluness':

... to observe my culture by attending *umkhosi womhlanga* (reed dance), *ukuhlolwa* (virginity testing) where we are taught about *ukuziphatha* (how to behave properly as girls) ... to be a proper Zulu girl. We were taught that it is important for us not to be tempted by boys ... to sleep [to have sex] with boys ... because we are going to get pregnant or contract HIV and AIDS and that in order to attend *umkhosi womhlanga* (reed dance) we have to remain virgins. (Sthembile)

This above idea was also confirmed by Lindiwe when she responded to the reaction of her family when they found out that she was pregnant. Firstly she indicated that her situation was worse than that of other participants as she is an orphan and was taken care of by her eldest brother. Her brother was very disappointed and had lost trust in her. Since the death of their parents, her brother had assumed the position of control and Lindiwe's pregnancy reflected badly on him. As a man from a patriarchal society he has to be able to prevent his sister from falling pregnant. Now he feels that he has failed as a man and that society blames him; as the society always blames women for all the ills of society. Furthermore, pregnancy leads to disgrace and depreciation when it comes to the payment of '*lobola*' when the young woman gets married. This means that Lindiwe's brother will receive less payment of '*lobola*' if it happens that she gets married. When Lindiwe got pregnant, her brother lost power of control over her.

Lindiwe felt that she had not only brought shame to the family but also to the community, as she was taking part in the virginity testing and reed dance tradition. As these cultural practices are highly valued by the community, becoming pregnant brought about disillusionment to the community about the effectiveness of these cultural practices; thus the pregnant teenagers received community disapproval. The participants were stigmatised and called names. The older generation is always ready to respond to teenage pregnancy by blaming and punishing pregnant teenagers. Furthermore, adults seldom realise that female teenagers are amongst the most vulnerable groups in our society. In SA there are reports of a high rate of violence against women and girls in the form of rape and abuse, and a high number of female teenagers report being coerced or forced into a sexual debut (Wood et al., 1997, 1998; Wood & Jewkes, 2001; Leclerc-Madlala, 2001; Jewkes, 2001). It seems easier to occupy the high moral ground and 'policing' role rather than tackling the problem (Cooper, Honikman & Meintjes, 2011).

Eish! With me it was not only about being pregnant ... like at home they were very shocked and hurt ... I don't have parents, I am being supported by my eldest brother ... he does everything for me, he trusted me, loves me ... they trusted me at home, and I let them down by getting pregnant. I am ashamed of how the members of the community are looking at me as they know that I have been attending *Umhlanga* ... what are they saying now that they can see that I am pregnant? I feel so ashamed after being so protected [from getting pregnant] by my brother ... but still I became pregnant. (Lindiwe)

#### 4.2.2 Use of contraceptives

All of the pregnancies were unplanned and the participants indicated that they were shocked to find out that they were pregnant; however, they indicated ambivalence in the use of contraception, in not thinking about their likelihood of falling pregnant. Whenever they referred to protection they were only talking about condoms, because they illustrated that amongst their peers nobody talks about reproductive contraceptives, for example, a pill or an injection. This resonates with the recent findings that there has been more emphasis on HIV prevention, to the detriment of contraceptive services (MacPhail et al., 2007). The teenage women indicated that they relied on their boyfriends to use protection, but were afraid or too shy to suggest the use of condoms to their boyfriends. The participants reported that they felt obliged to please their boyfriends as the men supported them financially. Women were also afraid of being abandoned by their boyfriends (Varga & Makubalo, 1996; Wood & Jewkes, 1997). Either their boyfriends wanted to have a child, as their peers already had children, or they did not want to use protection (i.e. condoms) when they were having sex. The girls also mentioned that they were afraid to tell their boyfriends that they were not ready to have sex or to demand the use of protection because they were afraid of being rejected or left for other girls who wouldn't mind not using condoms:

I was shy to tell him to use condom eh... I knew from the beginning that he wanted to have a child ... because all his friends had children err I couldn't talk about using protection. I felt that I had to make him happy as he supports me with most of the things I need ... sometimes you are forced to do things which you do not like to do ...

like the issue of condom ... you are afraid that if you force him, he will leave you and go to the other girls who do not care about the use of condoms. (Slindile)

He tricked me ... when I asked him where was the condom ... he told me that he was not going to use it because it's going to be very painful, as it was my first time having sex. I told him that I didn't want to be pregnant and he assured me that I wasn't going to be pregnant because he knows what to do to avoid it to happen. (Lindiwe)

Owing to the age difference and the young women's lack of experience, they let their boyfriends make decisions for them. The participants illustrated that they trusted whatever information pertaining to sexual matters was told to them by their boyfriends; they regarded the men as more experienced than they were.

#### **4.2.3 Older and working boyfriends**

It transpired that most of the participants had relationships dominated by older and working boyfriends, who financially provided their girlfriends with whatever they could not get at home, for example cell phones, spending money and clothes, and they also took them out to the movies (Leclerc-Madlala, 2001, 2002; Hallman, 2005; Marston & King, 2006; Bhana & Pattman, 2011). Studies reveal that during dating and courtship between young people of a similar age, exchanges of gifts are common and often expected (Kaufman & Stavrou, 2002); however, young women have started to commercialise sex, in that sexuality is conceptualised as a resource that can be drawn upon for material or economic advantage (Luke & Kurz, 2002).

The pregnant teenagers' relationships reflected complex gender power dynamics as the boyfriends were older than them by an average of six years and had financial standing (Shefer, 1999; Varga, 1997, 2003); therefore the young women compromised their power to negotiate about sexual matters and the choice of using protection. The participants also felt that they were obliged to please their boyfriends in return for the support they received. They

were afraid to be left for other young women. They were desperate to keep their relationship with their boyfriends, because their boyfriends provided for them financially. A sexual relationship with a man is a necessary requirement in their construct of womanhood (Leclerc-Madlala, 2002):

I prefer a working boyfriend from boys here at school because boys here at school have many girlfriends, they don't respect you. They cannot even provide you with anything because they are not working. At home I don't get spending money, it's only my mother who is working and she is always complaining that she doesn't have money. My boyfriend gives me money to spend here at school and sometimes takes me to the movies. (Sihle)

When I was in Grade 8 I had a boyfriend who was doing Grade 9 at Kusa Secondary School [pseudonym] but our relationship lasted for few months. We did not have a chance to be together because my parents are very strict. What made things more difficult was that we both did not have cell phones to communicate. After him I got involved with my current boyfriend and on special occasions he gives me presents. It's nice to show off to your friends about the gifts you have received from your boyfriend. Everyone can see that he really loves you. (Nelisiwe)

My boyfriend is a taxi driver and he helps me out when I don't have spending money and sometimes he brings me to school or fetches me after school. He really helps me a lot [financially]. (Slindile)

Older, working boyfriends have money and they have experience about relationships. Boys our age don't know to handle things ... we are both inexperienced. That is why we like older boyfriends. (Zanele)

Bhana and Pattman (2011) argue that love and relationship dynamics among teenagers in township contexts imbricates money and materiality (Dunkle et al., 2007). Gender power inequalities are manifest in the ways in which female teenagers aspire towards relationships where money and the desire for middle-class accoutrements are foregrounded. In this way young women are complicit in maintaining relationships with older men that create sexual vulnerabilities and put them at risk (Hunter, 2002). On the other hand, the above extracts

indicate that not all young women are victims or powerless as they choose to be involved in risky sexual behaviour when they have relationships with older men for acquiring financial gains (Leclerc-Madlala, 2002).

#### **4.2.4 Pregnancy and HIV/AIDS**

The participants had unbalanced gender relations with their boyfriends in that they tended to give in to the demands of their boyfriends because of the intersection of gender and age. As already mentioned, none of the participants wanted to fall pregnant, but gave in to pressure for sex from their boyfriends or thought about being pregnant only after they had already had sex. Moreover, they indicated that they did not think about contracting HIV and AIDS or testing for HIV before having sex with their boyfriends; they only became worried after they were already pregnant. They also indicated that they did not talk about HIV/AIDS with boyfriends. It was only after discovering that they were pregnant and after attending the antenatal clinic that they took an HIV test. They all reported that their boyfriends refused to go for HIV testing; they relied on the test results of their pregnant girlfriends:

err AIDS...we don't think that much about AIDS err what can, I say...we know about it but we don't talk about ... we've never discussed it. (Futhi)

No, we don't talk about AIDS, I only remembered and got worried about it when I was already pregnant ... like ... when I began antenatal clinic, because I had to take the test [HIV]. I started to get worried about the results of the test. After I'd learnt that I was negative I told my boyfriend to go for the test too. He refused and told me that he didn't see any point as I had already tested negative. He assumed that if I'd tested negative, he was also negative. (Buhle)

We don't talk about HIV/AIDS; it's as if it doesn't exist. I was worried when I started attending antenatal clinic. I was relieved when I received the result, but I don't know how I can make him [the boyfriend] go for HIV test. He kept on postponing it until I gave up asking him to go. (Hloni)

#### 4.2.5 TOP

The participants had information about the choice of either keeping the pregnancy to full term or having an abortion. Their religious beliefs and the negative attitude of their community towards abortion made the young women opt for keeping the baby to full term. Studies from the developed world correlate early pregnancy and motherhood with socio-economic status. Teenagers from low socio-economic backgrounds usually do not opt for abortion, but carry the pregnancy to full term (Arai, 2009; Kiernan, 1997; McCulloch, 2001; Coleman & Cater, 2006; Allen et al., 2007). In addition, there was also the perception amongst the girls that having a baby constructed the identity of being a woman; hence they were worried that if they had an abortion, they might have aborted the only child that would have proven their womanhood:

When I found out that I was pregnant, I thought a lot about abortion, but my aunt's visit at home made me think otherwise. My aunt visited our home and told me that she had a dream that I was pregnant. When she asked me about my last periods, I lied yet I was already in my second month of pregnancy. Nevertheless she preached to me about abortion; that it's sin to murder an innocent soul. (Futhi)

Our community believes that it is better to give birth to a child than have an abortion. When things are not going well for you ... like when you are older ... when you really want to have children and you are not getting them, they'll say it's just because you've been aborting all along. (Hloni)

I thought about abortion, but I also thought about what if I'd be aborting my only child ... like what if when I'm older I could not have children, wouldn't I think about the aborted child and regret doing it? (Lindiwe)

I went to the doctor because I had a problem with my periods and it was then that I found out that I was already four months pregnant ... and when I asked about abortion I was told that it was too late for it ... and I ended up keeping the baby. (Busi)

One participant, Sthembile, who was already engaged to be married, felt that even although she wasn't ready to get pregnant because she was still at school, she couldn't choose abortion since '*lobola*' had already been paid for her; culturally she was expected to have children at some stage.

#### **4.2.6 Physical violence and teenage pregnancy**

GBV in the form of rape within extended families was also a contributory factor to teenage pregnancy. One of the young women was raped by her uncle, who threatened her with a gun; he later ran away from the area. At first the pregnant teenager was afraid to mention the incident as her uncle threatened to kill her young brother (five years old) if she told anyone what he had done, and she was also afraid that no one was going to believe her. She kept the secret to herself until she realised that she was four months pregnant. By the time it was confirmed that she was pregnant, it was too late for an abortion:

he raped me ... he threatened me and told me not to tell anyone ... he said he was going to abduct Sizwe (five-year-old brother) at the crèche ... he disappeared the next morning. After the incident I began to have problems with my monthly periods, sometimes I had them for 2 days or 1 day ... until my mother told me to go to the clinic ... I then found out that I was four months pregnant ... I kept it a secret from my mother until she noticed when I was already seven months pregnant ... because I was afraid of how she was going to take it. Was she going to believe that it was my uncle who raped me ... I didn't know how she was going to react. (Busi)



#### **4.2.7 Summary**

Descriptions of factors that led to the pregnancy of the teenage girls provided the information that parents still avoid talking to their children about sexual matters and contraception. Instead they rely heavily on cultural practices to provide information on sexuality to their daughters. According to the Zulu culture, the emphasis on remaining a virgin rests with the young women, who have to make sure that they do not give in to the pressure of young men. This does not provide many options to the young women apart from abstinence.

GBV is also a contributory factor in teenage pregnancy; as mentioned above, one of the participants became pregnant through being raped. She kept the incident a secret because of fear for her young brother's life.

Poverty is described as one of the contributory factors, as the participants mostly engaged in transactional sexual relationships with older working men who dominated them because of the men's age, experience and financial standing. These men put pressure on participants to do their bidding; the young women give in because of poverty. The teenage girls also accepted their boyfriends' dominant position over their relationship because they were afraid of rejection. Lastly, none of the pregnant girls opted for abortion because of religious beliefs and the fear that they might have aborted the only child they could have.

### **4.3 Observations**

#### **4.3.1 Pregnancy and motherhood at school**

What was observed was that although teenage pregnancy is common, especially in African schools, pregnant teenagers and young mothers are still largely marginalised by other learners, especially boys, who think that these learners should not come to school and that rather they should stay at home to look after their babies (Masuku, 1998). The pregnant

teenagers feel ashamed owing to the stigma attached to being pregnant or being a parent while at school. This leads to low self-esteem and prevents these young women from making the best of their schooling (Kenway, 1990). When it is evident that they are pregnant, they either come to school very early before other learners or teachers arrive and remain in their classroom most of the time, unless they have to relieve themselves or it is time to go home.

During their pregnancy the pregnant learners try their best to conceal it by wearing oversized uniforms, baggy tracksuit jackets or jerseys, even if it is a very hot day. They remain in their classrooms even during break-time and do not mix with other learners; they often become very reserved and lonely. Taylor (1997) argues that loneliness can lead to social isolation from others and this may lead to regression to an earlier phase of life where the teenager feels insecure. The classroom setting makes things difficult, especially for very obviously pregnant learners. The desks are made in such a way that they do not accommodate pregnant learners. Most of these learners experience difficulty sitting at the desks. They keep on shifting their sitting position and the desks do not have enough space for stretching their swollen legs and feet. Pregnant learners, who come from very poor backgrounds, do not have money to buy oversized uniforms to accommodate the pregnancy, therefore their uniforms become too tight for them. They feel relieved if nobody notices that they are pregnant; for example, one participant mentioned that she was relieved that the news was known only by her friend because her uniform fitted her up until she gave birth. It was also observed that some pregnant learners felt sleepy during the lessons, and this would elicit teasing from their classmates.

After the participants had given birth they showed signs of relief and mixed freely with other learners; they no longer spent much time in their classrooms. It seemed as though they knew that you could not tell the difference between those who had had babies and those who had not, whereas when they were pregnant their movement and interaction with other learners was somehow constrained because of their being different from other learners.

#### **4.3.2 Peers**

In most cases it is boys who make life difficult for pregnant learners/young mothers in school. It was observed that the participants were teased mostly by boys, especially when the

teachers were not yet aware that someone was pregnant in class. The boys were repeatedly complaining to the teachers that they felt sleepy and when the teacher responded to the complaint they would laugh and the teachers would know that there was someone pregnant in the class. Boys also ridiculed the girls in front of other learners, especially when the pregnant girls had not satisfied the class requirement academically. In one class a boy drew a picture of a pregnant woman on the chalkboard after having an argument with the pregnant learner. Once pregnant learners start showing, boys usually do not address them by their names; they either address them as *umama kaschool fees* ('school fees' mother') or *umama kasbanibani* (so and so's mother). It seems that pregnant teenagers and young mothers lose their identity and are constantly reminded that they are no longer innocent (children), and yet they are not grown-ups and they are still at school. The other learners often laugh at the teasing and the participants feel hurt.

However, pregnant learners usually receive a lot of support from other female learners; for example, when a young woman is obviously pregnant, other female learners usually send or collect things from the teacher for her; they would never let the pregnant teenager go to the staffroom. They even submit her work to the teacher and if she doesn't feel well they are always ready to report her or to accompany her home. Most of the female learners try to keep the pregnant learner seated and not moving around a lot by offering to do things for her. When the female learners help the pregnant girls, male learners usually look at the reaction of the teacher.

### **4.3.3 Teachers**

There is minimal support of pregnant learners and young mothers from the teachers; the greatest support comes from classmates, especially female learners. They are the ones who collect homework and submit whatever is supposed to be submitted by the absent pregnant girl to be marked by the teacher. The teachers also tell the absent learner to ask her classmates what has been done in her absence. The pregnant learners and young mothers do not receive equal learning opportunities to the other learners. It was also observed that the pregnant teenagers are not marginalised by other learners only, teachers also contribute a lot to the teasing; it was surprising to see that much teasing came from the female teachers. They would make comments such as 'I thought you are intelligent enough not to get pregnant' or

‘How a clever person like you could get pregnant?’ They would also suggest that the young women get pregnant because they want to access the CSG. One of the classes in Grade 12, which had five pregnant learners out of 21 female learners in 2009, was referred to as an antenatal clinic by the teachers; its class teacher was continually teased by other teachers. They would say that if the class teacher was a male they would have thought that he had impregnated the young women.

There were, however, a few teachers who were sensitive to the challenges faced by pregnant learners and young mothers in school. The LO teachers did not let heavily pregnant learners do difficult physical exercises. One of the participants, who was walking a distance of about 3 km to school, used to feel very tired on her arrival in school. She used to sleep most of the time and couldn’t concentrate. When she was about to give birth, her class teacher suggested that she stopped coming to school and arranged with one of the learners to take and bring back any schoolwork done while she could not come to school.

Teenage pregnancy is very common, especially in black schools (Macleod & Durrheim 2003), and pregnant teenagers and teenage mothers are protected by the SASA. The stereotyping and prejudice from both learners and teachers, however, remain a challenge for these learners in school as they are still stigmatised and marginalised. I realised that when the pregnant teenagers who were already in the study introduced other pregnant learners, they felt that they had been presented with an opportunity to talk about how they were experiencing schooling while being pregnant/mothers. For instance, one of the participants who was doing Grade 12 came to school late while they were writing June examinations. The teacher who was invigilating refused her entry because she was one hour late. The participant came to me crying, explaining that she came late to school because her baby was sick and she had to take her to the doctor before coming to school. When asked whether she had explained the reason for being late to the teacher, she said that she was afraid to tell the teacher.

Most of the time teachers do not want to know about the challenges faced by the young mothers and become angry when the young mother’s reason is about the baby. They argue that they are not teaching mothers but learners. The young mothers feel that they are not supposed to talk about the challenges of motherhood to the teachers. One young mother kept on absenting herself from school because she had problems with the babysitter, and she was threatened by her class teacher that she was going to be withdrawn from school once she

absents herself again. She then brought the baby in school to show the teacher the reason for her absenteeism. This led to the young mother's humiliation and embarrassment as many learners were talking about her and pointing at her.

The section below outlines the experiences of the pregnant teenager and teenage mothers.

#### **4.4 Experiences of pregnant teenagers at home**

Although teenage pregnancy is common, especially amongst blacks in SA, it is not socially acceptable (Mkhwanazi, 2010). All the participants indicated that they were shocked when they found out that they were pregnant, and were afraid of their parents' reaction. They indicated that although they did not use any contraception, they did not think it would happen to them. Others said that they did not think that they would fall pregnant on their first sexual encounter. They were full of shame, especially about being pregnant while still at school, and worried about their families', teachers' and peers' responses to their pregnancy. However, some pregnant teenagers indicated that they did not experience any stigmatisation in their classes since their classmates are used to pregnant classmates. The participants stated that they did not volunteer the information about their pregnancy to their families because they were afraid of how they would react. Nine of the participants waited until their parents/guardians noticed that they were pregnant. One young woman waited for her boyfriend to report it by sending his family to pay the *inhlawuyo* (damages). 'Damages' is paternal acknowledgement, which may be in a form of economic compensation (Kaufman et al., 2001).

The young women's parents/guardians did not take it well. They were shocked, disappointed and showed great disapproval. One teenager's parent was even admitted to hospital for a week, and one participant was chased away from home for a few days. The reaction of the parents to the teenagers' pregnancy is in contradiction to the findings of Preston-Whyte (1992) that early childbearing was welcomed. This was because in that study early childbearing presented a route for upward mobility; cultural value was placed on childbearing: fertility confirmed womanhood.

Some participants reported that their pregnancy angered their parents so much so that the parents stopped talking to them. The participants indicated that they experienced loneliness because of this. Even the siblings were afraid to talk and laugh with them in case they were seen by the parents. What made matters worse was that all the participants were still at school; falling pregnant might get in their way of completing their schooling and having good job opportunities. This could also mean adding another mouth to feed to an already disadvantaged family. The participants did not have an easy life, either at home or at school, and felt that they had disappointed their parents by falling pregnant. One participant, Slindile, reported that her mother received the news of her pregnancy very badly; she was hospitalised for a whole week because of high blood pressure:

... my mother received the news about my pregnancy very badly. She was even admitted at Mahatma Gandhi Memorial Hospital for the whole week because of high blood pressure. (Slindile)

They [parents] were very disappointed because they were afraid that I'll drop out of school. They wanted me to finish school in order to get a better job than them. My parents did not have a chance to complete their schooling and they hoped that I'll finish school without being disrupted by pregnancy. (Zanele)

**Interviewer:** Why did they think that you are going to drop out of school?

It's just because I've seen many pregnant learners dropping out of school because they are being teased by other learners. (Zanele)

My mother confronted me ... she cried when I agreed that I was pregnant ... she chased me away from home and told me not to go to my grandmother's house ... she told me to go to the person who made me pregnant ... I ran to one of the family friend's house ... after a few days ... she was no longer crying, she called me to come back home. (Futhi)

When it was discovered that I was pregnant ... my father wanted to chase me away, but my aunt talked to him on my behalf ... he stopped talking to me ... he does not

even eat meals cooked by me ... it is better when he is at work ... whenever he is at home my brothers and sister are afraid to be seen talking to me ... most of the time I become very lonely, keeping myself in our room (sharing a bedroom with my sister) because I am afraid of bumping into him. (Sihle)

The participants also complained about loneliness at home as family members did not talk to them because they were still angry with them. Fear and shame engulfed the teenagers at home and they did all the household chores without complaining. Even their siblings were taking advantage of leaving everything to be done by the girls, because they knew that the pregnant girls would not complain to their parents about this.

The young women themselves were drawn into the perception that their circumstances were stigmatised and they were humiliated that they had to endure every brickbat thrown at them by their family members. They experienced unfair treatment from their siblings who took advantage of the fact that the participants could not report them or complain to their parents, as they were not on speaking terms owing to the parents' anger at the participant's pregnancy:

Sometimes I feel it's better to be here at school than at home, because at home I am always angry at something ... like my sister always takes all my clothes which no longer fit me without my permission and she tells me that I should let her wear my clothes because they no longer fit me ... but it's only one month to go and I'll be using my clothes again ... what makes me angry is that I know that they [parents] will not buy me clothes for a long, long time and I cannot complain to them because they do not talk to me ... they only talk to me via my sister and my brother. (Sihle)

I always feel sick these days ... sometimes I feel dizzy, but I am afraid even to rest when I am doing the household chores because at home they always give me dirty looks ... even my cousins have stopped helping out in doing the chores because they know that I cannot complain ... by the time I have finished all the chores I feel very tired to do anything else ... like doing my homework or studying. (Simpfiwe)

The blame for teenage pregnancy rests solely on the young women, as they are the ones who have to make sure that they don't fall prey to young men who are busy sowing their wild oats. Some participants felt that they had not only disappointed their families, but they also experienced being marginalised by their community members, especially the participants who attended the reed dance. The pregnant teenagers were repeatedly condemned for spoiling the valued cultural practice, and some members of the community viewed the pregnant teenagers as a bad example for those who were still taking part in the dance. On the other hand, some of the community members, especially those whose daughters have children, felt relieved to think that they are not bad parents, if even those who attended virginity testing had fallen pregnant (Mkhwanazi, 2007):

I always feel very bad about the comments that are made by my neighbours ... like they say "...Oh! Even those who attend the reed dance are getting pregnant so what's the use of taking our children there". It's as if they are accusing me for spoiling the reed dance ... sometimes I wonder whether they are happy that I've fallen out with those who attend the reed dance ... I don't know ... I really feel bad. (Sithembile)

My aunt always insults me whenever she is drunk ... she shouts at me, telling everyone in my area of how bad I am ... that I have spoilt the virgins of the area by getting pregnant ... sometimes she gathers all my cousins and gives them moral lesson and makes me an example of an immoral young woman ... you know I really regret being like this. (Lindiwe)

The participants were encouraged by their families to continue with their schooling in order to be able to become independent; however, other members of the community felt differently. The pregnant teenagers were largely marginalised by members of the community and they experienced disapproval because the community was under the impression that school was a place for innocent children. As the pregnant learners had lost their innocence, they were supposed to stay away from school where they might contaminate those who had not yet been spoiled. One of the young women, Futhi, mentioned that she was continuously asked by people when they met her on the way to or from school why she did not stay home until she had had the baby. She felt so intimidated that she felt like dropping out of school. She could



not talk to her mother about her emotions as they were not on good terms because of her pregnancy:

[sometimes] I don't know what to do ... my mother said ...“now that you are pregnant you must make sure that you work hard and pass at school so that you'll look for work and support your baby” ... even if I feel tired ... like sometimes I don't sleep well ... I can't stay at home because I am afraid to complain to my mother, but when I meet people on my way to or from school ... they always ask me: “Why are you attending school when you are so highly pregnant?”... some even ask me why does school allow mothers to mix with girls ... they are already addressing me as a mother ... you know sometimes I feel like running away and leave school. (Futhi)

The community members are against pregnant teenagers attending school, because of fear that other learners will emulate the actions of the pregnant learners – as if pregnancy is contagious. They are afraid that the pregnant teenagers might influence their ‘innocent’ children to fall pregnant. According to Bhana (2007), sex and children are not often associated, unless the child has been sexually abused by an adult. Adults often assume that they hold power over matters of sex, and presume that children are sexually innocent (Cunningham & Boulton, 1996). Furthermore, Macleod (1991) argues that a pregnant teenager is considered ‘deviant’ for engaging in an adult-like behaviour, that is, sexual intercourse. However, this discourse has been disputed by recent findings that the majority of South African young people engage in sexual intercourse between the ages of 14 and 15 years (Bhana, 2011).

## **4.5 Experiences with peers**

The participants’ experiences outside the school while pregnant had an effect on their schooling. They indicated that the harassment experienced from the community caused stress in their lives; this leads to being depressed most of the time and perform badly at school as they are mostly worried about how the community perceive them. This may also have led to the pregnant teenagers’ dropping out of school. Even at school, the pregnant teenagers were marginalised by their peers. Although there wasn't much harassment reported from female

learners, the female learners contributed to the marginalisation of pregnant teenagers by laughing at jokes and responding to the teasing carried out by the male learners. It was mostly boys who made fun of the pregnant teenagers; for example, boys would say that girls fell pregnant in order to access a CSG. They even drew pictures of pregnant women on the chalkboard to make fun of the girls. Since the girls easily became tired and fell asleep during lessons, their classmates would make jokes about this. They also complained to the teachers that the participants made them fall asleep. They were also called names; Busi said that in her class they called her ‘parachute’, referring to the oversized uniform that she was wearing in order to accommodate her big tummy. (The name stuck even after she had given birth to her baby.)

As already mentioned in the methodology chapter, harassment from fellow learners caused the pregnant teenagers to be confined to their classrooms in order to limit harassment from other learners besides their classmates. They became reserved and afraid to be involved in class discussions because of humiliating comments received if they came up with incorrect answers. This contributed to the lowering of their performance (Chigona & Chetty, 2008):

I am even afraid to stand up in class because other learners always talk about me; they say that they didn’t think that I even have a boyfriend. (Nelisiwe)

**Interviewer:** Why?

Most people used to refer to me as tomboy and they said that they are shocked that I am pregnant. Others are feeling sorry for me. They are saying “Oh! Shame she is so thin.” (Nelisiwe)

The teasing happens every day inside and outside the classroom. It comes from both boys and girls, especially the girls who have never been pregnant. (Zanele)

Busi felt that the treatment she received from the learners was very unfair, as she did not choose the circumstances she was in. The participant indicated that when a teenager is pregnant, everyone assumes that she deserves what she has as she has been sleeping around

or has fallen pregnant on purpose as she wanted to cash in on the CSG. The idea that the CSG is an incentive for pregnant teenagers is also perpetuated by media reports (*The Independent on Saturday*, 2003, May 3; *The Herald*, 2005, October 18; *Sunday Times* 2007, May 20 2007). This view was rejected by the HSRC report of December 2006 (Makiwane & Udjo, 2006). Busi elaborated:

[here] at school, boys tease me a lot ... calling me 'parachute' or 'school fees mother'... they are no longer calling me by my name ... others think that we all got pregnant just because we want child support grant,... they like to make jokes by saying: "... which hairstyle are you going to have next month after the collection of CSG?" The other will respond by saying, "Oh! Next month I'll buy myself a new pair of jeans" suggesting that all girls who get pregnant do it because they want the CSG ... all those things make me feel angry as if I've chosen to be pregnant ... I feel very hurt when people put us under one blanket. (Busi)

The pregnant teenagers experienced difficulty in attending school while pregnant. They were hurt by comments made by their peers and relieved when they successfully concealed their pregnancy. They could not wait to give birth and once again become like all the other female learners who were not pregnant:

It's not easy attending school and being pregnant among other learners ... it is not nice because you are different because you are pregnant ... you feel different from other learners. (Slindile)

I'm lucky because there is no one noticing that I am pregnant ... my skirt still fits me nicely, and I am fortunate that we are about to start our exams and close for the holidays ... when we come back I will have given birth ... but I feel hurt when they talk anyhow about pregnant girls, especially during the LO lesson. (Nelisiwe)

In other instances the participants felt that they deserved to be teased by the boys and there was nothing they could do about it besides learning to live with it. Hloni mentioned that there was a lot of teasing from the boys, but she had told herself that she was not going to pay attention to her tormentors. Had she paid attention, she would have left school long ago:

... my classmates tease me, but I don't pay attention ... like in the class I sit in the front desk ... they like to say that I'm blocking their view because of my excess weight ... when the teacher is handing out worksheets and if it happens that they are running short ... they'll say I've taken for two ... it hurts, but I pretend by laughing along with them.

It emerged, however, that the pregnant teenagers appreciated the support received from the female learners in their classes. Whenever participants were absent from school owing to illness, attending antenatal clinic or taking care of a sick baby, they did not miss much of what had been done in their absence as their girlfriends provided them with all the missed work or assignments. Friends also handed in the absentee's assignments; teachers and friends supported them emotionally as they sometimes could not talk to their parents about challenges arising from being pregnant or from being a young mother:

I get help from my friend, Mpilo, whenever I am absent from school, she provides me with schoolwork that was done in my absence ... there was also a Geography assignment which we were supposed to submit and I was absent because I was not feeling well ... she submitted it for me ... even if there is something bothering me, she is the only person I talk to ... I can say that she is the one who helps me a lot. (Futhi)

My friends are very supportive ... they provide me with all the work needed whenever I am absent from school ... we also have study sessions during weekends where they help me a lot if missed a lesson ... I really appreciate the support I receive from all my three friends. (Sthembile)

The pregnant teenagers' teasing, marginalising and stigmatising by their peers may contribute negatively towards the young women's attainment of educational opportunities.

## 4.6 Experiences with the teachers

The pregnant teenagers found that most of the teachers did not treat them differently from other learners, but neither did they receive any form of support from them. Some of the teachers pretended that the participants did not exist. They taught their learners as before, without providing any support to the pregnant teenagers if they missed a lesson owing to being sick or attending an antenatal clinic. Denying any support to the pregnant teenagers perpetuates gender imbalance, as the pregnant teenagers do not receive equal educational opportunities (Bhana et al., 2010; Chigona & Chetty, 2008). The participants reported that they were also afraid to approach the teachers *apropos* support because of shame about being pregnant while at school. Sometimes girls had to choose between attending an antenatal clinic and attending school. When dates for attending the antenatal clinic coincided with test dates, the girls opted for skipping the antenatal clinic rather than not writing the test, because they were afraid and ashamed of talking to the teacher:

Last week on Thursday, I was supposed to go to the clinic ... I did not go because it coincided with my Geography test and I was ashamed to explain to Mr Solo why I could not write the test ... that was why I decided to skip the date for the clinic. (Futhi)

I don't think teachers have much of a problem with me ... it's me who is ashamed ... like I feel ashamed if teachers looking at me ... like to be pregnant amongst other learners ... but the main problem is with me ... I am ashamed. (Hloni)

I didn't have marks for physical education last term ... the physical exercises were very difficult for me ... I decided not to go to the field for exercise because it is difficult even to bend and pick up something from the floor and I was afraid to tell the teacher that I had a problem doing push-ups and sit-ups. (Sihle)

Another participant had a different experience with the same teacher; when the girl went to the teacher and explained her difficulty in doing certain physical exercises, the teacher gave her easy exercises in order to satisfy the examiner. She said:

I do get support from other teachers ... like the LO teacher ... she told me that I did not have to do difficult physical exercises like other learners and she always gives me easy exercises ... other teachers like to make comments, like boys will always beat girls in senior classes because we [pregnant teenagers] are always thinking about boys instead of our schoolwork and end up getting pregnant. (Sthembile)

There isn't much difference from before I became pregnant ... it was only Ms Xulu and Ms Kholwa who called me when I started to show ... they asked me about the pregnancy ... they became angry with me and stopped talking to me for a few weeks and I was even afraid to talk to them about anything, but now they are talking to me again and I am no longer afraid to approach them with any problem I have with my schoolwork. (Lindiwe)

Other teachers were highly moralistic towards the participants, suggesting that they had received what they deserved. These teachers marginalised the young women by labelling them bad girls or girls who slept around, without considering other factors that could have led to their falling pregnant. Nelisiwe said that one teacher made a joke by saying:

“Oh! You have won?” He was referring to me being pregnant as if I had been going around asking to be pregnant and the whole class laughed at me. I felt very hurt, especially about that kind of a comment coming from a teacher. (Nelisiwe)

Most of the teachers do not say anything ... but when I started to show, one teacher asked me: “Are you pregnant again? When are you going to learn?” It hurts ... all those comments make me feel like a fool, especially when it is said in front of other learners. (Hloniphile)

What I do not like is what is done by some teachers ... they like to ask me: “Were you not attending ‘*umkhosi womhlanga*’?” ... I think they just like to rub in the shame I feel about getting pregnant. (Sthembile)

There are those who, once they see that you are pregnant, talk to you anyhow ... and you feel as if they think that you are out of your mind ... they become very judgemental ... like ... why didn't you use a condom? ... You have been told hundred times about AIDS ... but look at you ... aren't you afraid of AIDS ... all those things ... you see ma'am ... when you are already pregnant you cannot make yourself not pregnant just because they remind you about AIDS. (Sihle)

There were teachers who were very sensitive to the challenges faced by the pregnant teenagers; who realised that it was important for these young women to complete their schooling in order to compete with their peers for job opportunities. Some teachers gave the participants a second chance when they were absent on test dates. Since the teachers were not the part of the research, the supportive teachers towards the pregnant learners and learner mothers were those who are sensitive to gender equality and also take into cognisance that every child has got a right to equal educational opportunities:

Last month I started to struggle coming to school ... my feet were very swollen ... I used to feel like sleeping just after I had come in because of walking a long distance to school ... my class teacher suggested that I should stay at home and come to school only to write the test ... he collected my school work from other teachers and gave it to Mpilo [my neighbour] ... he had made my life easy. (Lindiwe)

The above extracts highlight a slight change for the better regarding the support of pregnant teenagers at school. Not all teachers stigmatise and marginalise pregnant girls/teen mothers at school; there are teachers who are very sensitive to the challenges faced by these teenagers. They try their best to support the teenagers in order to bridge the gender gap imbalances experienced by these girls at school.

#### **4.7 Physical changes during pregnancy**

The participants experienced many challenges caused by physical changes experienced during pregnancy. Some of the physical changes caused various difficulties in the schooling

and lives of the pregnant teenagers. Some of the young women complained about morning sickness, which sometimes made them miss school or be late for school. Some complained about being tired all the time; consequently they found it difficult to do their school work or they felt sleepy during lessons:

My problem is that I feel sick most of the time ... I have morning sickness ... sometimes it happens that when I am ready to go to school I get sick and I either come late or end up not going to school at all ... I miss lessons ... sometimes I manage to come early to school, but get sick here at school ... even when I try to study I cannot concentrate ... I can say it is difficult for me to follow a certain schedule ... it depends on how I feel ... I feel sick most of the time ... even at the clinic they add other things which I need to concentrate on ... like recording how many times the baby moves ... there is a sheet of paper where you record on ... all these things make being pregnant and doing school work difficult. (Sthembile)

I have difficulties with my school work ... because I get sick most of the time ... I always feel dizzy and I have a problem waking up in the morning ... like I always wake up feeling tired ... feeling like I am sick sometimes and I end up not going to school ... when I come back from school I arrive at home very tired and I have to do chores first and end up not doing my school work ... my school work suffers a lot. (Simpfiwe)

Most of the participants complained about gaining weight; there were also financial implications. They complained that gaining weight caused more expenses because they had to wear brassieres as their breasts were growing larger. Gaining weight also led to the school uniform being too tight; they needed to buy a bigger uniform to accommodate the pregnancy. Some of the young women could not afford to buy new uniforms and were afraid to ask the baby's father to buy these. They were then forced to wear a jersey or tracksuit jacket to conceal the very tight uniform.

My uniform is very tight but I am afraid of asking my boyfriend to buy me a new uniform because he always complains about money ... I always wear a jersey because it is bigger and it covers my tight uniform. (Simpfiwe)



It started when I was six months ... my stomach started to be big ... I couldn't fasten the zip of my skirt ... my shirt also became too tight ... I couldn't continue wearing my uniform and my boyfriend bought me a bigger one. (Sihle)

Getting pregnant brings many challenges into the lives of pregnant teenagers; all these challenges are detrimental to the educational opportunities of these teenagers. Most of the young women complained about the discomfort of sitting behind a desk, especially during their last trimester. They experienced swollen feet and back pain. They grew tired of sitting on chairs for a long time because their feet became swollen. They also experienced cramps, leading to their being late for school; all these experiences impacted negatively on the education of the participants:

My problem is that it is difficult for me to sit behind my desk for a long time ... I get back pains ... I always feel like standing on my feet ... this started after seven months ... both my hands and feet started swelling ... sometimes I feel like elevating my feet or having a massage or just walking around which cannot happen in the class ... it's like ... in the class we all sit the same way ... you cannot have a chance of relaxing your legs the way you want or you do at home. (Sthembile)

I am sick most of the time ... walking a long distance is very difficult now because I have gained weight ... when I arrive here at school I am always tired from walking and I have cramps most of the time, especially in the morning, and I don't gain much because most of the time I feel drowsy. (Slindile)

## **4.8 Conclusion**

This chapter explored factors that propel teenage pregnancy; firstly, that parents do not communicate with their daughters about sexuality or matters relating to sex. Parents hope that virginity testing will teach their daughters sufficiently about how to protect themselves from pregnancy and from contracting HIV and AIDS. All teenagers taking part in the virginity testing were known by the community; thus the participants indicated that when they

discovered that they were pregnant, there was a feeling of uncertainty of how their families and the whole community would react to their pregnancy.

The chapter has illustrated the teenagers' ambivalence towards the use of protection against pregnancy and HIV and AIDS. Teenagers indicated that the pregnancy was not planned, yet they did not use any protection. The pregnant teenagers thought only of condoms when they talked about contraceptives. They argued that they were afraid to suggest the use of condoms to their boyfriends, as they were afraid that their boyfriends would abandon them for young women who would not mind having sex without a condom.

The participants narrated the responses they experienced from parents, the community, teachers and learners. Although teenage pregnancy is common amongst blacks, being pregnant while at school is still highly stigmatised. The participants reported that they experienced marginalisation, humiliation and harassment from both society and school; and much insensitivity from the teachers. However, they reported, that there were some teachers who fully supported them - a positive shift in the teachers' attitudes towards pregnant teenagers.

The next chapter explores the teenage mothers' experiences of mothering and schooling.

## **Chapter 5: Teenage mothers' experiences of mothering and schooling**

### **5.1 Introduction**

Gender inequalities have a significant bearing upon all aspects of the young mothers' experiences, although they do show resilience. The experiences in school are such that it is young mothers who are scorned, and the management of schooling and having a baby is made difficult by the absence of any support from school. The dominant discourse indicates that teenage motherhood leads to school disruptions and school dropouts, and this chapter explores the caring for the child and examines how the young mothers balance both mothering and schooling. It further investigates the support of the family and the relationship dynamics between the learner mother, teachers and peers. Teenage mothers' experiences will be shown within differentially gendered environments, where interaction produces tension, conflicts and insubordination. Rather than simply remaining victims of these environments, young mothers find resources and strategies to cope, despite the overwhelming difficulties.

The chapter will focus on several areas of interrelated experiences, first drawing on the disruption of schooling. Next it focuses on relationships between learners and teachers and the ways in which schoolwork and responsibilities are negotiated. Loss of friends also features as important in young peoples' experiences. The chapter goes on to show how culture, body image and sexuality impinge upon teenage mothers' experiences of pregnancy and parenting.

## **5.2 Culture, mothering and exclusion**

As noted in Chapter One, the DoE provides only a legal imperative that ensures that pregnant teenagers remain in school and are permitted to re-enter after childbirth; however, there is no policy *apropos* the actual leave from school, when the pregnant teenagers leave school in order to give birth. This applies also to the re-entry after the birth. The data show that the time until the young mothers' re-entry to school after childbirth could range from one day to a month, depending on several factors, which include the health of the new mother and the baby, and availability of a person to look after the baby while the young mother is at school. Another factor is financial support which allows the baby to attend a crèche. Yet another factor is the cultural belief of the young mother's family; all the participants come from the isiZulu-speaking community, and some families still believe that after birth the new mother must remain in seclusion for a certain number of days (Mkhwanazi, 2007).

### **5.2.1 Seclusion after childbirth**

In former times, among the isiZulu-speaking community -as in any other African society - the new mother entered seclusion after childbirth; her blood, as with menstrual blood, was seen to be defiling. It was regarded as filth; accordingly, a woman's losing blood was considered unclean and she was thus unfit to mix with people, especially men. The postpartum period was thought to endanger men by weakening them and subjecting them to all kinds of dangers. Accordingly no man, including the father of the baby, entered the seclusion hut (Brindley, 1982; Magubane, 1998; Mullick et al., 2005). There was a social reaction to any woman who did not observe this cultural practice (Brindley, 1982). Even today this culture is still widely observed by many Africans. Mkhwanazi's (2007) study of pregnant teenagers and teenage motherhood in townships around Cape Town encountered a situation where the researcher found that one of her participants had to live with her aunt during the time of giving birth; culture forbade her father from taking care of her.

Eight of the 10 participants recounted that after giving birth they remained in seclusion. Three of the teenage mothers re-entered school after a week and another two after two weeks; the re-entry of the remaining two teenage mothers was delayed further owing to the health of both the babies and the mothers. Too much delay in the re-entry to school causes disruption to the schoolwork of the teenage mothers.

While about 80% of the teenage mothers embraced complicity with the seclusion practice, 20% of them contested it. Challenging the cultural norm means that the teenage mothers are also challenging the hierarchical order of showing respect to their elders. Respect is part of the African culture; adherence to this practice is sometimes used to subordinate women and young people. These teenage mothers were also risking a social reaction: society often does not accept behaviour seen to be outside of the 'norm'. Moreover, this contributed to teenager mothers' marginalisation; they were harassed and ridiculed by the other learners.

All of the first-time mothers were taught by their mothers or female relatives how to take care of their baby; this is done during the seclusion period. The participants said that at first they relied on their mothers or older relatives to teach them how to take care of the baby. The seclusion period allows a mother to teach her daughter important facts and values of motherhood. Parenthood is seen as a woman's work, since parenting and childcare emerged as primarily the responsibility of the females in the family. Mkhwanazi (2010) argues that the seclusion period provides a space for both mother and daughter to reaffirm their adherence to local ideals of good parenting and intergenerational relationships (Barker, 2005; Mkhwanazi, 2007). The following extracts show how the new mothers were introduced to motherhood:

When I came back from hospital, my mother moved into my bedroom to show me how to take care of the baby...she showed me how to bath him and how to handle him when I was breastfeeding. She showed me what to do when the baby cried non-stop, that maybe there is an evil spirit around and I need to burn incense '*impepho*' for the baby to stop crying. She [mother] was always hovering over me watching my every move and I think she moved in with me because she was worried that I might drop the baby or roll over him in my sleep. She kept on waking me up at night to tell me to watch out for the baby. (Sthembile)

For the first three days my mother was the one who was bathing the baby because I was afraid that I was going to drop her...she was very tiny at birth. I was also afraid of the stump of umbilical cord but now I am doing everything on my own... my mother financially provides for the baby, like money for the formula, clothes and crèche. (Futhi)

The seclusion practice is not only for the benefit of the new mother to adjust to motherhood; the cultural practice is gender biased - it protects men from the ills of women. The participants reported that they remained in seclusion because they were not supposed to mix with people, especially males. Challenging the cultural norm means that they were also challenging the hierarchical order, showing disrespect for their elders and risking a social reaction by 'endangering' men. This contributes to teenager mothers' marginalisation, as they are harassed and ridiculed by the other learners. Studies identify many cultures as highly gender-based; they have always associated women's bodies with uncleanness that brings harm to men (Albertyn, 2003; Saethre, 2009)

This study draws attention to the observation by some participants of this cultural practice; the data suggest that other young mothers challenged the cultural norm by attending school just one or two days after childbirth. Two of them, Slindile and Zanele, were forced by circumstances to go back to school only two days after giving birth. Had there been a policy in place on how to deal with teenage mothers' school re-entry after childbirth, participants would not have risked being marginalised, humiliated or stigmatised by both school and society. Slindile experienced a reaction from her grandmother when she attended school a day after she had given birth because she was worried about missing her June examinations. She secretly went to school, against her grandmother's wishes. Slindile related her experience, which illustrated that as a new mother she was expected by her grandmother to observe the cultural practice of the seclusion period. She chose to act against her grandmother because she was ashamed to explain to the teachers why she had been absent on the day of the examination. Challenging the cultural norm took resilience and determination to prioritise her schooling. This also indicates that learners who are also mothers are discriminated against at school; they feel ashamed to talk about the challenges of mothering. They deal with ridicule and prejudice rather than with support from the teachers.

Chigona and Chetty (2008), in a study conducted among teenage mothers in Cape Town, report that teenage mothers face many challenges when they return to school after childbirth; in order to meet these challenges they need the support of their teachers. This often does not happen, as Bhana et al., (2008, p.82), in a study looking at teachers' narratives on teenage mothers, argue that teachers found it difficult to override their own beliefs about generational hierarchies, reproduction and gender.

Here is Slindile's experience:

I started having pains on Friday while I was here at school and I was admitted in hospital in the same evening. I gave birth at 02:28 on Saturday and I was discharged from hospital on the same day ... I didn't have any problem and I felt fit to attend school because I didn't want to miss writing my exams, anyway we were writing creative writing on Monday and it doesn't need too much studying. I didn't want to explain to the teacher why I didn't write it ... *iyogugogo!* [grandmother] was very angry when I told her that I would be attending school on Monday, telling me that I was not supposed to mix with other people and all that ... I just kept quiet but I told myself that I would come to write the paper ... I was not going to spend the whole day here anyway ... in the morning I secretly left while my grandmother was still asleep... and came to write and after four hours I was back home ... but my grandmother made a big issue out of it, telling me that I do as I please *angihloniphi* [I am disrespectful] ... she was angry because she does not understand how difficult it is here at school when you are pregnant ... you don't feel comfortable talking to teachers about the problems of being pregnant or the baby ... most of the time you don't tell the truth if it's something to do with the pregnancy or the baby. (Slindile)

This extract illustrates that Slindile chose to experience her grandmother's anger for *ukungahloniphi* (showing disrespect), as *ukuhlonipha* (respect) forms part of the generational hierarchy whereby the younger generation has to respect the elders. Mkhwanazi (2007) argues that *ukuhlonipha* is one of the principles that underpin the perpetuation of gender inequalities. Slindile was prepared to face her grandmother's rebuke rather than the humiliation that she was going to receive at the hands of teachers when she asked for a re-test. On the other hand, Slindile's comment also indicates that teachers are not always to be blamed for not being supportive enough of teenage mothers; teenage mothers do not talk about the challenges of being a parent. By not observing the seclusion period and staying home with her baby for a few days, Slindile had decided to keep her baby from interfering

with her public place, the school; alternatively she could be perceived as rejecting the natural initiation of good mothering. While Slindile was rebuked by her grandmother for not observing the seclusion period, Zanele, another teenage mother was encouraged by her parents to go back to school as soon as she felt better. The following extract indicates Zanele's experiences of the other learners and her teachers:

When I came back I felt so out of place when other people kept on asking *hawu usubuyile?* [Are you back?] ... even other teachers could not hide their surprise. Mrs Z asked me: "Were you not at school on Monday?", and when I said "Yes, I was" she didn't say anything; she just rolled up her eyes. It became worse when one of my classmates called me names when I dropped his bag by mistake ... he became very angry, saying that I'm not supposed to be at school, and saying "*uthi umuntu uzopasa pho?*" [Do you think I am going to pass?]. He said that just because I've touched his bag. What hurts more is when the whole class laughs ... but there is nothing you can do ... you either keep quiet or pretend to laugh along with them. I just kept quiet and carry on with my schoolwork.

The teacher's expression of shock was evidence that she disapproved of Zanele's action of not observing the seclusion practice. Some teenage mothers are made to feel as though they are outsiders; they do not belong in school but at home. They face disapproval from both the teachers and learners; this is biased, since it is only childbearing learners who lose out on schoolwork. Instead of the female teacher's showing support for the minimal school disruption, she showed disapproval; most times when pregnant teenagers and teenage mothers complained about marginalisation, this referred to attitudes of female teachers towards them (Runhare, 2010).

When Zanele does not report the male learner's harassment, she is colluding in her own discrimination by thinking that she deserves to be humiliated; she has acted against the norm by having baby or not moaning. She keeps quiet because she will not get any support from the teachers; she has seen that the teacher also disapproved of her coming back to school early. This demonstrates how young mothers suffer in silence because they are desperate to remain in school. The male learner harassed her because he believed that she was going to bring bad luck and cause him to fail. As a man, he felt he had to safeguard his dominant position in the society by showing the teenage mother that she should have remained home.



Through all these challenges, teenage mothers became more resilient and determined to remain in school in order to acquire a good education, aiming at a better chance of employment. Some young mothers, however, thought that they deserved to be marginalised; they did not expect any protection from teachers and they [teenage mothers] did not report any of these incidents to the school authorities. In addition, participants' experience of a negative attitude and marginalisation from the teacher for not spending longer with their baby is in contradiction to the views of other teachers about pregnant teenagers and teenage mothers, that they often absent themselves from school. Absenteeism leads to a negative effect on the school's performance and the academic reputation of the school (Nkani & Bhana, 2010).

The above reveals that there is a shift from the cultural value of fertility amongst young African women as reported by previous studies, that fertility has a cultural value, especially in the gender identity of African Zulu women (Preston-Whyte, 1988). Childbearing is no longer seen as an essential part of being a woman as the studies conducted in the early 1970s (Berglund, 1976; Ngubane, 1977) reported. There is a strong resonance with Varga (2003) and Leclerc-Madlala's (2002) findings that childbearing competes with other social and economic pressures, and that there is a need to avoid school disruptions caused by childrearing, in an attempt rather to attain a good education that will lead to better job opportunities.

The data illustrate that the first reactions of the teenage mothers after giving birth were that of relief that they no longer looked different from other learners. During pregnancy they were physically different from other learners, and it was obvious that they had engaged in sexual activity, a domain of adults only (Bhana et al., 2010). This made the girls feel ashamed and guilty. This guilt was exacerbated by the humiliation and marginalisation they received from the community and from school. To most of the teenage mothers, school was viewed as a place where they could have a break from all the responsibilities and challenges of being a mother. At school they felt as carefree as any other teenager. Secondly, teenage mothers had mixed views about support from teachers; most of the teachers tolerated the presence of the

teenage mothers at school because of the DoE policy. Teachers were, however, ambivalent about supporting teenage mothers who missed lessons during the time of giving birth and whenever the baby was not feeling well.

In the next section the researcher discusses the support that young mothers received from family, teachers and/or friends. The teenagers' concerns about their lives and the lives of their babies are also discussed.

### **5.3 School disruptions**

The data suggest that the participants faced a lot of disruption - but some disruptions were more minimal than others. The disruption that occurred after childbirth depended on the length of time it took before the mothers returned to school. Buhle and Futhi, who only stayed away for a week, reported that it took a few weeks to catch up on the missed lessons; however, the learner mothers who stayed away for a month experienced far more difficulties. The shortfall of the DoE policy is that it only ensures the re-entry of teenage mothers into school, and does not go beyond that. The policy states that no learner should be excluded from getting education because of being pregnant. It is then acknowledged that a pregnant learner may encounter challenges that may cause her to be absent from school. In case of being absent from school due to pregnancy, the teachers have to provide support by sending work done on her absence. It is not clear how and when the teachers should go about doing this. For example, in informal settlement areas where there are no addresses and no telephones to call the parents it becomes difficult for teachers to give support to the learners who are not at school. Data revealed that while the school adheres to the policy of the DoE, the school does not have any policy on how to support young mothers in order to minimise school disruptions.

Some of the learner mothers revealed that they delayed their school re-entry for a month because of their ill-health or that of the baby. Nelisiwe, who was in Grade 9, stayed away for

a month because she gave birth to a premature baby and had to remain in hospital with the baby for that month. Busi, in Grade 11, gave birth through caesarean section and waited until she had recuperated. In both cases there was a great deal of disruption in their studies as they did not receive any support from the school while they were away. When they rejoined the school they were overwhelmed by the amount of work they had to do; this led to Busi's repeating her grade.

Teenage pregnancy has been noted as one of the causes of a high failure rate amongst African female learners in analysis of the matriculation results of 2002 (Perry & Fleisch, 2006). Grant and Hallman (2006, 2008) state that pregnancy and childbearing are among the most serious causes of disrupted education, especially in secondary school, posing risks for educational success among female learners (Macleod, 2003). The support of teachers could minimise the teenage mothers' disrupted schooling. Both Nelisiwe and Busi stated that they did not receive any support from the teachers. Various studies have concluded that the key to educational success of pregnant teenagers and teenage mothers is support from the teachers (Chigona & Chetty, 2008; Jewkes et al., 2009). These learner mothers realised how difficult it was to catch up the lost time:

I gave birth to a premature baby and I had to remain in hospital for five weeks. I missed many lessons because I found it very difficult to attend to my schoolwork while I was in hospital because we were attending to our babies after every two hours. When I came back I found it hard to cope ... even now I am still trying to complete all the work done in my absence ... if it wasn't for the help I received from my friends here I wouldn't know where to begin. (Nelisiwe)

I stayed away from school for about four weeks. I was hurting and struggling to walk a long distance because I gave birth through caesarean section. I only started catching up missed schoolwork when I came back. It's difficult but I am trying my best. It's much better when I am here at school because I have some classmates who help me with my schoolwork. Things become very difficult when I try to work at home because I do not have someone to help me. (Busi)

The above extracts do not only indicate the lack of support from the teachers; the young mothers' parents also could not give any support, as they did not have higher schooling than their daughters. The only form of support they (parents) could provide was to take care of the

baby. As mentioned in the methodology chapter *apropos* the context of the participants, it is also important to acknowledge that the participants' parents are located on the bottom rung of the social hierarchy; securing their jobs is paramount to supporting the teenage mothers' educational attainment. For instance, collecting school material for their daughters during school hours compromises their job security; they also often cannot go to school when they are invited to discuss how both the school and parents could support the pregnant teenager or the teenage mother (Nkani & Bhana, 2010), and therefore are unable to support their daughters emotionally.

Bhana et al., (2010) posit that young mothers from the middle class have limited school disruption as they receive support from both their teachers and their parents. Participants acknowledged and were grateful for the support given by their friends. They indicated that their classmates and/or friends played an important role in helping them to catch up on missed lessons.

### **5.3.1 Availability of a person for childcare**

Another major factor is that of the availability of someone to look after the baby while the learner mother is at school, or to give financial support so that the baby can attend a crèche. For some young mothers, giving birth can also mean dropping out of school for lack of social and institutional support. Crouch (2005), researching the drop-out phenomenon in SA, argued that about 13% of females reported pregnancy as the reason for dropping out of school. Out of 10 participants in this study, nine re-entered school after giving birth and one dropped out of school because she is an orphan and did not receive financial help from the baby's father.

Grant and Hallman (2008) assert that the continuation of schooling is facilitated by the availability of support in caring for the baby. Since the one teenage mother was not co-residing with an adult female (Macleod & Tracey, 2010) and did not receive any financial support, she could not continue with school. Studies report that a teenage mother's co-residence with an older female provides a supportive environment for the teenager (Coleman

& Dennison, 1998). Simphiwe could not obtain financial assistance from her brothers because her partner didn't pay '*inhlawulo*' (see Chapter Four). Her brothers withheld financial assistance as a form of punishment because she had brought shame to the family; to make matters worse, her boyfriend did not pay 'damages'. She did not have money to take the baby to the crèche or to buy baby formula for feeding the baby while she was at school. Her narrative revealed that her partner was not taking the responsibility of providing for the baby. He had moved on with his life without her, and had other girlfriends. She therefore felt obliged as a mother to leave school and take care of the baby:

I do not know when I am coming back to school but I know that I cannot come back this year because I do not have someone to look after my baby while I am school...I do not even have money to buy the formula...what am I going to feed the baby while I am at school? No one gives me money here at home because my brothers told me that since I have got a man, he must take care of me and my baby. What makes them angrier, it's because he didn't pay *inhlawulo*. He [the baby's father] has also changed; whenever I call him he gets angry with me because he knows that I am going to ask something for the baby... he asks me where do I think he gets money every day...all what we do these days is fighting, it's either we fight over money or girls. He seems as if he has forgotten that he has a baby, all what he does is spend money with girls. (Simphiwe)

Simphiwe further complained that she was not only failed by her baby's father, she was also let down by the system when she could not access a CSG (refer to Chapter Three) because she did not have an identification document. She had applied for an identification document when she was five months' pregnant. Her baby was already four months old at the time that she applied for a CSG. Access to a CGS could have helped her to send the baby to a crèche, leaving the mother able to attend school. She dropped out of school when she was 17 years old in 2009, returning in 2011 (Grant & Hallmark, 2006).

Ruddick (1997) argues that discourse on motherhood puts pressure on mothers to nurture and care for the baby. Most learners who have returned to school after childbirth find it difficult to balance mothering and schooling (Bhana et al., 2008). Nine of the participants were first-time mothers; they stated that for the first three months they found it difficult to balance

caring for the baby together with schoolwork. For the first three months of the baby's life all of the learner mothers indicated that taking care of the baby was done exclusively by them; their mothers were working and coming home very late. Only two of the teenage mothers that had older sisters but they could not seek their help as their parents would not let them. This was the young mother's form of punishment for falling pregnant. During the day the baby was kept in crèche and collected by the mother after school. Most of the young mothers indicated that they had not expected involvement of the baby's father in taking care of the baby, besides his financial support, as they were not living together.

As already mentioned, these young women are socialised to accept that child-rearing is the responsibility of the mother. Some of the teenage mothers indicated that they realised the gender-biased nature of child-rearing, and wished that their partners could be involved in the childcare, but the family did not allow their partners even to come and visit the child. For example, Sihle recounted that it was unfair that as a mother she was the only one who lost out by missing school when the baby needed to be taken to the clinic, instead of taking turns with the baby's father; if only her parents would allow his involvement in the upbringing of the child:

With the baby around I'm the only one who suffers, if only they [her parents] allow him [the baby's father] to be involved in his child's life, maybe we would have been taking turns whenever the baby needs to be taken to the clinic. We only talk over the phone, he is not allowed even to see his child ... nobody mentions his name when my father is around. He only comes around when my parents are not at home and he does not get in the yard ... I take the baby to him outside the gate. (Sihle)

All the participants indicated that they had experienced various forms of school disruption. For example, when the baby was sick they missed school because they had to take the baby to the doctor. They had sleepless nights when the baby cried non-stop; mothers often could not do schoolwork. In addition, as these teenage mothers came from deprived backgrounds and were mostly not breastfeeding, they experienced many financial challenges when they needed money to buy formula. They indicated that they could not take the baby to the crèche when the baby had no formula; they then absented themselves from school. The learner mothers also indicated that their mothers supported them financially whenever the baby's father had

not given money to pay the crèche and to buy formula. Jewkes et al., (2009) and Macleod and Durrheim (2003) argue that most of the disruptions experienced by teenage mothers are gendered, since as it is largely teenage mothers who bear the consequences of having children and taking care of the children, and when mothers are unmarried they and their families shoulder the financial burden.

Being a young mother is very difficult for me ... I have to wake up very early ... I wake up at 04:30 to prepare the baby and myself and take him to crèche at 6:00 because I have to be here at school at 7:00 for the morning class ... but sometimes I oversleep and miss morning classes and on the days when he is not well I don't come to school because I have to take him to the doctor ... after school I collect him at 16:30. I then wash his clothes before I prepare something for him to eat, bath him and prepare supper for the family. It is after all these things that I attend to my books. Sometimes I fall asleep before I could even finish my homework let alone studying. Hei ma'am! It's very difficult. What make things more difficult is because my mother is working and she comes back home very late. Everything depends on me. (Futhi)

These young women depended heavily on their family for support and could not defy their family members if they were determined to complete their schooling. Thus childbearing among black South African female teenagers is not a transition into adulthood. The young mother has to abide by the rules of her parents as she is still under their authority (Preston-Whyte, 1992). The learner mothers mostly work hard juggling mothering and schooling without the support of the baby's father.

## **5.4 Relationship with teachers**

All of the participants found it very challenging to negotiate the life of being both a mother and a learner. They maintained that the first few months were very difficult; they were still adjusting to the new life and it affected their schoolwork negatively. Most of the teachers became very impatient with them, and some openly asked the learner mothers to choose between motherhood and schooling. Since only they were taking care of the baby, they found very little time for their schoolwork; they were taking care of the baby and attending to the

household chores. They complained that by the time they had completed household chores and taken care of the baby, they were too tired to do schoolwork.

Some of the challenges arose from the young mothers' financial constraints: when they ran short of baby formula, or did not make payment at the crèche, they absented themselves from school. Absenteeism and not completing their schoolwork were factors which made some teachers remind the teenage mothers about the disadvantages of teenage motherhood. The participants kept quiet about all the treatment received from the teachers; they felt that they deserved to be marginalised. They also experienced emotional stress caused by various factors. For instance, when Slindile left the baby for the first time, she found it difficult to concentrate on lessons at school because she was worried about the welfare of her baby. The young mothers' narratives illustrated that they needed understanding and emotional support from the teachers. For example, when the baby was not feeling well, the teenage mothers complained that teachers were always reminding them of how difficult it was to be both a mother and a learner. It seemed as if the teachers were expecting them to give up at any time, rather than encouraging them to try harder to balance their lives:

I could not submit my Biology assignment which was due last Friday because my baby was not feeling well and he was crying a lot and when I told the teacher, he was angry at me asking me why don't I stay at home if I cannot cope with my schoolwork ... the only thing I can say is that it's very, very hard to be a mother and be at school. (Futhi)

I find it very difficult to cope with my schoolwork because all what I do is work ... work ... and I once complained to one teacher that I don't have time. Do you know what she said? "That's how things are when you choose to be an adult before your time." (Lindiwe)

All these challenges affected their school performance, and their circumstances were exacerbated by the teachers who become irritable instead of being supportive. The participants indicated that sometimes they felt as though teachers were targeting them to make them an example to the other learners of how difficult it is to be both a mother and a learner. They felt marginalised and humiliated when they were shouted at for failing to do their homework.



Reiterating the argument that teenage mothers need support from both home and school in order to succeed at school, the data suggest that teenage mothers benefited greatly from the morning classes, Saturday classes and study periods after school organised by the school. The participants used this opportunity to do schoolwork as they did not have time to study when they arrived at home because of the many chores to be done and the baby to be taken care of. Most of the learner mothers used the time profitably, successfully completing their schooling:

I have to attend study period which finishes at 16:45 because that is the only chance I have to study as I do not have enough time at home. (Lindiwe)

After school I go and pick up the baby from the crèche, wash his clothes, clean the house and cook supper for the family. It's very hard, especially now that he is no longer breastfeeding. You find that by the time I am finished doing all the chores I am too tired to do any schoolwork. I only get the chance to do my schoolwork during the study period. (Nelisiwe)

There are teachers who really understand and promote gender equality at school. They realise that young mothers need support in order to minimise disruptions caused by teenage motherhood. Some participants indicated that there were teachers who were very supportive. By supporting learner mothers, these teachers promote gender equality in education and empower the young women to achieve better education in order to increase their life chances and economic prospects (Chigona & Chetty, 2007, 2008; Bhana et al., 2008; Bhana et al., 2010; Panday et al., 2009). These teachers helped them out with their missed lessons; some teachers showed understanding of a young mother's having to attend to a sick baby as would any other mother. Hloniphile stated that when her baby was admitted to hospital during examinations, she was also admitted. She was given a chance to write all the lessons missed; in addition, her class teacher organised for her to write before the other learners in order not to delay her going back to hospital.

Hloniphile stressed that it is not all teachers who marginalise learner mothers; there are those teachers who have an interest in the educational success of all learners at school. They give support to the teenage mothers in order to minimise the school disruptions that they experience:

I became sick before giving birth and I stopped coming to school. I gave birth after three days and a week later I came back to school. After four days back my baby got sick and we went back to hospital. I was also admitted because I am breastfeeding. It was time for writing March tests and I missed one paper. I was worried what I was going to say to Mr Z, but only to find that he was very understanding. He organised me another date without many questions. I also received support from my class teacher who asked me if I could arrange with the hospital to come and write the rest of the exams ... I asked permission from the hospital and I used to come early and write; after I finished writing I went back to hospital. I was relieved that I did not miss any of the papers. (Hloniphinile)

The above extract highlights the self-determination and resilience of the young mothers to continue their education through all the difficulties of mothering they experienced. It also indicates that there is a slight change for the better in the support given to teenage mothers at school. Not all teachers stigmatised and marginalised teenage mothers; there were those teachers who saw the importance of supporting the teenage mothers by trying to bridge the gap of gender imbalances they experienced at school. Bhana et al., (2010) argue that teachers' support for teenage mothers promotes gender equality and mediates the negative consequences attributed to early pregnancy.

## **5.5 Relationship with learners**

The participants indicated mixed feelings about ridicule and teasing from other learners (Arlington Public School, 2004; Chigona & Chetty, 2008). Most of the teasing by other learners, especially male learners, was reported in lower grades because teenage pregnancy was not as common as in senior grades (refer to the previous chapter). The learner mothers who were doing senior grades, i.e. Grades 11 and 12, did not experience much teasing; instead they received support from their classmates. For example, there were five teenage mothers from the same class, who said that their classmates were so used to pregnant teenagers and teenage mothers that they were no longer paying much attention to them. These young mothers even reported that they formed study groups with both female and male classmates. However, those participants who were in the lower grades (Grades 9 and 10)

reported humiliating treatment by other learners, because pregnancy is not something common at that level:

There is this male learner in my class who likes to remind me that I am a mother. When I am here I just want to be like any other learner. He never addresses me by my real name, he always makes fun of me by calling me ‘so and so’s mother’ (*maka shanibani*). (Nelisiwe)

The above extract does only indicate the harassment and marginalisation Nelisiwe received from the male learner, it also illustrates how she constructs herself; in public she rejects motherhood. At school, she aspires to be seen as simply a female learner being addressed by her name so that she does not feel different from other learners. She likes to keep the identity of motherhood as private as she can and does not like to be constantly reminded of it:

We don’t get any teasing from our class; I don’t know, maybe it is because since last year, when we were doing Grade 11, there were many pregnant teenagers and teenage mothers, like this year there are eight of us [pregnant teenagers and teenage mothers]. We even have a study group preparing for our exams ... I think everyone is worried about passing Grade 12 at the end of the year. (Sthembile)

The data suggest that teenage pregnancy and teenage motherhood is common in some schools, especially in senior grades. Furthermore, when teenage motherhood is common, the teenage mothers are not ostracised and humiliated as much as when it is rare.

## **5.6 Schoolwork and responsibilities at home**

Child parenting is highly gendered, especially in the African context where childcare is seen as the responsibility or work of a woman (Hill-Collins, 1987; Barker, 2005). Studies show that factors such as gender, race and class are crucial in understanding the experiences of teenage mothers (Macleod, 2001; Macleod, 2003; Macleod & Tracey, 2010). Taking into consideration the social context of the participants, who come from a disadvantaged background (refer to Chapter Three), and the changes in the family life of the people living in

the informal settlement area, the teenage mother becomes a primary caregiver to her baby because of lack of support from the baby's father; she also cannot afford a babysitter (Pillow, 2004; Chigona & Chetty, 2008). About 70% of the participants live with single parents (mothers) who are working and coming home very late. They do not live with their grandmothers, since most grandmothers live in the rural areas. This has a huge impact on the teenage mother's lifestyle and development. She is not only taking care of the child, but taking care of the household chores and caring for younger siblings, all while attending to her schoolwork. De la Rey (1997) argues that teenage mothers are already reeling from the gender-specified roles used to define women that have been perpetuated in their communities.

What emerged from the data is that at first the participants did not know how to balance motherhood and school since they were taking care of the baby and household chores. Their schoolwork suffered as they received very limited support from their partners; however, the participants received a great deal of support from one other and from their friends at school. They also demonstrated that after they had adjusted to motherhood, they used the opportunities presented by the school fruitfully (that is, the morning classes and study periods), working very hard in order to make up for the limited time they have at home. Of the nine participants that remained in school, three did not pass at the end of the year.

## **5.7 Body image dissatisfaction**

As mentioned above, many participants were not breastfeeding (which would have freed the mother from the tedious preparation of bottles). However, mothers reported that they sometimes had no money to buy formula. The teenage mothers' narratives illustrated that although breastfeeding could have made their lives easier, it was not the preferred option for seven of them. At first they said that they stopped breastfeeding because it was painful, they did not have enough milk or the baby rejected breast milk after the mothers went back to school. They later contradicted themselves by complaining that they had stopped breastfeeding because it made them gain weight and they were no longer feeling beautiful.

This shows that these young women constructed their gender identity as sexual beings and were more concerned about keeping their breasts in good shape and size than in minimising the challenges they faced in taking care of the baby.

This also indicates the changing perception among the teenagers about what ‘beauty’ means to them as Africans - a westernised version of beauty. They are influenced by what they see in the media and no longer see being voluptuous as beautiful. They defined their identity along the lines of heterosexuality as they were worried that when they continued with breastfeeding they would not be able to compete with peers for the gaze of men. Weedon (2004) argues that identity is made visible and intelligible to others through cultural signs, symbols and practices. This can be seen most obviously in the case of gender identity, where cultural codes of the body, dress and behaviour signify gender.

They also indicated that they stopped breastfeeding because of the ridicule and teasing they received from other learners because of their big breasts. They also argued that it was ruining their breast shape and size (refer to Chapter Three). This resonates with the research findings that young women from low socio-economic background are least likely to breastfeed for a number of reasons, including embarrassment; they prefer bottle feeding (Shaw et al., 2003).

When I was breastfeeding my breasts were very big and I gained too much weight. Since I stopped it, I’ve been slowly losing weight and my boobs are not that big. They were making fun of me in my class when I was breastfeeding. One of my classmates said that if I was a cow, the class would be having ‘*amasi*’ [sour milk]. (Sthembile)

The participants told of dissatisfaction about the changes brought about by pregnancy. They felt that they were no longer beautiful and felt embarrassed to be with their peers. They complained about stretch marks and that their clothes did not fit them nicely (refer to Chapter Four):

I’ve got stretch marks; it’s embarrassing to undress in front of other people. It’s about to be a festive season and I don’t think I will be able to wear crop tops. My flabby stomach makes my clothes not fit nicely. (Lindiwe)

After giving birth I started to exercise in order to tighten my tummy, but stretch marks don't go away ... you know, I just feel like a zebra. (Buhle)

The data also demonstrate that teenage mothers invest heavily in their appearance and how men see them. By worrying about their appearance for the benefit of pleasing men, they reinforce existing gender norms and definitions of femininity (Litosseliti & Sutherland, 2002; Marcus, 2003). Furthermore, the young women's emphasised femininity is characterised by compliance with the heterosexual binary, where women's subordination to and accommodation of the interests and desires of men is emphasised (Connell, 1987). In accepting this they are complicit with the unequal structure of gender relations that subordinates women.

## **5.8 Conclusion**

This chapter outlined the gendered experiences of teenage mothers both in school and at home. In their different circumstances, the participants experienced challenges and disruptions to their schooling as a result of cultural expectations; by not challenging the cultural norms, they fed into the gendered hierarchies. Those teenage mothers who contested the cultural practices were condemned by family, risked derogatory remarks from other learners, and were stigmatised by teachers. Generally the participants were emotionally disturbed by constantly experiencing harassment, marginalisation and ridicule at school, and felt that they did not receive any support from the school authorities.

All the participants in this study argued that motherhood was very demanding, challenging and very disruptive of their school work; however, but they indicated self-determination and resilience to find ways of successfully juggling motherhood and schooling. They indicated that there is some degree of institutional support which accounted for their overall performance and achievement as learners who are also mothers.

The next chapter illustrates support from the children's fathers in the context of childcare.

## Chapter Six: Boyfriends, ‘babas’<sup>2</sup> and babies: Young women negotiating pregnancy, parenting and schooling

### 6.1 Introduction

Being pregnant or a young mother at school requires strategic negotiations and support in managing schooling during pregnancy and parenting. For young women to complete their schooling successfully requires support from school as well as from home. Chapters Four and Five argued that although research indicated that schools do not support young women (see Chigona & Chetty, 2008; Bhana et al., 2008; Nkani & Bhana, 2010), the pregnant teenagers and young mothers in this study indicated that there was minimal support from the school, which contributed positively to their schooling.

In this chapter the focus falls upon the boyfriends’ and young fathers’ involvement with pregnancy and parenting. The dominant discourse portrays how gendered the involvement of young fathers in the work of caring for and nurturing their children is, as it becomes overwhelmingly the responsibility of the young mother. This chapter investigates the support the young women received from their boyfriends during pregnancy and after giving birth.

**Table 6.1: Outline of the participants’ relationships**

Participant and age	Boyfriend’s age	Boyfriend’s home	Duration of the relationship	Employment of boyfriend
Nelisiwe, 16	22	Inanda	8 months	Casual
Mandy, 18	23	Inanda	1 year	Fully employed
Buhle, 18	20	Inanda	9 months	Casual

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<sup>2</sup> ‘Baba’ means a father in isiZulu language.



Futhi, 17	23	Inanda	2 years	Casual
Simphiwe, 18	24	Inanda	1 year	Casual
Zanele, 17	23	Inanda	20 months	Casual
Lindiwe, 16	22	Inanda	4 months	Fully employed
Sthembile, 17	24	Empangeni	11 months	Fully employed
Slindile, 18	25	Ulundi	8 months	Fully employed
Hloniphile, 19	26	Inanda	4 years	Fully employed

Pregnancy and parenting are highly gendered, as childcare largely falls on the shoulders of young mothers. Young women's experiences reflect the gendered, insubordinate environments in their sexual relationships and their experiences as pregnant teenagers and young mothers. This chapter traces the ways in which gender plays out in the sexual relationships, contraceptive use and boyfriends' involvement with the young mothers. First the chapter will explore the young women's relationship with their boyfriends; it will also draw attention to how the boyfriends responded to the news of pregnancy. The chapter then explores the young men's support during pregnancy and after the birth of their children.

## 6.2 Meeting boyfriends

Seven of the participants' boyfriends were living in the young women's neighbourhood. These young women had known them for a long time before the young men proposed love to them. The young women indicated that they occasionally met the young men in the neighbourhood, either seeing them in the shop or meeting them on their way to or from school. One of the participants indicated that when she first started Grade 8 in secondary school, the young man was doing Grade 12 in the same school:

Ehh! I used to see him visiting *umfana wakwamakhelwana* [my neighbour's son] and when I first came here [school] to do Grade 8 he was doing Grade 12 ... when it was time to go home, we had to walk home as a group because there were boys who used to intercept us on our way home and harass us, demanding money and cell phones ... at that time I was not used to him until one day last year when I met him. He was like ... wearing smart clothes ... he looked so different from the time he was here ... he asked me whether the boys were still harassing us and after that I met him quite a few times and he started to propose. (Lindiwe)

My boyfriend ... I used to see him around my area ... I mean I knew him long time ago, because we both live here at Inanda, but he started *shela* 'd [proposed love] me in 2007. I used to come across him on my way to school when he was coming from work ... when he was working night shift ... he used to make small talk until one day he asked for my cell phone number ... the rest is history. (Futhi)

Two of the young women's partners were not from Inanda. Sthembile's partner was from Empangeni, which is 167 km north of Durban and Slindile's partner was from Ulundi (211 km north of Durban). When Sthembile first met her partner he was 23 years old and working in one of the companies in Richards Bay. He used to visit his relative who lives in Inanda and that was how he met Sthembile. They exchanged cell phone numbers. She had just turned 16 and it was the year that she had stopped attending virginity testing (see Chapter Four). Because Sthembile's actions were heavily monitored by both her parents and brothers, her partner found it difficult to spend time with her and they mainly communicated love by cell phone (Hunter, 2010):

**Interviewer:** How did you meet your boyfriend?

**Sthembile:** He was visiting his relative, who lives in my neighbourhood, and he saw me coming from the shop. He asked for my cell phone number and he started calling me and we talked until I agreed to be his girlfriend. The problem was that we couldn't see each other whenever he was visiting at Inanda ... at home they are very strict, my parents and my brothers. I rarely go out unless I've been sent on an errand. After seven months of being together, he came and '*cela*' me [propose marriage]. My parents agreed and suggested that they would be happy if he could let me finish school.

**Interviewer:** How did he respond to your parents' request to complete school?

**Sthembile:** He agreed and said that he wished me to continue to tertiary.

Sthembile positioned herself as chaste and respectful of her parents' wishes by not forcing matters to meet her boyfriend clandestinely. Thus her partner saw her as a potentially good wife and sent his family to ask for her hand in marriage [*cela*]. Once the young woman's boyfriend had '*cela*'d her, negotiations over *lobolo* began, after which various formal visits and gifts exchanges between the families occurred. The young man is then referred as '*umkhwenyana*' (fiancé) and the young woman is referred as '*ingoduso*' (fiancée). Both young people have a right to visit each other openly. Although they are not yet formally married, the young woman is referred as '*umakoti*' among the *umkhwenyana*'s family. In addition, Sthembile's fiancé showing interest in her remaining in school indicated that he did not want her to be a traditional wife, who is only responsible for reproduction and taking care of the household. He wished that in future they would both provide the economic production for the development of their household. Historically, showing respect (*inhlonipho*) and maintaining virginity were key elements used in determining a young woman's potential for becoming a good wife in KwaZulu-Natal (Hunter, 2010).

According to a Zulu tradition, after the payment of *ilobolo* the family of the bride-to-be takes presents to the *umkhwenyana*'s family; that is called '*umbondo*', and the bride-to-be is left behind to spend some time with her future family. The participant reported that it was then that she first slept (had sex) with her partner and got pregnant. Morrell (2006) concurs that culturally among the isiZulu-speaking communities; virginal penetration was permitted after the '*ilobolo*' negotiations had started. Although her parents were disappointed, they did not receive the news of her pregnancy as badly as the other participants' parents. There was no need for the payment of the 'damages' as the payment of '*ilobolo*' had begun (Hunter, 2010). Ngubane (1981) and Harrison (2007a) argue that in historical perspective the practice of *ilobolo* was intended to give a husband's family the right to his wife's reproductive abilities.

I first went to Empangeni when we had taken *umbondo*...it was on the weekend of the second week of June holidays...I did not come back with the rest of the people whom I went with at Empangeni but remained behind for three days and that was when I first slept [had sex] with my fiancé and later I found out that I was pregnant. (Sthembile)

Slindile first met her partner when she was 17 years old and doing Grade 11. Her partner was 25 years old and working in the transport industry as a driver. He was living in rented accommodation in Slindile's neighbourhood as he was from Ulundi. He was the second boyfriend to Slindile. Before they were in a relationship he occasionally gave lifts to Slindile when she was going to school, and that meant that the money she was supposed to use as taxi fare she used as spending money at school. They became friends and later the friendship moved into a sexual relationship. Also, since the partner was renting Slindile could go to the rented room as she pleased while her mother was at work. After eight months in the relationship, Slindile fell pregnant.

### **6.3 Acknowledgement of paternity**

Some of the participants reported that when they discovered that they were pregnant, they panicked because they were worried about how their partners were going to respond to the pregnancy. Amongst the IsiZulu-speaking community, when a woman falls pregnant out of wedlock her family approaches the family of the identified father with a request for acknowledgement of paternity (Mkhwanazi, 2007). Initially this is the responsibility of the family's women-folk to '*ukubika isisu*', which literally means to report the stomach, referring to the big tummy because of pregnancy. The acceptance of paternity is linked to social and financial commitments. The child's father has to pay damages ('*inhlawulo*') as he has brought disgrace to the household; he must also contribute to the support of the child. In some instances young men deny paternity because they do not want to assume the financial obligations (Preston-Whyte & Zondi, 1992; Kaufman et al., 2001; Varga, 2003; Mkhwanazi, 2007; Jewkes & Christofides, 2008). Denying paternity leads to the young woman's stigmatisation, humiliation and being insulted as if she has been sleeping around and does not know who the father of her child is.

Sometimes the young man verbally acknowledges the paternity, and promises to pay for the damages once he has the money to do so. The participants indicated that it is safe for the

pregnant girl to talk to her boyfriend, so long as his family has already been approached for an acknowledgement of paternity in order to avoid the humiliation of denied paternity.

According to Swartz and Bhana (2009), in other communities, on top of the ‘damage’ payment for the actual pregnancy, there is the added burden of payment for transgressing the codes of ‘*ukuhlonipha*’ (respect) and ‘*ukudliwa*’ (a fine paid by the father of the child for being guilty of disrespect for a man’s household by impregnating the young woman), followed by the traditional practices of negotiations. The form of payment varies according to the community the young woman comes from. For example, there is an amount which is paid and distributed among the young women who are virgins in the area, which is a form of cleansing ‘*yeyokuhlanza izintombi zesigodi*’, and the young man should buy a goat for cleansing the young woman’s family household. From the above examples it is clear that the financial implications associated with being a father are indeed enormous. It becomes very difficult for many young men to meet these demands because of the high rate of unemployment (Chapter One), and this could make these men feel like failures or as less of a man if they fail to provide for their children:

When I found out that I was pregnant, I was shocked because I had never thought that I was going to get pregnant... I panicked because I did not think that my boyfriend was going to accept paternity and I was relieved when he accepted. (Zanele)

**Interviewer:** Why did you think so?

It’s because we’ve been fighting a lot and I decided not to take his calls for about two weeks. All of a sudden I called telling him that we needed to meet urgently. It sounded very suspicious even to my own ears. (Zanele)

I was shocked and afraid of what my ex-boyfriend was going to say because ‘*besesihlukene*’ [meaning that they were no longer in a relationship]. (Mandy)

The pregnant teenagers were worried about how their partners were going to respond when approached by their families about the pregnancy. All of the participants except one reported that their partners acknowledged the paternity, although some of the partners did not meet the requirement of paying the damages because they were only temporary employed. Whatever little they were earning could not cover the costs of payment of damages and supporting the pregnant teenager. Non-payment of the ‘damages’ could be negatively received by the young

woman's family, as happened with Simphiwe's brothers (refer to Chapter Four). Mandy, who was no longer involved with her boyfriend, indicated that when she was taken to her ex-boyfriend's family the paternity was neither accepted nor denied; they were told that the family would wait until she had given birth to the baby. Therefore, the damages were not paid and she also stated that she did not receive any support from her partner during pregnancy. It was only after the baby was one month old, when her family went back to her ex-boyfriend's family, that the paternity was accepted after they saw the resemblance of the baby to the father.

Hloniphile, who was cohabiting with her partner, was worried about her his reaction to the pregnancy because he was not aware that she was no longer using contraceptives. She indicated that after she had the first child, her partner did not want to use condoms; however, he was expecting her to use contraceptives as he did not want them to have another baby before she had completed her schooling. Her partner was providing material support for her, for example supporting her and sending her to school. She was afraid that by falling pregnant for the second time she would have to take the blame for the additional burden to her partner's finances:

I felt very bad when I found out that I am pregnant because this is my second child. I thought he was going to be angry at me...he was going to think "How can this person do this to me, after all what I'm doing for her, supporting her, sending her to school and now she is getting a second child, what she does is adding financial burden for me". What made things worse is that I did not tell him that I have stopped taking injection because it made me sick.  
(Hloniphile)

This participant was ready to take the blame for the pregnancy as she felt that she was the only person responsible for use of contraception in their relationship. This is an indication of desperation to maintain the relationship by portraying her boyfriend as innocent, whereas he was also responsible. The participant indicated that she stopped using contraceptives because of ill-health; however, she was afraid to suggest that her boyfriend should use protection, because of gender power dynamics (Shefer, 1999; Varga, 2003). The boyfriend had power

over her through age and money. However, she reported that her partner decided that they should keep the baby as she was already pregnant.

All the other participants reported that they were not worried about the reaction of their partners, since the three young women were virgins when they first had sex with them (partners). They followed different procedures in reporting the pregnancy at home. Two of the pregnant teenagers waited until it was discovered by their parents and the family approached the partner, after which the negotiations for the payment of the ‘damages’ began:

When I found out that I was pregnant I just kept it to myself because I was afraid to tell my mother that I am pregnant. I waited until they discovered for themselves. After my mother confronted me, I told my boyfriend and he told me that his mother would be at home for the whole week because she was on sick leave. My mother and my aunt took me to my boyfriend’s home very early on the following Saturday. (Buhle)

I was taken by ‘*ugogo*’ [grandmother], my aunt and mom to ‘*bika isisu*’ [report the pregnancy] to my boyfriend’s home. (Nelisiwe)

One of the participants, Lindiwe, waited for her boyfriend to approach her family to report the pregnancy with the payment of damages. When she discovered that she was pregnant she ran away from home to her grandmother’s house because she was afraid of how her brother was going to respond to the news.

When I discovered that I was pregnant, I decided to go and stay with my grandmother before they noticed me. I did not want my brother to find out because I did not know how to tell him. While I was at grandmother’s place, my boyfriend sent his family to report that he had made me pregnant and paid *inhlawulo*. I then returned home after my brother knew about my pregnancy and I thought that there won’t be any tension between me and my brother as he had received *inhlawulo*. (Lindiwe)

Lindiwe's further narrative illustrated that the payment of the 'damages' did not make her brother feel better about what she had done (getting pregnant), and the blame was still on her as it is culturally believed that a woman is responsible for avoiding pregnancy, regardless of being coerced and overpowered by a man. The young women further indicated that the payment of damages did not mean that they were now free to meet their partners or were treated as adults who could have an open relationship with a boyfriend. Their parents were stricter than before, and they were afraid to act against their parents as they were still expecting their parents' support when the child arrived. They mainly communicated with their partners through cell phones:

Eish! Things did not change at all at home...my mother became stricter than before; she said that I must concentrate more on my schoolwork, because if I fail this year she won't help me to come back to school. (Futhi)

I thought my brother was not going to be that angry with me after he received payment of damages, but I was mistaken. He did not speak to me for a long time...I think about three or four months. (Lindiwe)

Slindile, who once had a sexual relationship before this, reported that her partner was very happy to learn that she was pregnant as the child would be his first. She stated that from the beginning her boyfriend wanted to have a baby, and they had gone for HIV testing, although she claimed that she was not yet ready to have a child as she wanted to complete her schooling before she fell pregnant. She reported that she was afraid to tell her boyfriend that she was not ready because keeping a boyfriend was important to her:

I was not worried about how he [boyfriend] was going to respond on finding out that I am pregnant. He was very happy when I told him. (Slindile)

**Interviewer:** Does that mean you have planned to get pregnant?

I can say that I knew from the beginning that he wanted to have a child... because all his friends had children, but I was afraid to tell him that I was not yet ready. (Slindile)



To be a successful young woman, you must be able to secure and maintain a sexual relationship (Nduna & Jama, 2000; Leclerc-Madlala, 2002). On the other hand, Slindile's boyfriend had never impregnated a woman; he felt pressure from his peers to prove his manhood or maturity by fathering a child, and did not provide the opportunity for Slindile to make a choice about getting pregnant. Research has indicated that African men generally view fathering a child with pride; this symbolises sexual virility and promotes the status of a young man (Varga, 2003; Albertyn, 2003; Morrell, 2006; Hunter, 2006, 2010; Wood & Jewkes, 2006). There is a competitive attitude about the attainment of manhood or heterosexual masculinity amongst young African men. Their interest is either in multiple partners or fathering a child.

Slindile portrayed herself as someone who was not given a choice on the issue of pregnancy, and she did not use any contraceptives to prevent the pregnancy. The young man's wish for a child and the pregnancy had increased Slindile's chances for marriage, if not she will settle for a long-term relationship (Preston-Whyte & Zondi, 1992; Kaufman et al., 2001). In addition, being a 'child's mother' (*umama wengane*) provides an elevated position to the young woman in a multiple relationship situation, whereby other girlfriends have to give way to her. The child's mother is also acknowledged by her partner's family. In the case of Slindile, she was allowed to come and go in her partner's family, especially as her child was living with her boyfriend's mother. In other families, other girlfriends are not acceptable to visit, if they do so they do without the knowledge of the family. Same thing applies with the child's father, he can be allowed to bring things for the baby or take the child to the doctor, but in other families as long as he has not paid *ilobolo* his position does not change. It was both Slindile and her boyfriend that reported to her mother about the pregnancy. Other studies found that some teenage girls deliberately fall pregnant because of pressures from their boyfriends and peers to prove their fertility. Reproduction is viewed as an important element of social respectability and the ability to have a long-term relationship with the child's father, and it also confirms femininity (Southern African Regional Poverty Network, 1998; Varga, 2003; De Villiers & Kekesi, 2004; *IRIN*, 2007, April 3).

From the data indicate that Preston-Whyte and Zondi's argument appears to be upheld by the young women in this study: fertility is valued over abortion. Within the broader context of Inanda too, as Preston-Whyte and others have argued, fertility is cultural instantiation of power. However, the women are not simply a product of culture - they enable it, since they choose to have their babies rather than to abort. Abortion laws in South Africa make it possible for young women to terminate and are part of their sexual reproduction rights. However, the women referred to the stigma around abortion, and within a community where historically and culturally fertility has been valued, they did not find abortion to be an acceptable route. Further, many assumed that abortion would lead to negative consequences for future fertility and this myth and fear around this prompted decisions to go through with the pregnancy

#### **6.4 Support during pregnancy**

Most of the participants reported that their boyfriends supported them financially whenever they needed money to attend the antenatal clinic, which they joined very late in their pregnancy (on average when five months pregnant). Six participants indicated that they had a problem meeting their partners as they (partners) were not allowed to enter their homes, even after the payment of the 'damages'. They were mostly worried about being abandoned, especially because they were aware that their boyfriends' relationships were characterised by multiple concurrent partnerships. For men, multiple partners are socially acceptable and even encouraged (Hunter, 2010). In keeping with cultural constructions of masculinity, multiple partners are viewed as a form of security, to ensure that one has a partner (Harrison, 2007b). In Swartz and Bhana's (2009) study, young men put themselves at enormous risk through practising unprotected sex with multiple partners (Halperin & Epstein, 2007). They want to be popular among their friends and be called a '*pleya*' or an '*isoka*'. This is reiterated by Morrell (2006).

Harrison (2007b) and Hunter (2010) state that the identity of an African heterosexuality is characterised by risk taking and men having multiple partners. The young women reported that they became frustrated whenever their partners did not call and check on their well-

being. In addition, the pregnant teenagers were worried that they would not be able to compete with other young women for the young men's attention as they were restricted from meeting their partners by their parents. As these young women had already started expressing sexuality and experienced sexual pleasures, it became stressful when their parents barred them from getting into contact with their boyfriends. Their being worried that they would not be able to compete with other young women for his attention was justified considering the phenomenon of multiple relations. On the other hand, the pregnant teenagers could not act against their parents as they also expected their support when the child arrived, as a backstop should the father fail to assist financially:

He still cares for me, but sometimes he does not call me as regularly as he used to do. For example, he did not call me for a week and I got worried that maybe he had left me for other young women who have figures unlike me with this mountain that I have. When he ultimately called yesterday we fought like hell, when I asked him who he is calling these days and that he must not forget that no man wants someone pregnant with another man's child like me, so he is stuck with me. (Buhle)

He is not always around...most of the time we communicate telephonically or he only comes when he has brought money for me to go to the clinic...he is not allowed to enter at home...when he visits me ...he waits for me few metres outside the gate and I go out to him...I also do not stay long because I am afraid that my parents are going to catch me talking to him. (Futhi)

I think our relationship hasn't changed, he gives money for the clinic, he buys me things that I like to eat...but sometimes he causes me stress...like when I have a chance to meet him...if it happens that he receives calls, he moves away from me because he does not want me to see the name of the person who is calling or listen to what he is saying...that makes me very jealous because I know that he is hiding something from me...maybe he is talking to his other girlfriends. (Lindiwe)

He is not always around. Most of the time we talk over the phone...it's only when he brings money for me to attend the antenatal clinic or when I have a problem that he comes...otherwise I rarely see him. (Nelisiwe)

The young women's narratives illustrated that although they highly appreciated the material aspect provided by their partners, they also needed their boyfriends' emotional engagement, especially as some of the participants reported (see Chapter Four) the alienation they experienced at home as a form of punishment for being pregnant. The participants (excluding Simphiwe and Buhle) also reported that when their uniforms could no longer accommodate their pregnant bodies, their partners bought them a bigger one. Simphiwe reported that although her uniform was very tight she continued wearing it, and concealed her pregnancy by wearing a jersey even if it was hot, because she was afraid to tell her partner to buy her a new uniform. Sihle complained that things changed once she became pregnant; her partner's support was constrained by his being only temporarily employed. She could obtain support only whenever her partner had received a casual job; therefore she could not ask her partner to buy her a uniform. She was also depending on her mother's support, including for the money to attend the antenatal clinic. Thus the employment of the partner is a determining factor in the support given to the mother and child.

Hloniphile, Slindile and Sthembile indicated that they received both emotional and financial support from their partners; Hloniphile was cohabiting with her partner and Slindile was free to visit or to be visited by her partner. Sthembile's partner not only supported her financially, he also visited her almost every month-end as he was working in Empangeni.

He gives me money to attend an antenatal clinic ... he bought me a new uniform when my other uniform became smaller ... he also bought me clothes ... he has already bought baby's clothes ... he also calls regularly to find out about how I feel. (Slindile)

He gives me money ... he buys me my favourite things like chocolate ... but sometimes he does things that make me angry ... like when he answers his phone ... he hides it so that I cannot see who he is calling to and I feel jealous that maybe he is being called by other girlfriends. (Lindiwe)

He tries by all means to supply me with whatever I need ... he buys me all the things I like to eat ... he gives me money to attend antenatal clinic ... he has already given me money for an emergency ... like when the labour pains starts. (Zanele)

The above extracts indicate that the young men provided material support, which was what they thought, was expected of them. Dover (2001) argues that in many parts of Africa a man commands respect when he is able to provide for and maintain his household. On the other hand, Barker (2009) states that social class and educational attainment have an influence on men's participation in the child's care giving, with low-income men spending less time with their children than middle-class men. Furthermore, young men feel pressure to prove their manhood by proving virility both by fathering a child and providing adequate financial support for a household. Hunter (2010) concurs when he talks about commodification of a relationship, where the young man has to work very hard in order to pay *ilobolo* for a young woman and subsequently to support the wife. In return the wife contributes by giving birth to children, taking care of the children and maintaining the marital household.

## **6.5 Arrival of the baby**

Out of the 10 young mothers, four gave birth to boys and the new fathers were very happy because among Africans the birth of a boy child is more valued than that of a girl child. Having a son means continuation of the family name; it is assumed that a daughter will get married and change her name to that of her new family (Preston-Whyte, 1993). All of the fathers were very happy at the arrival of the new baby and wished to take part in their lives. However, some of *obaba bezingane* (fathers of the baby) were denied the chance to take part in caring for the baby, for various reasons, some were based on the fulfilment of cultural practice. Most of the participants reported that their partners waited for at least a month before they were allowed to see the baby, as the young mothers were still observing the seclusion period (refer to Chapter Five). Some of the new fathers were not even allowed to come to the young mother's home, as they had not paid the damages. On the other hand, the young mother is expected to respect her parents' wishes as she is still under their household. Thus cultural practice and financial disadvantage become barriers between the father and child:

He is not allowed to come and see the baby...we meet each other privately, especially when I take the baby to the clinic. Sometimes he gets a chance to come home when my parents are still at work, but he is not allowed to visit at all. (Futhi)

It was after a month that his mother came to see the baby...she brought some stuff for her [the baby]. *Ubaba wengane* [baby's father] is not allowed to visit. My uncle said that as long as he [the boyfriend] has not yet paid '*inhlawulo*', he is not allowed to come home. My uncle said that we could meet far away from home. (Nelisiwe)

They [paternal family] started to take the child for a visit after he was three months old because I was no longer breastfeeding. My parents said that it does not matter whether he [boyfriend] has paid '*inhlawulo*', he is not allowed to come home, but they [parents] do not mind if the baby is taken for visits as long as I am not going to go along with him. (Buhle)

Most international and national studies on teenage pregnancy depict fathers as invisible or absent from the lives of their babies (Morrell, 2006; Lamb, 2002); however, this view is contested by these findings. All fathers in the study maintained contact with their children and played a provider role in their children's lives, but since some of the young men were unemployed, working part-time or looking for permanent employment, this made fulfilling their social role very difficult (Coleman & Dennison, 1998). This resonates with various other studies that show while many young fathers are unable to provide financial support, they do keep in contact with their children (Duncan, 2007; Coley & Chase-Lansdale, 1998; Furstenberg, 1992; Furstenberg & Harris, 1993). In SA, in order to understand fatherhood and the role a father plays in a child's life, one need to take into consideration that the role changes according to context, i.e. depending on factors such as material resources and cultural background. Poverty and increasing unemployment has led to a decline in men's ability to meet the accepted social roles of fatherhood (Mtimkulu, 2006; Richter & Morrell, 2006; Swartz & Bhana, 2009; Hunter, 2010).

## 6.6 Naming of the baby

Teenage pregnancy out of wedlock is not a new phenomenon in the African community, given the central role that fertility plays in an African woman's identity (Preston-Whyte, 1988). A woman who cannot give birth is marginalised and called names like *inyumba* (barren) (Hunter, 2010).

When a baby arrived he was incorporated into the family; he assumed the name of the family regardless of the payment of damages (Preston-Whyte & Zondi, 1992). The child could only change from his mother's surname when the parents got married. Nowadays things have changed because of the high rate of unemployment; this has led to men's being unable to afford payment of *ilobolo* and to get married. A child could assume his father's surname when the damages had been paid (Gustafsson & Worku, 2006, 2007). In some instances the child's mother will register her child under his father's surname even if the *inhlawulo* has not been paid (see Hunter, 2010).

The young mothers indicated that all of the baby's fathers wanted their children to be registered under their surnames. Only three of the young fathers were granted their wish, and their children assumed their names because they had paid the damages. However, the family of one young mother denied the young father's request on the basis that the couple were not married. From the young mother's parents' perspective the payment of damages is not equivalent to the payment of '*ilobolo*', and they were hoping that the pregnancy might lead to marriage if they refused to have the child registered under his father's name. The rest of the young mothers colluded with their parents because they argued that if they had agreed to their boyfriends' wishes, the boyfriends would not consider the payment of damages necessary in the future:

When my boyfriend's family came to pay for the damages, both families discussed about the surname the baby would be registered under and they agreed that as the baby would go and stay at Ulundi after a month, and he should assume his father's surname. (Slindile)

My partner once suggested that he did not want the baby to be registered in my surname, but when I mentioned that to my aunt she got angry at me and told me that if my boyfriend wanted that he needed to pay the damages first. (Nelisiwe)

They [boyfriend's family] had mentioned that [the child's naming] when they came to pay the damages but my father was very angry and told them that they had not come to pay '*ilobolo*' but damages and the child would change his surname once they paid '*ilobolo*'...it just ended there. (Zanele)

The participants' narratives indicated that although there is a shift in cultural practices, there are families who are still conservative. This also indicates that IsiZulu-speaking communities are not homogenous, since other households still hold onto the belief that a child born out of wedlock belongs to her mother's family and must assume his or her mother's name unless the mother marries the father.

## **6.7 'Babas' and babies**

In South Africa young African fathers are mostly portrayed as irresponsible beings that impregnate teenage women and leave the responsibility of bringing up a child in the hands of the young mothers and their families. This was later disputed by Swartz & Bhana (2009)'s findings whereby most fathers indicated that they want to be involved in their children's lives, but sometimes there are socio-cultural factors that prevent them from doing so. The young mothers in the study indicated that their partners were very involved in the lives of their children. The young fathers were providing for the child financially and some tried to minimise the schooling disruptions of the young mothers by taking the child to their family. However, as the young fathers had been brought up to believe that childcare is the responsibility of womenfolk; they were not directly involved at the caring for their children and instead shifted the responsibilities of childcare onto their mothers and female siblings.

After the pregnant teenagers had given birth they reported that the baby's father was happy and excited to be able to fulfil one of the expectations of the dominant patriarchal society, of



fathering a child. All of the fathers were financially very supportive at the beginning; they bought clothes and other necessary requirements for the baby. They paid for a crèche where there was no one to look after the baby among the teenage mother's family while the young mother was at school. However, as time went on some of the young mothers experienced financial difficulties because of the partner's unemployment. About five of the young mothers' partners were working part-time and sometimes they could not work for a number of weeks. The participants had to rely on their parents' support whenever the partner could not provide the money for either the crèche or the formula:

Things are very difficult...sometimes I struggle for the formula and end up borrowing money from other people if my mother doesn't have money too, because I know that if I tell her [the baby] father he will tell me to wait until he has money...he works part-time at Pick 'n Pay...it's very difficult when you are the one who lives with the baby...if the formula is finished you can't wait for a day or two to get to feed the baby. (Buhle)

He [partner] really helps me whenever he can...he is responsible for buying the baby formula...he does not have a steady job, sometimes the formula is finished before he can be able to buy another tin...but he tries his best to support the baby...most of the time I get help from my mother. (Nelisiwe)

The participants' narratives indicated that their partners' involvement in their children's lives was that of a provider father. Thus lack of employment left them unable to assume the social responsibility associated with fatherhood by reducing them to fathers without economic power. Hunter (2006, 2010) argues that the high rate of unemployment has increased the phenomenon of fathers without *amandla* to take responsibility for their children.

Four of the teenage mothers (who happened to have given birth to boy children) not only received financial support for the baby, once the young fathers realised that the baby caused a lot of school disruption for the young mothers, the baby was moved to the young father's family. This was done in order to enable the teenage mother to dedicate her time to her schoolwork.

...after he (the baby) was born, I was helped by my neighbour because my mother is working...when coming back from school...I used to pick him up from my neighbour, did washing, cleaning the house and cooking...I had no time at all for my books...when he became one month old...his father suggested that we should take him to Ulundi, where he is looked after by his grandmother... and I've to go to Ulundi every month end because I miss him very much ...now I've got time for myself... everything at school is going alright...I've got enough time to do my homework and study. (Slindile)

I have no support during the week because my mother is working and Olwethu's [the child] grandparents are also working, but from Friday afternoon to Monday morning, I have got time for my schoolwork, because his grandmother [father's side] always takes care of him every weekend...she takes him on Friday and brings him back on Monday morning...I try to work hard to catch up whatever is left behind with my schoolwork on weekends. (Futhi)

It is much better since I complained to Lungelo [baby's father] that it's difficult to cope with my schoolwork...he asked his mother to help me out with the baby and I took him [the baby] to his grandmother at Umlazi as from the 1<sup>st</sup> of September in order to have enough time to study for the coming examinations. (Mandy)

The baby did not bring any change in my school performance because I was lucky to give birth at the beginning of the year when we did not have much work done at school...after three months his father's mother takes care of him during the week and brings him home on weekends...there is no change at all in my school performance. (Zanele)

These narratives indicated that the young fathers were indirectly involved in the lives of their children; they shifted the responsibility for caring onto their mothers or their sister, since they believe it is a woman's responsibility. The young fathers' definition of fatherhood places less stress on emotional engagement with their children and more on material aspects. On the other hand, they were concerned that the young mothers should continue with their schooling; the young fathers supported the young mothers' access to school for improving their life chances.

## 6.8 It's all about the baby

After the baby was born it became difficult for the fathers to provide for both the mother and the baby. The teenage mothers complained that their partners were no longer providing anything for them, but what was important for their partners was the baby. The participants felt that they were competing with their babies for the attention of their boyfriends. Considering that most of these young women had chosen to be involved in a relationship with older working men to be financially provided, there is a tension when the young mother is no longer provided for her personal needs instead every attention is transferred to the child. The young women started to realise the inadequacy of the glorified providing boyfriend that he cannot successfully provide for her and the child. The teenage mothers were no longer receiving much spending money from the baby's father, because whenever they asked for anything personal, the partners' excuse was that they did not have enough money to support both the babies and the mothers:

He still supports and cares for the baby, but...he is no longer giving me any money to spend at school or on myself...whenever I ask for something for myself he always tells me that he doesn't have money because he has been buying baby's things...he only makes sure that I always have airtime to call him whenever there is something wrong with the baby...that's all...even at home, they tell me the same thing. (Nelisiwe)

After childbirth some of the teenage mothers started to experience difficulties; they complained that most of the time they fought with the baby's father over girlfriends and money. Whenever they asked for money to buy the baby's necessities, there was always an argument with the baby's father. As Simphiwe said:

Eish! Things have changed, what we do now is always arguing. Sometimes the argument is about girls or money. He knows that I don't get financial support from home, but whenever I call him about money he gets angry. In the last four months, he has only given money twice.

The financial support that the young women were initially getting from their boyfriends was no longer available for their own use. The young mothers indicated that the arrival of the baby had brought about some changes in their relationship. They started to have arguments whenever the young fathers could not afford to support both the mother and the baby financially.

## **6.9 Fathers and the CSG**

Some of the fathers encouraged the young mothers to apply for the CSG, especially those who were working part-time. However, some of the partners were against the CSG because of the stigma attached to it (that young women deliberately fall pregnant in order to access the CSG). In addition, these young fathers did not want to be seen to have failed to support their children. As proud fathers they were willing to assume their fatherhood role by taking responsibility for providing for their children:

A child support grant...*ja!* Some of the young mothers here at school receive it, but both my parents and the baby's father are against it...I once suggested it to Ayanda [fiancé] and he didn't like the idea...he asked me whether I meant that he was not doing enough for the baby - the reason I wanted to apply for a CSG...then I saw that he did not like me to apply for it...so I did not apply. (Sthembile)

The young father was against the CSG because of newspaper reports that there was a belief that the CSG becomes an incentive to young women to fall pregnant, because they receive financial support when they bear children (Dawson, 1997; Bullen & Kenway, 2000; *The Herald*, 2005, October 18; Sunday Times, 2007, May 20). This view was denied by the HSRC final report of December 2006 (Makiwane & Udjo, 2006). Furthermore, the young father was invoking his masculine power. Obtaining the CSG was in opposition to the construction of masculinity based on social and economic power. Sthembile notes how the

child's father saw the CSG application as an undermining of his masculinity. Not getting the CSG was a means through which his masculinity could be exalted instead of being seen as marginalised by economic deprivation. Furthermore, not getting the CSG was regarded as showing people that the child was wanted.

## **6.10 Conclusion**

This chapter has explored the boyfriend and young father's involvement in the pregnancy and parenting. This exploration constitutes an investigation into the relationship dynamics and cultural and economic disempowerment that hinder their involvement in childcare. In most African communities, when a young man impregnates a woman there are cultural practices that need to be taken care of by the young man, such as the payment of damages. Failing to pay the damages may lead to the father being denied access to his child; thus the young African men are stereotyped as irresponsible and abandoning fathers. The young mothers' narratives indicated that the young men were proud to be fathers. They loved to be involved in all aspects of the lives of their children and were supportive whenever they could afford to provide for the children. The challenge some of the young fathers faced was lack of economic power, since most were casual workers and could go for days without finding employment (see Hunter, 2010).

Although all the young fathers understood their social role as that of a provider, some acknowledged the importance of the young mothers' completing their schooling and realised that they needed support other than financial provision. However, the young men did not provide the childcare themselves; they shifted the caring responsibility to their own mothers. The young mothers indicated that the young fathers took the baby to be cared for by the paternal grandmother so that they (young mothers) had enough time for their studies.

The next chapter provides the recommendations that arose from this study and its conclusion.

## **Chapter Seven: Recommendations and conclusion**

### **7.1 Introduction**

This chapter marks the end of my journey exploring the experiences and constructions of young women in Inanda in negotiating pregnancy, parenting and schooling through various adversities. In concluding this thesis, I will first provide a synopsis of each chapter, then review and underline key issues that emerged in this study and synthesise and reflect on the findings.

It is generally assumed that parenting is challenging for any mature woman, since parenting is premised within gendered social and cultural environment. Child-rearing is socially perceived as the responsibility of women. Therefore, parenting becomes worse for a teenager who is trying to balance motherhood and schooling, because of the gendered social and cultural environment that creates obstacles to the success of young mothers' schooling (Mkhwanazi, 2010). The main focus of this study was to explore the experiences of pregnant teenagers and teenage mothers in school. In examining teenage pregnancy I have considered the structural forces that contribute to teenage pregnancy, for example gender, socio-economic factors, race and class.

The pregnant teenagers in Khanya Secondary indicated that their parents are silent about the issues related to their [teenagers'] sexuality; instead, they have put more value into the cultural practice of virginity testing. The virginity testing practice limits the young women's choice on the use of contraceptives, since contraceptives are not mentioned - it only emphasises abstinence. This puts pressure on young women, because they are regarded as responsible for preventing pregnancy. I also argue that the sexuality of the African teenagers is characterised by GBV and sexual relationships with much older working men that lead to their vulnerability to pregnancy, since the teenagers lack the power of decision-making on the use of contraceptives.

I illustrated in the analysis Chapters Four and Five that although the SASA protects pregnant learners and learner mothers from being excluded from attending school during pregnancy and motherhood, these young women experience highly gendered challenges to their endeavours to continue with their education within the context of their socio-economic and cultural background. In addition, it has been shown that these young women face marginalisation and discrimination from teachers and ridicule and scorn from their peers. This becomes a serious threat to gender parity (Panday et al., 2009).

In the introduction to this thesis I began by illustrating a case brought about by the controversial DoE (2007a) guidelines, *Measures for the Prevention and Management of Learner Pregnancy* in school, which led to two young mothers in Free State being barred from continuing with their schooling. This happens because different schools have different interpretations of the guidelines, and used them to the detriment of pregnant teenagers and young mothers. The case is proof that teenage pregnancy is one of the major causes of gender inequalities in the education of female learners in South Africa. I also highlighted the statistics on teenage pregnancy and the media coverage on it that entrenches moral panic. The media coverage is gendered as it is only young women who are portrayed as having loose morals and needing regeneration. On the other hand, the media highlight the ineffectiveness of the various intervention programmes in reducing teenage pregnancy. Furthermore, instead of blaming teenage pregnancy on loose morals, there is a major need to address social inequities in South Africa, since it has been identified by recent studies that a high prevalence of teenage pregnancy is among disadvantaged communities, especially in informal settlements and rural areas.

The chapter also introduced Khanya Secondary in Inanda, which is the context of the study, and the surroundings area from which the participants come. All of the participants came from a disadvantaged community characterised by extreme poverty, a high rate of unemployment and GBV and that has been ravaged by HIV and AIDS. Creation of employment opportunities especially for young people might bring positive results in reducing both teenage pregnancy and contracting HIV and AIDS as young women might not engage in risky sexual relationships with older men in order to be provided with material resources. In outlined rationale and motivation for the study and theoretical perspectives that

were drawn upon to further the debate. In the next section I underline a number of key issues that emerged in this study. These are issues of great concern with respect to teenage pregnancy in South African schools. Attention is drawn to the role that is played by the family and the child's father in the financial and emotional support of the young mother in child-rearing. Secondly, attention is drawn to the teachers' responses to the policy that is meant to promote gender equality in school through the effective support and management of teenage pregnancy.

## **7.2 Social and cultural factors that influence teenage pregnancy**

### **7.2.1 Virginity testing and use of contraceptives**

Despite the common knowledge that the youth in South Africa are sexually active, with the age of sexual debut ranging between 14 and 15 years (Harrison, 2008b; Panday et al, 2009; Bhana, 2011) the common discourse is still within the premise of moral discourse and parents are still silent on issues relating to sex and do not discuss this with their children. When parents do not talk to their children about sex they are creating a fertile ground for teenage pregnancy to occur (Mkhwanazi, 2010). Instead of talking about sexuality issues with their children, parents or guardians in Inanda shift their responsibility to the cultural practice of virginity testing from as early as 10 years old. It is through the virginity test that parents believe that the teenagers learn about their sexuality and how to protect themselves from getting pregnant and contracting HIV and AIDS. Purity or remaining a virgin is the only thing that is emphasised in the virginity test and abstinence is promoted in order to prevent pregnancy; however, the high rate of teenage pregnancy among teenagers who attend this cultural practice is indicative that abstinence is not effective. There is a need to shift from viewing sex as the only problem that increase teenage pregnancy, but intensify programmes of changing young people's behaviour on engaging in unprotected sex. In addition, the idea that the responsibility of avoiding pregnancy rests solely on young women's shoulders is gendered and will not bring any solution to reduce the rate of teenage pregnancy. Young men also need to attend a cultural practice where they will learn about being responsible when it comes to their sexual activities.



The recommendation is that the cultural practices should empower young women with all forms of contraception so that they have choice in the case of sexual coercion. The deafening silence about other forms of contraception limits the chances of young women exercising their choice in case the need arises. Teenagers taking part in these cultural practices become vulnerable to older men who are attracted to young women without the risk of being infected with HIV and AIDS.

### **7.2.2 Much older boyfriends**

Young women are not victims of older men, instead they demonstrate agency in bartering their virginity for men with power or status. Although in some instances poverty puts pressure on young women to become engaged in transactional sex, the materialistic nature of the majority of young people also contributes to the ‘sugar daddy’ phenomenon. Moreover, peer pressure also demands that the African young women align themselves with men who have power and status in the construction of their femininity (Leclerc-Madlala, 2000). Hence, young women’s sexual relationships are characterised by gender power inequalities as they have relationships with much older men who provide them with gifts or money (transactional sex) (Hunter, 2010; Jewkes et al., 2009). This leads to young women being positioned in a subordinate way as they have limited agency in enforcing the use of protection. The pregnant teenagers indicated that they relied on the expertise of their boyfriends for the use of protection and were afraid to negotiate the use of condoms because they were afraid of being abandoned by their boyfriends. On the other hand it has been identified that young women exercise their choice to have relationships with older men. Most of young women who have relationships with older are coming from the poor background and this is indicative of deep-seated social inequalities and lack of opportunities for young people in South Africa. New opportunities for young people could give them a reason not to engage in risky sexual behaviours.

Young women should learn that their gender identity is not constructed by the material items accumulated from transactional sexual relationships with older men, where they give up their power of negotiating the use of protection. Moreover, the cultural practice is gendered as it is

only young women who are monitored, and it considers the responsibility of avoiding sexual penetration and pregnancy totally that of the young women (Varga, 2003). On the other hand, young men are not only encouraged to have sex, they are also encouraged to have multiple partners, even during this time of HIV and AIDS, and they are known to be *isoka* in order to gain respectability (Hunter, 2005, 2010). Therefore intervention programmes need not only to concentrate on women but on men too, as they need to change their attitude on sexual behaviour.

### 7.2.3 TOP

The findings of this study reflect that none of the pregnancies were planned, but they were carried to full term. For most of the participants, finding out about the pregnancy was associated with anxiety and fear of the reaction from both their boyfriends and families. They were worried about the reaction of boyfriends as pregnancy had never been discussed and they were afraid that they might deny paternity. Teenage pregnancy alone brings shame to the family, but denial of paternity is worse as it could also indicate that the pregnant teenager has had multiple sexual partners and is not sure who the father of the baby is. Pregnant teenagers were also afraid to disclose the pregnancy as they felt that they had brought disgrace to the family. However, they found a way of breaking the news to both their boyfriends and their families.

The family, community and school blamed the young women for not preventing the pregnancy. They experienced anger and disappointment from their families, especially those young women who had been attending virginity tests. They felt that they did not bring shame to their families only; they also brought disgrace to the whole community as they brought disillusionment as to the effectiveness of virginity testing in protecting young women from pregnancy and HIV and AIDS.

It also emerged that although the participants had knowledge about the TOP Act, they did not opt to use this facility because of the social stigma attached to it. It was not only the social

stigma attached to TOP that deterred the young women; some indicated that abortion goes against their religious beliefs. The value attached to fertility is still reflected as an important element of respectability and is centrally implicated in the construction of gender identity.

#### **7.2.4 Sexual violence**

In South Africa teenagers are amongst the most vulnerable groups in our country. They are being abducted, raped and murdered in numbers, but it seems easier for the adults to occupy the high moral ground and blame young women for the high prevalence of teenage pregnancy rather than talking to their children about sexuality and sex. In South Africa there is a high rate of violence against women and female teenagers in the form of rape and abuse, and a high number of female teenagers who report a coerced or forced sexual debut. Jewkes et al. (2005) confirm that there is high prevalence of rape in South Africa - with over 50 000 rapes of teenagers and women reported per year (Bhana et al., 2010). Thus sexual violence is one of the contributory factors in teenage pregnancy. The community and school should refrain from generalising that all pregnant teenagers are willingly sexually active. Instead of marginalisation and name-calling, all pregnant teenagers and young mothers need support and counselling in order to successfully manage balancing their schooling and pregnancy.

### **7.3 Experiences of pregnant teenagers and teenage mothers**

#### **7.3.1 At home and in the community**

Although teenage pregnancy is common among young Africans, it is not acceptable and all the participants reported experiencing fear and punishment (Varga, 2003; Mkhwanazi, 2009). All of the pregnant teenagers tried to conceal the pregnancy until it was discovered by their families. On discovering that the teenagers were pregnant, all of the families were shocked, disappointed and shameful. Other pregnant teenagers were physically punished, chased away from home, restricted from meeting friends and overworked, and some indicated that their parents stopped talking to them. This is contrary to previous research that posits that

teenagers' mothers or grandmothers are pleased when teenagers get pregnant (Wood & Jewkes, 2006). Nowadays teenage reproduction competes with educational opportunities. When pregnant teenagers are punished for being pregnant, they accept any form of punishment coming their way as they feel they deserve it for putting their families in distress. Other families favoured the pregnant teenagers' siblings as a form of punishment (Chigona & Chetty, 2008). This leads to the young women feeling lonely and isolated; even their siblings are afraid to be seen talking to them in the presence of their parents. The participants also indicated that they were barred from contact with their boyfriends.

All of this indicates that the pregnancy is not welcome at all because of shame and stigma attached to the pregnancy of learners. Moreover, the pregnant teenagers did not get any emotional support from their family. However, punishing a young woman who is already pregnant does not help, especially if parents have never talked about sexuality issues to the teenager before. It is not only the pregnant teenager who has to be blamed for pregnancy, the boyfriend and parents are also at fault. Parents should have been opened about sex with their children. More intervention is needed in order to make young men become responsible in their sexual behaviour and refrain from engaging in unprotected sex.

The community in which the pregnant teenagers live also had a negative impact in the young women's experiences during pregnancy. The participants indicated that the visibility of the pregnancy invited unpleasant comments from members of the community. The community premises its concern within the discourse of contamination. The community wishes that the school would prevent pregnant learners from attending school, because of fear that they will contaminate other learners.

### 7.3.2 School disruptions

Pregnant learners or learner mothers are not excluded from Khanya Secondary. However, during the time of giving birth these learners experience extensive school disruptions. At this time the young mothers have to stay at home for a long period depending on the health of both the baby and the new mother. At this time young mothers missed many lessons, and there is no programme in place for academic support of these learners. It was identified that some young mothers had minor disruptions as they stayed away from school for just two days. Most of them stayed away for two weeks because they were observing the culture of new mother exclusion (Mkhwanazi, 2010) and because of health reason for either the young mother or the baby. Two young mothers lost out on a lot of schoolwork because they stayed away for a month. It emerged that during this period the young mothers received no support from the teachers. It was only after they came back to school that they were supplied with whatever schoolwork they had missed. It became an enormous challenge to some young mothers to have loads and loads of schoolwork as well as taking care of their child, and they ended up repeating the grade. Thus childbearing while at school causes gender inequalities.

The young mothers indicated that instead of receiving support from the teachers, they received a lot of support from friends and classmates, who brought their schoolwork to them to be done at home. These classmates or friends also supported the young mothers by submitting assignments to be marked by the teachers. Most of the teachers supported teenage mothers in the form of marking submitted work, but besides this there was no other support from them. Instead, the teachers referred young mothers to their classmates about work done when they had been absent from school. It is evident that the majority of teachers perceived supporting the young mothers as a waste of their time, as they had situated young mothers within poor performance and achievement (Nkani & Bhana, 2010). In this case teenage mothers are situated in a subordinate position to their classmates (Bhana et al., 2010), which is a deterrent to their educational success.

Child-rearing is highly gendered, especially in the African context where it is socially believed that childcare is the responsibility of women (Hill-Collins, 1987; Barker, 2006). All

of the teenage mothers were single-handedly responsible for caring for the child and household chores when their mothers had gone to work. This means that these young women are overburdened and are reproducing the gender-specified roles used to define a woman that are perpetuated by the community (De la Rey, 1997). Thus young mothers constructed motherhood as difficult because they were overwhelmed by taking care of the baby, such that they hardly had time to do their schoolwork. In addition, the learner mothers had financial constraints. About 70% of the teenage mothers come from a single parent household; the mothers were already facing challenges in supplying financial and material resources for the family. The arrival of an additional member stretches a limited family budget to such an extent that some teenage mothers were contemplating dropping out from school to help out in supporting the family.

Besides being responsible for taking care of their child, the young mothers also took care of their younger siblings as the mothers were working until late. They indicated that they hardly had time to do their homework or to prepare for tests. It became worse when the baby was not feeling well or when they had to absent themselves from school because they had to take the baby to the doctor. Therefore their schoolwork suffered as they received limited support from the baby's father; this has a huge negative impact on schooling and the life development of young mothers. One young mother dropped out of school because she did not have parents to support her and could not get support from the baby's father. Lack of support from both their mothers and partners could mean that the only hope they have is financial support from social welfare in order to get hired help. In South Africa the CSG is the only form of care that is provided by social welfare to learner mothers from poor backgrounds. Of the 10 participants only one had successfully applied for the CSG by the end of the data collection. Other participants could not apply for the CSG because they did not have identification documents. Studies posit that most of the time the payout for a CSG takes too long, and it is argued that there are a number of reasons for this (Goudge et al., 2009; Leibrandt et al., 2010).

There is a dire need for intervention by the Department of Home Affairs and Department of Social Welfare in support of young mothers in accessing the CSG in order to get support that will lessen their school disruptions and boost their educational opportunities. While the CSG

is not enough to cover the necessary requirements for the baby, instead of increasing the amount of the CSG, creating baby-care centres could help young mothers remain in school. It is vital that young mothers successfully complete their schooling in order to gain economic freedom so that they will not be a burden on social welfare. In addition, young fathers must be encouraged that they should have equal responsibility to young mothers in taking care of their children.

### **7.3.3 At school**

Although teenage pregnancy is a common occurrence in township or African schools, when the participants became pregnant they reported that they felt ashamed. The experience of shame that they felt when their families discovered that they were pregnant was intensified in school. The pregnant teenagers indicated that they were afraid of the teachers and their peers' reactions when it became visible that they were pregnant or when they could no longer conceal their pregnancy from them. They tried everything to conceal their pregnancy because of shame of their condition; they either arrived very early at school or remained in the classroom even during break times as they did not want to be seen by many people. They wore baggy clothes, for example a tracksuit jacket or jersey, even if it was hot because of fear of being judged as bad learners who did not deserve to be supported.

This marks the beginning of the challenges of being pregnant and a mother while at school. Although the pregnant learners and learner mothers are protected by the SASA No. 84 of 1996 from being expelled from school, the Act does not protect pregnant learners and teenage mothers from being marginalised and discriminated against by teachers and peers. These young women are judged within moral discourses that they are not supposed to be pregnant while at school. It is only teachers who are accepted when pregnant in the school context. It is argued that teachers do not know how to react to pregnant learners or learner mothers (Chigona & Chetty, 2007). Pregnant teenagers are humiliated by teachers in front of other learners in order to deter other learners from getting pregnant because of fear of how the teachers will treat them. The participants indicated that if they are not stigmatised by the teachers they are ignored, since other teachers make as if they do not exist or that they are not

pregnant. This shows how the school, through teachers, reinforces the social constructs of teenage pregnancy. The pregnant learners are therefore regarded as immoral and that they are going to contaminate those who are still considered as ‘innocent’ (Pillow, 2004; Chigona & Chetty, 2007, 2008; Bhana et al., 2010).

What emerged from the data is that the pregnant learners are teased, ridiculed and called names by other learners, and sometimes this happens in the presence of teachers. There was limited intervention from the teachers in protecting the pregnant learners and learner mothers. The young mothers indicated that a lot of teasing happened in the lower grades that are Grades 8 and 9, because pregnancy is not common in these grades. This makes the young women at school very vulnerable as they feel guilt, hurt and pain. These learners become reserved in class and this hinders their full participation, which leads to poor performance. All of this impacts negatively on the schooling of pregnant teenagers and teenage mothers and perpetuates gender inequality. Ironically, the pregnant teenagers experienced most of the teasing and ridicule during LO lessons, which were supposedly introduced into the school curriculum as part of an intervention programme to highlight life skills. It is during LO lessons that topics around sexuality or pregnancy are taught – and it is where the pregnant learners and learner mothers are taunted most by other learners. Moreover, when the young mothers fail to participate effectively in the lessons or do not complete their homework because of not having enough time, they are ridiculed by other learners. Engaging all of the learners in programmes that promote gender equity might reduce the marginalisation of pregnant learners and learner mothers in school. Teachers’ intervention, by making the learners who are teasing aware of how damaging what they are doing is to these young women, might lessen stigmatisation and teasing.

The challenge for pregnant teenagers and teenage mothers in school is to manage and negotiate the demands of schooling, pregnancy and parenting (see Bhana et al., 2010). These young women are linked to school absence and poor performance by teachers because of challenges brought about by the pregnancy and parenting. The young mothers absent themselves from school for a number of reasons. For instance, it emerged that when the baby is not feeling well and they need to take him/her to the doctor or when they run short of baby formula, they absent themselves from school. The young mothers have the same



responsibilities towards their children as the teachers do to theirs. However, the teachers get angry when the learner mothers mention the baby as the reason for their absenteeism, so the young mothers give other reasons.

In a way, young mothers are forced by the teachers to keep their babies as private as they can. The majority of the teachers are very insensitive and become irritable with the challenges faced by pregnant learners and learner mothers. It must be understood that these young mothers depend on teachers for academic support as most of their parents have lower education than their daughters. The participants indicated that some teachers kept on reminding the young mothers about the challenges of parenting while in school, and they expect them to fail or give up schooling because of these. Yet it is important for these young women to remain in school and getting a good education is imperative for their life development. The young mothers need a lot of support from the teachers in order to be successful academically. Teachers need to devise catch-up programmes aimed to support pregnant learners and teenage mothers if these young women are to succeed. Teachers also have to organise counselling for the emotional stress caused by the challenges of parenting and stigmatisation by other learners. It emerged that the teenage mothers were afraid to mention the challenges of motherhood they encounter to the teachers because of the latter's negative attitude about teenage motherhood. The participants wish to be open about these challenges to the teachers for support or just purely their understanding.

It is argued that teenage mothers experience marginalisation, hostility and a lack of support from teachers; however there is an indication that some teachers have different views from the majority. It emerged that pregnant teenagers and young mothers received motivation from caring teachers to remain in school, and these young women were provided with the necessary support by these teachers. Other young mothers mentioned that they even received financial support from the teachers if the baby needed to be taken to the doctor. These teachers acknowledged that it is important for pregnant teenagers and teenage mothers to remain in school and successfully complete their schooling in order to gain better job opportunities and economic independence. Pillow (2004) posits that remaining in school is imperative for the teenage mothers in order to avoid being welfare dependant. Instead of judging and marginalising pregnant teenagers and teenage mothers, teachers need to be more

sensitive to the challenges faced by young mothers and to provide necessary support in order to reduce teenage mothers' frustrations that might lead to them repeating a grade or dropping out of school.

There is a general view about pregnant teenagers and teenage mothers that they contribute to the failure rate. However, the findings suggest that for some teenage mothers pregnancy became the main reason for being resilient and determined to succeed in school - for the benefit of their children. Out of 10 participants, only one besides the one who dropped out of school could not proceed to the next grade, and two did not pass Grade 12. Four young mothers successfully completed their Grade 12 and two proceeded to the next grade. In addition to the support provided by the few teachers who were sensitive to the needs of young mothers, the participants commended support from their friends and female classmates.

## **7.4 Body image and gender identity**

Research has shown that the teenage years are an important period in exploration and development of gender identity (Jewkes & Christofides, 2008), and teenagers construct themselves as sexual beings. Young women in this study defined their gender identity within the lines of heterosexuality where women are in a subordinate position and invest a great deal in their appearance to make themselves beautiful for the gaze of men. Research has also indicated that it is crucial for young women to secure and maintain sexual relationships (Leclerc-Madlala, 2000; Jewkes et al., 2009) by making themselves appealing to men. Thus young women are reinforcing the existing gender norms and definitions of femininity (Litosseliti & Sutherland, 2002; Marcus, 2003).

Teenage pregnancy does not only confirm femininity, but also strengthens relationships or leads to a long-lasting relationship within a sexual relationship that is characterised by multiple partners (Mpofu et al., 2006; Hunter, 2010). However, body changes brought about by pregnancy and motherhood are not welcomed because they make the young women feel

less appealing to their boyfriends. Gaining weight during pregnancy, breastfeeding and stretch marks after giving birth make the pregnant teenagers and teenage mothers feel embarrassed about their appearance among their peers and therefore less competitive for the attention of their boyfriends, who they know are involved in multiple sexual relationships. The body dissatisfaction leads to the young woman being insecure in her relationship and constantly demanding the boyfriend's attention and confirmation that he is still attracted to her.

## **7.5 Motherhood**

Through all the challenges caused by the pregnancy and child-rearing, all teenage mothers indicated their love for their babies. While the teenage mothers view child-rearing as burdensome, the baby becomes a source of joy and makes the mother forget about all the challenges she experiences. These young women even sacrifice spending time with their friends, since much of their time is spent caring for the baby. However, there is an indication that the arrival of the baby changes the relationship between the young mother and the baby's father. The father becomes more concerned with the well-being of the baby, forgetting the sexual relationship they have with the mother.

While teenage motherhood causes many disruptions in the teenagers' lives, it also brought about positive transformation. The participants indicated that being a mother changed them into mature, responsible beings. The teenage mothers become more supportive of their own mothers and showed appreciation for the financial support they received in order to take care of themselves and their babies. The teenage mothers became more helpful in the house and more understanding of their own mothers' struggles in providing for the well-being of the whole family in the context of poverty.

## **7.6 Teenage pregnancy and boyfriends**

The young mothers and their own mothers carry the burden of child-rearing, with limited support from the babies' fathers because of socio-economic and cultural factors. The challenges begin when the pregnant teenager discovers that she is pregnant. Besides worrying about how her parents are going to react to this, she also worries about the boyfriend's response to the news, and whether the boyfriend is going to accept paternity. According to African social and cultural expectations acceptance of paternity is attached to financial responsibility for the payment of 'damages' (refer to Chapter Four) and child-rearing. No payment of damages may lead to the father being barred from associating with both the mother and the child. This decision is out of the hands of the teenage mothers as they are supposed to respect their parents.

Research has shown that gender power inequities exist among youth and adults, especially among Africans. The youth occupy low social status and have to respect and observe generational hierarchy by being submissive to their parents and adults (Bhana, 2007; Jewkes et al., 2005; Mkhwanazi, 2007, 2010). The participants indicated that their boyfriends accepted paternity, but some could not afford to pay 'damages' because of being poor and unemployed. This suggests that poverty and unemployment are other contributory factors to fathers being absent from the lives of babies of teenage mothers. Thus some of the fathers could not be involved in the child's life.

## **7.7 Fatherhood**

What emerged from the study was that some of the fathers (who were employed) only provided the financial or material support which was expected of them culturally; this provided them with a chance to exercise their fatherhood role, which constructs their manhood (Morrell, 2006). Socially these fathers are not expected to be involved in childcare, as it is believed to be solely women's responsibility. Dover (2001) argues that in many parts

of Africa a man commands respect when he is able to provide for and maintain his household. Men involved in caring for children are seen as deviant from the norm and are marginalised or 'othered'. On the other hand, social class and educational attainment also have an influence in men's participation in their child's care giving, as Dover (2001) also argues that low-income men spend less time with their children than middle-class men (Barker, 2009). It emerged from this study that some fathers realised that the young mothers needed support in order to have more time to prepare for their final examinations - but shifted their responsibility for taking care of the child onto their mothers or sisters. This means that they still believe that child-rearing is the responsibility of the womenfolk.

The participants indicated that some of the fathers did not support their children financially, although they were working. They decided to abandon the mother and the baby, and the young mothers were fully dependent on their parents' support. Lack of support from the baby's father both financially or in taking care of the baby are highly gendered and add more challenges to the schooling of teenage mothers. It also perpetuates the cultural and social notions of motherhood, that women are the primary caregivers of children (Frizelle & Kell, 2010). This leads to gender inequalities, since it is only the teenage mothers who experience school disruptions. For instance, when the young mother does not have money to pay for the crèche or is running short of formula, she absents herself from school and waits for her parents' pay day. Her schoolwork suffers to such an extent that she could end up repeating the grade or dropping out of school.

Those fathers who are unemployed and do not have money are excluded from their children because they cannot provide for them. Therefore they are denied their gender identity of manhood. Hunter (2005, 2010) argues that the high rate of unemployment in South Africa, especially among Africans, has taken away power from these men, and they are known as men without *amandla*. They feel powerless because they cannot fulfil their fatherhood role which constructs their manhood. The exclusion of unemployed or poor fathers from being involved in their children's lives denies the young mothers the opportunity for support in taking care of the child. These fathers have plenty of time in their hands, so could also help in taking care of the child. On the other hand, most of the young mothers accept the status quo and become silent about the difficulties they face in balancing schoolwork and caring for

their baby. Jeannes and Shefer (2004) argue that most new mothers keep quiet about the struggles of mothering because of fear of being labelled as ‘not good mothers’.

## **7.8 In conclusion: Teenage pregnancy and school policy**

Even though the school upholds the SASA by not excluding the pregnant learners and allowing re-entry of teenage mothers into school, the reality is that these learners are largely marginalised. The teachers still situate teenage pregnancy within the social sexual stigma discourses and as a violation of age and generational hierarchy (Bhana et al., 2008; Mkhwanazi, 2007). Therefore a major shortfall of the policy is that it cannot protect the pregnant teenagers and teenage mothers from the practices of individual, prejudiced teachers who are reproducing the gender inequalities in school. Even those teachers who are willing to support pregnant learners complain about the lack of clear guidelines on how to go about it. They treat individual cases on their own merits; however, there are reports of a lack of consistency.

Furthermore, the challenges faced by pregnant teenagers were exacerbated by the DoE (2007) guidelines on management of and support for pregnant learners in schools. This document has many loopholes that are interpreted by the schools to the detriment of equal educational opportunities for pregnant learners and learner mothers. Some schools based their school policy on this document, excluding pregnant learners and young mothers from school. It is therefore urgent that the national DoE produces national regulations on learner pregnancy policy that are in keeping with the spirit of gender equality and empowerment of women as specified in the SASA and the Bill of Rights (refer to Chapter One).

There should be involvement of all stakeholders so that the pregnant learner or learner mother can receive support both at home and at school. One of the principals in a study conducted in Inanda asserts that teachers try by all means to support these learners, but are let down by lack of parental involvement (Nkani & Bhana, 2010). Thereafter a close monitoring of the

schools' implementation of the policy of the DoE is imperative, so as to have consistency in the management and support of learner pregnancy in schools.

In addition, the DoE has to devise intervention programmes towards shifting the teachers' attitudes and behaviours that impact negatively on teenage pregnancy. In addition, pregnant teenagers and young mothers need counselling in order to combat stigma caused by being ridiculed and marginalised. In most township schools counselling is supposed to be provided by LO teachers, but for various reasons they do not provide the needed counselling. Firstly, they have a full teaching load which does not allow time for counselling; and secondly, they do not have privacy to hold counselling sessions since many schools do not even have enough classrooms. In the case of this study, pregnant learners and learner mothers could not receive counselling.

Emphasis on the support of pregnant teenagers and teenage mothers does not mean that teenage pregnancy prevention programmes should not be considered. The high prevalence of teenage pregnancy in our schools is an indication that the existing intervention programmes are not effective, because they are mainly for prevention of HIV and AIDS. There is more emphasis on the use of condoms over oral contraceptives, whereas the gender power dynamics that characterised teenagers' sexual relations reduced the young women's ability to negotiate the use of condoms (Bhana et al., 2008; Jewkes et al., 2009). Collaboration between the DoE and the Department of Health is necessary. There is a need for Department of Health officials to have a programme for visiting schools so that learners can have easy access to contraceptives. Studies have shown that teenagers are afraid to go to health centres because of the hostility they experience from nursing staff, and some are afraid that it will become known by their families that they have started engaging in sexual activities (Mkhwanazi, 2010).

To conclude, it seems as if the problem of teenage pregnancy in schools will not go away any time soon. In the meantime, all of the stakeholders concerned need to change their attitude and come together in order to support these learners to achieve their academic qualifications. This will not only benefit the young mothers by helping them to become economically

independent, it will also benefit policy makers by leading to fewer people being dependent on welfare. Arai (2009, p. 137) suggests the following in terms of attitudes about young mothers:

A wider, social change in attitudes is warranted, as well as a change in policy-makers' and practitioners' attitudes. Once this is achieved, initiatives to help young mothers and their families are likely to meet with greater success.



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## **APPENDIX A**

### **AN OBSERVATION AND INTERVIEW SCHEDULES**

#### **Observation of the pregnant teenagers and teenage mothers' interaction with the teachers and their peers in school.**

- How teachers relate to the pregnant learners/young mothers?
- How the pregnant learners/young mothers association with their peers outside the classroom?
- How the pregnant learners or young mothers dress?
- The pregnant learners' and teenage mothers' movement within the school premises.
- The participants' involvement in physical education.

#### **A schedule for individual interviews with the participants**

- What does it mean to be an African (Zulu) young woman?
- How long have you been in a relationship with your boyfriend before you get pregnant?
- How old is your boyfriend?
- Is he still at school? If yes, where is he attending school? If no, what is he doing?
- How did you feel when you find out that you are pregnant?
- How did your boyfriend and your family react on the news of your pregnancy?
- What are the experiences of being a pregnant teenager who is also a learner?
- How long did you stay away from school during the time of giving birth?
- What kind of support did you receive from the teachers while you were at home?
- Tell me about your first day at school coming back from giving birth.
- What happens to the baby when you are at school?
- What kind of support do you receive from the baby's father?
- What does it mean to be a young mother at school?
- How do you manage parenting and school work?

- What kind of support do you get from your parents, boyfriend/child's father, friends, teachers and other learners?
- How do you relate with other learners during and after pregnancy?

#### **A schedule for the focus group interview**

- How did your parents find out about your pregnancy?
- What was their reaction?
- How do your classmates/peers relate to you now that you are pregnant?
- What are your experiences of being pregnant teenage girl who is also a learner?
- What does it mean to be a young mother at school?
- How do you manage parenting and school work?
- What kind of support do you get from your parent/s, friends, teachers and other learners?
- How do you relate with other learners after pregnancy?

## APPENDIX B

Principal's consent for the study to be conducted at the school.

Date: \_\_\_\_\_

Dear Colleague

I am registered for PhD study in the faculty of Education of the University of KZN. I am exploring the following topic, '**An ethnographic study of teenage pregnancy: femininities and motherhood among pregnant teenagers and teenage mothers at school in Inanda**'. My focus will be on 10 pregnant teenage learners/teenage mothers' experiences and gender identity constructions in the school context.

I would like you to grant me the permission to conduct the study in your school. The study involves conducting individual interviews, focus groups of 5 members and observations during their pregnancy up to three months after child birth. There will be four sessions of individual interviews and focus groups interviews. Each interview session will take approximately 60 minutes and will be recorded using audiotape. All the interviews will not interfere with the school programme as they will be conducted after school hours. Observations will be conducted during lessons and break-time.

No real names for both the learners and the school will be used in the write up of the study and actual data from the research will only be used for the research purposes. The learners participate at their own free will and they are free to withdraw from the study at any point. I will do everything to guarantee the learners' anonymity and confidentiality. If you require any information, feel free to contact my promoter, Professor Bhana. Contact details: e-mail bhanad1 @ukzn.ac.za; tel 031 260 2603.

I thank for you for your cooperation and look forward towards our working together.

Yours sincerely

F.N. Nkani

Tel: 031 578 4108

## Declaration

I \_\_\_\_\_ (Full name) hereby confirm that I understand the contents of this document and the nature of the research project and I consent for the study to be conducted at .....Secondary School.

I understand that the learners are at liberty to withdraw from the project at any time should they desire.

Signature\_\_\_\_\_

Date\_\_\_\_\_

## APPENDIX C

Parents/guardians' letter of consent

Dear parent/guardian

Re: Request for your daughter/ward's participation in a research study of teenage pregnancy.

A request is hereby made for your daughter/ward, \_\_\_\_\_ to participate in **'An ethnographic study of teenage pregnancy: femininities and motherhood among pregnant teenagers and teenage mothers at schools in Inanda.'** The study will be undertaken at school from about the third trimester of her pregnancy until the third month after child's birth. The purpose of the study is to explore experiences and the identity constructions of teenage pregnant learners and young mothers in school.

The learners will be interviewed as individuals and in focus groups. They will also be observed on how they interact with teachers, learners and friends during lessons and during their break-time. Both the individual interviews and the focus groups will have four sessions and each session will take approximately 60 minutes and will be recorded using the digital audiotape. All the information will be kept safe in the University of KZN for five years and thereafter the transcripts and field notes from observations will be shredded and the hard drive will be cleaned the information from the digital recorder.

Learners who participate in the study do this in their own free will as they are not forced to take part. The learners' real names will not be used in the write up and the actual data will only be used for the study purposes. I guarantee that your daughter's anonymity and confidentiality will be upheld. As this is a difficult time for your daughter/ward, an arrangement with the office of social welfare has already been done should the need for a counselling arise. The learners who participate in the study are free to withdraw from the study at any point. I have spoken to (Learner's name) \_\_\_\_\_ who has shown willingness to take part in the above study. If you have any questions you may contact my promoter, Professor Bhana at 031 260 2603. I can also be reached at 073 198 6945.

Your sincerely

F. N. Nkani

Reply slip:

I, Mr/ Mrs/ Ms\_\_\_\_\_hereby give/ do not give consent for my daughter to participate in the above mentioned study as outlined in the above request.

Signature:\_\_\_\_\_ Date:\_\_\_\_\_



## APPENDIX D

Participant's letter of assent for the study

Dear Participant

I am registered for PhD study in the faculty of Education of the University of KZN and I hereby request your participation in my study. The topic of my study is '**Anethnographic study of teenage pregnancy: femininities and motherhood among pregnant teenagers and teenage mothers at schools in Inanda**'. The purpose of the study is to explore the experiences and identity constructions of pregnant girls/young mothers in school.

The study involves conducting observations, individual interviews and focus groups of 5 members during pregnancy and at post birth (from third trimester to three months at post birth). There will be four sessions of interviews and each session will take about 60 minutes and will be recorded. The interviews will be conducted after school hours in order not to interfere with your school programme. I would also like to bring to your notice that there will not be any form of payment for your participation in the study, only refreshments will be provided.

The data from the interviews will only be used for the research purposes. Your participation in the study is voluntary and you are not obliged to respond to questions that I ask if you do not feel comfortable and you are free to withdraw from interview at any time. In addition, in case you need any counselling, you will be taken to the offices of social welfare at Section 'A' for counselling and the arrangement has already been done with the social workers. Please note that your anonymity will be upheld by using pseudonym in the writing up of the thesis. Every attempt will be made to keep the material confidential by keeping all information safe in the University for five years and thereafter transcripts and field notes from the observations will be shredded and the computer will be cleaned of information from the digital recorder.

If you require any further information, feel free to contact my promoter Professor Bhana at 031 260 2603.

Yours sincerely

F.N. Nkani

Tel: 031 578 4108

## DECLARATION

I \_\_\_\_\_ (full names of the participant)  
hereby confirm that I understand the contents of this document and the nature of the research  
project, and I consent to participating in the research project.

I understand that I am at liberty to withdraw from the project at any time, should I so desire.

\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE OF PARTICIPANT

DATE \_\_\_\_\_