THE PSYCHOSOCIAL EXPERIENCES OF TEENAGE LEARNERS IN TWO SELECTED SECONDARY SCHOOLS IN THE UBUMBANO CIRCUIT AT IMPENDLE

by

NHLANHLA AARON DLAMINI

Student number: 208525631

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Supervisor: Dr Visvaranie Jairam
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School of Education Studies
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DECLARATION

I, Nhlanhla Aaron Dlamini hereby declare that the dissertation titled: **THE PSYCHOSOCIAL EXPERIENCES OF TEENAGE LEARNERS IN TWO SELECTED SECONDARY SCHOOLS IN THE UBUMBANO CIRCUIT AT IMPENDLE**, is the result of my own investigation and research and that it has not been submitted in part or in full for any degree at any other university, and that all sources I have used or quoted have been indicated and acknowledged by complete references.

ABSTRACT

This study sought to explore and understand the psychosocial experiences of teenage mothers who have been pregnant while at school and find out how they have navigated these experiences in their academic lives. The study was conducted in two selected secondary schools in the Ubumbano circuit at Impendle. Research designs were plans that are used by the researcher to collect data. The research approach which was used in this study was qualitative and attempted to produce subjective data through involving the opinions, feelings and experiences of teenage mothers, which was underpinned by the interpretive paradigm.

The narrative inquiry was employed in generating research data, since it is a discipline within a qualitative approach. The experiences were explored at three levels namely the discovery phase, delivery phase and post-pregnancy phases. Connelly and Clandinin (1990) indicated that narratives enable the researcher to discover and understand the inner world of the individual (teenage mothers). This methodology gave meaning to events and circumstances and personalised data, providing an understanding of how an experience was lived (Roux, 2011). The participants in this study included six learners who were pregnant while in school. The six learners were sampled purposively. The study used the following tools: semi-structured interview and questionnaire.

 The study employed an inductive data analysis plan which is underpinned by the qualitative study. Therefore in this study data was analysed by the researcher using themes that emerged from data collected, and data was related to the theory of Erickson psychosocial development which was used as a framework for this study. A thematic analysis was used to analyse the audio taped data from the transcribed interviews.

The key findings showed that the learners experienced emotional problems in various forms concerning their pregnancy. Some of the learners experienced support from their immediate members such as parents, friends, educators and the father of the child. Furthermore learners experienced challenges around the caring demands of the baby and the schoolwork which could have resulted in them dropping out of school. However, all teenagers succeeded even though they had experienced emotional problems, financial difficulties, childrearing problems and school demands as well. These participants demonstrated strong ability in facing these situations irrespective of whatever complications stood against them.

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DEDICATION

This dissertation is dedicated to my late father, Vikani Silence Dlamini**,** who generally trusted me in the sphere of education. The man who always wished me the best and insisted that one day I would wear a red academic gown. This is my effort towards making my father's wish a reality. DLAMINI! SIBALUKHULU! KWEZALATUBELA!!

Lastly, he is remembered for his undying support for the whole family and also people that were close to him for the love he gave them to succeed in life through his strong advice.

Table of Contents

CHAPTER ONE

INTRODUCTION TO THE STUDY

CHAPTER TWO

LITERATURE REVIEW

CHAPTER THREE

RESEARCH DESIGN AND METHODOLOGY

CHAPTER FOUR

DATA PRESENTATION AND DATA ANALYSIS

CHAPTER FIVE

THE FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

CHAPTER ONE

INTRODUCTION AND BACKGROUND TO THE STUDY

1.1 INTRODUCTION

Teenage pregnancy is a major public social issue and phenomenon that affects young women across the world owing to consequences thereof on economic, physical and social aspects of teenage mothers, family members and the nation at large. Teenage pregnancy and childbirth interrupt the school progress and young mothers are faced with issues such as child rearing, emotional adjustment to a new role, financial constraints and carrying the burden of school tasks (Van Wyk, 2007).

Maputle (2006) states teenage mothers experience variable social and emotional problems from parents and partners. Adolescent girls incite higher risk of complications during pregnancy, or child-bearing. Furthermore, teenage mothers may experience feelings of fear, with the sudden awareness of motherhood and also indicated that their mothers were upset and scolded them, and as a result teenage mothers have feelings of guilt (Maputle, 2006).Teenage pregnancy and being teenage mothers are a major concern that impact on the psychosocial development of the learner during schooling years.

Teenage pregnancy is defined as a pregnancy in a woman under the age of 20 years, ranging between thirteen to nineteen years (Matshotyana, 2010). Teenage pregnancy has various negative factors that affect the life and career of a young girl. These factors include the physical effects, economic issues, social issues, psychological issues and perinatal outcomes of young teenage mothers. Dennison (2004) argued that the young fathers often feel excluded from the involvement in the pregnancy by health service professionals and are not seen as central.

No matter what, teenage pregnancy affects the education of the learner who has been pregnant. A study conducted by Willan (2013) shows that pregnancy and motherhood do not necessarily end a girl's schooling however for many who remain or return to school following childbirth; it does affect grades, and sometimes academic progression. As Willan (2013) noted, teenage mothers did return to school, however their performance was often affected and many moved from doing well academically to becoming average

or 'underachievers' once they were balancing motherhood and schooling. Dropping out of school and unemployment are the factors that may inhibit teenagers' future goals. Nkani (2012) confirms that these learners experience a challenge having to look after a child properly and devote enough time to school-related activities. Teenage mothers may experience feelings of fear with the sudden awareness of motherhood and teenage mothers encountered traumatising and stigmatising teenage pregnancy experiences while they were in schools, home and the community at large. Nkwanyana (2011, p. 11) agrees that the pregnant teenagers find it difficult to reveal their pregnancies to parents or authority figures, and they therefore undergo psychological stress from negotiation with parents, peer rejection, leaving the school and fear.

It is stated that there is a need for back-up structures both in and out of school to support these teenage mothers and pregnant mothers (Nkani, 2012, p.66). In South Africa the post-apartheid education policy regulated the suspension and expulsion of pregnant learners from the public school system. The post-apartheid policy which was affecting pregnant and teenage mothers was effectively removed from the education arena. However, in 1996 the constitution of South Africa established the Bill of Rights which affirmed the "democratic values of human dignity, equality and freedom," including the rights of children and the right to education.

The report by Govender (2001) shows teenage girls experienced different types of discrimination and were denied the right to education because they were pregnant although there are measures in place to protect human dignity and rights. This is done by the teachers who deny pregnant girls access to continue their education in their school, the reasons being that they will bring the school into disrepute. Those who do go back to school are often isolated and secluded from school children and in some schools especially, in rural schools, girls who have children and are pregnant are put in one classroom and labelled as promiscuous women.

Even though liberal school policy on teenage pregnancy has softened some of the consequences of early childbearing in South Africa, not all teenage mothers remain in school or return to school. This may stem from uneven implementation of school policy resulting in the suspension and expulsion of pregnant teenagers, poor academic

performance prior to pregnancy, inadequate support from families, few child-bearing alternatives, peer and the school environment, as well as the social stigma of being teenage mothers, according to Education for All (2013) report.

Ramulumo and Pitsoe (2013) reveal that in the Commission on Gender Equity report to the South African Ministry of Education, it was stated that there is an increase in learner pregnancies, provincial trends show the concentration of learner pregnancies in predominantly rural areas and lastly in schools that are poorly resourced, those located in poor neighbourhood, those schools having no fees, and those located on land independently owned by farmers. Some forms of discrimination which included suspension from class were reported. Although it may be illegal to refuse pregnant girls an opportunity to complete their schooling, since education is their human right, it is reported that some school committees in South Africa are often unwilling to allow the girls to continue attending classes for fear that they may 'contaminate' other girls and encourage them to become pregnant.

The unwillingness is still practised in many public schools. According to Mashishi and Makoelle (2014, p. 377), Convention on the Elimination of all forms of Discrimination against women and the Convention on the Right of all Children argue that the expulsion policy symbolised a direct violation of a girl's human right, and argue that learners who fall pregnant should not be subjected to any punitive punishment, but rather be guided on parenting while schooling. The National Education Department (2009) has also stressed that "all learners have the right to education" including pregnant and teenage mothers. This means that educators and parents need to find a way to accommodate a pregnant and teenage mother. This is a burning issue that has created a problem that the teachers at school are not trained midwives who can fully attend to a learner who might be faced with an immediate need to give birth (Mashishi & Makoelle, 2014, p. 377).

The questions then asked in this study were: what experiences do these teenage mothers go through psychosocially and how do these teenage mothers navigate these experiences in the learning and teaching environment? This study therefore sought to explore and understand the psychosocial experiences of teenage mothers who were pregnant while at school and find out how they have navigated these experiences in their academic lives.

1.2 RATIONALE OF THE STUDY

The researcher has been in a school for many years observing the high rate of teenage pregnancy. Consequently there is a need for conducting a study that explores how such a phenomenon affects teenage mothers' lives, especially their academic lives. The researcher has witnessed the incidence of teenage pregnancy in the school for more than a decade irrespective of available measures. It is therefore of paramount important to explore the psychosocial experiences of teenage mothers and have a strong desire to investigate how teenagers navigated these experiences in the learning and teaching environment and in a home set-up. Coffel (2002, p. 15) recommends that the learners can be helped to think critically about gendered expectation through reading novels and books that bring them another kind of female community capable of rendering the desperately needed affective support. The pregnant teenagers feel ashamed owing to stigma attached to being pregnant or being a parent while at school, resulting in low self-esteem (Nkani, 2012, p. 106). This study therefore provided a platform to express the challenges encountered when they were pregnant in different phases.

Although the policy for pregnant and teenage mothers was implemented in 1996, this lack of literature shows that schools have not yet started to properly implement the policy. A learner pregnancy policy adopted by the Department of Education in 1996 allows pregnant learners to stay in school and also allows parenting learners to do so if they can manage logistically and financially. Before 1996 the schools did not keep learners who were pregnant but the boy who impregnated the girl was not expelled from school.

The study can be significant by contributing knowledge that will help teachers to understand the psychosocial experiences of the teenage mothers. This research will generate knowledge which may be beneficial to improve the education of teenage mothers. This study itself with its generated knowledge will help to understand better what it means to be a teenage mother especially for those who have been pregnant while in school and continue with schooling. This research could provide recommendations to the school policy based on teenage mothers' experiences of teenage pregnancy.

Furthermore, the recommendations that have been generated from this study can be an example that can be used by other schools in the area of Impendle.

Therefore, this study could be used as an important tool to the researcher and all stakeholders involved in the education system to understand the psychosocial experiences of teenage mothers who are still at school. The teenage pregnancy interrupts schooling practices and causes traumatic experiences in the school and understands how they cope with these experiences. That knowledge will assist all education stakeholders to understand teenage mothers' education.

1.3 STATEMENT OF THE PROBLEM

According to Paronjothy, Broughton, Adappa and Fone (2008, p.241), teenage mothers experience more deprivation and more mental health difficulties and had lower levels of educational attainment, emotional and behavioural problems. The KZN Education Department stated clearly that the school managers and governing bodies must ensure that the rights of female learners must be protected and that special measures should be taken in respect of pregnant learners and teenage mothers, since the following studies Chigona and Chetty (2008), Samuelsson (2002) and Gama (2008) indicate that teenage mothers experience traumatic challenges. It is therefore important to investigate these lived experiences of teenage mothers as professional educators or as stakeholders in the education system. The aim is to establish how these learners navigate their experiences in the field of academic life. Through this study the available information generated will be made available to the school managers and governing body to use in assisting pregnant teenagers and teenage mothers, as per the demand of a learner pregnancy policy adopted by the Department of Education in 1996 which allows pregnant learners to stay in school and also allows parenting learners to do so if they can manage logistically and financially.

1.4 FOCUS AND PURPOSE OF THE STUDY

Whitley and Kirmayer (2007, p. 347) claim that young women may perceive stigma and experience social exclusion associated with 'teenage mothers' which appears to have deleterious effects on various behavioural, affective and cognitive aspects of life. This

study therefore focuses on and aims to understand the psychosocial experiences of teenage mothers who have been pregnant while still in school and return to school following childbirth, and also find out how these learners have navigated these experiences in their academic lives since teenage pregnancy is presented in the literature as a problematic issue nationally and internationally. The study will be conducted in two selected secondary schools in the Ubumbano circuit in Impendle. The experiences that will be studied are based on the discovery phase, delivery phase and post-delivery phase.

1.5 CRITICAL RESEARCH QUESTIONS

The study sought to explore the following questions namely:

- ➢ What are the psychosocial experiences of teenage mothers in two secondary schools?
- ➢ How do these learners navigate these experiences in their academic lives?

1.6 KEY OPERATIONAL CONCEPTS

Teenage pregnancy is defined as pregnancy in a woman under the age of twenty years, ranging between thirteen to nineteen years (Matshotyana, 2010, p. 1).

Teenage mother refers to a young woman who has reached puberty with an age ranging between thirteen to nineteen years who has been pregnant and delivers a baby while still attending high school in this study (Matshotyana, 2010, p. 5).

Psychosocial development is development describing the relation of the individual's emotional needs to the social environment. In this study it involves cognitive, emotional, and social growth as the result of the interaction between social expectations at each life stage and the competencies that people bring to each life challenge (Newman & Newman, 2006, p. 56).

Maputle (2006, p. 88) defines **experiences** as "living through" what happens to one and how one respond or reacts. In this study experiences referred to physical, psychological, emotional and cultural changes that the teenage mothers lived through during the discovering stage, delivery stage and post-delivery stage. This involves both

psychological and behavioural dispositions including traits, cognition, feelings, perceptions and behaviour.

1.7 LIMITATIONS OF THE STUDY

Conducting a study that is based on self-reported data on a sensitive and traumatic topic can compromise the measurement of desirability because the study explores the experiences of teenage mothers about a sensitive topic; therefore there is a possibility of under-reporting (Alexander, Kiemanh, Nhan & Saifuddin, 2013). The sampling was chosen adequately for this study because the participants would have been traumatised if it was done anyhow. The researcher is a male teacher who interviewed the young female mothers who have been pregnant. This poses the problem that the data cannot be generated successfully and to the best ability of participants, due to the reason that the participants are likely to experience feelings of shame, dissatisfaction and embarrassment, but this has been addressed in the following section. The limitation and weaknesses of this study can be related to the psychosocial experiences that cannot be measured; however these limitations can be dealt with accordingly by using trustworthiness wherein the first language of participants was used to avoid the problem of not understanding the questions to produce the expected information since this was a qualitative study.

The limitation is that the findings cannot be generalised to other pregnant learners and teenage mothers experiencing psychosocial challenges, as this study is limited to only six participants. Lastly the study has been delayed by the approval office from the ethics committee which influenced the planned scheduled time to collect data completely. Another limitation of this study that emerged during the data collection process was that the interviewer also delayed the process due to her personal matters and school-related activities. The participants did not elaborate satisfactorily when answering some of the questions.

1.8 STRATEGIES IN OVERCOMING THESE LIMITATIONS

In order to delimit these challenges in this study the researcher had asked the Life Orientation teacher to attend to the issue of interviewing learners to avoid any shame and

discomfort in that respect. This also addressed the possibility or issue of under-reporting data. The challenge was dealt with accordingly, and in the case of limited time, the researcher worked hard and at a faster pace in order to complete the thesis on time. The researcher changed the scheduled time for conducting interviews to happen during their leisure time such as Saturdays and spring vacations. The researcher had to ensure he encouraged her all the time during the process. Lastly during the interviewing process itself the researcher always reminded the interviewer to seek clarity and make participants elaborate on the question to create discussion. The researcher feels that without monitoring, this study would not have been possible.

1.9 DELIMITATIONS OF THE STUDY

The problem of teenage pregnancy is a worldwide issue but this study is confined to two secondary schools to explore and understand the psychosocial experiences of teenage mothers and find out how they cope with such experiences in their lives in the wider Umgungundlovu district in the KwaZulu-Natal province. This study is also limited to learners in secondary schools with reference to grade ten, eleven and twelve, the reason being these learners are likely to respond fully to the research questions unlike learners in grade eight and nine because they are still children.

1.10 CONCLUSION

This chapter has introduced and discussed briefly teenage pregnancy with the aim of giving the idea as to what the study was about. It also discussed teenage pregnancy and the consequences thereof. This chapter gave an overview of the background, rationale of the study and statement of the problem. The focus and purpose of the study, research questions, objectives of the study, study limitations as well as delimitations have been discussed to give the reader a global idea about the study.

1.11 DIVISION OF CHAPTERS

Chapter one: Introduction

Chapter one has looked briefly at a detailed background of the study, which provided the reader with an overview and understanding of teenage pregnancy and its impact on the

education of teenage mothers. The rationale of the study and the statement of the problem for the study are described. The focus and purpose of the study, research questions, objectives of the study, study limitations as well as delimitations have been given to create a global idea about the study. In the last section of this chapter various concepts have been defined as a means to provide the reader with better understanding of what is discussed throughout the study.

Chapter two: Literature review

Chapter two comprises the theoretical framework, literature review and a detailed discussion of the psychosocial development theory which underpinned this study. Thereafter the literature review is provided, and a detailed discussion on teenage pregnancy and areas of support provided by different structure in the education environment will be thoroughly discussed.

Chapter three: Research methodology

Chapter three discusses procedures as to how research was conducted and gives a comprehensive description of the methodological structure and methods applied in the study. A precise description of participants, and the instrumentation used are mentioned. Furthermore, a step-by-step procedure of how the data was collected, validity and reliability clearly explained as well as how the data was analysed is specified. This chapter furthermore indicates the ethical considerations taken into account for this study.

Chapter four: Analysis of collected data

In this chapter the results of the questionnaire and interview schedule conducted by the researcher are interpreted and discussed.

Chapter five: Conclusion of the study

Findings, conclusion and recommendations are discussed in greater detail in this chapter.

CHAPTER TWO

LITERATURE REVIEW

2.1 INTRODUCTION

This chapter aims to give a literature review that is based on teenage pregnancy which is the core phenomenon of this study. This forms a very important part of the whole study because it provides the researcher with important facts and background information about the subject under study and also enables him to avoid duplicating previous research, lastly most importantly to narrow the research question (Welman, Kruger & Mitchell, 2005, p. 39).

In this chapter the researcher deeply reviews literature based on teenage pregnancy on a global level and an African level, and the impact of teenage pregnancy will be reviewed in greater detail. Many studies have been conducted on the high rate of teenage pregnancy, and the impact thereof as well as supporting structures or recommendations that were made available to assist these learners, after all odds that have been experienced. This study seeks to explore their psychosocial experiences and how they navigate these experiences in their academic lives. The theoretical framework that informed how the study might be understood is discussed in this chapter followed by the literature review.

2.2 THEORETICAL FRAMEWORK

Teenage pregnancy and teenage mother are social issues that directly affect the psychosocial development of an individual, in this case the learner. The pregnancy of a teenage girl poses a deep and continuous emotional and financial impact and it has a detrimental effect, for very often the female is unable to attain needed education to compete in the economy (Domenico & Karen, 2007). This is underpinned by Erickson's theory of psychosocial development. This study aimed to investigate the psychosocial experiences of teenage mothers and how these learners navigate these experiences in their academic life. His theory emphasises how relationships influence one's search for his or her identity and also highlights that teachers occupy a potentially important position in the lives of young people and influence the environment in which relationships between

students are established (Erickson, 1968). Jali (2005) who quoted in a study by Matshotyana (2010) concurs with this notion that the educators are in a sole position to assist the learners because they spend most of the time with adolescents in school. They therefore should teach them what it means to be adolescents and young women.

This theory is divided into eight stages with dichotomies that define the developmental crises that have lasting effects on the lives of a person, namely trust versus mistrust, autonomy versus shame/ doubt, initiative versus guilt, industry versus inferiority, identity versus role diffusion, intimacy versus isolation, generativity versus stagnation, and ego integrity versus despair (Erickson, 1968).

Erickson's theory is based on the assumption that the individual undergoes different stages of psychosocial development which is appropriate to this study as it sought to understand the psychosocial experiences of learners who have been pregnant while still at school. Briefly, the theory is suitable in the sense that it discusses the developmental crises of human development and the impact of one's social environment on one's psychological development. It assisted to understand the psychosocial experiences that teenage mothers have gone through using the lenses of the different stages of development – intimacy versus isolation, identity versus role diffusion, autonomy versus shame, initiative versus guilt, and ego integrity versus despair.

The rationale for selecting psychosocial theory as an organising framework for this study is that it proved to a suitable theory for studying human development because it integrates three features that are of importance to the development of human life. Newman and Newman (2006) postulate that the theory addresses growth across life span and suggests that those experiences of teenage mothers can lead to a reinterpretation of earlier periods. The theory further assumes that individuals have contributed to their psychological development at each stage. It is suitable in the sense that it shows how important it is for individuals to integrate, organise, and conceptualise their experiences in order to protect themselves and cope with the challenges. Lastly the growth of the individual is shaped by cultural goals, aspirations and social expectations.

What is applicable to this study is the fifth stage: identity versus role confusion. The importance of Erickson's theory is to favour the psychosocial factors such as conflict

between children as well as the child's interaction with the social environment and also states that development extends throughout the lifespan (De Wet, 2004). This is particularly important in that the child has to contend with the re-emergence of latent sexual impulse, genital maturity and inner turmoil. This stage involves the obsession with how significant others perceive him or her. They have to develop a new sense of the 'inner self.' The development of the child is to know how he or she fits in with the rest of society. The danger of this stage is what Erickson refers to as identity or role confusion.

Marshall (2010) also adds that the concept of identity indicates a sense of being at one with oneself as an individual grows in social roles and communities. It is important to sort out and integrate roles such as friend, older sibling and parent. Many teenage mothers exhibit certain psychological problems. It is quite likely that pregnancy and teenage mothers lead to identity diffusion and unnecessarily delay the attainment of identity achievement and lead to role confusion.

2.3 HISTORICAL BACKGROUND

In this section the researcher aims to delve deeply into the studies relating to this study that aimed to analyse the psychosocial experiences of teenage mothers in the learning and teaching environment. The study by Xui and Shtarkshall (2004) shows that in different parts of the world, sexual activity is common among some adolescents and initiated in early teenagers and this study is supported by the study of Khawanga (2011) that the United States and United Kingdom have the highest level of teenage pregnancy. It is therefore important that this study aimed to explore the psychosocial experiences of teenage mothers who were pregnant and returned to school. It is of paramount importance to review research pertaining to the experiences of learners and find out how they turned things around in their lives.

The section also provides a review of literature on how different learners in particular have experienced such a phenomenon and also finds out what mechanisms were applied or used by these learners to succeed in academic life.

The stigma against pregnancy and young parents in schools results in difficult circumstances for young women and young mothers to access education (Wiggin,

Oakley, Sawtell, Austerberry, Clemens & Elbourne, 2005). This suggests that these teenage mothers experience challenges in their lives that need to be attended to in order for them to succeed without having difficulties in school work. From a legal perspective the schools are obliged to provide a supportive environment for young women and young parents, as part of the commitment towards gender equality encapsulated in the South African School Act of 1996.

2.4 GLOBAL PERSPECTIVE

This chapter addresses literature relating to the psychosocial experience and highlight the fact that teenage pregnancy is a problematic phenomenon in all societies which affects everyone in the family and society at large.

For a decade teenage pregnancy existed around the world. Dawson and Hosie (2005) show that in England the Social Exclusion Unit (1999) made a strong effort to avoid teenagers who became parents, and so as to not lose out on opportunity for the future, young parents must have a chance to complete their education, prepare to support themselves and their families in order to reduce the risk of long term social exclusion.

Mary, Debie and Jake (2013) indicate that the rate of teenage pregnancy is relatively high in Australia compared to other comparable countries. Globally, statistics released by the World Health Organisation (2014) report that many adolescent girls between 15 and 19 years get pregnant and about 16 million women give birth each year worldwide. This has a ripple effect on the individual and economy of the country.

The proportion of birth that takes place during adolescence is about 2% in China, 18% in Latin America and the Caribbean, and more than 50% in sub-Saharan Africa. Half of all adolescent births occur in just seven countries namely Bangladesh, Brazil, Democratic Republic of Congo, Ethiopia, India, Nigeria, and the United States. Therefore pregnancy among very young adolescents is a significant problem.

Philippines again is characterised as a region with a high rate of teenage pregnancy, according to statistics, it is about 70% which indicates that there is high incidence (Pogoy, Verzosa, Coming & Agustino, 2014), where they research the reasons, impact and coping mechanism.

A study by Khawanga (2011) shows the prevalence of teenage pregnancy, and report that the United States and United Kingdom have the highest level of teenage pregnancy in developed countries, lower in Japan and South Korea. In developing regions the rate is highest in African society with Uganda having the highest rate. The reason for this is due to parental negligence, poverty, poor environment and parents who do not work or work long hours (Khawanga, 2011). All these contribute to the high rate of teenage pregnancy in Uganda.

Teenage pregnancy emerged as a social problem in the United States only around 1970 historically a national study indicates that in 1981 the United States had the highest rate of adolescent pregnancy, birth and abortion among six industrialised nations. Those include England, Wales, France, Canada, Sweden and the Netherlands (Mohase, 2006).

In London the study by Wiggin, Oakley, Sawtell, Austerberry, Clemens and Elbourne, (2005) contradicts the idea that the learners usually voice that teenage pregnancy is a mistake, as these scholars report that the teenagers have a desire to have a baby as they need something to own as theirs, to love and to escape from the feeling of unhappiness. They have gained a positive experience.

The World Health Organisation (2014) addresses the issues of gender disparity in making sure to meet millennium development goals to enable adolescents to have access to education. The management of adolescent pregnancy includes women empowerment for eradication of existing social and cultural biases against adolescent women (Neelofur-Khan, 2007).

2.5 AFRICAN PERSPECTIVE

It is a matter of undeniable fact that when the literature is reviewed it suggests that the rate of teenage pregnancy still remains high internationally and in African countries as well, despite the fact that there are contraceptive measures in place (Panday, Makiwane, Ranchod & Letsoala, 2009; Sodi, 2009).

Ugandan teenage pregnancy rate is one of the highest in sub-Saharan Africa. Thirty-five percent of girls aged 15-19 years were either pregnant or had already delivered a child. The review by Madanda and Ahikire (2010) stipulate that the learner who falls pregnant

is expelled from school as the child mothers fail to return to complete their education and they further argue that it is due to the lack of mechanism to ensure teenage mothers the right to education in Uganda.

Maluli and Bali (2014) openly argue that the policy of Tanzania (2012) denies the access to education for learners who have been pregnant while in school. The learners are not allowed to stay at school when they are pregnant and there is no access after delivery. These scholars argue that girls' pregnancy-related school dropout remains high irrespective of the Convention on the Rights of the Child (2002) and a policy of Education for All (2000) at the world level. The Convention on the Rights of the Child asserts that every child should have access to primary and higher education. Girls and women being the majority, remain illiterate. To encourage the education of girls and women, the World Education Forum of the United Nations met in Dakar in the year 2000, and they set a goal that all countries should aim at attaining universal primary education.

Some countries have for a long time drafted enabling environments for learners who are pregnant and give birth. Hubbard (2008) explains the situation that occurs in Namibia where teenage mothers are mandated after delivery to return to the school immediately if they wish to do so. The girls have a right to negotiate the duration of their maternity leave with the school, and can arrange for extra classes so that they cannot lag behind in their school work.

Even though the fertility rate in South Africa has decreased, the rate of teenage pregnancy in South Africa is still high. Ghosh (2013) reports 182 000 female high school students, mostly poor, black learners, become pregnant every year in South Africa, thereby endangering their education and future. The study conducted by Sodi (2009, p. 5) confirms that the rate of teenage pregnancy remains high, despite high levels of knowledge about modern methods of contraception. The other researchers indicate that the availability is limited to the reach of the adolescents, while others suggest the stigma attached to them when they try to access the contraceptive measures.

Panday, Makiwane, Ranchod and Letsoala (2009) further state that the high prevalence of teenage pregnancy and early motherhood has been one of the major hindrances to

educational attainment. The learners are able to further their schooling due to the demands that they face to look after their children.

A historical understanding in Botswana as far back as the twentieth century reveals that learners had gone through difficult experiences due to pregnancy (Mojapelo, 1997), pregnancy affects health and welfare of young women. This researcher further states that learners in Botswana experience hardship if they fall pregnant, as they are forced to leave school and not come back to school after delivery. This culture which is practised in Botswana deprives the school going-learners their educational right. It is clear that these learners have feelings of hopelessness because they do not do anything for themselves. Most girls have never managed to return to school after they give birth and become mothers but are only admitted to a different school set for that purpose.

Kheswa and Pitso (2014) share the very similar idea that teenage mothers have counted against education success of girls in South Africa, such youth end up being depressed and experience difficulty achieving self-actualisation. This assertion is confirmed by Chigona and Chetty (2008) where the students express clearly that they do not have time to complete their homework and to study at home. Furthermore Pitso (2013), in Pitso and Kheswa (2014), states that teenage mothers have displayed a higher level of parenting stress, and less affective responsiveness in the interaction with their infants. This effect of being in a condition of pregnancy affects the young ones in Botswana as stated by Chapman, Emert and Coyne (2003), on a Girls' Education Movement that raises a concern that all girls must be encouraged to school retention and helped to cope with mistreatment as the case might be in Uganda and other countries.

In South Africa the prevalence of pregnancy increases with age. This means that the survey conducted indicates that 10, 2 % of 19-year-old girls were pregnant compared to 0.3% of 13-year-old girls (Statistical release, 2012, p. 18). According to the Statistical report (2012), girls between the ages of seven and eight years who were not attending any educational institution blamed pregnancy for dropping out of school. National and international studies confirms that data collected shows that the fertility rate increases with age by the Department of Education (2009) and a study conducted in Africa also

agrees to this relationship, for example teenage pregnancy in Kenya doubled from 17% at ages 15-18 to 34% at ages 17 -18 years.

Lastly this section gives the brief trend in as far as teenage pregnancy is concerned based on the report by Department of Education (2009) that older adolescents aged seventeen and nineteen account for the bulk of teenage fertility in South Africa, while rates are significantly higher among Blacks, Coloureds, Whites and Indians (71 per 100, 60 per 1000, 22 per 1000 and 14 per 100 respectively). This difference can be accounted for by the wide variation in the social conditions under which young people grow up. This phenomenon results in disruption of family structure, inequality in access to education and the concentration of poverty and unemployment. The report further states that the decline in teenage fertility rate does not state automatically that there is no pregnancies, but the high proportion of unintended pregnancies for teenagers in South Africa remains a serious problem. The study by Xui and Shtarkshall (2004) concurs that in different parts of the world, sexual activity is common among some adolescents and initiated in early teenagers. In the United States of America 5% to 10% of females have had sexual intercourse by the age of 13 years; in Tanzania it is 13.5 years for girls to start sexual activity. In New Zealand one study shows first sexual intercourse before 16 years of age, and western Canada found 30 % of girls aged 17 years.

2.6. TEENAGE MOTHERS' EXPERIENCES OF TEENAGE PREGNANCY

The incidence of teenage pregnancy remains high among the teenage girls in schools as discussed earlier in the previous sections under global and african perspectives, and as a result the school dropout rate is high. It is therefore important to seek an understanding of teenage mothers' perceptions and experiences regarding this matter. In addition these adolescents become sexually active at an earlier stage and without using any form of contraceptive measure, and children born to these girls display some sort of developmental complications. Shaw, Debbie and Jake (2005) show that the offspring of 14-year-old mothers are more likely to have disturbed psychological and behavioural problems, have poor school performance and poorer reading ability. This phenomenon has a significant psychological impact on the individual. These areas will be discussed in greater detail in the following sections.

2.6.1 THE EXPERIENCE OF BEING PREGNANT

Teenage pregnancy affects the learners one way or another; socially these learners have a low self-esteem. These factors affect and alter the development physically, socially and educationally in the teenage mother. It is very important to assist these teenage mothers because they can suffer from diseases such as anaemia, toxaemia, and urine dysfunction. These are the diseases that normally affect young women that fall pregnant when they are still young. The teenage mothers feel guilt, shame and anger (Gama, 2008).

Ginny (2008) explains that the learners have faced difficult periods where teenage mothers drop-out of school due to the reason that they experience low academic achievement. Therefore they reach professional dead-ends or miss out on job opportunities.

Even though girls are legally allowed to attend school during and after pregnancy in South Africa, they are often confronted by the stigma of teachers and peers in the school environment. Pogoy, Verzosa, Coming and Agustino (2014) claim some teenagers may use their pregnant status to deliberately escape the demands of high school education. The teenage mothers describe the problems and behavioural challenges that they experience in the learning and teaching environment (Malahlela, 2010).

Teenage pregnancy becomes a norm rather than exception in many communities. The study by Ngcobo (2009) also confirms clearly that the rate of teenage pregnancy still remains higher among black women. Such young mothers tend to display the following behaviour, such as denial and shock as well as conflict with boyfriend, which leads to serious emotional distress and impulsive decision-making.

2.6.2 THE INFLUENCE OF PEERS

Peer pressure is also one of the main factors that lead to early sexual intercourse and to teenage pregnancy. Mohase (2006) elucidates that they often get pregnant not to please themselves, but only to be accepted within a group of pregnant or teenage mothers to maintain friendship. Sometimes they advise one another that in order to have money through social grants is to have a baby. That is the perception the researcher has when observing the high number of teenage pregnancy around the schools in Impendle

irrespective of contraceptive measures as espoused by Panday et al. (2009). They are often misguided by the influence of others.

Peer pressure is a challenge that any adolescent has to deal with and there are many factors that stimulate it. This is explained better by Gyan (2013) in his study that peer influence contributes greatly to teenagers' involvement in early sex. This was for a long time revealed by William (1991), quoted by Gyan (2013), that most teenagers' reliance on their peers for information makes them fall prey to teenage pregnancy. Gyan further claims that the teenagers learn a lot from their peers.

Kansumba (2002), cited in Matshotyana (2010), agrees with the assertion that peers play a major role in the transfer of sexual knowledge. This is a problem because it does not help in solving the problem of teenage pregnancy that affects almost everyone in the world. This is particularly when teenagers are tempted to give into negative peer pressure because they want to be liked or fit in. Pressure from peer clusters can lead to risky behaviour such as promiscuity and neglect of contraception (Nkwanyana, 2011).

Mwingi (2012) states that peer pressure influences adolescent sexual behaviour, they begin to socialise with their peers and they tend to shift from reliance on their parents and the lessons, and values they learnt from home socialisation to reliance on their peers. As young people move out of their parents' home direct parental control ceases and identification with peer groups increases, therefore sexual intercourse is practised with resultant pregnancy (Makhaza & Ige, 2014).

2.6.3 VICTIMISATION BY EDUCATORS

Young mothers are rejected by educators by not giving enough time to do their work at school. They are sometimes referred to other learners to get help for what has been learnt while they are not present due to their commitment as young mothers. A study by Molapo (2011) shows that the learners are afraid to face and meet the teacher because of their big stomachs and some educators articulate clearly that these young mothers increase the rate of failures.

Even though teenage mother learners experience many problems such as family problems, financial constraints and boyfriend conflicts, among other issues, teachers on

the other hand are also putting pressure on them by judging them and making the atmosphere in the school unbearable for these learners to finish their studies. Being teased and humiliated creates loneliness and makes these learners feel alienated from school, causing them to eventually drop out. Chigona and Chetty (2008) concur teachers and fellow learners put a good deal of pressure on pregnant and parenting learners without really understanding what the girls were going through. In addition, they suggest that teachers need professionals to come and inform them about handling teenagers and their situations, and they need in-service training to keep track of changes that the society is facing (Chigona & Chetty, 2008).

Lastly, there is humiliation by teachers in classrooms by not calling the learner by her name but some teachers use the name of her child (Chigona & Chetty, 2008). These teenage mothers are interpreted as teachers having a negative attitude towards young mothers. Furthermore teachers fail to deal with young mothers because their problems are continuous, especially those that lack support from their mothers. They are always absent from school as a result they fail to catch up with others (Molapo, 2011). The young women perceive attitudes present around them such as being labelled in a negative way (Samuelsson, 2012). The teachers and learners have shown a negative attitude towards them as is evident by certain studies that show that teenage mothers are troubled in the school.

2.6.4 EXPERIENCES WITH FAMILY MEMBERS

In some families teenage pregnancy is not welcome due to certain reasons such as economic stress, cultural non-acceptance and social issues. Molapo (2011) agrees with this notion that most families reject young mothers because of the country's dominant culture that puts more values on their children in the sense that most parents expect to get something like money or any kind of animals for their daughters as lobola.

Chigona and Chetty (2008) add that sometimes the parents distance themselves from the girls because they feel ashamed that the community would look down upon the family because of their child's actions. Ultimately, teen parenting is a serious problem in the African community and most children born to teenage mothers have very few chances of success in life due to the poverty they are born into. Research by Gyesaw (2013) further

argues that the parents are upset and depressed; the father of the girl is very angry and does not talk to her for a three month period. This phenomenon affects the social aspect of the teenage mother in the relationship with her father and she experiences sanctions with her father.

Some parents can't accept the pregnancy and force their daughters to leave home, as she would bring embarrassment to the family. The child will obviously be seen as a burden by the teenager's parents as they will have to readjust their budget in order to accommodate the newest member of the family. In some cases the parents fail to accept the situation as they could be suffering financially even before the realisation of the pregnancy (Mohase, 2006).

Young mothers lack child care and assistance at home and no one is willing to help or provide professional care for the baby. They do not get help from the boyfriend and family members (Taylor-Ritzler, 2007).

Furthermore, young mothers get no encouragement at home in relation to school, and they then decide to leave school before they complete their studies. In Molopo's (2011) study this is supported by the idea that the learners do not have time to do their homework because the baby is always with them and crying all the time.

The pregnancy is a crisis to those who do not receive support from their mothers socially and financially. It is the burden of the mother depending largely on the government social grant as a stable income. London (2002), cited n Matshotyana (2010), concurs that student mothers survive very stressful times after their babies are born as they are torn between demands of family, classmates, the father of the child and the outside world at large. This is a daunting challenge that they face which therefore leads to the situation where they cannot succeed in their academic lives.

2.6.5 THE FATHER'S ROLE IN CHILD UPBRINGING

Financially the teenage father of the child does not support his child with the welfare grant, well-being and childrearing. Normally these 'fathers' are still schooling. Fears (2014) notes children with fathers under 18 years old are maintained by their mothers without their fathers' help. Teenage mothers need financial support to sustain themselves

and their babies. The learner can have all the other means of support but without financial support the baby won't survive and the learner won't be able to continue with her studies.

The financial support from the father of the baby might be insufficient. Young fathers, however, may lack maturity to provide their partners with the emotional support and stability they need. Janet, Sydney and Bernstein (1996) concur that the male partner does not perform numerous support functions; moreover the nature of support they provide, however, was not related to the mother's experience or behaviour as a parent. The father may be available but that does not mean that he will automatically provide financial support.

The study conducted by Swart, Bhana, Richter and Versfeld (2013) further argues that the parents of teenage mothers reject the father of the child to contribute financially, as a result the father stops assuming the role of fatherhood.

2.6.6 FINANCIAL NEEDS OF TEENAGE MOTHERS

South Africa has a problem of unemployment which affects a huge number of people who live in South Africa especially the youth. Over two thirds of adolescents who have ever been pregnant in SA report their pregnancies as unwanted. This is confirmed by Chigona and Chetty (2008) in their study that teenage mothers come from financially challenged families and the parents cannot afford babysitting for the grandchildren. The lack of support from the father multiplies the challenges experienced by teenage mothers. The financial need is not fully met.

Although the South African School Act of 1996 on learner pregnancy policy legalises that all pregnant girls or teenage mothers must be in schools to continue till the pregnant learner is due, and can immediately return to school, the above mentioned conditions result in children not being able to continue with schooling.

As Samuelson (2012) emphasises, the young mothers come from poor homes, and it is a struggle when it comes to having money to provide the necessities and other expenses that come with having a baby.

Having a child requires financial stability; hence the adolescent mother cannot provide financial support to the baby as she also depends on her family for support. The adolescent mother may only have the means to provide through a state maintenance grant, which affects the economic status of the country (Matshotyana, 2010).

2.6.7 THE PREGNANCY IMPACT ON THE EDUCATIONAL ATTAINMENT OF TEENAGE MOTHERS

Teenage pregnancy strains the country in various ways. The Department of Education (2009) states that teenage pregnancy has negative educational and economic consequences. South Africa has one of the highest literacy levels exceeding many other countries in sub-Saharan Africa. In a knowledge-based economy, education is essential to secure future employment. Teenage pregnancy can have a profound impact on young mothers and their children by placing limitations on their educational achievement and economic stability and predisposing them to single parenthood and marital instability in the future. The disruption that pregnancy inflicts on the educational and occupational outcomes of young mothers both maintains and intensifies poverty.

Furthermore few learners can be re-enrolled at schools even though there are amended liberal policies that are adopted by many countries including South Africa to remain in schools and to return to schools post-pregnancy. This phenomenon results in poor academic performance, lower grade attainment and high failure rates in schools due to absenteeism as a result of poor support from families. The social stigma of being a mother has an impact on the educational outcome. Every year teenage mothers remain outside of the education system (Panday *et al.,* 2009).

According to Paronjothy, Broughton, Adappa and Fone (2008, p.241), teenage mothers experience more deprivation and more mental health difficulties and had lower levels of educational attainment, and emotional and behavioural problems. The study conducted in Malawi agrees that the school leaving stems from pregnancy and childbearing and again in an environment where school attendance can be sporadic, dropout for the girls is more likely to be permanent than for girls who leave for other reasons (Chalasami, Kelly, Mensch & Soler-Hampejsek, 2012).

Teenage pregnancy leads to over population which leads to lack of jobs because the economy will suffer a serious blow. Nirkhe (2013) also confirms in his study that adolescent pregnancy is associated with increased rates of subsequent poverty for the mother and greater risk for behavioural problems, neglect, and low educational attainment for the child.

Even though South Africa is striving for economic development, teenage pregnancy is posing additional challenges for the country. The Department of Education (2009) concurs that South Africa is better than other African states; its child mortality is increasing. These challenges require bold solutions from the broader community. Informed use of contraception has a significant effect on reducing the possibility of conception and conversely ignorance about sexuality, contraception and reproduction can be a major contributor to teenage pregnancy (Van Wyk, 2007).

2.6.8 SUPPORTING SYSTEMS FOR TEENAGE MOTHERS

Prior to 1994, there was no written document on learner pregnancy in schools. Pregnant girls were usually expelled as soon as the school authorities found that the learner was pregnant, and the decision on whether to readmit them after they had delivered the baby was left entirely to the individual school. In 1996 the new Constitution of South Africa stipulated that everyone has the right to a basic education, including adult basic education and further education, which the State, through reasonable measures, must progressively make available and accessible.

The Department of Education makes sure that the learners may not be deprived the right to access education curriculum. It recommends strongly that the arrangement must be made to assist the learners. This means that lesson notes and assignments must be made available to them and that they must take responsibility for completing and returning the assignments to the school for continuous assessment (CASS). The process of gathering valid information about a learner's performance and the formal recording of her progress throughout the year (CASS) must be continued as far as is practically possible whether she is at school or at home.

The education primarily aims to assist the students in actualising their potential. Van Den Berg and Mamhute (2013) insist that in order for educational goals to be realised by teenage mothers they need a supportive environment to avoid them experiencing depression and dropping out of school. Without the support of their classmates in the academic arena, the learners with babies would have found it almost impossible to proceed. Some students with babies continue schooling with the aid of their parents supporting them to do so and this happens when both parents worked and had an education beyond high school (Mangino, 2008).

Peer support assists usefully in the lives of teenage mothers when still schooling. Lynch (2008), in Van Den Berg (2013), indicates clearly in the study that students who get support from their peers find it easy to combine study with mothering.

Peers' support dispels any fear of loneliness. Mamhute (2011) concurs that the teenage mothers have been assisted by their classmates with notes and group discussion to catch up. Adolescent mothers simply make meanings out of their predicament by adopting religious measures and personal resolution to go on with their lives. Furthermore tailored care and youth-friendly service are required to help these females to navigate through safely (Melvin, Ayotunde & Mustapha, 2009).

Literature indicates that teenage mothers are facing many challenges. The teachers on the other hand are also putting pressure on them by judging them and make the atmosphere in the school unbearable for these learners to finish their studies. As the study by Molapo (2011) confirms, learners are afraid to face and meet the teacher because of their big stomachs and some educators articulate clearly that these young mothers increase the rate of failures. The peers also make the situation worse in the interaction with teenage mothers. This contradicts with others peers who bring support during the times of hardship. The family planning research unit (2011) suggests that the teenage mothers describe strains on their existing friendships. They are treated as outcasts, receiving negative comments about their behaviour as well as experiencing violence.

2.6.9 PSYCHOLOGICAL IMPACT ON TEENAGE MOTHERS

The psychological impact on teenage mothers presents challenges and problems to young mothers which they are often unprepared for. Sodi (2009) clarifies this and asserts that teenage mothers may contribute to high rates of depression, poor school performance and emotional instability. Teenage pregnancy is associated with distressing psychological symptoms such as loneliness, feeling stressed and inadequate, which results in teenage mothers experiencing psychological distress.

Kheswa and Pitso (2014) share the very similar idea that the teenage mothers have counted against educational success of girls in South Africa, such youth end up being depressed and experience difficulty achieving self-actualisation. This assertion is confirmed by Chigon and Chetty (2008) that the students express clearly that they do not have time to complete their homework and to study at home.

Teenage mothers find it is difficult to meet educational, physical, emotional and financial needs. Gasa (2012) in his study argues that teenage mothers often blame the school for bringing more stress than solutions and also often reveals their emotional instability in the form of shame, guilt, anger, self-doubt and dissatisfaction with their parental role.

Furthermore Sodi (2009) postulates that teenage pregnancy is associated with distressing psychological symptoms such as loneliness, feeling stressed and inadequate, which result in teenage mothers experiencing psychological distress. As stated earlier the father's role is minimal and may not be a positive role model for parenting and fatherhood. This also leads to teenage mothers having a higher level of depression than any other teenagers (Collingwood, 2010).

Feelings of anxiety and insomnia are experienced by teenage mothers, as well as psychological problems like intense feelings of ambivalence, uncertainty and confusion (Sodi, 2009). These conditions lead to the complicated situation where these mothers may have improper thinking capacity. Therefore receiving treatment for depression is extremely important for the mother in order to cope with her symptoms.

Lastly the study by Tagbuzaden, Irajpour, Nedjat, Arbabi and Lopez (2014) confirms that teenage mothers perceive the psychological trauma in every point of time during their

pregnancy and giving birth as apprehension, helplessness, and collapse and impending death with these continuing feelings as psychological trauma which begins on the day of receiving a positive pregnancy test. This is summarised by the fact that teenage pregnancy is a crisis that teenage girls experience in their developmental journey.

2.6.10. ACCESS TO CONTRACEPTIVE MEASURES

The high incidence of teenage pregnancy among teenagers suggests that the young people do not use measures to prevent pregnancy. Teenagers believe that condoms reduce sexual pleasure and are antagonistic to love and trust, and as a result they do not see the need for using condoms (Nkosi, 2009).

During early sexual activity, teenagers are not well informed about contraceptives. Amu and Koby (2006) argue that teenagers are generally poor contraceptive users and they tend to delay accessing the service until they have been sexually active for about a year or when they have been motivated by a pregnancy scare. As Kinaro (2010) signifies, generally the perceptions on contraceptive use among adolescents are negative and the majority of adolescents cannot get contraceptives if they wanted to. Kinaro added that the parents would also not allow their children to use contraceptives.

Informed use of contraception has a significant effect on reducing the possibility of conception and conversely ignorance about sexuality, contraception and reproduction can be a major contributor to teenage pregnancy (Van Wyk, 2007). As Kayongo (2013) highlights on condom use, behaviour and practices reveal improper and inconsistent use of condoms among youth. This discontinuation of condom use may pose problems in that the young girls may fall pregnant. Makhaza and Ige (2014) also add that some students use contraception, and others are failing to use contraceptives properly or not using contraception at all. However, teenage pregnancy figures remain high; this could suggest the inconsistent use of contraceptive measures.

Therefore, young people should be informed about STD/HIV/AIDS and early pregnancy, and appropriate advice and supplies should be made available to them. As Kansumba (2002), cited in Matshotyana (2010), argues that parents are the main providers of sex education to adolescents. Adolescents undermine education from parents and think that it

does not equip them to deal with the pressures with regard to sexual issues. Jali (2005), cited in Matshotyana (2010), emphasises that educators are in a sole position because they spend most of the time with adolescents in school; therefore they should teach adolescents what it means to be an adolescent and young adult.

Young people need to develop certain skills to be able to make informed, responsible decisions about their sexual behaviour. They need to be able to resist pressure, be assertive, negotiate, and resolve conflicts. They also need to know about contraceptives, such as condoms, and feel confident enough to use them. Peer counselling and peer education can be very effective in strengthening these skills and attitudes.

From the international perspective, Murray, Stewart and Rosen (2000), cited in Matshotyana (2010), give the following recommendations:

- Formulating national policies that authorise the provision of information and services to unmarried young people is an important step toward overcoming informal barriers.
- Open communication- through the mass media and at a more personal level- helps remove the taboo from discussing adolescent sexuality, and can also provide information, redefine social norms, and change attitudes and behaviours.
- Young people are among the most effective advocates for change, and several programmes have channelled energy and enthusiasm into helping modify social norms and lower barriers to youth programming.
- Involving a broad range of key actors early in the process of policy or programme development is an important way to address conflict and controversy.

These can be of help to other learners not to fall pregnant at an early age because childbearing has a detrimental effect on the life of the individual. Secondly, these have to be applied carefully and practically since pregnancy among adolescents is high.

2.7 CONCLUSION

Chapter two covered the main theoretical influences which underpinned the study the psychosocial development theory. Relevant literature was reviewed, including teenage pregnancy and its impact on education attainment in a global and local context. Teenage

pregnancy impact was also discussed in a broader perspective. Interventions for teenage pregnancy including learner pregnancy policy were discussed in detail. The teenage mothers' experiences of teenage pregnancy was presented and the impact of adolescent pregnancy on the adolescents' needs. Various interventions and responses to teenage pregnancy were explored.

The next chapter discusses the research design and methodology that will be used to collect data for the research and procedures, as well as ethical issues to complete the study.

CHAPTER THREE

RESEARCH DESIGN AND METHODOLOGY

3.1 INTRODUCTION

Chapter two provided the theoretical framework and literature review that provided the understanding of the phenomenon under the study. This chapter discusses the research approach, paradigm and research design used in this study. It further looks at and discusses the study setting and the sample that was used to pursue the study. Procedures that were followed are given, data collection methods and data analysis are also explored. Furthermore ethical considerations that need be addressed before embarking upon a research project and taken into account while the research is ongoing are clearly explained (Burton & Bartlett, 2009, p. 29).

3.2 RESEARCH APPROACH

This study was influenced by a qualitative research approach that is designed to provide an in-depth narrative analysis of a particular event and a narrative of experiences; stories present possibilities and selected details of participants' experiences, reflecting on them (Mears, 2009, p. 14). The approach was preferred mainly because the primary aim was in-depth description and understanding of action and events in terms of its specific context (Welman, Kruger & Mitchell, 2005). Learners were expected to give detailed narratives of their experiences due to the adoption of qualitative approach.

The approach was appropriate for this study because it allowed the researcher to collect data by interacting with participants during the study. This is confirmed by Leedy and Ormrod (2010), explaining that qualitative research enables a researcher to interact with participants in order to gain insight into the nature of a particular phenomenon. The learners narrated their stories to the researcher about their pregnancy experiences during the discovery phase, delivery phase and post-delivery phase.

The approach was appropriate because the learners were obligated to narrate their experiences in the form of a chronological account (O'Hara, Carter, Dewis, Kay& Wainwright, 2011, p. 98). They further suggest that this approach is good for an

individual, which refers to the learners who were pregnant and were currently teenage mothers, although this does not have to be the case. Clough (2002) further argues that stories can provide a means by which those truths, which cannot be otherwise told, are uncovered.

3.3 RESEARCH PARADIGM

The study is underpinned by interpretivist paradigm. Cohen, Manion and Morrison (2011) explain the interpretive paradigm as striving to understand and interpret the world in terms of its actors. They describe it as a 'double hermeneutic' where people strive to interpret and operate in an already interpreted world and researchers have their own values, views and interpretations.

The researcher used an interpretive approach in order to understand the meaning and experiences derived from narrative enquiry style because the learners had to tell of their experiences. It was an appropriate paradigm as this study aimed to look at local meanings of the social action for the actors involved in them (Borg, Gall & Gall, 2007).

The ontological assumption of this approach is a subjective reality constructed on individual interpretation. The interpretive paradigm was relevant for this study because it investigated the psychosocial experiences of teenage mothers that differ from one learner to another. Each teenage mother gives her understanding of the phenomenon. As Luttrel (2010) signifies, reality is a social, multiple reconstructions and derives from human interactions aimed at meaning making as well as comprising inter-subjective meanings.

As Burton and Bartlett (2009) concur, the interpretivist believes that there is no objective reality that exists outside of the actor's explanation and making use of an individual account. The interpretive world view was more suitable in this study because the learners could have different understandings of the phenomenon that was studied and act according to how they interpreted the event. Therefore the researcher sought to explore the meaning behind these actions. The paradigm fitted very well with this study because the participants had to express their feelings and opinions based on how they view pregnancy and how they were treated.

3.4 RESEARCH DESIGN

There are various research designs to choose from within each research method which researchers can use to collect research data. Research methods are ways that researchers use to conduct research (Cohen, Manion & Morrison, 2011), whereas the research design is also explained by Babbie and Mouton (2011), as a plan or blueprint of how a researcher intends conducting the researcher which focuses on the end-product.

Research designs are basic plans for a piece of research that include four elements, strategy, conceptual frameworks, the question of who or what will be studied and lastly procedures to be used for collecting and analysing data (Punch, 2009, p. 112). The research design which was used in this study was qualitative because the study aimed to understand the psychosocial experiences of teenage mothers in schools.

A qualitative study is explicitly explanatory because it aims to show the relationship between events and meanings as perceived by participants and increase the understanding of the phenomena (McMillan & Schumacher, 2010). The learners in this study were expected to explore and explain their experiences since this design aimed to lead to insight and comprehension rather than the collection of detailed and replicable data (Babbie & Mouton, 2011).

This study attempted to produce subjective data through involving the opinions, feelings and experiences of learners underpinned by the interpretive paradigm. The narrative was employed through interviewing to generate research data based on the ontological and epistemological understandings.

The narrative style was chosen as the best design to conduct this study. It is a discipline within qualitative approach. The participants were expected to tell stories of their experiences during pregnancy. As in the past two decades, Connelly and Clandinin (1990) suggested that those narratives enable the researcher to discover and understand the inner world of the individual. This style gives meaning to events and circumstances and personalises data, providing an understanding of how an experience is lived (Roux, 2011). The experiences were explored at three levels of experiences, namely discovery phase, delivery phase, and post-pregnancy phase. The design of this study was perfect

because it gave the participants a chance to explain and describe their experiences about pregnancy and how they understood the pregnancy at their age. The data was produced through the use of semi-structures interview. This encouraged participants to relate the experiences in their words.

3.5 STUDY AREA

This research was conducted in two selected senior secondary schools, which are located in Impendle. Impendle is a rural eco-friendly area. It is well occupied with forestry that contributes well to the reduction of global warming. It has a beautiful landscape and mountains that sustain its biodiversity. It has no industrial activities meaning that the area is pollution free. The people are free from environmental problems. The people mostly practise farming to earn a living. The area is located 80km from the centre of Pietermaritzburg.

Impendle has many challenges among them are social and economic problems. Along with poverty and the lack of facilities there is also a high rate of HIV/AIDS infections especially in the vulnerable rural women. The learners come from the historically disadvantaged community in KwaZulu-Natal province. The context in which this study took place is the disadvantaged community where most of the community members depend largely on a social grant to support their families. These schools were ideal for this study because these schools have learners that fall pregnant across the grades, which lead to negative education outcomes such as high rates of school girls dropping out of schools.

For the purpose of privacy the area under study was not mapped in this study. As it is suggested in the study by Mears (2009), the researcher must protect the rights and safeguard the well-being of the individual and groups who participated in the study in order to avoid the harm that may occur. Not mapping out the school can serve such a purpose, because a map could give some kind of clue to other people to identify the schools.

3.6 SAMPLING

Since this was a qualitative study the researcher was therefore obliged to use the applicable sample from the suitable population. Furthermore the participants were selected based on their characteristics and knowledge as they related to the research questions being investigated. Sample is defined as a smaller group selected from a larger population (Lodico, Spaulding & Voegtle, 2006). This is the most important part because it allows the researcher to work with a smaller and more manageable subgroup of the realistic population. In this case, the sample comprised of teenage mothers from these two selected schools because these were the suitable people for this study.

Population refers to the group to which the researcher would ultimately like to generate the results of the study (Lodico, Spaulding & Voegtle, 2010). In this study the population refers to the teenage mothers who were pregnant while in school and returned whether immediately or not. The two selected senior secondary schools have many learners, approximately about 1000 in all, including boys and girls.

The context in which this study took place was strictly senior secondary schools in the Impendle area. In sampling the participants of this study, the researcher however had chosen the purposive sampling method, usually used in qualitative studies. Purposive sampling is explained by Babbie (2010) as an appropriate technique to select a sample on the basis of knowledge of population, its elements and purpose of the study. It is purposive in nature because the participants were required to produce relevant information and were those who were pregnant and were currently teenage mothers.

Hence Lodico, Spaulding and Voegtle (2006) also emphasise that the researcher has to select information-rich cases for the study in-depth and identify key informants, meaning learners who have some specific knowledge about the topic being investigated. Kumar (2005) agrees that purposive sampling is ideal to provide the best information to achieve the objective of the study and describe the phenomenon. The participants in this study included six learners in different schools who were pregnant while in schools and returned to schools.

The six learners were sampled purposively in order to make the study a reality and demonstrate validity of the research. In a qualitative study, these six learners can be a large enough size to generate rich data. In other words these were the participants with rich information about the phenomenon. The researcher selected three learners in each school.

In school B the researcher had used snowball sampling, and the school principal was used to identify the learners who were teenage mothers. The school principal knew these learners. Lodico *et al.* (2010) concur that snowball sampling is crucial in the sense that certain individuals who have experiences are selected first in order to identify others in the research sample. This was ideal for this study because the researcher had little knowledge and could not identify any to participate in the study, and had to make contact with a few individuals (Kumar, 2005). It was easy in school A because as a teacher I knew the learners who have been pregnant and who continued schooling. The selection of these three learners was easily identified. In school B as a researcher I relied on the principal as the school principal knew the learners who had been pregnant and came back to school.

3.7 PROCEDURES

After the decision taken by the ethics committee from the University of KwaZulu-Natal that as male teacher the researcher could not conduct the interviews, as the study concerned such sensitive issues, a female Life Orientation teacher was recruited to conduct the interviews. This teacher had agreed to do the collecting of data. Most of the time, the researcher planned with her as his assistant in the completion of the study.

The researcher made an appointment with the school principal for school B to discuss the research planned to take place. The researcher asked or requested permission orally but with formal letter in hand to give to him. The reason for having the meeting was to discuss other ethical issues. In school B the teenage mothers were recruited by the school principal because he had better knowledge about the learners who were pregnant, to enquire if they would be willing to participate in the research study. They were given the study information sheet providing the relevant information regarding the study. The consent forms to be signed by the parents or guardians of these learners were made

available. Interviews were arranged with participating learners and they were held at the school, in a classroom convenient for both the participant and the researcher. The semi-structured interviews were used as the technique to collect data for the study. Each participant was also expected to complete the small demographic questionnaire, which contained personal details of participants. Participants were informed that their participation in the study was voluntary and that they were free to withdraw at any point in time without penalty. Permission was acquired from the participants for the use of a voice recorder, which was used to advance the accuracy of the data and of the data analysis.

3.8 DATA COLLECTION METHOD

Any study must follow a certain method or more than one method in order to generate data for the study. Those methods must be suitable enough to be used to produce sound and 'truthful' information. This study adopted two methods namely semi-structured interviews and small questionnaire schedules (McMillan & Schumacher, 2010).

The researcher used techniques that are underpinned by narrative enquiry. Leedy and Ormrod (2010) explained that qualitative research enables a researcher to interact with participants in order to gain insight into the nature of a particular phenomenon. In this case the interview was used to conduct the study. Semi-structured interviews were guided by open-ended questions that were used to probe responses from participants. Participants were to narrate their lived experience that emphasised a textual description of what happened and how the phenomenon was experienced (McMillan & Schumacher, 2010).

As McMillan and Schumacher (2010) explain, semi-structured interviews are an appropriate instrument to obtain participants' meanings and how they conceive their world and make sense of the important events in their lives. This was a more appropriate instrument for this study because this study aimed to find out how these learners who were pregnant while in school experienced the phenomenon or how they went through these experiences of being pregnant and also being teenage mothers in their academic life. Punch (2009) further emphasises that approach is ideal for this study because it allowed the researcher to hear directly about the participants' experiences, the meanings

they placed on those experiences and to ensure that their views and opinions, feelings and responses, were accurately reflected in the findings.

As opposed to a focus group discussion for this study, because it can cause secondary shame and victimisation due to the fact the study dealt with personal issues.

The interviews were planned to be conducted for approximately 60 minutes. The interviews with teenage mothers were conducted in their preferred language, in IsiZulu or English, if the interviewees were comfortable. The interviews were voice-recorded. The transcription and translation were done later. After this, the researcher used transcriptions to analyse the data. This was also an appropriate method in terms of its flexibility because it gave an opportunity to explain and expand on questions to ensure that participants understood what had been asked (O'Hara *et al.,* 2011).

A questionnaire is the best technique to obtain data because it is economical and also ensures anonymity (McMillan & Schumacher, 2010). This method of data collection makes respondents relaxed enough to complete, due to its anonymity. Hence, Borg *et al.* (2007) concur that the use of a questionnaire costs less over a wide geographic area for respondents, and time required to collect data is much less. It was appropriate for this study in the sense that it promoted privacy since this study dealt with a sensitive topic. It was administered only to six purposefully selected participants for this study.

3.9 DATA ANALYSIS

It is very important to analyse the data collected due to the fact that the study would have not achieved its significance in the research journey. It is therefore however, crucial to discuss how data is manipulated and analysed to make meaning and sense. McMillan and Schumacher (2010, p. 367) explain inductive analysis as the process through which the researcher synthesises and makes meaning from the data. It is relatively a systematic process of coding, categorising and interpreting data to provide explanation of the single phenomenon. The advantage of qualitative study is that the analysis is done during data collection.

The study employed an inductive data analysis plan which is underpinned by the qualitative study. Therefore in this study data was analysed by the researcher using

themes that emerge from data collected and again related data to the theory which was used as a framework for this study. The voice recorded data from the interviews was transcribed and analysed qualitatively producing themes and sub-themes.

Data analysis of this current study was subjected to these steps used in qualitative analysis. The researcher therefore followed steps espoused by McMillan and Schumacher (2010, p. 368) which are:

➢ Data preparation refers to organising the large amount of data so that coding is facilitated. Organising the data separates it into few workable units. In order to achieve this step, the researcher used the research question, instrument, data itself, themes and personal interest.

➢ Data transcription involves the process of taking information and converting this data into a format that will facilitate analysis. The researcher used large margins for additional comments and coding.

➢ Data coding involves label for segment by identifying small pieces of data that stand alone. In order to achieve this, these need to be taken into account to refine the data codes, these can be summarised as follows:

1. Getting the sense of the whole
2. Generation of initial codes from data
3. Comparison of codes for duplication
4. Trying out your provisional coding
5. Continuation of coding system

➢ Forming categories referring to major ideas that are used to describe the meaning of similarly coded data

➢ Developing patterns involves the relationship among categories

Lodico, Spaulding and Voegtle (2010) also suggest that the qualitative study is unlike quantitative research in which data analysis comes after the completion of the study and they also concur with McMillan and Schumacher (2010) about the methods of analysing data using the similar steps. This method of data analysis was ideal in this study because it helped the researcher to organise and describe data in rich detail. The experiences were categorised into discovery stage, delivery stage and post-delivery phase. The

questionnaire schedule was analysed quantitatively based on the collected data from only six purposively sampled learners.

3.10 VALIDITY AND TRUSTWORTHNESS OF THE STUDY

The issue of reliability in qualitative research is not easy to determine since qualitative research aims to generate an understanding of phenomena. Leedy and Ormrod (2010, p.29) claimed that instruments designed to measure psychological characteristics tend to be less reliable than those designed to measure physical phenomena. Therefore this study simply considered the examination of trustworthiness in evaluating the research quality. The interviews were conducted in the first language of teenage mothers to increase the quality of the responses. The researcher took the findings to the participants for confirmation and validation and approval to ensure credibility. Shenton (2004) stated that the reliability in a qualitative study is ensured by credibility, transferability, dependability and confirmation.

During the research process, the researcher collected contact details of those participants or participants' parents/ guardians who expressed an interest in the findings. Findings that were accessible to participants were not just an executive summary but were tailored for participants. Findings that were of great importance to participants were highlighted. Also, data from the study was made available to participants to verify the data produced. Information on recommendations was included in their feedback.

3.11 ETHICAL ISSUES

Ethics is the branch of philosophy that is concerned with questions of how people ought to act towards each other which pronounces judgements of value about actions and develops rules to guide ethical choices (Borg, Gall & Gall, 2007).

It was therefore important for this study to consider the following elements before conducting the research: permission, informed consent, confidentiality and anonymity. This study followed these ethical channels in order to protect and guarantee the privacy of learners and their rights. As Kumar (2005) argues, it is considered unethical to collect information without the knowledge of participants, and expressed willingness and informed consent.

3.11.1 PERMISSION

In order to maintain the ethics for the study, the researcher consulted the study supervisor to get approval for interviewing techniques, strategies and aims. The protocol was observed accordingly during the approval process. After the approval the researcher requested in writing the approval of interviewing procedures, techniques and strategies from the Ethics Committee of the University of KwaZulu-Natal. Afterwards, the researcher requested necessary permission in writing, from the KwaZulu-Natal Department of Education to conduct research with teenage mothers from two secondary schools in Impendle. The permission was then granted being subjected to a number of conditions all of which the researcher had to comply with. Finally, the researcher consulted the school principal to allow him to use the life orientation teacher in school A to assist him to conduct this research since this study dealt with a sensitive topic. The principal as a head was expected to inform all stakeholders that were involved in making decisions at the school.

3.11.2 INFORMED CONSENT

Luttrell (2012) emphasises the idea based on Nuremberg Code (1994) from international expression of principles that set out to protect the rights of people from research abuse. It was of paramount importance in this study to consider the rights of participants during the research process. It was made known to learners that any information given by them would not be used against them, and the collected data was to be used for purposes of this research only.

Data are stored in secure storage and destroyed after five years. The learner was informed that they had a choice to participate, not participate or stop participating in the research. They were advised that they would not be penalized for taking such an action and that their involvement was purely for academic purposes only, and there were no financial benefits involved. This however, eliminated the unequal relationship between the teacher and the learners. Hence McMillan and Schumacher (2010) concur that this is achieved by providing subjects with an explanation of the research, an opportunity to terminate their participation at any time with no penalty, and full disclosure of any risks associated with the study.

3.11.3 CONFIDENTIALITY AND ANONYMITY

Permission was obtained from schools where the study was conducted. Roux (2011) points out that the research is done in an honest and ethical manner by following guiding principles that should be in place namely: a letter of consent signed to take part in research, anonymity and confidentiality, voluntary involvement, avoidance of psychological distress. The identity of the participants remained anonymous and confidential and this was maintained at all times.

The confidentiality was guaranteed as their input was not attributed to them in person, but reported only as a population member opinion. The support and referrals were provided because the interview could have triggered personal and emotional issues. The participants were assured that the data would only be used for data collection purpose of the research and that no other person will have access to interview data. To assure this statement the voice-recordings were erased after the completion of the research project according to the supervisor's instructions and discretion. As McMillan and Schumacher (2010) argue, the setting and participants should not be identifiable in print. This makes sure that the learners' rights are protected and avoids any harm that may be inflicted.

3.12 RAPPORT BUILDING

This is a very important aspect to be established during an interview session in order to enable participants to give information that is relevant to the study. As Welman, Kruger, and Mitchell (2005) signify, a good rapport with respondents opens many doors for the researcher and will lead to the collection of valuable information, and also emphasise that the researcher must therefore take care to remain objective as well as making sure that this is done carefully as it is there to facilitate the revelation of information not to provide therapy.

In this study the rapport building was more applicable because the researcher had asked a Life Orientation teacher to conduct the interviews with learners. This teacher was ideal because she was a very young female who was always with them in class discussing these social issues. This assisted in getting the learners to share information freely as learners did would be fearful to reveal their experiences if they had to speak with the

researcher, a male and older teacher, who may have appeared as a father figure to the participants. As Dickson-Swift, James and Kippen (2007) emphasise, if research participants feel that they are in a safe place, they may feel inclined to share some aspects of their lives that they may not have shared previously. This happens when the interviewer has put more effort to build trust between teacher and learners.

The learners did not have a problem with speaking to the Life Orientation teacher as she did physical education with them which could make the situation more relaxed between teacher and learners. This works as an additional advantage. Knoel (2012) reveals that students also value when their teachers make learning fun and quantifies that the learners' trust is achieved when the teacher is consistent with high expectations and a sense of belonging is felt by learners. This can assist to let participants speak freely during interviews.

Therefore the rapport building was imperative to be carefully applied in this study since the study was about a sensitive topic that might have brought back memories of victimisation and shame. This could have led to a situation where learners might not have given enough information. King and Horrock (2010), in Meda (2013), state that rapport is essentially about trust - enabling the participants to feel comfortable in opening up to the researcher. Rapport makes participants feel relaxed and free to discuss very sensitive issues in their lives.

3.13 CONCLUSION

This chapter has presented the research design and methodology that were used in the study. The detailed explanation for using a qualitative research design, paradigm and approach that underpinned this qualitative study was provided. The research setting, data collection procedures and data analysis are thoroughly discussed. Finally, rapport building, validity and trustworthiness, ethical issues including permission, informed consent, confidentiality, and anonymity were discussed. The next chapter discusses results and findings of the study.

CHAPTER FOUR

PRESENTATION AND ANALYSIS

4.1 INTRODUCTION

Chapter three discussed the research design and methodology that were used to complete the study and provided the explanation for the use of a particular method, approach, paradigms, and instruments for data collection. The data analysis styles, ethical considerations, validity and trustworthiness and rapport building were provided. This chapter presents data collected for the phenomenon under study and also analysis of the data for the purpose of generating a pool of information for this study.

The analysis and presentation of the data are facilitated by two methods used to collect data namely a small questionnaire and semi-structured interview schedule. The process of data analysis will be done thematically. In order to maintain validity and trustworthiness, since this study is qualitative, the learners were interviewed using IsiZulu as their first language to improve the quality of the study. The researcher then translated the participants' responses as stipulated in the methodology chapter.

This section firstly discusses the findings generated from the small questionnaire that aimed to collect data specifically for demographic purpose. After this discussion the chapter will present the results from the semi-structured interview that will be summarised under different themes that come from data collected from participants. The participants are labelled using letters A, B, C etc. The results that are summarised come from the participants that are recruited from these two selected secondary schools in the Ubumbano circuit in UMgungundlovu district, in the Impendle area.

4.2 PRESENTATION AND ANALYSIS

4.2.1 AGE INTERVAL WHEN PARTICIPANTS FELL PREGNANT

Age interval	Number of participants	Percentage
12 - 15 years	1	17%
15 - 17 years	3	50%

| 17 - 20 years | 2 | 33% |

The table depicts that seventeen percent (17%) of the teenage mothers got pregnant between 12 and15 years, fifty percent (50%) ranged from 15 to 17 years and thirty three percent (33%) of learners fell pregnant between 17 and 20 years.

These findings are aligned with the findings of national and international study confirming that data collected shows that the fertility rate increases with age by the Basic Education report (2009) and a study conducted in Africa also agrees to this relationship, for example teenage pregnancy in Kenya doubled from 17% at ages 15 - 18 to 34% at ages 17 -18 years.

In South Africa the prevalence of pregnancy increases with age. This means that the survey conducted indicates that 10, 2 % of 19-year-old girls were pregnant compared to 0.3% of 13-year-old girls (Statistical release, 2012, p. 18).

4.2.2 GRADE LEVEL

Grade level	Number of participants	Percentage
Grade 9	2	33%
Grade 10	3	50%
Grade 11	1	17%

Most of the participants, fifty percent (50%), were enrolled in Grade 10, thirty three percent (33%) enrolled in Grade 9 and lastly seventeen percent (17%) enrolled in Grade 11. This study contradicts the study conducted by Grant and Hallman (2006) where they claim that the relative risk of becoming pregnant is greatest in Grade 12. This study indicates that the high rate of teenage pregnancy is found in Grade 10. Furthermore this study does not support the findings by Batch (2013) in his study, that the highest incidence of teenage pregnancy is in Grade 12 with 52.6%, which opposes the current study because it shows the greatest incidence is in Grade 10.

4.2.3 PARENTS DISCUSSING PREGNANCY MATTERS

Talk with parents	Number of participants	Percentage
Talking	3	50%
Not talking	3	50%

Fifth percent (50%) of the participants in this sample stated that their parents discussed matters about pregnancy with them. This notion is supported by Chigona and Chetty (2008) who indicated that there is a need for parents and teachers to equip teenagers with life skills which would enable them to handle their problems and challenges. There is therefore strong evidence that suggests that parents and teachers have an important role to play and need to engage in open discussions about the problems teens face, including teenage motherhood.

As young people move out of their parents' home direct parental control ceases and identification with the peer group increases, therefore sexual intercourse is practised with resultant pregnancy (Makhaza & Ige, 2014). That is why these participants end up being pregnant even though their parents gave them advice about pregnancy issues. It is then an influence of social interaction with peers to discover their identity in cases where parents have done their work around pregnancy issues. This concurs with the finding of this study where some learners ignore their parents' advice.

Another fifty percent (50%) of the participants indicated that their parents did not discuss the matters and pregnancy issues. Nkani (2011) signifies that parents thus lose valuable opportunities to engage with their daughters in a way that may protect and equip them with life skills, such as how to negotiate consensual and safe sex, and further insisted that parents preferred the cultural practice that is known as virginity testing as they still don't feel comfortable talking to their daughters about sexuality. This is true in the sense that the parents are scared of discussing love and sexuality matters. This is supported by the findings of this study that indicates 50% of teenage girls do not discuss love matters and consequences thereof.

4.2.4 DISCOVERING STAGE MOMENT

Delivering stage feelings	Number of participants	Percentage
Happiness	2	33%
Unhappiness	4	66%

The table above indicates that sixty six percent (66%) of the participants were unhappy when they discovered that they were pregnant and thirty three percent (33%) of the participants were happy that they were pregnant. The findings do not concur with the study by Spear (2001), that the participants perceive pregnancy as a benefit, not a liability, problematic and a personal crisis, and further emphasise that their life situations were more than manageable and that their plans for the future were not impacted in a negative way by pregnancy and (or) the prospect of single parenthood. This is indicated by the high number of participants that demonstrated that they were not happy. This discussion is supported by the following quotations:

PARTICIPANT A: Ngaphatheka kabi kakhulu uma ngithola ukuthi ngikhulelwe ngoba ngangazi ukuthi angisebenzi ngeke ngokwazi ukukhulisa ingane okunye abantu babekhuluma ngami bakuveza ukuthi angilaleli futhi angizange ngiziphathe kahle.

*(*I felt very bad when I found out that I was pregnant because I knew that I was not working and I wouldn't be able to take care of the child. I also heard that people were gossiping about me that I did not listen and could not take care of myself).

PARTICIPANT B: Ngaphatheka kabuhlungu kakhulu ngoba umzimba wami wawusuzoshintsha kanye nempilo isizoshintsha isikhathi engivuka ngazo ukuze ngilungiselele ingane.

(I really felt bad because my body was going to change and also my life was going to change. Now my waking up time is early so that I can start by organising things for the baby).

PARTICIPANT D: Ngaphatheka kabi ngoba anginabo abazali nomfana owangikhululeliswa wayesafunda. Nami ngabuye ngaqhubeka nesikole

(I felt very bad because I knew that I don't have parents even the boy that impregnated me, he was still schooling. However, then I also continued with schooling).

PARTICIPANT E: Ngaphatheka kabi ngoba impilo yami yabe isishintshile futhi nomzimba wami washintsha nokuvakasha angisakwenzi ngenxa yengane.

(I felt sad because my life and my body would change, and I could not even go with my friends and visit somewhere due to the reason that I was having a baby).

PARTICIPANT F: Ngaphatheka kabi ngoba ngangingakulindele ukuthi ngibe nengane ngisesikole. Ngabuye ngaphatheka, kahle ukuze ngazi ukuhlukanisa okuhle nokubi.ngakhulelw ngo-one day.

(I was so sad because I was not prepared and ready to be a mother while I was still at school. But when time went on I felt so happy that I now could make a difference between what is wrong and right. I got pregnant one day).

4.2.5 LIFESTYLE CHANGE

Changing lifestyle	Number of participants	Percentage
Not changed	2	33%
Changing	4	66%

The table shows that sixty six percent (66%) of the participants experienced life change in different forms and thirty three percent (33%) did not change. Nothing happened that affected them directly. Pregnancy affects individuals socially and personally.

The participants also indicated that as teenage mothers, they need money to fulfil their own needs and their babies' material needs such as clothes. They also stated that since they are dependent on their parents, they can no longer get what they used to get from their parents because the same amount now needed to cover the needs of two individuals (Matshotyana, 2010). The current study concurs with this idea by the following quote:

PARTICIPANT B: Kwayishintsha angisayitholi into engiyidingayo ngoba sekufanele bangisize   kumntwana

*(It changed my life completely, since I don't get what I need because they have to help me and the baby.

4.2.6 IMPACT ON SELF-ESTEEM

Self-esteem impact	Number of participants	Percentage
Yes	5	87%
No	1	17%

Most of the participants, eighty seven percent (87%), in this sample felt that their self-esteem had been affected by the pregnancy and seventeen percent (17%) of the participants felt that the pregnancy did not affect their self-esteem.

Teenage pregnancy disturbs almost everyone in the society in one way or another as it affects the person herself. Knews (2011) published in his paper that this low self-esteem is viewed as a risky factor for teens to become involved in risky sexual behaviour and early pregnancy. Furthermore, as stated in Internal Council for Self-esteem, there is a close relationship between pregnancy and self-esteem since girls getting pregnant in the teen years are likely to suffer from physical and psychological problem (Knews, 2011). The study by Malahlela (2013) found that pregnant learners are generally aggressive and suffer inferiority complex or low self-esteem as well as experiencing withdrawal symptoms. It is an undeniable fact that the social interaction provides challenges that influence teenagers' self-esteem as explained by Erickson's theory. As a result the teenage mothers' psychosocial development is affected.

4.2.7 FEELINGS OF BEING PREGNANT

Pregnancy feelings	Number of participants	Percentage
Happiness	2	33%
Unhappiness	4	66%

The table indicates that sixty six percent (66%) of the participants felt that they were not really happy about being pregnant and thirty three percent (33%) of the participants were

happy about the pregnancy. It is true that teenage pregnancy is associated with negative outcomes. This data is confirmed by Adam's study (2011) where learners indicated that they were not very happy about their pregnancy due to the fact that the baby would have changed their life. For example the teenage mothers may repeat a grade and if she does not have someone to babysit she can be compelled to leave the school as well as failing to support the baby with material things.

4.2.8 ADAPTATION TO THE NEW SITUATION

Adaptations	Number of participants	Percentage
Adapting	5	87%
Not adapting	1	17%

Most of the participants, eighty seven percent (87%), in this sample stated they have simply adapted to the new situation because they believe they cannot change it, and seventeen percent (17%) of the participants felt that they had not adapted accordingly. This experience of becoming a mother is indeed a daunting challenge but teenagers have adapted, although there are complications. The teenage mothers experience a positive transition into adulthood, but also as physiologic and psychological hardship (Wahn, 2009).

Since pregnancy and childrearing are problems in a teen's life, they therefore need support. This is supported by Hugh and Cragg (1999) who revealed that teenage mothers particularly need advice; help with babysitting and general emotional support, because those without such support had more difficulty in adapting to a parenting role.

4.2.9 SUPPORT FROM FAMILY MEMBERS

Family members support	Number of participants	Percentage
Supported	3	50%
Not supported	3	50%

Fifty percent (50%) of the participants in this sample stated that the parents discussed matters about pregnancy with them. Another fifty percent (50%) of the participants indicated that their parents did not discuss the matters and pregnancy issues. These findings concur with the study by Nkani (2011) who signifies that parents thus lose valuable opportunities to engage with their daughters in a way that may protect and equip them with life skills, such as how to negotiate consensual and safe sex and further insisted that parents preferred the cultural practice that is known as virginity testing as they still did not feel comfortable talking to their daughters about sexuality. This means that the parents avoid the situation where they can talk and advise their daughters. On the other hand, the lack of support is confirmed by Chigona and Chetty (2008) in their study that teenage mothers come from financially challenged families and the parents cannot afford babysitting for the grandchildren. The lack of support from the father multiplies the challenges experienced by teenage mothers.

4.2.10 PEER/ EDUCATOR SUPPORT

Peer/Educator support	Number of participants	Percentage
Supported	2	33%
Not supported	4	66%

The table indicates that sixty six percent (66%) of the participants felt that they were not really supported by peers and teachers to attain educational goals and thirty three percent (33%) of the participants were supported by their friends and educators. Peer support assists usefully in the lives of teenage mothers when still schooling. Lynch (2008), in Van Den Berg and Mamhute (2013), indicates clearly in a study that students who get support from their peers find it easy to combine study with mothering. When the learners are not supported this leads to a sense of isolation and feeling of being alone.

These findings agree with the study by Mamhute (2011) that the teenage mothers have been assisted by their classmates with notes and group discussion to catch up. Adolescent mothers simply make meanings out of their predicament by adopting personal resolutions to go on with their lives. Furthermore tailored care and youth-friendly service are

required to help these females to navigate through safely (Melvin, Ayotunde & Mustapha, 2009).

The current study agrees that some learners are not supported by teachers and peers; with the study by Chicago (2008), the teachers on the other hand are also putting pressure on them by judging them and making the atmosphere in the school unbearable for these learners to finish their studies. As the study by Molapo (2011) confirms, learners are afraid to face and meet the teacher because of their big pregnant stomachs and some educators articulate clearly that these young mothers increase the rate of failures. The peers also make the situation worse in the interaction with teenage mothers. This contradicts with others peers who bring support during the times of hardship.

4.2.11 DELIVERY STAGE MOMENT

Delivery stage	Number of participants	Percentage
Worried	5	87%
Not worried	1	17%

Most of the participants, eighty seven percent (87%), have indicated they were worried during delivery although seventeen percent (17%) of them indicated that they were not worried. This narrative is supported by the work of Gyesaw and Ankomah (2013) who stated clearly that the teenage mothers testified to the pain that came with labour by saying labour is difficult and painful.

4.2.12 DELIVERY PAINS

Pains	Number of participants	Percentage
Felt	5	100%
Not felt	0	0%

All the participants, one hundred percent (100%), indicated that they had all experienced pains during the birthing period. This is supported by Westnedge (2013) agreeing clearly that some mums-to-be will feel pains and some find it easier to bear; the first stage of

labour tends to start gradually and build up. Furthermore when teenagers are asked to recall their experiences during labour they narrated clearly that they all testified to the pain that came with labour by saying labour is difficult and painful (Gyesaw & Ankomah, 2013).

4.2.13 PARENT EXISTENCE

Parents existence	Number of participants	Percentage
Both	1	17%
Single mother	1	17%
Single father	2	33%
Neither of them	2	33%

Some of the participants, thirty three percent (33%), indicated that they have single fathers, thirty three percent (33%) indicated that neither of them were alive, seventeen percent (17%) indicated that they had single mothers and seventeen percent (17%) indicated that both parents were still alive.

This is a very important aspect in the life of the teenage girl in one way or another. Nkani (2011) signifies that parents thus lose a valuable opportunity to engage with their daughters in a way that may protect and equip them with life skills, such as how to negotiate consensual and safe sex. The data indicates that most of the participants have one baby which agrees with the study conducted by Greer and Levin-Epstein (1998) who found that teen mothers who lived with parents have a lower likelihood of second teen births.

4.2.14 NUMBER OF BABIES

Number of babies	Number of participants	Percentage
One	5	87%
Two	1	17%

Most of the participants, eighty seven (87%), indicated that they all have one child and seventeen percent (17%) according to the data collected have two babies. The study conducted by Van Wyk (2007) confirms this finding that parenting learners who had only one child were found to be more likely to finish high school than those who had more than one child. Even this study indicates the fact that these learners return to schools to continue with their education.

4.2.15 PRE-USAGE OF CONTRACEPTION

Pre-usage of contraception	Number of participants	Percentage
Using before	5	87%
Not using before	1	17%

Most of the participants, eighty seven percent (87%), have used contraceptives before pregnancy, although seventeen percent (17%) of them indicated that they had not used contraceptives before. Makhaza and Ige (2014) also add that some students use contraception, others are falling to use contraceptives properly or not using contraception at all. However, teenage pregnancy figures remain high; this could suggest the inconsistent use of contraceptive measures. This data indicates that the young women have used protective measures.

4.2.16 TAKING BIRTH CONTROL

Birth control measures	Number of participants	Percentage
Taking	5	87%
Not taking	1	17%

Most of the participants, eighty seven percent (87%), were currently using contraceptives and seventeen percent (17%) of them indicated that they were currently not using contraceptives.

It is a norm that the girls take measures after pregnancy due to the fact that the sample used demonstrate a high number using the measures at a later stage. This discussion is supported by Botha (2010) that young women lack knowledge on family planning apart from the male condom and low use of family planning method among 39% of the adolescents.

4.2.17 MOMENT OF HAVING A BABY

A baby moment	Number of participants	Percentage
Happiness	4	67%
Unhappiness	2	33%

Although thirty three percent (33%) of the participants indicated that they were not happy, most of them indicated that they enjoyed the moment of having a baby. The current study is supported by the study conducted by Spear (2001) that the participants perceive pregnancy as a benefit, not a liability, problematic and personal crisis, and further emphasise that their life situations were more than manageable and that their plans for the future were not impacted on in a negative way by pregnancy and (or) the prospect of single parenthood. This current study concurs with the study by Gyesaw and Ankomah (2013) who found that most of the participants had no regrets about carrying the pregnancy to term and narrated that the pain and suffering vanished. This means that the pregnant women experienced hardship for a period of nine months and not thereafter.

This means that the learners sometimes felt happy to have babies as teenagers. This discussion is supported by the following quote:

PARTICIPANT C: Excited ukuthi sengizoba more experienced and ngizoba responsible to raise someone. Ngangingendaba kuphela ngamukela.

(I was really excited that I was about to have a bigger experience than others and be a responsible woman to raise someone. I didn't care I simply accepted the situation*).*

4.2.18 KNOWLEDGE OF CONTRACEPTION MEASURES

Knowledge of contraceptive	Number of participants	Percentage
Knowing	5	87%
Not knowing	1	17%

Most of the participants, eighty seven (87%), indicated that they knew and were aware about the contraceptive measures that are provided by the health department. Although there are available pregnancy measures, seventeen percent (17%) of the participants did not know about family planning programmes that are available. The study conducted by Sodi (2009, p. 5) confirms that the rate of teenage pregnancy remains high, despite high levels of knowledge about modern methods of contraception. The other researchers such as Mothiba and Maputle (2012) indicated that the availability is limited to the reach of the adolescents, while others such as Chigona and Chetty (2008) suggest that the stigma is attached to them when they try to access the contraceptive measures. This means that the young women fail to assist themselves in preventing pregnancy due to stigmatisation.

This is supported by the high incidence of teenage pregnancy in schools especially in secondary schools. Marshall (2005) also adds that the concept of identity indicates a sense of being at one with oneself as an individual grows in social roles and communities. It is important to sort out and integrate roles such as friend, older sibling and parent. This is indicated by the finding of this current study where seventeen percent of participants could not access the available programmes to prevent pregnancy. Furthermore the study by Adams (2010) found that contraceptive measures are available, but teenagers do not have sufficient knowledge about how to use them and rely on the information from their peers instead.

4.2.19 DIFFERENT TYPES OF CONTRACEPTIVE MEASURES

Knowledge of contraceptive	Number of participants	Percentage
Knowing	5	87%

| Not knowing | 1 | 17% |

Most of the participants, eighty seven (87%), indicated that they knew and were aware about the contraceptive measures that are provided by the health department. Although there are available pregnancy measures, seventeen percent (17%) of the participants did not know about family planning programmes that are available. The rate of teenage pregnancy still remains high internationally and in African countries without a solution which makes a great difference despite the fact that there are contraceptive measures that are in place (Panday, Makiwane, Ranchod & Letsoala, 2009; Sodi, 2009).

4.2.20 LIFE ORIENTATION AS A SUBJECT IN THE SCHOOL CURRICULUM

Life Orientation	Number of participants	Percentage
Discussing	2	33%
Not discussing	4	66%

The table shows that sixty six percent (66%) of the participants were not discussing issues about pregnancy. This means that the subject as such fails to address the issue of pregnancy in the lives of teenagers and in life skills it is not well addressed. This concurs with the findings of this current study when looking at the number of participants. The importance of life orientation is less considered. As the findings indicated, even though life orientation is a subject in the school, its significance is being disregarded by learners and this could be because this course does not provide information that relates to pregnant learners' needs (Matshotyana, 2010). However, Jali (2005), quoted in Matshotyana (2010), argues that teachers should be in the best position to provide sex education to adolescents, since they spend most of the time with them. Another study argued that some students had an experience of sex education but important issues were not covered, including contraception, STIs and early pregnancy (Howlett & Hyde, 2004).

Only thirty three percent (33%) of the participants were well informed. This means that this 33% did not take this into account and it is through their ignorance that they fell pregnant. Many teenage mothers exhibit certain psychological problems. It is quite likely

that pregnancy and teenage mothers lead to identity diffusion and unnecessarily delay the attainment of identity achievement which leads to role confusion (Erickson, 1968).

4.3 CONCLUSION

This section has dealt with the demographic characteristics of participants which reveal that the participants are dynamic in a sense that they are different individuals in terms of their personal characteristics. Most of the participants seem to take things for granted even though they have knowledge and understanding. Furthermore, the participants indicated that they were not using contraception before the pregnancy; however, they currently used contraception after pregnancy. This highlights the elements of ignorance and the lack of information about contraceptives.

4.4 DISCUSSION OF FINDINGS

The results are summarised under different themes that have emerged from the data. Key themes relate to the following phases:

4.4.1 DISCOVERY PHASE: The themes that were formulated under this stage were:

4.4.1.1 The learners' feelings of being pregnant

4.4.1.2 Relationship with teachers and peers

4.4.1.3 Lifestyle change and values

4.4.1.4 Support during pregnancy

4.4.2 DELIVERY PHASE: The following theme emerged to address this phase:

4.4.2.1 Experiences during delivery

4.4.3 POST-PREGNANCY PHASE: The themes that were formulated under this phase were:

4.4.3.1 Changing habits and social network

4.4.3.2 Emotional support in place

4.4.3.3 Motherhood need for support at teenage level

4.4.3.4 Coping mechanisms

The above themes emerged to address these phase. The participants illustrated different experiences psychosocially. All themes are discussed here

4.4.1 THEME ONE: DISCOVERY PHASE

4.4.1.1 SAD AND UNCOMFORTABLE FEELINGS

It was evident that when they discovered that they were pregnant, teenage mothers experienced a variety of emotions. The participants indicated that they were not happy because they were confused about the situation that they were in.

Spear and Lock (2003) found that teenage mothers experience stressful events and express the feeling of negative perception of their bodies.

The participants expressed different emotions and feelings with regard to their pregnancy. The following quotations support this notion:

PARTICIPANT A: Ngaphatheka kabi kakhulu uma ngithola ukuthi ngikhulelwe ngoba ngangazi ukuthi angisebenzi ngeke ngokwazi ukukhulisa ingane okunye abantu babekhuluma ngami bakuveza ukuthi angilaleli futhi angizange ngiziphathe kahle.

(I felt very bad when I found out that I was pregnant because I knew that I was not working and I wouldn't be able to take care of the child. I also heard that people were gossiping about me that I didn't listen and couldn't take care of myself).

PARTICIPANT B: Ngaphatheka kabuhlungu kakhulu ngoba umzimba wami wawusuzoshintsha kanye nempilo isizoshintsha isikhathi engivuka ngazo ukuze ngilungiselele ingane.

(I really felt bad because my body was going to change and also my life was going to change. Now my waking up time was early so that I could start by organising things for the baby).

PARTICIPANT D: Ngaphatheka kabi ngoba anginabo abazali nomfana owangikhululeliswa wayesafunda. Nami ngabuye ngaqhubeka nesikole.

(I felt very bad because I knew that I didn't have parents, even the boy that impregnated me, he was still schooling. However, then I also continued with schooling).

PARTICIPANT E: Ngaphatheka kabi ngoba impilo yami yabe isishintshile futhi nomzimba wami washintsha nokuvakasha angisakwenzi ngenxa yengane.

(I felt sad because my life and my body would have to change and I could not even go with my friends and visit somewhere due to the reason that I was having a baby).

PARTICIPANT F: Ngaphatheka kabi ngoba ngangingakulindele ukuthi ngibe nengane ngisesikole. Ngabuye ngaphatheka, kahle ukuze ngazi ukuhlukanisa okuhle nokubi.ngakhulelw ngo-one day.

(I was so sad because I was not prepared and ready to be a mother while I was still at school. But when time went on I felt so happy that I would now make a difference between what wrong and right. I got pregnant one day).

To add to this most of the participants clearly indicated that the pregnancy was a human crisis and social issue that affects individuals psychologically and socially. As the psychosocial development theory of this study stated clearly that many teenage mothers exhibit certain psychological problems it is quite likely that pregnancy and teenage mothers lead to identity diffusion and unnecessarily delay the attainment of identity achievement, which leads to role confusion (Erickson, 1968). This reflects the experiences that the teenage mothers face when they become pregnant which concurs with the finding of this current study where learners are confused about the situation that they are in.

4.4.1.2 RELATIONSHIP WITH TEACHERS AND PEERS

The participants experienced different reactions from the school. Some participants indicated that they felt deserted by their school mates and because of their fear to be among them. The learners also expressed that they were ashamed of their condition. This

finding supports the idea of the theory that is used as a lens to this study, that the learners suffer the feeling of isolation.

The following excerpts concur with this discussion:

PARTICIPANT A: Kontanga: Yebo kwabushintsha ubudlelwano bangicwasa bakuveza ukuthi singabaholela ekubeni nengane nabo.

(Peers: Yes it changed our relationship and they revealed to me that I could influence them to become pregnant).

Kothisha: bathetha ngenxa yokuthi izinga lokukhulelwa laliphezulu babebona ukuthi kuzoba sengathi abasifundisi indlela yokuziphatha okunye awufocus emsebenzini wesikole.

(Educators: they scold and complain due to the reason that the pregnancy rate was very high in school. They suggested they failed to give us adequate knowledge about pregnancy and the learners do not focus on the school work).

PARTICIPANT C: Ontanga: asisasitholi isikhathi sokuba ndawonye.

*(*Friends: We do not have time to spend together as girls).

The participants indicated the relationship is affected in one way or another. Marshall (2005) also adds that the concept of identity indicates a sense of being at one with oneself as an individual grows in social roles and communities. It is important to sort out and integrate roles such as friend, older sibling and parent. In this case the learners' friendships are purely disrupted.

4.4.1.3 CHANGING OF LIFESTYLE AND VALUES

Child-rearing is a completely life changing event and it impacts negatively and positively on others in life. This period in life changes teenage mothers' freedom of social movement and they start to experience social exclusion. The theory articulates clearly that the individual who decides against raising the child can lead to a dead-end which involves developmental crises. This means that teenage mothers have to adapt to their own developmental changes, they must now also learn to cope with the new tasks related

to parenting and the needs of their babies at the same time as their schooling (Erickson, 1968), which teenage mothers find challenging. Van Wyk (2007) agreed that the young teenage mothers are in most cases responsible for supporting and raising their children on their own. Raising a child at such a tender age places a heavy burden on the parenting learners. Having a child forced them to mature quicker and it was difficult for them. Restrictions on personal freedom, missing opportunities for fun and good times with their peers, and the responsibility for the infant, were some of the costs that came with having a baby during adolescence.

Matshotyana (2010) also concurs that the teenage mothers were scared or ashamed of themselves because they were very young. They stopped going to church because they were such a disgrace and their friends all ran away from them (teenage mothers). They thought that their friends' parents told them that they shouldn't mix with them because they were a bad example. Even if they were walking in the street people would look at them and talk, and some wouldn't even talk, they would make some funny faces and clap. It indicates the difficult experiences. These discussions are supported by the following interviewee quotations:

PARTICIPANT B: Ngaphatheka kabuhlungu kakhulu ngoba umzimba wami wawusuzoshintsha kanye nempilo isizoshintsha isikhathi engivuka ngazo ukuze ngilungiselele ingane.

(I really felt bad because my body was going to change and also my life was going to change now. My waking up time was early so that I could start by organising things for the baby).

PARTICIPANT A: Kontanga: Yebo kwabushintsha ubudlelwano bangicwasa bakuveza ukuthi singabaholela ekubeni nengane nabo.

(Peers: Yes it changed our relationship and they revealed to me that I could influence them to become pregnant.

PARTICIPANT C: Asisasitholi isikhathi sokuba ndawonye nabangani.

(We do not have time to be together as friends).

PARTICIPANT D: Ngingakabi naye umntwana ngangikayazi impilo manje ngiyayazi impilo ngenxa yokuthi senginomntwana

(Before I got pregnant, I did not understand and know life really, but now I know it).

Participant B concurs with Matshotyana (2010) that the parenting mothers indicated that they need enough time to focus on their studies. They also indicated that they also need enough time to take care of their babies. The demands of a new baby and of school work impact on the time available for social engagement and other activities.

Another theme that arises from the data is that the learners consider pregnancy as a demanding experience. The following quote supports this idea:

PARTICIPANT C: Kuyachallenge but ukuba umama ukwenza ube disciplined and matured

(It is a bit challenging but being a mother makes a person more disciplined and more mature).

Atkin (2012) found that becoming a mother was a catalyst for change and a motivator to provide for the children.

4.4.1.4 SUPPORT DURING PREGNANCY

Although the teachers are not fully trained to deal with pregnancy the findings show that they were more concerned about the safety of these students. They also played a parental role in supporting these learners in different situations. The following excerpts support these statements:

PARTICIPANT C: Othisha bangisiza ngokunginika ipermission slip yokuphuma esikoleni.

(Teachers helped me by giving me a permission slip to leave the school premises).

This means the teachers do care for teenage mothers because they know they have to access medical care for the child and herself if a need rises.

PARTICIPANT B: Uclass teacher wayengisiza ngokungikhumbuza ngokuya eklinikhi (My class teacher helped to remind me to go to the clinic).

This generates the idea that the educators have empathy for their learners who are in a difficult situation. Erickson's theory of psychosocial development (1968) emphasises how relationships influence one's search for his or her identity and also highlights that teachers occupy a potentially important position in the lives of young people and influence the environment in which relationships between students are established. Educators who are well equipped with skills to deal with psychological development problems must always assist in the lives of young people to assist them to overcome any difficulties in life.

4.4.2 THEME TWO: DELIVERY PHASE

4.4.2.1 EXPERIENCES DURING DELIVERY

This aspect is covered in the small questionnaire, and since it was too private and personal the researcher decided to obtain information on this in the questionnaire. Data was taken from there to verify the quality of this theme. The fact is that the learners experienced hardship during labour and this also means that complications are experienced during delivery. This discussion is supported by these following quotes:

All the participants, one hundred percent (100%), indicated that they had all experienced pains during the birthing period. This is supported by Westnedge (2013) who clearly agrees that some moms-to-be will feel pains and some find it easier to bear; the first stage of labour tends to start gradually and build up. Furthermore when teenagers were asked to recall their experiences during labour, they narrated clearly and all testified to the pain that came with labour by saying labour was difficult and painful (Gyesaw & Ankomah, 2013). It is evident that the teenage mothers faced difficult times during their pregnancy. This is supported by the data from the questionnaire that indicates that most of participants, eighty seven percent (87%), indicated they were worried during delivery, although seventeen percent (17%) of them indicated that they were not worried.

4.4.3 THEME THREE: POST-PREGNANCY PHASE

4.4.3.1 CHANGING HABITS AND SOCIAL NETWORK

The young women had to change and were compelled to change their habits since they discovered that they were pregnant and also after delivery. They then happened to experience changed behaviour and habits to do the variety of tasks in their daily life. This discussion is confirmed by these different quotations from different participants:

PARTICIPANT E: Yebo ukugqoka kwashintsha kwakufanele ngihlale ekhaya. Uma ngibuya esikoleni kufanela nginakekele ingane nokunye okumane kuvele esikhaleni.

(The things I used to wear changed and I had to stay at home. When I get back from school I have to take care of the baby and some other things that happen suddenly as a need for the baby).

PARTICIPANT F: Yebo kwayishintsha ngoba ngeke ngisahamba nabangani bami siye evillange.

(Yes it changed my life because I now no longer go with my friend to the village).

Kothisha: ngashintsha ngoba ngangingabahloniphi emuva kwalokho ngaqala ngabahlonipha.

(I started to respect the educators because I did not give them respect for a long time).

Childrearing is a very stressful life experience in different ways because it demands that one has to act like an older person, as a result the teenage stage is completely affected especially when continuing with school. The following quotes support these assertions:

PARTICIPANT D: Kwayiphazamise impilo yami kulowo nyaka ngoba angizange ngiphase.

(It disrupted my life that year because I did not pass).

PARTICIPANT F: Ngayeka konke lokho ukuwrong, ngabe sengenza okuright ngaxila kumuntu yedwa ngezothando ngoba phambilini ngangithanda abantu abaningi.

(I left all the wrong things and did what was right and focused on one love partner due to the reason that prior to pregnancy I had multiple love partners).

The findings suggest that to have been pregnant and have a baby while schooling is problematic and leads to failure in school because of the demands that a baby brings. This is supported by Gustafsson and Seble (2008) that teenage childbearing is negatively correlated with completing high school and failing to supply contraceptive education can result in failures.

4.4.3.2 EMOTIONAL SUPPORT IN PLACE

Provision of affection and support from family members, the father of a child and educators consequently boosts the image of the teenage mothers and leads to emotional stability. Therefore, emotional support was provided and experienced to meet the needs of teenage mothers, as a close psychosocial relationship is established with one another. The participants also stated clearly that they happened to feel secure and supported by the teachers and parents as well as boyfriends throughout the difficult times.

The following quotes support this:

PARTICIPANT A: Bayangisiza ekhaya ngokungiphathela ingane kanye nobaba wengane uyangisaphotha kakhulu.

(My family help me by babysitting my child and the father of my child also supports me a lot).

PARTICIPANT B: Abazali: Bangisiza ngokungilekelela babokangane ngezinto eziningi kakhulu.

(Parents: they helped me with baby the needs so much especially the child's family members).

Othisha: bangisiza njengabanye abantwana futhi ngasizwa ngicomfortable.

(Teachers supported me like other learners and I felt comfortable).

Ubaba wengane wangisupport kakhulu nangenkathi ingane incane.

(The father of the child supported me a lot when the baby was young).

PARTICIPANT   C: Bazonginakekela   ingane   bakubongane.
(Family members from the father's side would have to take care of the baby).

Othisha: bangisiza   ngokunginika   ipermission   slip   yokuphuma   esikoleni.
(Teachers helped me by giving me permission to leave the school premises).

Ubaba   wengane: usaphothivu   ngoba   uyayithanda   ingane
(The father of the baby was supportive because he loves the baby).

PARTICIPANT E: Umndeni wangisiza ngokungifundisa ukuthi umntwana ukhuliswe kanjani banginika uthando

(The family helped me by teaching me how to raise the baby).

Ubaba wengane: ungisiza ngakho konke okufanele ukudla imali yasekliniki.

(My boyfriend assisted me with everything like food for my baby, money to go to the clinic).

PARTICIPANT F: Umndeni wangisiza ngokuthengela izinto zengane.

(They bought me things for my baby).

Ubaba wengane wamukela ingane yakhe futhi wangisupport ngokudla kwengane, nemali yokuya eklinkhi.

(The father of my baby gave me food for my baby and money to go to the clinic).

4.4.3.3 A MOTHERHOOD NEED FOR SUPPORT AT TEENAGE LEVEL

This theme is discussed under the different aspects which lead to the understanding that the participants (teenage mothers) simply make meanings out of their predicament by adopting personal resolutions to go on with their lives. The participants have faced many

problems and challenges as they are teenagers and fail to provide themselves with the necessities and means to support a baby financially.

This notion is confirmed by the following narrative:

PARTICIPANT D: Kunzima ngoba anginayo imali yokusupport ingane, kodwa ngasizwa abazali bomfana owangikhulelisa.

(It is difficult because I do not have money, but my boyfriend's parents assisted me).

The teenage mothers have to endure a difficult life when bringing up the babies while schooling. This experience supports the claim that each adult must find some way to satisfy and support the baby in that sense. They have to multi-task in order to succeed in expected daily duties. This is a traumatic experience.

The need for finance is expressed in various ways and it is a reality for the learners as they realised that they require basic needs such as food and clothing which have financial implications. The following narratives support this idea:

PARTICIPANT E: Kumnandi kodwa izinto eziningi ziyashintsha njengokuhlala nengane.

(It feels so great but lot of things changes because you have to spend your time with the baby).

Njalo kufanela ngenyanga ngingayi esikole ngihambise ingane ekliniki noma uma igula. Ezinye izikhathi ezingenziwe angikwazi ukuya khona ngisho namatrip esikole angisawahambi ngenxa yengane.

(On a regular basis, once a month, I must be absent from school to take my baby to the clinic and I do not even attend school trips).

PARTICIPANT F: Kubi ukuba umama njengoba ngisafunda akwenzeki

(It is a bad thing to be a teenage mother).

This also puts pressure on the life of teenage mothers in the educational sphere. Hence Chigona and Chetty (2008) found that teenage pregnancy reduces the study hours of the teenage mothers.

Although it is a demanding phenomenon to raise the child, on the other hand it matures the young women to experience a meaningful life. Lastly the teenage mothers fail to give biological love early in the morning and when they go home late in the afternoon. The following narratives support these discussions:

PARTICIPANT C: Kuyachallenge but ukuba umama ukwenza ube disciplined and matured.

(It is a bit challenging to be a mother but it makes a person more disciplined and more mature).

PARTICIPANT A: Akukho right / akumnandi njengoba ngingumfundi ingane ayilitholi uthando olwanele ngoba zihlala nogogo.

(It's not right or nice since I am a school girl and the child does not get motherly love because my grandmother assists to babysit).

4.4.3.4 COPING MECHANISMS

This theme emerges from the data collected that the participants succeeded even though they had experienced emotional problems when they discovered that they were pregnant and during the times of childrearing while still schooling. However these participants demonstrated the strong ability to face these situations irrespective of whatever complications stood against them. The following narratives support this notion:

PARTICIPANT A: I-counselling yangisiza ngoba ngangicabanga ukusikhipha isisu.

(The counselling helped me because I was thinking about aborting the child).

Ngasimukela isimo njengoba sinjalo ngoba akekho owangifosa ukuba ngikhulelwe bayasiyala abantu abadala.

(I accepted the situation as it is, because no one forced me to fall pregnant and the elders used to advise us about pregnancy).

PARTICIPANT B: Abanye babethi angi-abort kodwa ngamukela ngoba ayikho into engingayishintsha.

(Some people said I could have an abortion but I did not do this and simply accepted the situation).

Ngasimukela isimo ngaze ngajwayela ukuthi ngenza zonke izinto zengane okunjengokuwasha

(I accepted the situation until I got used to do all the chores that pertain to the baby such as doing the washing).

PARTICIPANT C: Ngazitshela ukuthi kuzokwenzeka futhi kuzodlula.

(I told myself that it with happen and it will pass).

PARTICIPANT D: Ngasizwa umama wakamakhelwane ukuba ayoxoxisana nabokamfana ngokukhulelwa futhi wangibonisa ngezinto eziningi.

(My neighbour assisted me; she negotiated with my boyfriend's parents about my issue).

Ngazijwayeza ukuhlukana nabangani ngahlala phansi ngabhekana nesimo engikusona.

(I got used to distance from friends, so that I could deal with the situation on my own).

PARTICIPANT E: Ukwamukela ukuze uqhubeke nempilo.

(To accept what I am facing so that life goes on).

Kwazishintshela kona ngokuhamba kwesikhathi kodwa ngangingahambi phakathi kwabantu.

(It happened automatically until the time came to stop, however I distanced myself from the public).

PARTICIPANT F: Ukuxoxa nomdala wasekhaya ukuze atshele abadala.

(I discussed the matter with someone older than me so that she could tell parents).

Angikhohlwe izinto eziningi ukubhekana nengane.

(I told myself to forget many things in my life, I had to focus on my baby).

The findings show clearly that the teenage mothers understand that developmental crises cannot affect them totally because they happen to take resolutions that instil the sense of self-confidence and stability. This involves positive developmental crises in the lives of teenage mothers who have to endure with the results of their social influence which is espoused by the theory.

Qambata (2011) found that the teenage mothers are isolated from family and peers. This notion concurs with the current study in the following quote:

Ngazijwayeza ukuhlukana nabangani ngahlala phansi ngabhekana nesimo engikusona.

(I got used to distance from friends, so that I could deal with the situation on my own).

Teenage mothers develop a sense of inferiority since they tend to isolate themselves from their friends. Lastly, this study demonstrated clearly that the growth of a human being undergoes different stages of life. They experience different developmental crises in life growth where they need to reorganise and integrate these experiences. Newman and Newman (2006) postulated that the theory addresses growth across the lifespan and suggests that those experiences of teenage mothers can lead to a reinterpretation of earlier periods. The theory further assumes that individuals have contributed to their psychological development at each stage. Moreover they claimed that this theory shows how important it is for individuals to integrate, organise, and conceptualise their experiences in order to protect themselves and cope with the challenges. Lastly the growth of the individual is shaped by cultural goals, aspirations and social expectations. Friends distanced themselves and teenage mothers failed to establish a close relationship with one another. They tended to isolate from friends and felt comfortable being alone in their growth in social interactions.

4.5 CONCLUSION

The chapter dealt with the analysis of the findings that emerged from the experiences of teenage mothers that were interviewed using a semi-structured interview schedule. The purpose of this study aimed to find out what teenage mothers experienced when they discovered that they were pregnant, during the delivery stage and lastly their experiences after pregnancy while schooling. Throughout the analysis several themes have been

identified such as feeling uncomfortable, teachers' and peers' reactions, lifestyle change and values, and support thereafter during the discovery phase.

Post-pregnancy experiences themes were summarised briefly, such as changing of habits and social network, emotional support in place, motherhood need for support as teenagers and lastly coping strategies to withstand the challenges. The key findings show that the learners experienced emotional problems about their pregnancy. For those who were fortunate, they experienced support from their immediate members such as parents, friends, educators and the father of the child. Furthermore they experienced suffering as a result of the caring demands of the baby and schoolwork, which can result in girls dropping out of school. Therefore, the findings of the study were discussed in conjunction with published literature at a global and national level. The following chapter presents summary of the key findings, conclusion and lastly highlights recommendations that emanated from the findings.

CHAPTER FIVE

SUMMARY OF STUDY, CONCLUSION AND RECOMMENDATION

5.1 INTRODUCTION

This study aimed at exploring the psychosocial experiences of teenage mothers who were pregnant while at school and returned to continue schooling after giving birth, and also finding out how they navigated these experiences in their academic lives. The Department of Education, as gazetted in the Constitution of South Africa, made provision that pregnant learners must not be denied basic education. The demographic characteristics and interview findings were analysed in the previous chapter. Therefore, this chapter discusses the summary of findings, implications of the findings and presents recommendations based on the key themes that have emerged from the data with reference to published scholarly works.

This study was conducted using six purposively sampled learners who were pregnant while schooling. The data in the previous chapter has been generated using two data production techniques namely small questionnaire and semi-structured interview. The questionnaire had looked specifically at the demographic information that was analysed quantitatively.

5.2 SUMMARY OF STUDY

In order to summarise the findings of this study the researcher will give the summary based on quantitative data and under different themes that have emerged from the data, the researcher will therefore follow the outline below that relates to the following phases:

The results revealed that young learners fell pregnant at a young age in lower grades. It is evident that the parents failed to discuss pregnancy issues with their daughters. Half of the sample indicated that they discussed these issues but they fell pregnant which means they did not take their parents' advice. Although some of the participants experienced life changes in different forms, but they failed to change. Pregnancy affects individuals socially and personally. This experience of becoming a mother is indeed a daunting challenge but teenagers have adapted, although there are complications. They did not get

assistance from teachers and peers, which was important in order to attain educational goals. They had not used contraceptives before. This confirms that the teenagers were not consistent in their actions. It is a norm that the girls take measures after pregnancy due to the fact that the sample used demonstrated a high number using the measures at a later stage. This means that the subject as such fails to address the issue of pregnancy in the lives of teenagers and the teenage girls were not empowered adequately in life skills as well.

5.2.1 DISCOVERY PHASE: Investigated the psychosocial experiences of teenage mothers and how they navigated their experiences in the home and school environment. The following themes were formulated under this phase:

5.2.1.1 The learners' feelings of being pregnant

5.2.1.2 Relationship with teachers and peers

5.2.1.3 Lifestyle change and values

5.2.1.4 Support during pregnancy

5.2.2 DELIVERY PHASE: In order to understand how these teenage mothers

experienced the process of childbirth, the following theme emerged from the data to address this phase:

5.2.2.1 Experiences during delivery

5.2.3 POST-PREGNANCY PHASE: Investigated experiences of these teenage mothers during childrearing. The following themes were formulated under this phase:

5.2.3.1 Changing habits and social network

5.2.3.2 Emotional support in place

5.2.3.3 Motherhood need for support at teenage level

5.2.3.4 Coping mechanisms

The above themes emerged to address these phase. The participants illustrated different experiences psychosocially. All findings from data collection process are summarised here.

5.2.1.1 THE LEARNERS' FEELINGS OF BEING PREGNANT

The findings show that teenage mothers faced many challenges when they discovered that they were pregnant, they therefore happened to experience a variety of emotional problems. The participants indicated that they were not happy because they were confused about the situation that they were in. These similar findings have been found by Spear and Lock (2003), who state teenage mothers experience stressful events and express having negative perceptions of their bodies.

The participants expressed different emotions and feelings with regards to their pregnancy. As it is noted, teenage mothers have to face the demands of providing for the needs of the baby, through demanding challenges and hard experiences due to the reasons that they are still young. They then have to look at their new role as a parent. This provides the feelings of acceptance and stability.

It is quite likely that pregnancy and teenage mothers lead to identity diffusion and unnecessarily delay the attainment of identity achievement, which leads to role confusion (Erickson, 1968).

5.2.1.2 RELATIONSHIP WITH TEACHERS AND PEERS

The teenage mothers experienced different reactions from the teachers, society and peers. They indicated that they felt deserted by their school mates, because of their fear to be among them. The learners also expressed that they were ashamed of the condition that they were in, however they experienced the support from the teachers in different forms and their friends happened to not reject them. There were different feelings with regards to the realisation of the relationship between teachers and peers. Seemingly the teachers may have been trained in dealing with pregnancy so that learners would receive adequate support.

5.2.1.3 LIFESTYLE CHANGE AND VALUES

Child-rearing is a completely life changing event and it impacts negatively and positively on others in life. This period in life changes teenage mothers' freedom of social movement. This means that teenage mothers have to adapt to their own developmental changes, they must now also learn to cope with the new tasks related with parenting and the needs of their babies at the same time as their schooling. This finding is similar to that of Van Wyk (2007), who found that the young teenage mothers are in most cases responsible for supporting and raising their children on their own.

This study has also found that there are restrictions on personal freedom, missing opportunities for fun and good times with their peers, and the responsibility for the infant. These are some of the costs that came with having a baby during adolescence as stipulated by Van Wyk (2007). The findings of this current study are in line with Matshotyana (2010), that the teenage mothers were scared or ashamed of themselves because they were very young. They stopped joining their friends who all ran away from them (teenage mothers) as they thought that their friends' parents told them that they shouldn't mix with them because they were bad examples. This indicates their difficult experiences.

5.2.1.4 SUPPORT DURING PREGNANCY

Although the teachers are not fully trained to deal with pregnancy the findings show that they are more concerned about the safety of these students. They also play a parental role in supporting these learners in different situations. This means the teachers do care for teenage mothers because they know they have to access medical care for the child and themselves if a need rises.

This generates the idea that the educators have empathy for their learners who are in a difficult situation. As emphasised by Erickson's theory of psychosocial development (1968), relationships influence one's search for his or her identity and also highlights that teachers occupy a potentially important position in the lives of young people and influence the environment in which relationships between students are established.

5.2.3.1 EXPERIENCES DURING DELIVERY

Learners experienced hardship during labour and complications were experienced during delivery. This finding is similar with Gyesaw and Ankomah (2013), that when teenagers were asked to recall their experiences during labour, they narrated clearly and all testified to the pain that came with labour by saying labour was difficult and painful. It was therefore found that the teenage mothers faced difficult times during their delivery.

5.2.4.1 CHANGING HABITS AND SOCIAL NETWORK

The young women had to change and were compelled to change their habits since they discovered that they were pregnant and also after delivery. They then happened to experience changed behaviour and habits to do the variety of tasks in their daily lives.

Childrearing is a very stressful life experience in different ways because it demands that one has to act like an older person, as a result the teenage stage is completely affected especially when continuing with school demands.

The findings suggest that to be pregnant and have a baby while schooling were problematic experiences and could lead to failure in school because of the demands that a baby carries. This is also in support with Gustafsson and Seble (2008), that teenage childbearing is negatively correlated with completing high school and failing to supply contraceptive education can result in failure.

5.2.4.2 EMOTIONAL SUPPORT IN PLACE

The finding showed that affection and support were provided by immediate family members, the father of a child and educators, and consequently that boosted the image of the teenage mothers and led to emotional stability. Therefore emotional support was provided and learners' needs were met by the parents and fathers of the child and very few of them were not supported by parents. In short through these pillars of support the teenage mothers experienced feelings of security, protection and a sense of fulfilment of educational goals while they were mothers who had to take responsibility to raise a child.

5.2.4.3 MOTHERHOOD NEED FOR SUPPORT AT TEENAGE LEVEL

The findings show that the teenage mothers have to endure a difficult life when bringing up the babies while schooling. They have to multi-task in order to succeed in expected daily duties. This is a traumatic experience because the teenagers have to face many problems and challenges as they as teenagers fail to provide for the necessities of a baby financially. They realise that they require basic needs such as food and clothing which have financial implications however this is catered for by immediate people such as parents, the father of the baby and other close people. Chigona and Chetty (2008) state teenage pregnancy reduces the study hours of the teenage mothers. The learners in this study indicated that they had to repeat a grade due to the experiences of becoming a mother during the teenage stage.

Although it is a demanding experience to raise a child, teenagers suggested that they had matured at a young stage and experienced a meaningful and purposeful life. Lastly the teenage mothers revealed that they failed to share biological love with their babies due to school demands.

5.2.4.4 COPING MECHANISMS

The teenagers succeeded even though they had experienced emotional problems, financial difficulties, childrearing problems and school demands as well. This is due to the fact that they have to raise the child and return to school to continue schooling while they are mothers; however these participants demonstrated a strong ability to face these situations irrespective of whatever complications that stood against them. Qambata (2011) found that the teenage mothers were isolated from family and peers.

Lastly the findings demonstrated clearly that the growth of a human being undergoes different stages in life. They experience different developmental crises in life growth where they need to reorganise and integrate these experiences (Erickson, 1968).

In conclusion, the study provides data for understanding the experiences, challenges and coping mechanisms of teenage mothers. Since it was a qualitative study in its nature it has biases resulting from selected issues. Its results are not representative of the whole population. For this reason it is cannot be generalised to all teenage mothers in Impendle.

Furthermore qualitative research could be subject to multiple interpretations. This means one question can have numerous interpretations.

5.3 CONCLUSION

The purpose of this study was to find out what teenage mothers experienced when they discovered that they were pregnant, during the delivery phase and lastly their experiences after pregnancy while schooling. Throughout the analysis several themes have been identified such as feeling uncomfortable, teachers' and peers' reactions, lifestyle change and values, and support thereafter during the discovering phase.

Post-pregnancy experiences themes are summarised briefly, such as changing of habits and social network, emotional support in place, motherhood need for support as teenagers and lastly coping strategies to withstand the challenges. The key findings showed that the learners experienced emotional problems concerning their pregnancy. For those who were fortunate, they experienced support from their immediate members such as parents, friends, educators and the father of the child. Furthermore they experienced challenges as a result of the caring demands of the baby and the schoolwork that could have resulted in them dropping out of school. Most importantly these mothers have faced numerous experiences, challenges and coping strategies as teenage mothers but also an ability to adapt to the demands of parenthood. Lastly, teenage mothers have to endure a variety of experiences during pregnancy, not excluding financial hardship.

5.4 RECOMMENDATIONS FOR THE STUDY ITSELF

The psychosocial experiences of teenage mothers at different levels, namely discovery, delivery and post-pregnancy phases, have been discussed in this chapter. In order to solve the complications that teenage mothers have gone through at different stages of life the following strategies can therefore be recommended to assist in the pregnancy and mothering issues:

➢ It is recommended that the teenage mothers should be given counselling during the discovery stage so that they can avoid hopelessness and sad feelings that can lead to complications and abortion.

78

- It is vital that the teenage mothers use contraceptive measures if they have started sexual activity. Furthermore it is recommended that they must avoid early initiation of sexual intercourse. This recommendation is backed by this finding that most of the participants, eighty seven percent (87%), have used contraceptives before pregnancy, although seventeen percent (17%) of them indicated that they had not used contraceptives before.

- The so-called other learners (classmates) should assist the pregnant learners emotionally so that they do not feel rejected. It is clearly revealed by one of the participants that peers distance themselves. This is supported by the excerpt, "Yes it changed our relationship and they revealed to me that I could influence them to become pregnant".

- Financial support is of paramount importance to assist teenage mothers to meet basic needs of the baby and themselves. This support must be provided by parents, the father of the child and immediate relatives, because it is scientifically researched that the social grant from government cannot fully cover the needs as such.

- Lastly the recommendation of this study is similar to the study by Matshotyana (2010), that there should be support groups for pregnant and parenting learners as well as additional tutoring study notes, supporting educational material, and extra lessons, extensions for tests, and a flexible time line for assignments or projects to assist pregnant and parenting learners who lost time from school due to pregnancy or child care. It is a fact that the teenage mothers experience problems with losing much time.

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APPENDIX: A

SAMPLE OF SEMI-STRUCTURED INTERVIEW SCHEDULE

What are the psychosocial experiences of teenage mothers in two selected secondary school?

How did you feel when you discovered that you are pregnant?

Has pregnancy changed how you relate with peers and educators? Explain how.

How has pregnancy changed your life?

How has pregnancy impacted your self-esteem? Explain in details.

During pregnancy did you feel supported or judged by peers and educator?

Are there any instances you felt that you were treated unfairly by parents, educators and classmates? Explain in details.

How does it feel to be a mother at teenage level?

What are the experiences that you are facing as a teenage mother?

What are the challenges that you are facing at home and school?

How do these experiences differ from the time before you became a mother?

How does your friends relate to you?

In what ways of being a mother affects or influences your education?

How have teenage mothers navigated these experiences in the academic lives?

From your experiences of being a teenage mother, what have you learnt that can help others in the same situation?

What helped you to cope with your situation?

How did you adapt to a change that was to take place in your life?

To help with the wellbeing of yourself and the child you are carrying or carried what are the essential needs you feel were provided or not by family, friends, and educators and the father of the baby?

What support do you get from family, school, and government?

SMALL QUESTIONNAIRES FOR DEMOGRAPHIC PURPOSES

This questionnaire aims to gather the information that will be used to investigate the psychosocial experiences of teenage mothers in the schooling set-up. You are therefore requested to answer these following questions to the best of your ability in order this study be fruitful to its best, by circling the appropriate response.

NB. Do not write your name

How old were you when you were pregnant?

12-15yrs

15-17yrs

17-20yr

What grade level were you in when you got pregnant?

Grade 8

Grade 9

Grade 10

Grade 11

Grade 12

Did your parents talk adequately about pregnancy

YES or NO

Were you happy when you discovered that you were pregnant?

YES or NO

Did pregnancy change your life?

YES or NO

Did pregnancy impact your self-esteem?

 YES or NO

Through these experiences you encountered in life how did you feel?

Happy or unhappy

Did you adapt to the new situation?

YES or NO

Did your family members support you?

YES or NO

Did your peers and educators support you?

YES or NO

Were you worried when you are about to deliver?

YES or NO

Did you feel some pain during delivery

YES or NO

Do you have parents?

Both parents

Single mother

Single father

Neither of them

As you are teenage mothers, how many babies do you have now?

One

Two

Three

OTHER

Did you try contraceptive measures prior to the pregnancy?

YES or NO

Right now do you take contraceptive measures?

 YES or NO

How did you feel when you knew that you would have baby?

 Happy or unhappy

Did you have knowledge about contraceptive measures before you fell pregnant?

YES or NO

Did you know different types of contraception?

YES or NO

Did life orientation teacher discuss the issues of pregnancy in class adequately?

YES or NO

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE

APPENDIX: C

education

Department:
Education
PROVINCE OF KWAZULU-NATAL

Enquiries: Nomangisi Ngubane   Tel: 033 392 1004   Ref.:2/4/8/215

Mr N A Dlamini
P O Box 38
IMPENDLE
3227

Dear Mr Dlamini

PERMISSION TO CONDUCT RESEARCH IN THE KZN DoE INSTITUTIONS

Your application to conduct research entitled: **"THE PSYCHOSOCIAL EXPERIENCES OF TEENAGE MOTHERS IN TWO SELECTED SECONDARY SCHOOLS IN THE UBUMBANO CIRCUIT AND HOW THEY NAVIGATED THESE EXPERIENCES IN THEIR ACADEMIC LIVES",** in the KwaZulu-Natal Department of Education Institutions has been approved. The conditions of the approval are as follows:

1. The researcher will make all the arrangements concerning the research and interviews.
2. The researcher must ensure that Educator and learning programmes are not interrupted.
3. Interviews are not conducted during the time of writing examinations in schools.
4. Learners, Educators, Schools and Institutions are not identifiable in any way from the results of the research.
5. A copy of this letter is submitted to District Managers, Principals and Heads of Institutions where the intended research and interviews are to be conducted.
6. The period of investigation is limited to the period from 01 August 2014 to 30 June 2015.
7. Your research and interviews will be limited to the schools you have proposed and approved by the Head of Department. Please note that Principals, Educators, Departmental Officials and Learners are under no obligation to participate or assist you in your investigation.
8. Should you wish to extend the period of your survey at the school(s), please contact Miss Connie Kehologile at the contact numbers below.
9. Upon completion of the research, a brief summary of the findings, recommendations or a full report / dissertation / thesis must be submitted to the research office of the Department. Please address it to The Director-Resources Planning, Private Bag X9137, Pietermaritzburg, 3200.
10. Please note that your research and interviews will be limited to schools and institutions in KwaZulu-Natal Department of Education (Umgungundlovu District).

Nkosinathi S.P. Sishi, PhD
Head of Department: Education
Date: 26 August 2014

KWAZULU-NATAL DEPARTMENT OF EDUCATION

POSTAL: Private Bag X 9137, Pietermaritzburg, 3200, KwaZulu-Natal, Republic of South Africa   ...dedicated to service and performance
PHYSICAL: 247 Burger Street, Anton Lembede House, Pietermaritzburg, 3201. Tel. 033 392 1004 Fax: 033 392 4200
EMAIL ADDRESS: kehologile.connie@kzndoe.gov.za; CALL CENTRE: 0860 596 363;
WEBSITE: WWW.kzneducation.gov.za

APPENDIX: D

UNIVERSITY OF ™
KWAZULU-NATAL

INYUVESI
YAKWAZULU-NATALI

26 August 2014

Mr Nhlanhla Aaron Dlamini (208525631)
School of Education
Edgewood Campus

Protocol reference number: HSS/0479/014M
Project title: The psychosocial experiences of teenage learners in two selected secondary schools in the Ubumbano circuit in Impendle

Dear Mr Dlamini,

Full Approval Notification – Committee Reviewed Protocol

This letter serves to notify you that your response to our letter dated 02 July 2014 was reviewed by the Humanities & Social Sciences Research Ethics Committee and has now been granted **Full Approval**.

Any alterations to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach/Methods must be reviewed and approved through an amendment /modification prior to its implementation.   Please quote the above reference number for all queries relating to this study.

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

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

Best wishes for the successful completion of your research protocol

Yours faithfully

_____
Dr Shenuka Singh (Chair)

/ms

Cc Supervisor: Dr V Jairam
Cc Academic Leader Research: Professor P Morojele
Cc School Administrator: Mr Thoba Mthembu
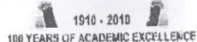
APPENDIX: E

<div align="right">
Box 38

Impendle

3227

07 May 2014
</div>

The principal

Siyazama Secondary School

P.O. Box 534

Impendle

3227

Dear Madam

Request for permission to conduct research exercise in your school

I, N.A. Dlamini hereby request to conduct a study in your schools. I am currently a registered student for Med. Educational Psychology degree at UKZN (Edgewood Campus) this year and I am expected to complete a research project with a title: **The psychosocial experiences of teenage mothers in two selected secondary schools in the Ubumbano circuit at Impendle**.

This research task may under no circumstances disturb the normal teaching and learning programme of the learners, excerpt if principal and class teachers may give permission to do so. The participation is absolutely voluntary and I am prepared to ensure the confidentiality during interview programme. The interview session will only last 60 minutes and audio-taping recorder will be used to tape the interview. The principal will be requested in identifying the learners using the office statistics for learners about their information. I will be then using three learners from each school.

Lastly the learners will be required to sign the **informed consent form** before the commencement of research.

I thank you in anticipation for a positive response.

Yours truly

Mr N.A. Dlamini

APPENDIX: F

Siyazama Secondary school

P.O. Box 435

Impendle 3227
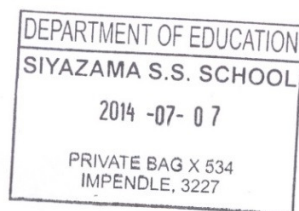
07 July 2014

To whom it may concern

This letter serves to inform that Mr N.A. Dlamini is expected to complete research task with a topic that stands as: **The psychosocial experiences of teenage mothers in two selected secondary schools.** He has been therefore granted permission in this regard.

We wish him a good luck with his study.

Yours Truly

N.W. Shezi (Principal)

Signature ....Shezi...................Date ...07 MAY 2014...........

DEPARTMENT OF EDUCATION
SIYAZAMA S.S. SCHOOL
2014 -07- 0 7
PRIVATE BAG X 534
IMPENDLE, 3227

Box 38

Impendle

3227

07 July 2014

Dear Principal

Asande Senior Secondary

P/ Bag X 517

Impendle

3227

My name is **Nhlanhla Aaron Dlamini;** I am an Educational Psychology **Master's** candidate studying at the University of KwaZulu-Natal, Edgewood campus, South Africa.

I am interested in learning about **the psychosocial experiences of teenage mothers, and find out how these teenage mothers navigated these experiences in two secondary schools in the Ubumbano circuit.** Your schools are one of my case studies in order to gather the information; I am interested in asking you some questions.

Please note that:

- Your confidentiality is guaranteed as your inputs will not be attributed to you in person, but reported only as a population member opinion.
- The interview may last for about 1 hour and may be split depending on your preference.
- Any information given by you cannot be used against you, and the collected data will be used for purposes of this research only.
- Data will be stored in secure storage and destroyed after 5 years.
- You have a choice to participate, not participate or stop participating in the research. You will not be penalized for taking such an action.
- The research aims at knowing the psychosocial experiences of teenage mothers, and how these learners navigated their experiences.
- Your involvement is purely for academic purposes only, and there are no financial benefits involved.

Yours truly

N.A. Dlamini
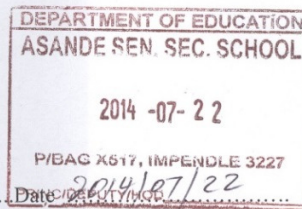
APPENDIX: H

Dear Sir/ Madam

I Sipho Joseph (Principal) hereby accept that Mr N.A. Dlamini can conduct the research with the topic titled as 'The **psychosocial experiences of teenage mothers in two selected secondary schools'.** He is expected not to interrupt the school functionality in this regard. He has to organise with the participants the suitable time to complete his task.

Good luck with your journey.

Yours faithfully

S.J. Dlamini (principal)

Signature .... Date 2014/07/22

DEPARTMENT OF EDUCATION
ASANDE SEN. SEC. SCHOOL

2014 -07- 2 2

P/BAG X517, IMPENDLE 3227

APPENDIX: I

Incwadi yemvumo

Mina *Sthenjiwe Maknaye* mzali ka *Nontandoyenko Maknaye* ngiyavuma ukuba umntwana wami abambe iqhaza kuncwaningo olumanyelana nabafundi abafunda bengabazali.

Ngikufisela impumelelo ekuncwaningeni kwakho.

Yimina ozithobayo

Incwadi yemvumo

Mina *Ngainda Maphanga* mzali ka *Nomusa Maphanga* ngiyavuma ukuba umntwana wami abambe iqhaza kuncwaningo olumanyelana nabafundi abafunda bengabazali.

Ngikufisela impumelelo ekuncwaningeni kwakho.

Yimina ozithobayo

N. Maphanga

Incwadi yemvumo

Mina *Ncombizonke Dumakude* mzali ka *Smangele Dumakude* ngiyavuma ukuba umntwana wami abambe iqhaza kuncwaningo olumanyelana nabafundi abafunda bengabazali.

Ngikufisela impumelelo ekuncwaningeni kwakho.

Yimina ozithobayo

N. Dumakude

Incwadi yemvumo

Mina Roy Makhosonile Ngcobo mzali ka Fezeka Ngcobo ngiyavuma ukuba umntwana wami abambe iqhaza kuncwaningo olumanyelana nabafundi abafunda bengabazali.

Ngikufisela impumelelo ekuncwaningeni kwakho.

Yimina ozithobayo

R. Ngcobo

Incwadi yemvumo

Mina Natalia Ndlovu mzali ka Neliswa Ndlovu ngiyavuma ukuba umntwana wami abambe iqhaza kuncwaningo olumanyelana nabafundi abafunda bengabazali.

Ngikufisela impumelelo ekuncwaningeni kwakho.

Yimina ozithobayo

N. Ndlovu

Incwadi yemvumo

Mina Betty Hlengwa mzali ka Monkululeko Hlengwa ngiyavuma ukuba umntwana wami abambe iqhaza kuncwaningo olumanyelana nabafundi abafunda bengabazali.

Ngikufisela impumelelo ekuncwaningeni kwakho.

Yimina ozithobayo

B. Hlengwa.

APPENDIX: J

Box 38

Impendle

322

07 July 2014

Dear Participants

INFORMED CONSENT LETTER

My name is **Nhlanhla Aaron Dlamini;** I am an Educational Psychology **Master's** candidate studying at the University of KwaZulu-Natal, Edgewood campus, South Africa.

I am interested in learning about **the psychosocial experiences of teenage mothers, and find out how these teenage mothers navigated these experiences in two secondary schools in the Ubumbano circuit.** Your schools are one of my case studies in order to gather the information; I am interested in asking you some questions.

Please note that:

- Your confidentiality is guaranteed as your inputs will not be attributed to you in person, but reported only as a population member opinion.
- The interview may last for about 1 hour and may be split depending on your preference.
- Any information given by you cannot be used against you, and the collected data will be used for purposes of this research only.
- Data will be stored in secure storage and destroyed after 5 years.
- You have a choice to participate, not participate or stop participating in the research. You will not be penalized for taking such an action.
- The research aims at knowing the psychosocial experiences of teenage mothers, and how these learners navigated their experiences.
- Your involvement is purely for academic purposes only, and there are no financial benefits involved.
- If you are willing to be interviewed, please indicate (by ticking as applicable) whether or not you are willing to allow the interview to be recorded by the following equipment:

	Willing	Not willing
Audio equipment	*	
Photographic equipment	*	
Video equipment	*	

Email: nhlanhla05dlamini@gmail.com

Cell: +2797582270.

My supervisor is Dr. **Visvaranie Jairam** who is located at the School of Educational Psychology, Edgewood campus of the University of KwaZulu-Natal.
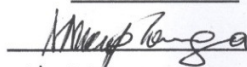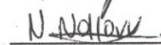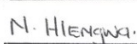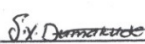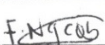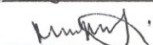
Contact details: email: Jairam@ukzn.ac.za   Phone number: 0827700509

Thank you for your contribution to this research.

DECLARATION

We **Nomusa Maphanga, Nelly Ndlovu, Fezeka Ngcobo, Nonkululeko Hlengwa, Simangele Dumakude, and Ntandoyenkosi Makhaye** hereby confirm that we understand the contents of this document and the nature of the research project, and we consent to participating in the research project.

We understand that we are at liberty to withdraw from the project at any time, should we so desire.

INITIALS	SIGNATURES	DATES
N. Maphanga		21.07.14
N. Ndlovu		21.07.14
N. Hlengwa		21.07.14
S. Dumakude		21.07.14
F. Ngcobo		21.07.14
N. Makhaye		21.07.14