

# **THE VALUE OF ONGOING PEER SUPPORT GROUP PARTICIPATION FOR SUPPORTING TERTIARY LEVEL STUDENT MOTHERS IN SOUTH AFRICA**

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## DECLARATION

I, the author, hereby declare that unless specifically indicated to the contrary, this thesis is the result of my own work, that all sources that I have used have been properly referenced and that I have not previously submitted this research at any other university for degree purposes.

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## **ABSTRACT**

This research explores whether ongoing peer support group participation has value for supporting student mothers on a university campus. It aimed to investigate how peer support group participation relates to the challenges that student mothers face, particularly in how they balance motherhood with academia, how they construct an integrated identity and how they respond to stigmatisation. Data was collected from twelve peer support groups and eleven individual interviews with nine student mothers. An interpretive approach was used to understand the experiences of student mothers in tertiary education and how participation in the peer support group process interacts with this. The data was analysed using discourse analysis to understand how student mothers position themselves in terms of motherhood and in relation to stigmatisation and how they construct their maternal identities. Findings revealed that the peer support group process empowered student mothers and did this through the mechanisms of social support, experiential learning, social comparison and helping others. In addition, the peer support group process allowed for an integration of their student, personal and maternal identities. Outcomes of the peer support group process were acceptance of their circumstances and increased self-efficacy and agency. This study highlights the need for provision of ongoing peer support groups for student mothers and concludes with recommendations about how this population can be better supported at University.



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## **CHAPTER ONE**

### **INTRODUCTION**

There has been a substantial amount of both South African and international research exploring the drivers for and experience of teenage pregnancy. Little has however been written about the experience of unintentional pregnancy amongst university students, particularly in South Africa. Over and above the students who enter university as mothers, there are those who become pregnant at university. While there are no national figures reporting student pregnancy in South African universities, a report on one of the five University of KwaZulu-Natal campuses stated that there were 221 unplanned pregnancies on that campus during a two-and-a-half-year period (Naidoo & Kasiram, 2006). These figures are supported by statistics from the UKZN campus clinic and the UKZN Aids programme (Stephens, 2017). It is thus likely that student mothers constitute a notable percentage of the student population.

Unintended pregnancy is a consequence of sexual risk behaviour which is typical of the university culture in South Africa (Mutinta, Govender, Gow & George, 2012). In addition, research has shown how it is intricately related to gendered sexual ideology and power relations where men are expected to be dominant and to hold the decision-making power in a relationship and thus would regulate whether contraception is used (Wood & Jewkes, 1997). Within these gendered power relations, women would be expected to acquiesce to their partner's demands (Jewkes & Morrell, 2012) especially in the setting of an established relationship.

Research involving student mothers has highlighted that student mothers are generally left responsible for the child (Brown & Amankwaa, 2007; van den Berg & Mamhute, 2013) and that this affects all aspects of their lives from their ability to continue studying, to their general well-being and finances. Previous research has highlighted the difficulty that student mothers have in balancing their student and parent identities (Estes, 2011) and the negative effects this role conflict can have upon their well-being (Funiba, 2011; Longhurst, Hodges & Stolte, 2012). It has also drawn attention to the isolation and disconnect from their peers that many student mothers experience (Brown & Amankwaa, 2007; Duquaine-Watson, 2007; Funiba, 2011; Longhurst et al., 2012; Taukeni, 2014; Yakaboski, 2010). Being isolated can deprive student mothers of peer support which can be crucial in negotiating the academic

curriculum (Corfe, 2015; Funiba, 2011; van den Berg & Mamhute, 2013) and in buffering them from loneliness and depression (Funiba, 2011).

Previous research has also underscored the stigmatisation to which student mothers are subjected (Brown & Amankwaa, 2007; Corfe, 2015; Duquaine-Watson, 2007; Longhurst et al., 2012; Manalang, Liongson & Bayubay, 2015; Taukeni, 2014). Due to gendered double standards of sexual behaviour (Varga, 2003), student mothers are blamed for the pregnancy (Mkhwanazi, 2010) and are held responsible for their circumstances, resulting in pathologization by peers and the community (Corfe, 2015; Manalang et al., 2015; Taukeni, 2014). Stigmatisation can cause student mothers to feel shame which is highly correlated with depression, anxiety and low self-esteem (Tangney, Stuewig & Mashek, 2011). Shame can cause student mothers to hide their student mother status (Gilbert, 2000) which results in them becoming invisible on campus (Duquaine-Watson, 2007). Research emphasises that universities have been designed for single, male, childless, students (Barnes, 2013) and thus are ill-equipped to support non-traditional students. Previous studies have also reported that student mothers are not supported on campus (Brown & Amankwaa, 2007; Brown & Nichols, 2012; Duquaine-Watson, 2007; Funiba, 2011; Longhurst et al., 2012; Taukeni, 2014; Yakaboski, 2010). Yakaboski (2010) argues that there is an urgent need to support student mothers in graduating in order to improve both their own and their children's prospects in life.

Many studies with student mothers recommend a support group process (Naidoo & Kasiram, 2006; Springer Parker & Leviten-Reid, 2009; Taukeni, 2014; van den Berg & Mamhute, 2013) in order to connect student mothers with similar students and thereby decrease their isolation and stress. While some studies (Parekh & de la Rey, 1997; Yakaboski, 2010) utilised focus groups to collect data and reported increased social support and decreased isolation as a result, there is a dearth of literature on the provision of support groups for student mothers in higher education with only one American study being reported (Bruns, 2004).

This study aims to contribute to this gap in the literature. It builds upon my Honours research project of the experience of student mothers in tertiary education at the University of KwaZulu-Natal (Corfe, 2015). The data for my Honours project was collected in collaboration with Cebisile Kubeka in conjunction with her Master's thesis (Kubeka, 2016). In addition, our combined research was published in conjunction with our supervisor, Dr

Mary van der Riet (van der Riet, Corfe & Kubeka, 2019). My Honours project involved in-depth individual interviews with student mothers and one focus group. The student mothers who participated found the focus group very supportive and requested further groups. Out of this emerged the idea that an ongoing group process might be useful to student mothers, and that this could be researched, almost as if they were focus groups. Focus groups can operate in much the same way as peer support groups, in that they provide the opportunity to share experiences with similar others which often results in a sense of group cohesion and high levels of warmth and empathy (Peek & Fothergill, 2009)..This study was initially designed as an ongoing focus-group process but became a peer support group process and indeed was understood as a peer support group by the participants. This report thus refers to the process as a peer support group.

This qualitative study aimed to investigate whether participation in an ongoing peer support group process has value for supporting student mothers in higher education. It sought, by the use of an interpretive approach, to understand the challenges student mothers experience in higher education and how the group process related to these. It also sought to understand whether the peer support group process allowed for shifts in the way student mothers construct motherhood and whether during the process there would be shifts in identity. It hypothesised that participation in ongoing peer support groups would provide a source of support for student mothers which would bolster their coping with the experience of higher education. By analysing the peer support group process, this study aimed to provide a model for future support groups at a policy level which could contribute to student mothers' support at an individual level.

### **Structure of the dissertation**

Chapter Two incorporates the literature review which discusses previous research on the experience of student and teenage mothers. It highlights student mothers' challenges and refers to relevant theory in connection with these challenges. It also explores the systems of support, including institutional support available to student mothers. It further discusses research on the potential benefits of peer support groups in supporting student mothers and concludes by considering the concept of empowerment in relation to peer support group participation.

Chapter Three presents the rationale for the study and details the specific aims of the research together with the research questions to be answered.

Chapter Four summarises the methodological approach used for the research. It includes details of the design, sampling, recruitment, data collection and data analysis employed in the study. It concludes with a consideration of ethical issues.

Chapter Five presents the findings of the study. It begins by demonstrating that student mothers were not coping with their dual roles at the beginning of the study, it then reports the challenges faced by student mothers and explores their existing systems of support. It then reports on the empowering benefits of the peer support group process and examines the impact of this upon the challenges that student mothers face. It concludes by considering how the university can better accommodate student mothers.

Chapter Six discusses the findings in relation to relevant literature and theory and specifically in relation to the research questions.

Chapter Seven discusses how the study answered the research questions and provides a summary of the main findings. It considers the strengths and limitations of the study in relation to validity and reliability and concludes by making recommendations for university policy and further research.

## CHAPTER 2

### LITERATURE REVIEW

Much has been written both in South Africa (Chigona & Chetty, 2008; Chohan, 2010; Macleod, 2001; Macleod & Tracey, 2010; Shefer, Bhana & Morrell, 2013; Willan, 2013) and internationally (Macvarish, 2010; Pillow, 2004; Whitehead, 2000; Wilson & Huntington, 2005) about the experience, causes and consequences of teenage pregnancy, however there has been comparatively little research on unplanned pregnancy amongst university students. Most of the studies which are available focus on graduate or college students abroad, particularly in North America (Brown & Amankwaa, 2007; Duquaine-Watson, 2007; Longhurst, et al., 2012; Manalang, et al., 2015; Yakaboski, 2010) or on student mothers in other African countries (van den Berg & Mamhute, 2013; Taukeni, 2014) or are in grey literature, in the form of Masters theses (Funiba, 2011; Kubeka, 2016; Mayer, 2012; Walls, 2007).

National statistics from the 2003 South African Demographic and Health Survey indicate that almost a third of women in South Africa bear children before the age of 20 (Department of Health, 2007). In a nationally representative, cross-sectional survey of 15-24-year-old South African women, nearly half of the sexually active participants reported ever having been pregnant, with the majority of these pregnancies being unwanted (MacPhail, Pettifor, Pascoe & Rees, 2007). It is thus likely that some students enter South African universities as mothers. In addition to the students who enter university as mothers, there are also the students who become pregnant while at university. While there are no national figures on the incidence of student pregnancy at South African universities, a nation-wide Higher Education Sector study (HEAIDS, 2010) found that sexual risk-taking behaviour amongst students is high, putting them at risk for HIV infection, sexually transmitted infections (STI's) and unplanned pregnancy. In support of this, a study on one of the five University of KwaZulu-Natal (UKZN) campuses reported that there were 221 unplanned pregnancies at that campus during a two-and-a-half-year period (Naidoo & Kasiram, 2006). More recently an internal UKZN student support services policy document reported 631 cases of unintended pregnancies and 153 cases of termination of pregnancies across the four UKZN colleges during a 16-month period, January 2014 – April 2015 (Stephens, 2017). These figures were obtained from UKZN Campus Health Services and from the UKZN AIDS Programme but it is unclear whether there was overlap in students making use of both services. Thus, while

significant, these figures cannot be reported as a percentage of the total student population. While it is difficult to establish precisely how many student mothers are enrolled in higher education nationally, it is clear that they constitute a sizeable proportion of the student body and their needs deserve to be better understood in order to facilitate retention.

## **2.1 Reasons for unplanned pregnancy**

While there have been numerous HIV/AIDS prevention campaigns aimed at students in South African universities, sexual risk behaviour continues to be an issue (Lengwe, 2009; Moodley, 2007; Mulwo, 2009). Research suggests that students at South African universities engage in sexual risk taking for a variety of reasons including freedom from parental supervision, trying out various sexual partners as potential marriage partners, and a sense of invincibility that HIV/AIDS (and pregnancy) will not happen to them (Mutinta et al., 2012).

Central to understanding sexual risk behaviour which can lead to an unintended pregnancy are gendered sexual roles and ideology. South African research has shown that some young women are positioned as needing to safeguard themselves from pregnancy and are accountable if they fall pregnant (Mkhwanazi, 2010) but are considered to be brazen if they suggest using condoms (Varga, 2003). Men on the other hand use sexual behaviour to attain respectability. Men are positioned as needing frequent sex which legitimates numerous partners and coercion of sex from girlfriends (Mutinta & Govender, 2012). Men are also expected to be dominant and to hold decision-making power in relationships thus men would usually regulate when and how sex would occur and whether contraception should be used (Wood & Jewkes, 1997). These double standards in the expectations of male and female behaviour causes unequal power differentials in relationships (Varga, 2003). Women appear to have agency during the initial stages of a relationship but once in a relationship, men expect acquiescence to their demands (Jewkes & Morrell, 2012).

Within an established relationship, the need to prove one's affection to one's partner and fear of desertion by one's lover (Parekh & de la Rey, 1997) can contribute to students not using contraception. Further, condoms may not be used because they are considered to reduce sexual pleasure and male partners desire unprotected sex thus pregnancy can become a risk (Mutinta et al., 2012). Moreover, unprotected sex within a regular relationship is an attestation of faithfulness and trust which heightens female enjoyment and provides a source of self-esteem from being in what is perceived as a loyal and faithful relationship (Varga, 1997). Within such a relationship, female partners are afraid that requesting condom use



might be construed as proof of their being unfaithful as well as lack of trust in the relationship (Parekh & de la Rey, 1997).

This review will briefly summarise previous research on the experience of student mothers making reference to teenage mothers where relevant. It will detail their challenges and will highlight relevant theory relating to these challenges. It will then explore the existing support available to student mothers including institutional support. Finally, it will discuss research on the benefits of peer support groups in supporting student mothers and will conclude by considering the interaction of group participation with the concept of empowerment.

## **2.2 Student mothers**

Research shows that education is a means to social mobility. A degree affords student mothers access to better employment prospects and increased wages (Lee, 2007). Research in America shows that completion of higher education elevates the prospects of self-sufficiency, decreases the amount of time poor women spend on social benefits and reduces poverty by half (Duquaine-Watson, 2007). The majority of the student mothers in the studies reviewed were single (Brown & Amankwaa, 2007; Corfe, 2015; Duquaine-Watson; Funiba, 2011; Longhurst et al., 2012; Manalang et al., 2015; Taukeni, 2014; Yakaboski, 2010) and many were women of colour. Research demonstrates the racial feminisation of poverty where women, especially those of colour, are usually the only breadwinner in the family and will therefore be burdened with financial and social pressure (Yakaboski, 2010). Funiba (2011) argues that this is especially pertinent in South Africa given its history of racial capitalism where poverty is largely experienced by black African people. Access to, and completion of higher education is thus crucial for student mothers and their children to escape the poverty cycle and to redress inequity (Yakaboski, 2010).

### **2.2.1 Challenges for student mothers**

While there are no specific statistics for parenting students at South African universities, there are figures from abroad. The American Council on Education (2005) reported that 16% of all undergraduate female students are single parents. A longitudinal study begun in 1995/1996 found that 47 % of the single parent undergraduate population aimed for a bachelors' degree but that by 2001 only 7% of these had succeeded (National Centre for Educational Statistics, 2002), thus student mothers are not progressing at the same rate as their childless peers. Pinilla and Munoz (2005) in writing about student mothers in Venezuela, also found that it takes twice as long for student mothers to complete their

degrees and that many do not graduate. I turn next to look at some of the reasons for attrition amongst student mothers.

#### **2.2.1.1 Balancing roles**

Many student mothers position their child as a blessing (Brown & Amakwaa, 2007; Manalang, et al., 2015) and report that they return to higher education with increased motivation to succeed for the sake of a “bright future” for their child (Manalang et al., 2015). They however, have a difficult time achieving this. This motivation to succeed can decline with conflicting obligations and external duties (Yakaboski, 2010). For students who live at the university, away from their children, coping with the demands of academia can be more manageable but comes with the pain of missing their child and being deprived of motherhood (Corfe, 2015; Kubeka, 2016; Manalang, et al., 2015; Taukeni, 2014; van der Riet, Corfe & Kubeka, 2019). For student mothers who live with their children, their greatest challenge is juggling motherhood with studying (Brown & Nichols, 2012; Corfe, 2015; Kubeka, 2016; Funiba, 2011; Longhurst et al., 2012; van der Riet et al., 2019). Estes (2011) highlights that both roles are time-consuming, emotionally demanding and labour intensive and while highly valued separately are incompatible together. Student mothers desperately try to fulfil the requirements of both their mothering and student roles often at the cost of their own physical and mental health (Funiba, 2011; Longhurst et al., 2012).

#### **2.2.1.2 Intensive mothering**

Student mothers’ challenges in balancing motherhood with student hood are further exacerbated by their subscription to an ideology of “intensive mothering” (Corfe, 2015). While there are competing ideologies about motherhood “intensive mothering” coined by Hays (1996) has been the principal ideal of Western motherhood since the 20<sup>th</sup> century. It is defined by Hays (1996, p. 46) as an “expert-guided, and child-centred ... emotionally absorbing, labour intensive and financially expensive” undertaking where the mother takes responsibility for developing and nurturing the child and where the needs of the child are prioritised over those of the mother. According to this ideology, mothers ought to be the primary caregivers and their offspring should be their foremost concern, before work or other interests (Estes, 2011). Moreover, this is viewed as the natural consequence of biologically assigned gender differences and is considered evidence of the female quality of “maternal instinct” (Smart, 2013, p 37). There is thus the presumption that women are intrinsically endowed with empathy, responsiveness, understanding and other attributes of good

caregivers (Stearney, 1994, cited in Lynch, 2008). Women are also expected to find gratification and contentment in this role (Bassin et al, 1994, cited in Kruger, 2006).

While this is a predominantly Western, middle class ideal (Mayer, 2012), Akujobi (2011) argues that motherhood, as essentialised in African literature, is also understood in African culture as innate feelings and behaviours that are activated by gestation and birth and where a woman transitions from being an independent entity to being bound to her child. In Africa, the role of mother is considered as ordained by God and thus as sacred (Akujobi, 2011). Turrittin (2002, cited in Barnes, 2013) also highlights that children in Africa are viewed as a blessing and that motherhood is understood as a special favour bestowed on the woman by God. Motherhood in African literature is also characterised by nurturance and self-sacrifice (Akujobi, 2011). Walker (1995) in examining themes of motherhood in South African history, draws attention to the way the dominant Euro-Christian discourse of the ideal mother who was the contented core of the family (Walker, 1995) was disseminated by churches and missionaries and then intermingled with existing African constructions of motherhood. Media representations of the good mother are also a powerful means by which this Western ideology would further take root in Africa to meld with traditional conceptions of motherhood. Lynch (2005) discusses how the portrayal of the ideal mother in American magazines became increasingly child-centred and expert guided over time. A similar process could have occurred in South African media images of motherhood, which would impact on student mothers' understanding and practice of motherhood.

Attachment theory (Bowlby, 1958; Ainsworth, 1969, cited in Karen, 1994), as well as other psychodynamic theories such as Kohut's Self Psychology, Klein's Object Relations Theory and Winnicott's "Good Enough Mother" have been the basis for the intensive mothering ideology (Kruger, 2006). These theories promote a dyadic relationship between mother and child, lay emphasis on a bond or strong attachment between mother and child, advocate the necessity of sensitive and immediate response and highlight the damaging psychological consequences of inadequate mothering (St Claire, 2004). This ideology of "the good mother" constructs a norm, against which women, society and other mothers judge themselves and each other (Kruger, 2006). This norm is a socially constructed myth which is impossible to accomplish (Walls, 2007) and trying to achieve it can result in a sense of failure and despair (Frizelle & Kell, 2010). Smart (2013) highlights the cultural construction of motherhood and describes how it is bound to a particular historical time and place, the cultural ideals of which become the base of dominant, normative restrictions. Braverman (1989, cited in Kruger,

2006) highlights that the role of mothering is bound to social and economic circumstances and that whatever the childcare arrangements in each society are, they are seen as normal and natural.

### **2.2.1.3 Maternal identity**

Cultural norms construct motherhood as a fundamental part of being a woman and as the foundation of her womanly identity (Gillespie, 2003). In understanding identity, it is useful to distinguish between different types of identity. Stets and Burke (2000) explain identity by distinguishing between social identity theory, identity theory and personal identity. Social identity is formed by self-categorisation into a particular social group with similar others with whom one identifies, for example the broad category of mother (Stets & Burke, 2000). These social groups or categories are characteristic of a structured society and are defined by their comparison with other, differing categories (for example father, child, teacher) and it is from these that people gain a sense of self (Stets & Burke, 2000). People belonging to a particular social group are likely to synchronise their behaviour with that of the group and to adopt the culture of the group (Ethier & Deaux, 1994). The group identity is then shaped by the dominant society and particular political, social and religious ideologies about motherhood (for example, intensive mothering ideology) would be communicated to the individual via this social identity (Walls, 2007). Social identities are thus entrenched in political and social conditions (Howard, 2000).

Identity is conceptualised as the categorisation of the self as holding a specific role, for example “mother” and is a consolidation into the self of the values and responsibilities that role entails (Thoits, 1986). These responsibilities and values attached to the role form standards that direct behaviour (Burke & Reitzes, 1981). Thus, women’s individual construction of their maternal identities (Walker, 1995) would be influenced by discourses (ideologies about what behaviours define a good mother, e.g. intensive mothering) about motherhood by virtue of them holding the social identity of mothers, which would inform mothers’ carrying out of their motherhood roles, i.e. the practice of motherhood (Walker, 1995). An identity is comprised of numerous role identities which are organised hierarchically depending on the salience of the role to the self, thus a mother could simultaneously hold a student identity which might be more or less important to her (Howard, 2000). Commitment to an identity is determined by both the number of people to whom one is connected through an identity and by the depth and quality of these relationships (Burke &

Reitzes, 1991). The more people one is connected to through holding an identity and the stronger these ties are, the more probable it is that the identity will be actuated in a particular context (Stets & Burke, 2000). In social identity theory, the person identity is the bottom level of the self-category (Brewer, 1991) and adds distinctive, individual features to social identities which results in members being motivated by their own goals and expressing their belonging to social groups in individual ways (Stets & Burke, 2000).

Frizelle and Kell (2010) explain that motherhood can engulf individual identities where, as a mother is required to focus on her child's needs, she can experience a loss of self while at the same time coming to recognise herself as belonging to a broader social group, that of mothers. Being part of the group identity renders this social category prominent and her individual identity less recognisable (Brewer, 1991). Frizelle and Kell (2010) suggest that this loss of individual self is actually the product of negotiating a rearrangement of identities where the constant needs of the child invoke the mother identity more frequently than other identities.

#### **2.2.1.4 Conflicting identities**

For student mothers, parent and student identities and the norms and ideals they embody come into conflict (Estes, 2011). This can result in an identity dilemma for student mothers where the valued identities of the self are lost (Charmaz, 1994). This is comparable to the identity dilemma which numerous working mothers face. Baxter and Montgomery (1996, cited in Johnston & Swanson, 2006) suggest various solutions for resolving the tensions of opposing roles. Amongst these solutions are *selection* where a mother might remain at university and reject her mother identity; *segmentation*, where work and mothering identities are kept separate; and *reframing*, where the mother refashions her understanding of the intensive mothering expectations or student expectations in a manner that no longer causes tension (Baxter & Montgomery, 1996, cited in Johnston & Swanson, 2006).

Graduate mothers at a North American university used segmentation to manage their competing student and mothering identities, hiding their mother identity whilst at university and their student identity whilst outside of academia (Lynch, 2008). They were thereby able to maintain a position of good student and good mother. Mothers in other studies have also used reframing to cope with the role conflict of both identities. Participants in Johnson and Swanson's (2006) study reframed their construction of intensive mothering expectations to accommodate these expectations with their occupations. Thus, they constructed their work

choices as benefiting their children in various ways. Similarly, working mothers in an internet discussion board also reframed the expectations of intensive mothering to fit their worker identities (Mayer, 2012). This study was interesting because the working mothers highlighted that the personal fulfilment they obtained from working, allowed them to be better mothers thus although they still kept the child at the core of their focus, they also evidenced a concern for the self which is a shift away from the self-sacrificing intensive mother (Mayer, 2012). Estes's (2011) study found that student parents also used reframing by joining their student and parent identities to position higher education as advantageous to their children and their children as similarly valuable to their studies. Thus, identity is constantly shaped and reshaped by discussions about what being a mother entails. Mothers acknowledge, reflect on, act on and sometimes resist societal expectations of good mothering and in doing this they are constructing both their own maternal identities and in a wider sense, contributing to societal discourses about the meaning of motherhood (Mayer, 2012).

#### **2.2.1.5 Financial stress**

Finances are a general source of stress to student mothers (Duquaine-Watson, 2007; Longhurst et al., 2012). Raising a child brings expenses that the average student would not have to bear (Duquaine-Watson, 2007; Funiba, 2011). In addition to this having a child means sourcing and funding accommodation off-campus because most university residences do not cater for students with children (Brown & Nichols, 2012; Funiba, 2011; van den Berg & Mamhute, 2013). Accommodation is expensive and involves additional travelling time and expense for students. Student mothers also have challenges with finding affordable childcare for their children while they attend lectures (Brown & Amankwaa, 2007; Brown & Nichols, 2012; Duquaine-Watson, 2007). As childcare is costly, student mothers who do not have financial support from their partners have to engage in paid work outside their studies in order to be able to afford it (Lynch, 2008). This leaves them with even less time to be able to complete university related work.

#### **2.2.1.6 Stigma**

Student mothers experience stigma (Brown & Amankwaa, 2007; Brown & Nichols, 2012; Corfe, 2015; Duquaine-Watson, 2007; Longhurst et al., 2012; Manalang et al, 2015; Naidoo & Kasiram, 2006; Taukeni, 2014; van der Riet et al., 2019). Stigma is experienced from the community where for example student mothers at a Philippines university reported feeling scrutinized and judged as “flirts” by people because they had had a child at a young age

(Manalang et al., 2015). Discrimination is also experienced from peers, where at a university in Namibia, student mothers reported friends not wanting to walk with them and boys in their group laughing at them after they had become pregnant (Taukeni, 2014). Student mothers at a North American community college reported being stigmatised by peers because of cultural stereotypes about single mothers on welfare (Duquaine-Watson, 2007).

Discrimination can also be experienced from lecturers. Student mothers in Zimbabwe, at a teacher training college, describe how lecturers would bully and scorn them when their mothering duties interfered with their school work (van den Berg & Mamhute, 2012). Some lecturers position student mothers as choosing to have a child and as being responsible for being unmarried and not having support (Duquaine-Watson, 2007; van den Berg & Mamhute, 2013). Student motherhood is thus decontextualised. Student mothers are assumed to be independent beings who have made poor decisions. Understanding of choice as being unrestrained from context can lead to repudiation rather than an examination of systemic disadvantage, which can result in a lack of empathy (Baker, 2009). Even when context is taken into account, mothers are urged to take full responsibility for their poor choices (Ellis-Sloan, 2014). This lack of consideration of context is also evident in teenage pregnancy research. In a South African study where teachers, school principals and parenting learners were interviewed, teachers assumed pregnancies were a sign of sexual delinquency even when they were conscious that they could be related to sexual abuse, impoverishment and other sources of disadvantage (Shefer, Bhana & Morrell, 2013).

Traditionally stigma has been described as a characteristic that is deeply disgraceful to the individual who possesses it and which reduces that person in the eyes of others resulting in a spoiled identity for the stigmatised person (Goffman, 1963). It results from a fear of “symbolic contagion” in which others feel that the person possessing the discrediting attribute is a risk to the health and well-being of others as well as to the status quo (Campbell, Foulis, Maimane & Sibaya, 2005), and it is applied by society through rules and sanctions.

Goffman ‘s (1963) concept of stigma arising from bodily abominations or physical deformities is particularly relevant to student mothers as the pregnancy (and motherhood) are visible signs (bodily abominations) of unprotected sexual activity (Whitehead, 2001). This evidence of sexual intercourse incurs stigma because youthful, unmarried, sexual activity is considered improper (Ellis-Sloan, 2014). Macleod (2003) refers to the “conjugalisation of reproduction” where children born into a marriage between opposite sex partners is regarded

as normal and beneficial whereas alternative family forms that disrupt these parent or children axes are pathologized (Macleod, 2003). Thus, child birth is only sanctioned within a matrimonial coalition (Macleod, 2003). Phoenix and Wollett's (1991, cited in Macleod, 2003, p. 24) concept of "normalised absence/pathologized presence" is also useful in understanding the stigmatisation of single mothers. Macleod (2003) explains how discourses of pathology are dependent on discourses of normality and how they constitute the missing trace "defining and interpenetrating the pathological presence" (Macleod, 2003, p. 25). Thus, the nuclear family becomes the normalised absence and single motherhood the pathologized presence with all its incumbent connotations of parental and social failings (Macleod, 2003).

#### **2.2.1.6.1 Stigma in relation to discourse**

Foucault (1977) was fascinated by the connection between discourse, power and knowledge. He described discourses as ways of speaking about an issue which then create a depiction of the issue and through being constructed and reconstructed, come to be accepted as the truth. Discourses are fluid and are dependent on a particular time and place (Carabine, 2001). They are also opportunistic in that they draw on other discourses about an issue while also hooking into other dominant discourses, for example about motherhood, the family or morality to produce new ways of envisioning the topic (Carabine, 2001). Foucault (1977) understood discourses to be productive in that they have effects or power outcomes. Thus, if we examine the portrayal of young, single mothers in the media abroad and also in South Africa, to a certain extent, they are constructed as uneducated, lazy and welfare dependant (Haleman, 2004). These persistent constructions interact with other discourses about single mothers and also latch onto discourses which position illegitimate births as responsible for a variety of social issues. These constructions result from dominant discourses about youth, motherhood and the family which work together with religious, moral and cultural ideologies (Shefer, Bhana & Morrell, 2013) to create a version of young, single motherhood which is widely accepted to be true. The young, single mother, through her sexual and reproductive rank is seen as promoting the deterioration of society and is thus viewed as dangerous to the status quo and as both an indication of and a source of societal issues (Shefer, Bhana & Morrell, 2013). Discourses thus contribute to the stigmatisation of the young, single mother who becomes constructed as the "pathologized other" (Macleod, 2001) which then warrants peers and members of her community excluding and "othering" her. Discourses also have power outcomes which, in America have resulted in welfare reforms which set a maximum life-time



limit on welfare eligibility and have posited a work-first approach to accessing benefits (Duquaine-Watson, 2007).

#### **2.2.1.6.2 Stigma in relation to control**

Stigma is related to issues of power and domination in that it causes some groups to be depreciated and others to be valued (Parker & Aggleton, 2003). Foucault's work (1977) explains that power hierarchies are policed by both overt (police force and legal system) and covert systems (internal psychological policing) (Campbell, Nair & Maimane, 2006). Stigma would be a form of covert policing where those who violate power relations of gender or generation are disciplined and penalised (Campbell, Foulis, Maimane & Sibaya, 2005). The stigmatisation of young, unmarried mothers would thus serve as an affirmation of the power of public institutions, like the church or traditional leadership, whose moral power depends on their ability to control the sexuality of women and youth, thereby maintaining patriarchal systems (Campbell et al., 2005).

Parker and Aggleton (2003) explain that the stigmatised often accept and internalise stigma as they are exposed to such a powerful structure of cooperating hegemonic systems which legitimates inequality, thus their ability to withstand or question these forces is restricted as they are woven into every aspect of social life. Such is this internalisation of stigma that single mothers expect to be judged even in situations where this is not forthcoming (Macvarish, 2010). Expectation of stigma has a significant impact and can affect the way a young mother feels about herself.

#### **2.2.1.7 Guilt and shame**

Having transgressed societal rules about child bearing, student mothers are thus treated by others in a way which causes them to feel shame and guilt (Longhurst et al., 2012). Longhurst et al. (2012) explain that student mothers feel guilt for a variety of reasons such as their internalisation of "intensive mothering" for not providing enough to their children financially, for taking time away from their children by studying and for doing something wrong in the eyes of others. In developing countries where some societies are impoverished and have high levels of unemployment, supporting a child in university is often a financial burden to the family. These sacrifices are considered a worthwhile investment because a well-educated child can ensure an improved standard of living for the entire family (Parekh & de la Rey, 1997). A daughter who misuses this opportunity by falling pregnant at university would thus bring great disappointment and shame to her family (Naidoo & Kasiram, 2006). This could

result in her feeling shame and guilt for her transgression (Corfe, 2015). Guilt motivates one to make amends for one's behaviour especially if the relationship is intimate (Wallace & Sadalla, 1966, cited in Baumeister, Stillwell & Heatherton, 1994).

Shame, however, materialises when one attends to other people's opinions of oneself and usually occurs when the wrongdoing is public, for example, a societal or religious ethical transgression. Shame often generates feelings of impotence and worthlessness (Tangney et al., 2011) and induces the person to engage in behaviours to avoid detection and the judgement of others (Gilbert, 2000). Fortenberry, McFarlane, Bleakley et al. (2002) suggest that shame is a response to stigma where, having accepted the stigma, the person participates in self-stigmatisation (or shame). Shame can cause some student mothers to conceal their maternal status in order to blend in and avoid detection (Duquaine-Watson, 2007).

#### **2.2.1.7.1 Shame as productive**

Probyn (2005, cited in Longhurst et al., 2012) states that shame can be productive as it causes us to re-evaluate our behaviour and identity and to rethink who we want to be. It can often then initiate a new way of existence. In Longhurst et al.'s (2012) study amongst single mothers at two universities in New Zealand, the shame of being a lone mother had caused participants to examine themselves and their lives and had thereby triggered enrolment in tertiary education. Participants in Longhurst et al.'s (2012) study reported feeling monitored by certain parts of society and were thus motivated to succeed at university to "make good" (Longhurst et al., 2012, p. 307). Participants in other studies also reported returning to university to prove to people that they could still be successful after having a child (Corfe, 2015; Manalang et al., 2015). A university degree thus, while it leads to increased job prospects and earning capacity, also increases student mothers' self-esteem (Duquaine-Watson, 2007; Manalang et al., 2015), is an opportunity for personal growth (Yakaboski, 2010) and success at university counters feelings of guilt (Longhurst et al., 2012). Higher education often makes family members hold student mothers in higher esteem and is a positive example to their children (Duquaine-Watson, 2007; Yakaboski, 2010). Success at university (and the improved access to employment that this leads to) thus becomes the reparation to society, to their child and to their families (Corfe, 2015) which can dilute the stigma of being a single mother. This is supported by a study of three generations of women living in Cape Town, where it was discussed that single-motherhood is less stigmatised when

the mother has the financial means to take care of her own child and the child does not become a burden to her family (Moore, 2013).

### **2.3 Support**

Central to studies of both teenage and student pregnancy is the gendered nature of childcare where responsibility for the child rests primarily with the mother (Brown & Amankwaa, 2007; Manalang et al., 2015; Van der Riet et al., 2019; Willan, 2013). Having a child can thus have dire implications for her education and life chances unless she has support (Brown & Awakwaa, 2007; Funiba, 2011; Pinilla & Munoz, 2005; Taukeni, 2004; Van den Berg & Mamhute, 2013; Willan, 2013). Families who can finance childcare or provide it themselves facilitate the return of the young mother to her studies (Corfe, 2015; Kubeka, 2016; Willan, 2013). When families cannot supply childcare, young mothers are forced to abandon their studies and to look after their babies themselves. Grant and Hallman (2008) report that only one third of South African teenage girls stay in school during their pregnancies and return following childbirth and that the majority of the girls who return are in Grade 12. Jewkes, Morrell and Christofides (2009) describe how in black African communities, girls often experience strong support with childcare from their mothers. In some cases, particularly where student mothers live far away from university, the child will live at home with the student's mother so that the young woman can live on campus and continue with her studies. While this is a common South African practice, it is also culturally normative in other countries. In a North American study, South Asian Indian immigrants send their young offspring back to India to be brought up by their grandparents. The parental motivation for this is amongst other things, parents' demanding occupations and pursuing higher education (Srivastava & de Guzman, 2017).

While support with childcare is crucial in order for young mothers to return to their studies, it can sometimes compel the young mother to become the compliant and obedient daughter because of the benevolence her family extends to her (Parekh & de la Rey, 1997). This positioning effectively prevents young mothers from expressing distress, regret or anger at their circumstances. As childcare is a favour, young mothers also have no control over it and thus for those who live with their children, assistance with childcare is usually only provided for the duration the young mother is away from the home. Once she returns home, her child and the incumbent household chores become her responsibility (Parekh & de la Rey, 1997).

Finding time to do homework or assignments at home can therefore be very challenging (Chigona & Chetty, 2008).

Support is also not without conflict. In the same South African study with teenage mothers (Parekh & de la Rey, 1997) some participants reported feeling that their own mothers usurped their maternal role to the detriment of their bond with their child. Similarly, in an American study, teenage mothers experienced their parents as interfering and as taking over their role particularly with regards to the expectation of adhering to parental advice and beliefs and to differences in opinions about child rearing methods (Richardson, Barbour & Bubenzer, 1991).

### **2.3.1 Emotional support**

Families can also provide high levels of emotional support. In a study of teenage mothers who returned to school in the Witwaterand, South Africa, support from the teenagers' mothers was described like a "shield" that cushioned young mothers from the cruelty of the world (Chohan, 2010, p. 74). Similarly, amongst student mothers in Namibia, having a supportive family buffered the young mothers from stigma (Taukeni, 2014). However, this is not always the case and some families are reluctant to support their daughters emotionally due to shame and fear of judgement from the community (Chigona & Chetty, 2008). Similarly, I found that while some student mothers were financially supported, they were punished by their mothers for their transgression and were denied support in tending to their babies as a lesson not to have a child out of wedlock again (Corfe, 2015).

### **2.3.2 Support from peers**

Support can also come from peers. Zimbabwean student mothers (van den Berg & Mamhute, 2013) reported that consideration and support from peers in the form of lecture notes, flexible group meetings and discussions about course content was crucial for passing their exams. Similarly, student mothers at the University of KwaZulu-Natal (Corfe, 2015; Kubeka, 2016) commented that attending study groups with peers helped with exam preparation. Some studies report that student mothers experience a lack of connection with peers which can cause them to feel isolated (Brown & Amankwaa, 2007; Brown & Nichols, 2012; Duquaine-Watson, 2007; Funiba, 2011; Longhurst et al., 2012; Taukeni, 2014; Yakaboski, 2010). This, together with lack of free time, can lead to a limited social life (Brown & Amankwaa, 2007). Being isolated can cut student mothers off from peer support which can be a vital resource in

negotiating the academic curriculum (Corfe, 2015; Funiba, 2011; van den Berg & Mamhute, 2013) and in buffering them from loneliness and depression (Funiba, 2011).

### **2.3.3 Support from fathers**

While nearly half of South African fathers do not interact with their children on a daily basis (Richter & Morrell, 2006), studies involving student and teenage mothers have found that there are young fathers who have contact with and provide some form of support for their offspring (Chohan, 2010; Corfe, 2015; Naidoo & Kasiram, 2006; Parekh & de la Rey, 1997; Willan, 2013). Data from Wave 1 (2008) and Wave 2 (2010) of the National Income Dynamic Study (NIDS) indicate that most children (84 %) in South Africa have a living father but only about 40 % of these fathers provide financial support for their children. Eddy, Thomson-de-Boor and Mphaka (2013) highlight that fathers who regularly interact with their children are more likely to support them financially. Mkhize (2006) highlights that fatherhood, over time, has become constructed as a man's capacity to financially support his family and that with elevated South African unemployment rates at nearly 30% (Richter, Chikovore & Makusha, 2010) many fathers are unable to fulfil this role. Thus, only men with financial resources are seen as good fathers (Lesejane, 2006).

With reference to a study conducted in KwaZulu-Natal, South Africa, Hunter (2006) explains that the fathering of a child increases the status of a young man because it is a symbol of sexual virility. He comments that in Zulu custom impregnating a girlfriend often requires the payment of *inhlawulo* (damages for impregnation) by the man to the woman's family, particularly in rural areas (Hunter, 2006). In Varga's study with young people in KwaZulu-Natal, acknowledgement of paternity bestows social validity upon a birth and mediates the respectability of the young mother in the eyes of the community, without which acknowledgement, she can be seen as a loose woman (Varga, 2003). Acceptance of paternity rests with the man and his family and is frequently denied because of the financial implications of accepting responsibility (Varga, 2003). Even when a man accepts paternity, he is unlikely to be able to afford *inhlawulo* (damages) or *ilobolo* (bride wealth) (Hunter, 2006). Not fulfilling his social role of fatherhood in this way can lead to the woman's family disregarding the father of the child (Hunter, 2006). This can result in the father being excluded from his child's life and can contribute to the breakdown of the relationship between the young mother and her partner thereby cutting her off from his support. Richter et al. (2011) suggest that women who enjoy supportive relationships with men are less

vulnerable to stress and mental health issues and more likely to gain pleasure from their mother roles. Alternatively, as experienced by some participants in Funiba's (2011) study, rejection and stress in intimate relationships can cause depression and suicidal ideation in young mothers. Roy (2008) suggests that, due to more women entering the workforce, there are new ideals for fathers. This ideology calls for fathers to be more involved in parenting activities, particularly in caregiving (Morrell, Posel & Devey, 2003). Many women now welcome paternal participation in the lives of their children's lives regardless of marital status (Willan, 2013).

## **2.4 The institutional context**

Very little has been written about accommodating pregnant and parenting students in higher education in South Africa. This section will thus rely predominantly on literature from abroad and will relate it to the South African context. Brown and Nichols (2012) in writing about North American universities, draw attention to the expanding numbers of pregnant and parenting students but highlight that these changes in enrolment have not been met by revisions in resource and programme allocation to serve their needs. The National Centre for Education Studies in America (2002) predicts that non-traditional students will comprise 35-38 % of the undergraduate population in the next 15 years with pregnant and parenting students comprising over half of non-traditional students. This trend can also be seen in developing countries. Pinilla and Munoz (2005) in writing about universities in Venezuela explain that with the transfiguration of universities from elite to a mass models, new social groups have been provided with the opportunity to access higher education but that these groups, for example student mothers, are under-represented and marginalised. The Council on Higher Education in South Africa (2016) reports statistics for race, gender, age and nationality of enrolled students but does not document whether students have dependents. While it is thus not possible to report or predict the number of parenting students enrolled in South African universities, it is likely, given the increased opportunities for enrolment and funding, that similar trends will be seen in South Africa. Springer et al. (2009) in writing about North American universities, explain that there is a structural lag, where policies and programmes have not yet caught up to the needs and realities of parenting students. Mabelebele (2015) similarly highlights that with the massification of universities in South Africa, student enrolment exceeds capacity and universities lack the resources to cater for their diverse student populations. There is an urgent and increasing demand in South African universities for access to free higher education, to residential accommodation and to financial

aid (Council on Higher Education, 2016). Barnes (2013) in speaking of South African higher education argues that it has been designed for traditional young, single, male, childless students and thus has also not transformed to accommodate its changed population. Duquaine-Watson (2007) highlights the well-publicized sex discrimination at North American universities where men are still treated differently to women. Historically, higher education has been an environment which has tolerated women but where they have not been fully accepted (Yakaboski, 2010). Writing about contemporary South Africa, Barnes (2013) highlights the continuing institutional tendency to privilege masculine production of knowledge over other pathways of knowing. Springer et al. (2009) discuss the devalued and hidden nature of social reproduction on North American campuses where single mothers are rendered unnoticed and invisible (Duquaine-Watson, 2007). Studies in South Africa have reported similar findings (Barnes, 2013; Corfe, 2015). Yakaboski (2010) argues that instead of student mothers having to apologise for their diverse identities or instead of expecting non-traditional students to morph themselves into the young, unattached, childless, conventional student, tertiary education should redesign itself into a more incorporating environment (Yakaboski, 2010). She highlights the lack of scholarship on single parent students in North American universities and interprets this as social resistance to acceptance and prioritising of non-traditional students (Yakaboski, 2010). She further argues that a critical look at the needs of student mothers would challenge the culture of traditional male dominance at universities by merging private and public realms (Yakaboski, 2010). Bennett and Reddy (2007) in writing of South African higher education also highlight that South African universities have not readily addressed topics related to gender and sexuality.

Duquaine-Watson (2007) writing about North American universities highlights that academic success is conditional upon the extent to which students feel supported, valued and included as members of the institutions which they attend. Springer et al. (2009) concur and stress the link between North American graduate school success and supportive policies. Research shows that single mothers in North American universities (Brown & Amankwaa, 2007; Brown & Nichols, 2012; Duquaine-Watson, 2007; Yakaboski, 2010); in universities in New Zealand (Longhurst et al., 2012); at a university in Namibia (Taukeni, 2014) and in South African universities (Corfe, 2015; Funiba, 2011) do not feel supported on campus. In many North American institutions, there are continual messages via policies, the behaviour and attitudes of faculty and other students that student mothers are abnormal and even unwelcome (Springer et al., 2009). It is possible that this is also the case in South African universities.

While there is a historic precedent in both North American (Springer et al., 2009) and South African universities of adapting the academic environment to accommodate students with varying needs, there are few or no specific services or programmes for student mothers in the North American (Springer et al., 2009) or South African context (Corfe, 2015). Neglect of their needs creates an institutional atmosphere in which single mothers and their needs are marginalised (Duquaine-Watson, 2007). There is the assumption that everyone is just a student without external responsibilities and thus can be treated the same way.

#### **2.4.1 Supporting student mothers**

Research amongst student mothers at North American universities (Brown & Amankwaa, 2007; Brown & Nichols, 2012; Duquaine-Watson, 2007; Yakaboski, 2010); at universities in New Zealand (Longhurst et al.); at a university in the Philippines (Manalang, 2015) and at South African universities (Corfe, 2015; Kubeka, 2016; Funiba, 2011) argues that specific programmes need to be instituted to support student mothers in order to improve their experience in higher education and to aid retention. Yakaboski (2010) writing in the North American context proposes that the needs of single mothers are identified and that policies are crafted around these requirements. Duquaine-Watson in the North American context (2007) argues that there should be an affirmation of the existence of student mothers on campus in order to transform the institutional climate and to save guard them from unfair treatment. This might also be relevant in South African universities. Writing about the North American context, Brown and Nichols (2012) advocate for a uniform policy addressing pregnant and parenting students in class and covering such issues as the extension of financial aid and “enrolled status” for the maternity period. Springer et al. (2009) also argue for an official policy to support parenting students and further suggest an extension of academic deadlines during the maternity period, where relevant (Springer et al., 2009). This could also serve as an incentive to student mothers to complete their studies (Brown & Nichols, 2012). These ideas might also be beneficial to student mothers in the South African context. South African research (Barnes, 2013; Corfe, 2015) has found that young mothers often return to university a few days or weeks after having a child because they are scared of jeopardising their degrees by missing course content, tests, practicals or assignments. The same research found that early return to university, particularly after caesarean section, resulted in health complications for these students (Barnes, 2013; Corfe, 2015). Duquaine-Watson (2007) writing about American universities suggests that a formal attendance policy be included which permits students to make up work without penalty which they might have missed



related to caregiving duties. Similarly, North American researchers suggest that flexible course attendance where some lectures are repeated at different times or are available online would be useful for students who have to miss class due to child related issues (Brown & Nichols, 2012; Yakaboski, 2010). These ideas might also be applicable in South African universities.

North American researchers argue that there is also a need for structural support like family housing (Brown & Nichols, 2012; Yakaboski, 2010); a flexible, high-quality, subsidised creche which also functions as a drop-off centre (Brown & Nichols, 2012) as well as lactation facilities (Brown & Nichols, 2012). South African research has also recommended family housing (Corfe, 2015; Funiba, 2011) and a subsidised creche (Corfe, 2015). North American researchers suggest that not providing such facilities can convey the message to student mothers that campus is not the place for mothers and that they must choose between these roles (Springer et al., 2009). Further, North American researchers recommend that available services should be advertised to students and that faculty members should be aware of their existence (Brown & Nichols, 2012; Springer et al., 2009). This would also be an important initiative in the South African context.

Research in North America (Brown & Amankwaa, 2007; Brown & Nichols, 2012); in Zimbabwe (van den Berg & Mamhute, 2013) and in South Africa (Funiba, 2011) highlights that lecturers need to be sensitized to the experience of student mothers and to be aware of the impact of their course requirements on student mothers. For example, North American research (Duquaine-Watson, 2007) highlights that group work and field trips can be difficult to manage with childcare and time constraints and can have financial implications for student mothers. It would thus be unfair to penalise student mothers for not attending these and alternative make-up course content should be arranged (Duquaine-Watson, 2007). It is likely that this would be applicable in South African universities as well. Research in North America (Duquaine-Watson, 2007) argues that faculty and staff members should take an active part in fighting stereotypes about and prejudice towards student mothers. Similarly, research in South Africa (Funiba, 2011) suggests that stigma reduction strategies be implemented at universities at both individual and group levels. Studies in North America (Springer et al., 2009); in Namibia (Taukeni, 2014); in Zimbabwe (van den Berg & Mamhute, 2013); and in South Africa (Corfe, 2015; Funiba, 2011; Kubeka, 2016; Naidoo & Kasiram, 2006) recommended a support group for student mothers where they could make sense of their circumstances and which would decrease their isolation.

While some of the North American student mother (Yakaboski, 2010) and South African teenage mother (Parekh & de la Rey, 1997) studies utilised focus groups to collect data and reported increases in social support and decreases in isolation as a result of this, a search of the literature could only find one study of a support group for student mothers in higher education in North America (Bruns, 2004). The support group was organised for seven single, student mothers at a North American university in order to increase their sense of social support with similar others. Bruns (2004) reported positive results and recommended that support groups be incorporated into universities' student support services.

## **2.5 Peer support groups**

Peer support, mutual support or self-help groups have been employed in mental health services for many years (Soloman, 2004). The Society for Community Research and Action (2013, cited in Brown, Tang & Hollman, 2014, p. 2) define self-help groups as “a voluntary, self-determining, and non-profit gathering of people who share a condition or status; members share mutual support and experiential knowledge to improve persons' experiences of the common situation”. A self-help group can thus be understood as people who are facing comparable challenges helping one another by joining together. The premise behind this is that collective wisdom grows through shared experience (Davidson, Pennebaker & Dickerson, 2000).

Stressful circumstances or suffering can elicit strong emotions and thus the desire to talk to others, causing people to join support groups (van Uden-Kraan et al., 2008). Davidson et al. (2000) measured support group participation for 20 disease categories in four large cities and found that support seeking was highest for diseases which were viewed as stigmatising (Davidson et al., 2000). While measurement of the effectiveness of self-help groups is difficult because of its self-selected nature, studies of the effects have generally yielded positive results (Davison et al., 2000). In addition, the sheer number of self-help groups around the world for different conditions including addiction, bereavement, illness and mental health problems are an indication of their success as people vote with their feet. Salzer (2002) outlines five theories which underpin self-help groups: social support, experiential knowledge, helper-therapy principle, social learning theory and social comparison theory.

### **2.5.1 Social support**

The first of these, social support, is described as the network of individuals on whom one can depend and who are willing to contribute to meet one's needs. Studies have demonstrated that

these relationships help cushion people from stress during difficult times. A peer support group offers different types of social supports, for example, emotional support (self-esteem and encouragement), material support (goods, money and services) and information support (advice, guidance, assistance with problem solving) (Salzer, 2002). Participation in a self-help group can expand the number of individuals a participant can rely on for support, thus enhancing a sense of belonging (Soloman, 2004). It also increases the supportive behaviours extended to a person as well as awareness of this support (Salzer, 2002). Many peer support groups are also characterised by warmth and humour which function to maintain group cohesion and prevent members taking themselves too seriously (Ussher, Kirsten, Butow & Sandoval, 2006). Humour can also be an effective coping mechanism when discussing painful issues (Ussher et al., 2006).

Participation in a university-based support group for single student mothers in North America helped create a sense of belonging and community through being with other similar people (Bruns, 2004). Participation alleviated student mothers' sense of isolation and contributed to decreasing their self-reported levels of stress (Bruns, 2004). Participating in a support group with other similar people can also highlight universality, i.e. I am not the only person going through this, thus I am not alone (Yalom, 1995). Teenage mothers in community-based focus groups which functioned as a peer support group in KwaZulu-Natal reported that participation in the group had helped them realise that many of their feelings and experiences were shared by others (de la Rey & Parekh, 1996). They also reported a decreased sense of stigma induced isolation and that participation in the group had provided them with the opportunity to make connections and strong friendships with other teenage mothers (de la Rey & Parekh, 1996). This finding was echoed in a support group for single mothers in Canada (Lipman et al., 2010). In addition, single mothers in the Canadian study described that involvement in the group and engagement with other participants had facilitated their development of inner strength as well as enhancing their self-esteem (Lipman et al., 2010). Enhanced self-esteem results from encouragement and positive feedback from other members as well as from a sense of acceptance and belonging from similar others. Participants in an internet support groups for fibromyalgia, arthritis and breast cancer highlighted the emotional support and sense of belonging that they gained through participation (van Uden-Kraan, et al., 2008). Many participants reported having increased their social network, having made friends through the group and having engaged in face-to-face meetings (van Uden-Kraan et al., 2008). In addition, participants explained that involvement in the support group had

helped them to disclose their illness to others in their social environments (van Uden-Kraan et al., 2008). Finally, members valued being able to talk about their illness which they felt constrained to do in their social environments through fear of boring or worrying others (van Uden-Kraan et al., 2008).

### **2.5.2. Experiential knowledge**

The second theory is experiential knowledge which can be understood as clearly defined information and insight which is gained from living through a particular experience (Brown, Tang & Hollman, 2014). This knowledge tends to be practical and specific to the experience and so can be powerful information when shared with those going through similar challenges (Brown et al., 2014). When this knowledge is shared with others experiencing a similar problem, common themes emerge and solutions become clearer (Soloman, 2004). Salzer (2002) describes this as a more active approach to dealing with difficulties than the submissive approach sometimes elicited by traditional services because it “promotes choice and self-determination that enhance empowerment” (Salzer, 2002, p. 6). Participants in van Uden-Kraan’s et al.’s (2008) online support group study described that they received useful information from other sufferers which was easily understandable and relevant (van Uden-Kraan et al., 2008). Participants also described vicarious learning after hearing about other participants’ experiences which provided them with hope and encouragement (van Uden-Kraan et al., 2008). In addition, when participants discovered that many of them shared similar views about difficult experiences, they undertook political action to petition for a disease to be officially recognised and to advocate for a less painful type of medical examination (van Uden-Kraan et al., 2008).

### **2.5.3 Helping others**

The third theory is the Helper-Therapy Principle (Riessman, 1965) which states that peer-support affords participants the opportunity to benefit themselves from helping others. Skovholt (1974, cited in Davidson, 2004) explained that the helper experiences a sense of accomplishment and often feels that they have gained as much as they have given. In addition, the helper acquires learning that is personalised and gains social approval from those whom they have helped which then enhances self-esteem and places them in a better position to further help others (Skovholt, 1974, cited in Davidson, 2004). The online participants in van Uden-Kraan et al.’s (2008) study stated that one of the main reasons for participation was to try to assist fellow participants through volunteering their individual

experiences. Participants also stated that they experienced an enhanced sense of worth due to the gratitude they got from assisting peers (van Uden-Kraan et al., 2008).

#### **2.5.4 Learning from others**

Social Learning Theory (Bandura, 1977) proposes that changes in behaviour are more likely to occur from interacting with peers because they are judged to be reliable role models as they have experienced similar circumstances. Bandura (1977) states that learning can occur through the observation of others but whether learning occurs or not is dependent on mediational processes. Learning requires the individual to pay attention to the modelled behaviour; to retain and retrieve the behaviour so that it can later be imitated; to have the ability to be able to reproduce the behaviour; and for the individual to be motivated to imitate the modelled behaviour (Bandura, 1977). Bandura (1977) further explains that learning is then intrinsically (pride, satisfaction, sense of accomplishment) or externally (through other people or material rewards) reinforced. Thus, people who are coping well with challenges model effective coping behaviours and as these are qualities that the observer would like to possess, the observer identifies with the model and adopts the observed behaviour, values, beliefs or attitudes of the person whom they are identifying with (Bandura, 1977).

Adoption of modelled behaviour can result in enhanced self-efficacy for other participants. Self-efficacy can then increase optimism which will reinforce positive treatment behaviours (Salzer, 2002). Bandura (1982) defines self-efficacy as the private perception of how effectively one can accomplish the actions necessary to manage possible situations. An individual's perception of self-efficacy can be crucial to how one approaches challenges and thus is directly related to agency. Bandura (1982) explains that those with high self-efficacy will approach challenges with the expectation of success and will be able to display coping behaviours and sustained effort to achieve their goals.

Recently divorced participants in the Canadian support group for single mothers stated that it was reassuring to them to see others who had been divorced for longer coping well and supporting themselves and their families (Lipman et al., 2010). Participants in van Uden-Kraan et al.'s (2008) study mentioned that they had learnt particular coping mechanisms from other participants and were more hopeful about outcomes after reading the accounts of members who they considered role models (van Uden-Kraan et al., 2008). Other participants stated that their membership in the group brought about enhanced self-esteem and this was often after discussion or advice from others (van Uden-Kraan et al., 2008).

Participation also contributed to acceptance of the fibromyalgia, arthritis or breast cancer (van Uden-Kraan et al., 2008). Nakamura and Orth (2005) explain acceptance as a form of accommodative coping which alters the psychological effect of circumstances when it is not possible to control the situation itself. Trying to control emotional experiences has been found to negatively affect emotional functioning, cognition and even the experience of pain (Blackledge & Hayes, 2001). Hayes, Wilson, Gifford, Follette and Strosahl (1996) explain that when people have accepted internal events or situations, they can direct their energy, previously used to avoid or control these situations towards achieving their goals and values. Acceptance because of its ability to influence emotional processes, can thus operate as an emotional regulation function (Thompson, 1990). Active acceptance of a situation over which one has no control is thus adaptive and is associated with positive psychological outcomes (Nakamura & Orth, 2005). In a study of empowerment among Chinese cancer patients, acceptance of the controllability of the disease was listed as one of empowerment processes which resulted in reappraisal of life and increased harmony for participants with themselves and the world (Mok, Martinson & Wong, 2004). Acceptance of an uncontrollable situation can thus give rise to cognitive reappraisal or reframing of the situation which is a form of cognitive change that entails understanding the stressful situation differently and thereby altering its emotional impact (Gross & John, 2003). Reappraisal is a particularly adaptive form of coping in situations where stressors are uncontrollable and the person can only regulate him/herself (Troy, Shallcross & Mauss, 2013). Troy, Wilhelm, Shallcross and Mauss (2010) state that cognitive reappraisal can be an effective way to down regulate negative emotions in the context of high stress and it can thus serve as a protective factor against depression.

### **2.5.5 Social comparison**

The final theory which assists in understanding how peer support groups benefit participants is social comparison theory. This states that people are drawn to those who share comparable diagnoses or circumstances in order to normalise and understand their experiences (Festinger, 1954). Interaction and comparison with people who are coping better than them (i.e. upward comparison) raises efficacy expectations, resulting in optimism that they too have the capacity to succeed in similar activities (Bandura, 1982) and thereby increases the desire to improve further (Salzer, 2002). Interactions with people judged to be worse off than them (i.e. downward comparison) is considered to enhance self-worth by putting in perspective just how difficult the situation could be (Salzer, 2002). Participants in van Uden-Kraan et al.'s

(2008) online support group explained that comparing themselves with others was useful and helped them to feel that they were not crazy or alone. They also engaged in downward comparison which contributed to seeing their own disease in perspective.

Realising that others are worse off can create a sense of gratitude for what one has. Emmons and Shelton (2002) highlight that gratitude often necessitates comparison with others in order to discern ones' blessings. A focus on and gratitude for ones' blessings can affect well-being and engender a sense of optimism about the future. A study involving undergraduate students found that those who were requested to record weekly experiences for which they were thankful scored significantly higher on measures of physical and emotional well-being at the end of the intervention than those who had been asked to focus on stressors or those who were merely asked to record events (Emmons & Crumpler, 2000).

#### **2.5.6 Narrative theory - telling one's story**

In addition to the theories put forward by Salzer (2002), Ussher et al. (2006) suggest that narrative theory is also useful for understanding the mechanisms which operate in peer-support groups. They suggest that peer support groups offer a safe space wherein participants can re-evaluate and change identity because by definition they are mutually supportive and thus offer high levels of warmth and empathy. Yaskowich and Stam (2003) propose that people whose lives are suddenly and irrevocably changed by an event are driven to reevaluate their identity and to determine how the event fits into their life story. They posit that people seek to integrate their experience of the event into an understanding of the self in a consistent manner (Yaskowich & Stam, 2003). This process is called biographical work (Bury, 1982) and is achieved by individuals narrating their personal stories and experiences within the group over time in order to construct a biography of the self (Finn, Bishop & Sparrow, 2009).

Yaskowich and Stam (2003) describe how the experience of cancer requires biographical work within a separate space in order to integrate it into an understanding of one's self. As people strengthen and transform their identity through reciprocal influence with others, the validation and counterviews of these narratives from others can sustain, change and integrate self-image into a person's identity (Borkman, 2008). These stories also resonate with those told by other group members and comprise a community narrative which represents collective experience and knowledge and is fundamental to the social identity of the group (Mankowski & Rappaport, 2000). Community narratives become psychological resources for group members which can be used to elucidate and explicate their experiences and to guide

the formation of their individual identities (Mankowski & Rappaport, 2000). Similarly, the community narrative is further constructed and revised according to the personal stories of members.

### **2.5.7 Empowerment**

Gutierrez (1990) in working with historically marginalised and stigmatised groups who are powerless to exert personal control, challenge negative stereotypes or attain social and material resources suggests the need to look beyond the individual client's situation and advocates for an empowerment perspective. Empowerment is defined as "a process of increasing personal, interpersonal, or political power so that individuals can take action to improve their life situations" (Gutierrez, 1990, p. 149). She highlights that mutual aid, self-help or support groups have the potential to facilitate empowerment by creating a base of social support, a chance to learn new skills through watching others and the opportunity to raise consciousness through discussions of mutual problems and thus are a possible foundation for social action.

Many support groups document empowerment processes in participants. Ussher et al. (2006) collected data from nine Australian cancer peer support groups and found that heightened empowerment and agency were reported as significant outcomes of group support which then resulted in enhanced self-confidence and perception of personal control relative to others. Similarly, research into GROW, Australian mental health peer support groups, report outcomes associated with the acquisition of life skills, positive changes in self-recognition and an enhanced sense of self-worth (Finn, Bishop & Sparrow, 2009). The authors documented that participants moved from a passive to an active stance during the change process. These changes were presented as identity transformation. Participants in a Dutch internet support group for patients with fibromyalgia, arthritis or breast cancer reported feeling empowered by participation in the group and analysis revealed that information exchange, emotional support, being recognised, the sharing of experiences, assisting others and humour were processes which enabled this sense of empowerment (van Uden-Kraan et al., 2008). Outcomes of empowerment were feeling more knowledgeable about the illness, feeling confident, better acceptance of the illness, an increased sense of hope and control, improved self-worth and social well-being, and collective action (van Uden-Kraan et al., 2008). The authors concluded that peer support groups can be a valuable source of empowerment for patients.



## **CHAPTER THREE**

### **AIMS AND RATIONALE**

#### **3.1 Rationale**

Student mothers are an integral part of the student population in South African universities due to the sexual risk behaviour of this age group. While there is little research on the experience of student mothers abroad and in South Africa, those studies that do exist highlight the challenges that student mothers experience in balancing motherhood and student-hood and emphasise the need to support student mothers in achieving their degrees. While many studies recommend the provision of a support group to provide this function, there is a paucity of research documenting the benefits of such a group. By researching an ongoing peer support group process, the value of this process for supporting student mothers to complete their degrees can be ascertained and could contribute to interventions.

#### **3.2 Aims**

This research aimed to:

1. Examine how ongoing peer support group participation has value for supporting student mothers in tertiary education.
2. Understand how peer support group participation relates to the way in which participants construct motherhood.
3. Understand how participation in the peer support group process relates to participants' identity construction.
4. Understand how participation in peer support groups relates to the challenges that student mothers experience at university.
5. Investigate how participation in peer support groups relates to the systems of support available to student mothers.
6. Examine how the University can better support these students

#### **3.3 Research questions**

The specific research questions of this study are:

1. How does peer support group participation have value for supporting student mothers in tertiary education?

2. How does peer support group participation relate to the way in which participants construct motherhood?
3. How does peer support group participation relate to the way in which participants construct their identities?
4. How does peer support group participation relate to the challenges that student mothers experience at University?
5. How does peer support group participation relate to the systems of support available to student mothers?
6. How can the University support student mothers better?

## **CHAPTER 4**

### **METHODOLOGY**

#### **4.1 Research design**

This study employed a qualitative design which facilitated the exploration of phenomena as they emerged in reality (Durrheim, 2006). Terre Blanche, Kelly and Durrheim (2006) suggest that a qualitative approach is useful when it is impossible to know what the variables under study are or how to measure them. It was thus thought an appropriate approach for studying the value of participation in peer support groups for student mothers about which little was known. A qualitative approach attempts to portray participants' worlds from the inside perspective, that is from the point of view of the participants themselves (Flick, Kardorff & Steinke, 2004). It is interested in meaning and is curious about how people make sense of their experiences in the world (Willig, 2001). Qualitative research assumes that social reality can be understood as the result of meanings and contexts that are mutually produced in social interaction (Flick, Kardorff & Steinke, 2004). It strives to describe and understand the phenomena under study (Babbie & Mouton, 2005). It does this by providing considerable detail and in-depth description of the actions of participants and seeks to understand these actions against the background of the participants' personal histories, beliefs and contexts (Babbie & Mouton, 2005).

Flick, Kardorff and Steinke (2004) argue that qualitative research, in providing this thick description, does not merely represent reality but utilises the deviant or unexpected to provide insight into making the unknown visible in the known and the known perceivable in the unknown. Babbie and Mouton (2005) state that as qualitative research observes actions as they occur, it is ideal for studying social processes over time. Willig (2001) explains that qualitative research focuses on understanding participants in context and that these contexts can be understood as open systems wherein conditions develop and interact with one another contributing to a process of ongoing change. Willig (2001) highlights that both the participants' and the researcher's interpretation of events contributes to the process of continual change. This flexible, inductive approach was thus considered appropriate for examining the individual's experience as a student mother and how participation in the peer support group process over time contributed to this experience.

This study employed an interpretive paradigm. An interpretive approach tries to make sense of the subjective experiences and understandings of individuals through interaction with them

in context (Terre Blanche, Kelly & Durrheim, 2006). It utilises language and expression to understand participants' realities (Terre Blanche, Kelly & Durrheim (2006). It depends on a subjective relationship between researcher and subject (Terre Blanche & Durrheim, 2006) and interprets data from a place of empathetic understanding (Terre Blanche, Durrheim & Kelly). In its efforts to stay close to the data, interpretive research reports its findings in language that is congruent to the language used by the participants (Terre Blanche, Durrheim & Kelly, 2006). It also acknowledges that the researcher is the main instrument in the research process and thus that s/he needs to both establish rapport with participants in order to achieve valid descriptions as well as to show impartiality in describing and interpreting findings (Babbie & Mouton, 2005). It is thus crucial that the researcher is transparent about her contribution to the research process and shows reflexivity or an awareness of her influence on the research (Willig, 2001). Kelly (2006) highlights that while the interpretive researcher does need to be immersed in the context in order to understand the experience of participants empathically, it is also necessary to view participants' experiences from a distance. He points out that participants are not always able to account for contextual influences on their behaviour, thus there is a need for distanciation, i.e. interpretation of experiences from outside the context, often in relation to theory (Kelly, 2006). An interpretive paradigm was thus considered an ideal approach for this research as the researcher was immersed in the peer support group process over time and thus, being part of the setting, was able to gain experiential understanding of the group culture and tap into participants' experiences in order to understand their constructed realities and to interpret these realities in relation to contextual influences and in relation to theory.

#### **4.2 Sampling**

Students at the University of KwaZulu-Natal, Pietermaritzburg were recruited as participants for this study and they were accessed by means of purposive and convenience sampling (Terre Blanche, Durrheim & Kelly 2006). Purposive sampling is where participants are selected based on their representativeness of the group under study (Durrheim & Painter, 2006). Convenience sampling is where cases are selected based on their availability for the study (Henry, 1998). This small, non-probability sample permitted in-depth understanding and rich, detailed description.

Students were selected on the basis that they fitted the criteria of interest. Selection was made on being a mother of at least one child, (birth to 10 years), being a full-time student at the university, being over the age of 18 and up to 40 years old. The criterion for maternal age

was given to be able to include as broad a range of student mothers as possible in the study. The range to ten years was included as it is up to this age that children require more intensive care and attention from their caregivers. The criterion for being a full-time student was chosen in order to make certain that the students selected were typical of the university population who are usually enrolled full time and thus that the findings would be transferrable to other student groups.

#### **4.2.1 Recruitment**

Permission was granted from the Registrar's office to approach students about participating in the study (Appendix 1a, 1b). Permission was also granted from the Humanities and Social Sciences Research Ethics committee (Appendix 2a, 2b) to conduct the study. Participants were recruited through advertisements placed around the University (Appendix 3) as well as from referrals from counsellors in the University's student support service. Permission to put up posters around campus was requested from Risk Management Services (RMS) (Appendix 4).

Interested parties were requested to email the researcher to demonstrate their desire to take part in the study. Upon receipt of the email, the researcher asked the student a number of questions to assess eligibility for participation. These questions sought to confirm: number and age of children, age of student, current registration for full-time study, study level, race and country of origin. Students who were eligible were asked to participate and were given the details of where and when the first group meeting would be scheduled. However, this recruitment method failed to recruit sufficient numbers of participants as only two student mothers responded to these posters. Counsellor referral was also used, and additional permission was requested from the Registrar (Appendix 1b) and from the Humanities and Social Sciences Research Ethics committee (Appendix 2b) to recruit students in this way.

Counsellor referral involved student counsellors suggesting participation in the groups to student mothers whom they considered would benefit from the groups. Nine of the eleven participants were referred to the group by student counsellors working at Student Support Services. Seven of these referred participants had been identified by the computerized Academic Monitoring system as underperforming academically. The UKZN Academic Monitoring and Exclusion Policy (2009) makes provision for assessment of students' academic performance at the end of each semester and classifies their performance according

to the categories of “good academic standing”; “at risk” or “severely underperforming”. This status is then colour coded as “green”, “orange” or “red” respectively and is reflected on the student administration system. The policy aims to identify underperforming students early and to offer them academic, personal or career counselling in order to facilitate retention (Academic Policy and Exclusion Policy and Procedures, 2009). There are specified supportive interventions for each academic status classification.

As soon as students are classified as having “At Risk” status, they are monitored and supported in various ways. One of the ways this support is implemented is by having all “At Risk” status students complete a computerised checklist, the Learning Enhancement Checklist (LEC) which helps “At Risk” status students to identify barriers to academic success. “At Risk” status students are also required to attend personal counselling with Student Support Services staff after completing the LEC in order to discuss and manage these barriers to learning. Therefore, the “At Risk” status student mothers in this study, having completed the LEC, would have discussed their challenges as student mothers with student support counsellors during personal counselling and would then have been asked if they would like to be referred to the group. Those who indicated that they would like to be referred were given the contact details of the researcher.

The remaining two referred participants had approached Student Support Services independently for counselling and once their challenges as student mothers were discussed during individual counselling, they were also asked whether they would like to be referred to the group. The effect of using counsellor referrals, especially from the college where the researcher was based, was that the sample was comprised primarily of students who were underperforming academically and who were predominantly from one college.

Eleven students participated in the support groups, three groups were conducted in semester one and nine groups were conducted in semester two. A further nine participants were recruited for individual interviews. Selection for individual interviews was made on the basis of participants’ willingness and availability to engage in an individual interview. During the first semester two out of the four support group participants engaged in an individual interview. The additional interviewee did not attend the support groups. During the second semester, seven out of the eight support group participants engaged in an individual interview, the eighth participant dropped out of the group process and thus was not available

for an interview. This information is discussed in more detail under sampling and is clarified in Table 2.

Eleven student mothers took part in this study in total, six of these were undergraduate students and five were postgraduate students. This sample was thought to be large enough to generate information-rich data but small enough to manage the dynamics of support groups and the time demands of individual interviews. The students ranged in age from nineteen to forty years of age, with the majority of students being in their twenties. Most of the students were from KwaZulu-Natal and spoke *isiZulu*, one student was an international student and two were from other provinces in South Africa. Demographically all students self-identified as black. This final sample comprised black, African mothers. Whilst not deliberately recruiting for this particular demographic, these were the students who responded to the advertisements as well as who were referred from the student support counsellors. All participants were unmarried and had one child with the exception of the international student who was married and had two children. All of the participants' pregnancies were unintended apart from those of the married student. Seven participants lived in university accommodation away from their children. Four participants lived with their children, two of these lived in their parents' homes and the remaining two lived independently. Below is a table providing information about participants. The table gives participants' pseudonyms; their ages; age and sex (M/F) of their child; their system of childcare (who takes care of the child); students' level of study - undergraduate (UG) or postgraduate (PG); whether the student lives with (LWC) or away from (LAC) her child; the students' living arrangements – university residence (res), living at home (home) or living alone with her child (independent); and the type and level of support from the child's father.

Table 1

*Participants' details*

NAME	AGE	AGE OF CHILD (Y/Mo) SEX OF CHILD (M/F)	CHILDCARE	UG/PG	LWC/LWA	RES/HOME/ INDEPENDENT	SUPPORT FROM FOC
SLINDILE	21	6 Mo, F	CRECHE/MUM	UG	LWA	RES	NO CONTACT
LIYANDA	20	2 Mo, F	MUM	UG	LWC	RES	NO SUPPORT
MBALI	23	3 Y, F	MUM	UG	LAC	RES	NONE
DUDU	21	4 Mo, M	NANNY/MUM	UG	LAC	RES	VARIABLE
THENJIWE	27	13 Mo, M	MUM	PG	LWC	HOME	FINANCIAL
HLENGIWE	24	24 Mo, M	MUM	PG	LAC	RES	FINANCIAL

NTOMBI	19	7 Mo, F	STEPMUM, NOW CRECHE	UG	LWC	HOME	EMOTIONAL
KHOLWA	34	6 Y, M	SCHOOL	PG	LWC	INDEPENDENT	NO, LITTLE CONTACT
OLWETHU	40	5 Y, F, 3 Y, M	CRECHE	PG	LWC	INDEPENDENT	FINANCIAL AND EMOTIONAL
ZAMA	24	2 Y, M	BOYFRIEND'S MOTHER	PG	LAW	RES	FINANCIAL AND EMOTIONAL
NQOBILE	21	5 Y, M	MOTHER/AUNT	UG	LAC	RES	NONE

### 4.3 Data collection

Data was collected from student participants in two ways: from individual interviews and peer support groups.

#### 4.3.1 Interviews

A qualitative interview is a first hand, personal conversation between the researcher and participant with the purpose of comprehending the participant's understanding, in his/her own words, of his/her lived experience of a particular situation (Taylor & Bogdan, 1984).

Interviews are iterative, open ended and encourage the participant to speak freely about experiences (Babbie & Mouton, 2005). Individual interviews provide participants with the chance to tell their story and during the process of selecting which details to include and by reflecting upon and ordering the experience, participants engage in making meaning of their experiences (Seidman, 1991). Individual interviews can thus be an opportunity for participants to discuss their thoughts, feelings and experiences in depth with the researcher (Kelly, 2006). Individual interviews were considered an appropriate method to use in this study in order to fully understand participants' experiences and perceptions of student motherhood and how participation in the support group process impacted upon this.

The interviews utilised a semi-structured schedule of questions (attached in Appendix 5, 6) and took place in a quiet, private setting in the researcher's office. The questions were formulated after an examination of pertinent topics in the literature on student mothers and in connection to the research questions.

The interviews were conducted in English and were audio-recorded in the quiet, private space of the researcher's office. In order to ensure that participants were fully autonomous, they were verbally briefed on the research aims and what would be expected of them as well as the risks and benefits of the study. Participants were also given an information sheet (Appendix 7) which summarised this information and assured them that their privacy was protected.



After agreeing to these conditions, participants provided their consent by signing the consent form, which emphasised that participants were free to withdraw from the study at any time without penalties (Appendix 8). In addition, the participants were asked to provide their consent to allow the researcher to audio-record the interviews and peer support groups (Appendix 9).

Nine participants were invited to participate in an interview lasting from half an hour to two hours. Three participants (Slindile, Liyanda, Thenjiwe) engaged in individual interviews before the first semester support groups began but only two of these (Slindile, Thenjiwe) attended the support groups (details of interview participation are recorded in Table 2). An additional student (Ntombi) was invited to participate in an individual interview prior to the commencement of the peer support groups in the second semester. Seven participants (Ntombi, Thenjiwe, Zama, Olwethu, Nqobile, Hlengiwe, Kholwa) were interviewed after the termination of the peer support groups (two of these participants, Thenjiwe and Ntombi, had also been interviewed prior to the commencement of the groups).

Table 2 below details participants who engaged in individual interviews prior to peer support group sessions in both semesters as well as participants who participated in interviews after the peer support group process. The table also shows the number of peer support groups in each semester and participants who engaged in these. In addition, it lists those participants who dropped out of peer support groups in both semesters.

Table 2

*Data collection techniques in the first and second semester*

Semester	Semester 1	Semester 2
<b>Individual interview prior to start of groups</b>	Lindiwe, Slindile, Thenjiwe	Ntombi
<b>Number of Peer Support Groups</b>	3	9
<b>Participants in the Peer Support Groups</b>	Slindile, Thenjiwe, Hlengiwe, Dudu	Thenjiwe, Hlengiwe, Ntombi, Mbali, Zama, Olwethu, Kholwa, Nqobile,
<b>Participants who dropped out of the peer support groups</b>	Slindile	Mbali

<b>Individual interviews post groups</b>	-	Thenjiwe, Ntombi, Zama, Olwethu, Kholwa, Nqobile, Hlengiwe,
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#### 4.3.2 Peer support groups

As mentioned above, initially the study was designed as an ongoing focus group process so that the process could be ‘researched’. However, the groups operated as support groups and were ‘researched’ in the sense of the discussion being recorded and transcribed. The group process was designed as peer support groups for participants as participants would be able to meet regularly to share experiences and to give and receive emotional support.

Peer support groups took place in a quiet and secure setting, within a boardroom at one of the UKZN College offices. Permission was requested from the Humanities and Social Sciences Research Ethics committee to change the location of the groups (Appendix 2b) The duration of each peer support group was about 1 ½ hours. The introductory group was comprised of two parts, the first of these was for participants to sketch a simple genogram of familial relationships which was utilised to discuss participants’ circumstances and childcare arrangements. The second part of the introductory group explored the participants’ experiences of motherhood whilst in tertiary education, specifically, the systems of support, sources of stress and impact on academic goals. This, and subsequent peer support group discussions, were loosely guided by the open-ended questions from the introductory group schedule of questions (Appendix 10) which was developed by a review of relevant literature on student mothers and is related to the research objectives. These questions focused on how the participants constructed motherhood, what challenges they encountered, what coping strategies they used and what support systems were available at the University for student mothers. In subsequent sessions, the discussion in the groups was open ended and driven by a range of topics considered important to the group. The researcher was interested in building a relationship with and engaging with the participants over time.

All data collection occurred in English. In order to ensure autonomy, participants were verbally briefed on the research aims and expectations as well as the risks and benefits of the study. Participants were also given an information sheet (Appendix 7) which summarised this information and reassured them that their privacy was protected. Participants provided their agreement to these conditions by signing the consent form, which emphasised that

participants were free to withdraw from the study at any time without penalties (Appendix 8). The peer support groups were audio-recorded in quiet and secure rooms within one of the College offices. Permission was obtained from participants to record the discussion in the groups (Appendix 9). These recordings were then transcribed for analysis using Jeffersonian transcription conventions (Appendix 13).

Twelve peer support groups were organised (three in the first semester and nine in the second semester). There was slow uptake of the groups in the first semester with referred student mothers indicating their willingness to attend and then not doing so due to lecture time clashes and work load commitments. Four students (Slindile, Thenjiwe, Hlengiwe and Dudu) participated in the peer support groups in semester one at various times (See Table 2 for details of group participation). Three of these students lived at the university, away from their children and the remaining student (Thenjiwe) lived at home with her child. This group composition made it difficult for Thenjiwe to feel understood and supported as the rest of the group did not share or empathise with her experiences. The group dynamic in the first semester thus did not facilitate support for all students. One of the students (Slindile) dropped out of the groups after the second peer support group and one student (Dudu) was excluded from the university at the end of the semester. The remaining two students (Thenjiwe and Hlengiwe) then attended peer support groups in the second semester.

Uptake of the peer support groups was better in the second semester which begun with five participants (Hlengiwe, Thenjiwe, Ntombi, Mbali, Kholwa). One of these participants (Mbali) dropped out after the second session and an additional three participants (Olwethu, Zama, Nqobile) joined the group over the remaining sessions. All seven of these final participants attended regularly.

Data was thus collected from individual interviews conducted both before the start of the ongoing peer support group sessions and again after the series of support group sessions were finished; as well as from ongoing peer support group sessions themselves. The rationale for conducting two sets of interviews was that student mothers could be interviewed individually before the peer support group sessions commenced and could then be re-interviewed after the series of peer support group sessions had ended. This would have allowed for a comparison of their experience as student mothers before the peer support group process with their experiences after the peer support group process and could have potentially highlighted the

supportive benefits that peer support group participation had brought to them. As two of the participants interviewed in the first semester before the commencement of peer support groups either did not attend or dropped out of the groups, only two participants (Thenjiwe and Ntombi) were interviewed before and after the groups. It was thus decided to interview all participants who regularly attended the peer support groups in the second semester in order to better understand their experiences and the potentially supportive benefits of the groups. Individual interviews also protected the confidentiality of participants who wished to share more private information and provided an occasion for participants to reflect on the influence of other group members upon their own experience.

#### **4.4 Ethical considerations**

Ethical considerations will be discussed using Emanuel, Wendler and Grady's (2008) framework.

##### **4.4.1 Collaborative partnership**

This research arose from an expressed community need in that student mothers at the University of KwaZulu-Natal had requested further focus groups as they had found focus groups to be beneficial in a previous study (Corfe, 2015). Student mothers in this study were intimately involved in determining the issues under discussion and these related directly to their needs. The study community potentially benefited from this study both in terms of support, empathy and skill acquisition which peer support group participation provided and also potentially in the long-term provision of a support group for student mothers.

##### **4.4.2 Social value**

The beneficiaries of this research are the research participants themselves and potentially other student mothers in tertiary education. Direct benefit is in terms of social and emotional support provided by peer support group participation, indirect benefit might be that the results of this study could potentially inform policy at the university e.g. by providing greater support for student mothers in the form of access to counselling, support groups and increased sensitivity to their circumstances by administrative and teaching staff.

##### **4.4.3 Scientific validity - credibility, dependability and transferability**

Babbie and Mouton (2005) recommend carrying out qualitative research in such a way that it is objective and promotes credibility, dependability and transferability in order to meet the

requirements of scientific research. Credibility is understood as agreement between participants' constructed internal worlds and those ascribed to them (Babbie & Mouton, 2005) and was attained by prolonged engagement between the researcher and the participants so that the researcher gained an adequate understanding of the issues involved through building an ongoing relationship of trust with the participants. The researcher also remained in the field until data saturation thus the researcher continued to interview until recurring patterns of behaviour and action confirmed her account and added nothing new.

Credibility was also achieved by referential adequacy, i.e. audio recordings were used to document findings and by transcribing these recordings using transcription symbols of Jeffersonian conversation analysis which provided additional information on how participants organised their talk. This is, according to Seale and Silverman (1997) a more objective and reliable record of the data because the level of detail provided allows for crucial pauses, overlaps and body language to be captured thereby aiding interpretation. Credibility was also achieved by recording participants' responses verbatim; by checking for misinformation with the participants; by triangulation (information was gathered by various types of questions and methods, i.e. by peer support groups and personal interviews and from a wide range of informants). Shenton (2004) suggests that using a diverse assortment of informants to triangulate the data source allows individual viewpoints and experiences to be verified against others to provide a rich portrait of the attitudes and behaviours of those under study.

Silverman (2010) argues that qualitative research, particularly that in which the researcher has been immersed for a period of time, can suffer from anecdotalism in which a few exemplary extracts from interviews or support groups are utilised to argue for the support of a particular conclusion. This study thus tried to enhance validity by employing Silverman's (2010) principles to think critically about data analysis and avoid anecdotalism. It tried to achieve objectivity by seeking to refute initial generalisations about relationships in the data using Silverman's (2010) refutability principle (Silverman, 2010). I tried to prove initial conclusions false by examining all the data from the interviews and focus groups and constantly trying to find a new case to disprove the initial hypotheses, this is Silverman's (2010) constant comparative method. I also used Silverman's (2010) comprehensive data treatment by including all the data from interviews and support groups into the analysis and making sure that the hypotheses applied to every case. Silverman's (2010) deviant-case

analysis was also employed, where I tried to find and deal with variance in the data, adjusting the hypotheses to incorporate these, until the conclusions fitted every bit of data.

I attempted to remain neutral during data collection by avoiding using leading questions and by suspending judgement.

Dependability is the extent to which the reader can be convinced that the findings occurred as the researcher claims they did (Van der Riet & Durrheim, 2006). Dependability was enhanced by accounting fully for all the processes in the research from sampling decisions to data analysis and by providing rich description of how participant behaviour and attitudes emerged out of interaction with others during the group process. It was also achieved by providing detailed information on data collection and analysis. In addition to this, this study followed Silverman's (2000) suggestions of using field note conventions i.e. keeping all data and notes from which hypotheses and results have been drawn so that these can be inspected by readers and researchers.

Transferability is understood as the degree to which results can be generalised to other settings and with other participants (Kelly, 2006). Transferability was enhanced by supplying a thick description of all aspects of data collection, particularly context and participants, which can then be compared to similar settings and respondents by other researchers. In addition, transferability was further enhanced by giving specific details of the analytic process and by giving reasons for the adoption of particular methods throughout the research process.

This study also potentially has pragmatic proof. Lather (1986, p. 5) discusses the concept of "catalytic validity" referring to the extent to which a particular research project empowers the community under study. Participants in this study reported increased optimism and self-efficacy after participating in the study.

#### **4.4.3.1 Reflexivity**

As the researcher, I was also sensitive throughout interviewing and analysis to how my presence as a white, mature, middle class student mother, who is influenced by the ideology of intensive mothering, might influence participants' narratives as well as to my own expectation of findings. This sensitivity was achieved by acknowledging my own

assumptions prior to the research process and by being aware of how these might be communicated verbally and non-verbally to participants. I reflected on this communication of assumptions through listening to the audio tapes and critically considering my style of questioning and responses to participants, as well as by analysing participants responses to me. In addition, I kept a journal of my personal reaction to participants' accounts which helped me be aware of my own position and to maintain improved neutrality. As a student mother myself, I shared some of the challenges which the participants highlighted. This understanding made me very empathic to participants' narratives and it is possible that this contributed to participants feeling understood which might have facilitated them sharing more in-depth experiences.

As well as being a researcher and a student mother, I was also an intern counsellor. These roles were sometimes in conflict and were awkward for me. At times I felt that I could have contributed better by engaging more fully in the group, by sharing my own experiences of student motherhood and sometimes by giving advice or counselling to participants. I sometimes found it difficult to judge when being participatory was appropriate and thus tried to remain as firmly in the researcher's role as possible.

#### **4.4.4 Fair selection of participants**

The recruitment process of placing advertisements in all colleges within the university allowed for any student mother who wished to be in the study to participate. In addition, student support services counsellors offered referral to the peer support group to all student mothers they encountered. Undue incentives were not offered to induce subjects to participate. Participants who bore the largest burden of the research, that is student mothers, are also those who will potentially gain the greatest benefit as if these support groups continue, they will be able to attend them in subsequent years.

#### **4.4.5 Favourable risk/benefit ratio**

Students were advised that there were no particular risks as they would be in a supportive process, but that should they become distressed as a result of discussing their own challenges or from hearing about the experiences of others that counselling was available to them. They were provided with the following information on the information sheet (Appendix 7):

“If the research raises social or psychological issues, you can visit the Campus Clinic or Student Counselling Services. At the campus clinic you can get information and assistance on HIV testing, pregnancy testing, sexual advice, information and contraception.”

At the clinic you can book an appointment to see either Sr. Govender or Sr. Peters via email [govenderma@ukzn.ac.za](mailto:govenderma@ukzn.ac.za) and [peterssi@ukzn.ac.za](mailto:peterssi@ukzn.ac.za). You can also approach the Child and Family Centre at the University for an appointment with an intern psychologist (Ms N. Naidoo: [naidoo2@ukzn.ac.za](mailto:naidoo2@ukzn.ac.za); 033 260 5116).” Permission was obtained from the Child and Family Centre (CFC) (Appendix 11) to refer student participants to them if necessary. Students were also informed that the potential benefits of their participation in the study would be an ongoing opportunity to discuss their experiences of student motherhood with similar others and to possibly benefit from the support, advice and solidarity of others. It was thus likely that the potential benefits to the participants would be greater than the potential risks.

#### **4.4.6 Independent ethics review**

The proposed study was awarded ethical clearance before data collection commenced (Appendix 2a, 2b). Protocol reference number: HSS/0573/016M.

#### **4.4.7 Informed consent**

Participants were notified about the research aims and expectations of them, in order to guarantee their autonomy. These were communicated verbally and via email before participants agreed to participate in the study. Participants also received an information sheet (Appendix 7) which assured them that their confidentiality would be protected and which provided them with explicit information about the study, its methods, risks and benefits. Participants were asked to supply their consent by signing a consent form which highlighted the voluntary nature of participation and their right to withdraw at any time without penalties (Appendix 8). Participants were also asked to provide their consent for the researcher to audio record the support groups or interviews (Appendix 9). University gatekeeper’s permission was also granted before conducting any research with students (Appendix 1a, 1b).

#### **4.4.8 Ongoing respect for participants and study communities**

Participants’ well-being was monitored throughout the data collection process and if participants became distressed, they were referred for counselling. Participants’ privacy was respected by maintaining confidentiality. The participants were informed that there was no specific risk, but were also reminded of the limits to confidentiality in group settings. These limits are that the researcher cannot assure confidentiality in groups, however to further



reduce risk, all peer support group participants were requested to sign a confidentiality pledge (Appendix 12). A confidentiality pledge is a document in which the participant promises to respect the privacy of other participants and to keep all information shared within the group confidential.

Participants were advised that the data from this study will be circulated as a dissertation which will be assessed by one staff member of the Discipline of Psychology at UKZN, and one person external to the university. They were also made aware of the possibility of publication of the research findings and that these could possibly be used in student projects and theses, be presented at conferences or used in journal articles. Reassurance was given that participants' privacy would be protected as all distinguishing information identifying them would be removed. Pseudonyms selected by the researcher and of which the participants are unaware are used to refer to participants. After completion of the study, a short summary of the results will be made available to the participants, upon request.

The data from this study (in written and digital form) will be kept safely in a locked cabinet in the supervisor's office for 5 years and after that it will be incinerated. Electronic data will be stored in password protected files which only the researcher and her supervisor have access to. After the study, all audio recordings will be deleted. Further, data will be kept independently to the research participant's records.

The participants were compensated for their participation in the peer support groups and interviews. This compensation was not intended as payment, but was payable to them for giving up their time and effort to participate. They each received a voucher for R35 at each interview or peer support group, redeemable at the campus coffee shop. The participants in the peer support groups were also provided with refreshments during each discussion.

## **4.5 Data analysis**

### **Data processing**

I employed a transcription company as well as a student to transcribe some of the audio recordings of the peer support groups and individual interviews. I trained the student in basic verbatim transcription conventions herself. Confidentiality agreements were drawn up and signed by all parties. I transcribed the outstanding interviews myself as well as carefully listening to the audio-recordings of the already transcribed data in order to check for veracity

and to add Jeffersonian transcription conventions. I found, in many cases, that outsourcing transcribing led to a problematic interpretation and I thus had to rework large parts of the transcription for both the group discussions and the interviews. Jeffersonian transcription is a conversation analytic technique which records not only what is said but how it is said (Hepburn & Bolden, 2013; Jefferson, 2004) (Appendix 13). It highlights that varying characteristics of the delivery of talk are crucial to how speakers produce particular actions and react to the action of others (Hepburn & Bolden, 2013). It thus inserts all details of the conversation relevant to analysis for example, emphasis (conveyed by pitch, tempo, volume or voice quality), hesitation, intonation, overlapping speech, intake of breath and any other sounds like sighing, laughter or crying. I analysed the interview and support group data in order to grasp the discourses incorporated in it especially in terms of the discourses which affect how the participants construct motherhood and thus how they experience it. The data was then coded in relation to the research questions.

Discourse analysis was utilised to analyse the data. Discourse analysis is interested in how individuals use language to achieve individual, social or political ends (Starks & Brown Trinidad, 2007). It was well-suited for this study as an analysis of the language used by the participants elucidated the societal influences from which they construct their understanding of motherhood, social roles and identities. Terre Blanche, Durrheim and Kelly's (2006) guidelines for discourse analysis were followed. These authors suggest removing ourselves from our familiar cultural background and critically reflecting instead on culture to see what discourses do. Identifying the effects of discourses in the text involves a questioning reading of the action and an awareness of the context in which it is rooted; a search for implicit binary oppositions (e.g. true-false, clever-stupid); an identification of repetitive words, expressions and figures of speech that exist in the text; and an examination of all the human subjects that are discussed in the text, including the shadowy ones, e.g. the, "author" and, "listener" as well as the family behind the student. Using these guidelines, the researcher tried to achieve a critical reading of the action in the text and attempted to show the effects that the discourses created.

## CHAPTER 5

### RESULTS

This study aimed to examine whether ongoing peer support group participation has value for supporting student mothers in tertiary education. The final sample was comprised of black, African mothers. It was interested in how the peer support group process relates to student mothers' existing systems of support and to the challenges that they face. It was particularly interested in whether the peer support group process allowed for different constructions and practices of motherhood and whether, during the process, there were shifts in student mothers' identities.

The discursive data for this study was acquired through eleven individual interviews as well as twelve peer support groups. Individual interviews (I) are annotated by I 1 or I 2 depending on whether it was the first or second interview for the participant. Peer Support Groups are annotated consecutively (e.g. SG 1 or SG 2) followed by the Semester in which they were conducted (e.g. S1 or S2), so the first support group in the second semester would read. SG 1, S 2. All extracts indicate the child's age in months or years, the students' level of study (PG/UG) and whether the student lives with or away from her child (LWC, LAC). Jefferson transcription conventions were used to transcribe the interviews and groups, these build intuitively on common sense literary conventions (Appendix 13).

This chapter will begin by presenting data which shows that student mothers were not coping with their dual roles at the beginning of the support group process, it will then go on to look at some of the reasons for this. Next it will examine the existing support that student mothers have; and will then present data which shows the benefits of the group process for student mothers. It will then show how participation in the support groups produces shifts in response to the challenges that student mothers face; and will conclude by considering how the university can better support these students.

#### 5.1 Not coping

Many participants were not coping as student mothers at the beginning of the peer support groups. Ntombi, poignantly describes her experience:

*Cause now, I don't know how to manage everything. You know cause everything is crushing me up and I am feeling so tiny with all of those things around me. (7m, UG, LWC, I 1, S2)*

Ntombi highlights the overwhelming weight of the responsibility of motherhood and student hood by use of the word, “crushing” and thus feels inadequate and perhaps, by the use of the word, “tiny”, too young, to balance everything.

Thenjiwe, also explains in the first group that she is not coping:

*I don't think I am coping, I wouldn't say I have a coping mechanism..... It is just getting up and taking a deep breath, just going through the motions, going to sleep.... that is my favourite part of the day....Because everything is at a pause so when he starts crying it's like “No! Please don't, not now.” (13m, PG, LWC, SG 1, S 1)*

Thenjiwe's phrasing highlights the mechanical and unemotional repetition of daily actions, “going through the motions” until she can escape from her reality into sleep. This extract shows how overwhelming, Thenjiwe finds her life, where she needs to force herself (indicated by her use of “taking a deep breath”) to perform these actions and where her highlight of the day is “going to sleep.” Thenjiwe had depression before she had her son and explains that previously she could take care of her own needs:

*Now, you can't sleep the whole day because there's someone next to you crying....then you have to feed them and they need a bath. And.... (.) my supervisor would email me wanting work. So...I'd just feel overwhelmed and then, sometimes I'd leave him in the lounge watching cartoons and I just go to my room and cry the whole time. (13 m, PG, LWC, SG 1, S 2)*

Thenjiwe describes how difficult it is to cope with her own low mood, the demands of her child and the pressure of university. She positions herself as a reluctant caregiver, indicated by her use of the words “have to” and engulfed by the situation by her use of the word, “overwhelmed” and thus withdraws from her child to her room to cry.

Kholwa, who has no family support and has to provide for her son, similarly describes that she hasn't been coping:

*I have to push, I have to push every day. ...I have reached a point where I feel if he wasn't there and I was facing everything I'm facing, I would just shut off. But I have to, I have to be awake, I have to be alive, I have to be sane and happy for him. So I think, now he's kind of a reason why um I decide to live every day now. Because, truth is....I reached a crashing point, but I keep going. (6y, PG, LWC, SG 1, S 2)*

Kholwa positions herself as exhausted and defeated by her circumstances “everything I am facing” and is tempted to give up “shut off”. She positions her son as her motivation for staying alive “he's kind of a reason why um I decide to live”. This fight against surrendering takes a huge, daily effort from Kholwa illustrated by her repeated use of the phrase “have to”.

Hlengiwe, was also diagnosed with depression. She describes that the combination of her personal issues and an increased Masters workload resulted in her feeling like she could not cope and so she frequently considered dropping out of university:

*I've been going through some stuff for like a long time. But.... last semester, ... it started getting too much.... I always wanted to drop out..... (24 m, PG, LAC, I 1, S 2)*

Many participants were thus not coping with being a student and a mother and this was impacting upon their mental health. We turn next to some of the challenges that student mothers encounter which contribute to them feeling like they cannot cope.

## **5.2 Challenges**

Due to the gendered nature of childcare, student mothers and their families shouldered the burden of looking after the child. This section explores the challenges they experience in relation to this and is comprised of four subsections: balancing roles; construction of motherhood; identity; and stigma.

### **5.2.1 Balancing roles**

The greatest challenge that mothers who live with their children face is time management. Ntombi, in an individual interview prior to participating in the peer support groups, describes the challenge of being both a mother and a student:

*I'd say it's been really hard yeah..... Cause you'd just have a lot of things to work on....It's just too much for one person to handle, especially a teenager like me. I feel like I still have to be taken care of .... (7m, UG, LWC, I 1, S 2)*

Ntombi positions the sheer volume of work of these two roles as “just too much” to manage and by reference to herself as a “teenager” as her being too young to cope with it. Ntombi’s sense of feeling like she still needs “to be taken care of”, emphasises how ill-equipped she feels to manage this burden. Ntombi’s emphasis on her “teenage”, status also alludes to the problematic nature of being a young mother.

Thenjiwe explains the impossibility of meeting all the expectations of being a student, a mother and a worker:

*I needed to get clearance, I needed to collect data, to transcribe, to...All these things need my undivided attention, nje but I can't split myself into being a mom and doing that, and also having a job. (13 m, PG, LWC, SG 1, S 2)*

Thenjiwe positions herself as trying to be a contortionist, needing to “split” herself into different parts in order to fulfil the various roles she has. Her repetition of the word “need”

and “needed” draws attention to the compulsory nature of these tasks, all of which require her “undivided attention”. Her repetition of and emphasis on the word “and” emphasises the never-ending nature of these tasks.

Furthermore, student mothers are sometimes called from their studies to attend to child related issues. Thenjiwe explains how even her two precious varsity days can be interrupted:

*Sometimes my mum will call in the middle of the day, “He’s sick.” I’ll have to stop what I am doing, pack up and go. (13 m, PG, LWC, SG 1, S 1)*

Olwethu also describes that as a single parent without support, she is responsible for chores outside of university work and childcare which also impact on her ability to study:

*Sometimes you have to take time off to go grocery shopping....to organise the house, pay bills. Some days I find I miss two days of studying. (5 y, 3 y, PG, LWC, SG 3, S 2)*

Student mothers thus find it very difficult to find the time to balance parenting and student roles. These challenges are further exacerbated by the way in which student mothers construct motherhood, I turn to this section next.

### **5.2.2 Constructions of motherhood**

Most participants initially engaged with motherhood conventionally. Ntombi, during an individual interview before the start of the support groups, evidences this as she explains her understanding of the word “mother”:

*A mother is a person that would forget about everything and just.... taking care of her child, caring for the child, she would do ANYTHING, the child would always come first....it is something that you are born with. Once you realise that.... you are going to be a mother, that’s when it all comes in. (7 m, UG, LWC, I 1, S 2)*

Ntombi’s explanation of motherhood reveals that she understands motherhood as nurturing, illustrated by her repetition of the word “care” and “caring.” She also sees motherhood as child-centered, indicated by “the child would always come first” and self-sacrificing where the mother would “forget about everything and just about her child” and prioritising the needs of the child above her own “she would do ANYTHING” for her child. Further, mothering in this way is seen by Ntombi as universal, as “something that you are born with” thus an innate instinct that women have that is actuated “once you realise that you are going to be a mother”.

Kholwa understands her role as a mother as putting her child first:

*As a parent you're not doing things for yourself....you have to know that you are focussing on your kids. You have to make sure that they don't go through what you went through, now, especially like negatively.... (6 y, PG, LWC, I 1, S 2)*

Kholwa positions being a parent as needing to be child centred “you are focussing on your kids”, as sacrificing “you are not doing things for yourself” and as protecting children from negative experiences “don't go what you went through.”

Liyanda, whose understanding of “mother” comes from her relationship with her own mother describes the all-encompassing nature of this role for her:

*My mother is like everything to me (2 m, UG, LAC, I 1, S 1)*

Liyanda's emphasis on the word “everything” highlights both the multidimensional character of this role for her, as well as its importance.

These constructions of motherhood show that the participants are drawing on the discourse of intensive mothering in which the mother is considered the best caregiver for her child and is accountable for the care and upbringing of the child. Intensive mothering highlights the importance of an accessible, physically available mother and emphasises the need for a loving relationship between the mother-child dyad. Further it prescribes that a good mother puts her child first and is nurturing and self-sacrificing. This is seen instinctive for mothers and as natural and universal.

Constructing motherhood in this way can create unrealistic mothering expectations for student mothers and can cause guilt when they are unable to meet these. For example, drawing on the “intensive mothering” discourse causes Ntombi to feel guilty about being leaving her child during the day and prioritising her studies instead of her child:

*I feel bad about it, I do. My child. If only. But then it's done...I would have done it differently....I would have.... just stay at home, just get to bond with my child. Yeah, I would have not taken this decision if I could. (7 m, PG, LWC, SG 1, S 1)*

Ntombi's guilt is evident in the words “feel bad” and this is further highlighted by the short sentences and unfinished thoughts which highlight her regret about her decision and her inability to reverse it. Her child is positioned at the centre of the regret and is constructed as not being given what she is entitled to, an accessible mother who is “at home” with her and with whom she can “bond.” Ntombi's use of the word “bond” evidences her awareness of the importance of a close, emotional relationship with a primary caregiver as necessary for a child's healthy development.

Not all participants constructed motherhood according to this all-encompassing, self-sacrificing ideology. Thenjiwe evidences her ambivalence to motherhood, in the following extract, when asked to explain “mother”:

*Nurturer, uum (.) protector, (.) I don't know.... Uum (.) insanity (laughter), imbalance, definitely, ye:::ah. I think it has like it's goods and bads, it has it's highs and lows ...when you do find the balance then I think it is fulfilling..... It's a nice, uh, not job, um, uh, thing to be, it's a nice, I don't know..... (13 m, PG, LWC, I 1, S 1)*

Thenjiwe begins by listing the accepted qualities of what she thinks a good mother should be “Nurturer, protector” but she then pauses unable to continue, and reflects on her own difficult experience “insanity, imbalance”, thereby drawing attention to the contradiction between the two. She finally softens this and finds a compromise in describing motherhood as having “its goods and bads.” Thenjiwe, rather than idealising motherhood, understands it as work “job” and aware that this unconventional explanation of motherhood might be construed as negative, repeatedly attempts to find an alternative word to describe it “nice, uh, not job, um, uh, thing to be...”, but cannot.

Thenjiwe, unlike Ntombi, doesn't understand mothering as a biological instinct that women are born with but rather as something that is learnt over time and thus as a set of skills that others, for example fathers, can also perform. This might contribute to her resentment of carrying the burden of motherhood alone:

*You weren't born a mother, you learnt everything on the way and obviously with the help of your mother as well.... So now he [the father] will get to learn along the way. (13 m, PG, LWC, SG 2, S 2)*

Constantly being immersed in the work of mothering can make some students feel that other valued identities have been lost. I turn to identity next:

### **5.2.3 Maternal identity**

#### **5.2.3.1. Tension between identities**

Thenjiwe battles with the loss of self that being a mother brings:

*Sometimes I feel a bit overwhelmed since I stay with my son every single day so it's not like I'm saying I don't like being his mom but I was an individual before I was his mom, so I feel like I don't get.... that time to....be with myself again as I used to ....before I had my son. (13m, PG, LWC, SG 2, S 2)*

Thenjiwe positions herself as being engulfed by her motherhood role to the detriment of herself as an individual. She craves time away from her son in order to reconnect with



herself and this is highlighted by her emphasis on “time” and the phrase “be with myself”. But again, aware that this might be construed as abnormal, she defends against possible criticism of being seen as a bad mother by the phrase “I’m not saying I don’t like being his mom.”

Thenjiwe accounts for her need for time alone as important for her mental health and ultimately for her ability to mother competently:

*It’s just being a person as a whole because you need to function properly in order to function for them as their mothers. (13m, PG, LWC, SG 4, S 2)*

Thenjiwe also describes how she battles with the transition from her student to her mother identity in the following extract:

*It’s like, “Whew, you know, okay, okay I’m a, I’m a young adult again. I’m a student again. I’m at varsity, I’m like everyone else.” And then the clock strikes 16:30. (Laughter) (13m, PG, LWC, SG 1, S 2)*

In the above extract Thenjiwe positions herself as a Cinderella relishing being able to forget her mother identity and being “just like everyone else”. Her reluctance to go home is captured by the clock striking which signals an end to her freedom and a need to assume her mother identity again. For Thenjiwe, her personal identity is bound up in her student identity. Her student identity is a role she values highly and is central to the way she sees herself - independent, driven, empowered. It is also the vehicle to become the person she wants to be. Thenjiwe explains this ambition:

*In my head I still want to do my Masters, do my PhD and, you know, live life and travel and spend my money on me. (13 m, PG, LWC, SG 1, S 2)*

Thus, while Thenjiwe’s personal identity is engulfed by motherhood, so is her student identity because she just can’t plan and stick to anything or meet deadlines she or others set and the self she needs to be is dependent on being a good student.

Thenjiwe further explains the difficulty of walking straight in the door and taking over the mother role:

*When I do come home my mom is like, “Oh, thank God, my shift is over,” .... like, I don’t even have five minutes to get in my room and to say, “Okay, I need to switch now to being a mother again, because he’s already like, behind me. (13 m, PG, LWC, SG 1, S 2)*

Mothering is presented as hard work “my shift” by Thenjiwe’s mother, and work she is eager to end “Oh, thank God.” Thenjiwe positions herself as an unwilling worker who is expected

to transform roles as she works in the door “I need to switch to being a mother again.” Thenjiwe’s need for time alone to prepare herself for this “five minutes in my room”, highlights the difficulty that Thenjiwe has with this transition. The pressure that this transition brings is captured by “he’s already like, behind me.”

Other student mothers don’t seem to evidence tensions in their different identities. I look at these mothers next.

### **5.2.3.2 Motherhood as core identity**

Kholwa, in contrast to Thenjiwe embraces her son as a part of her identity and this identity is stable throughout the group process. She describes her relationship with her son:

*I sometimes miss him.... ... even when I feel like I’ve got that overwhelming thing, I think of him, I become happy... Like he is just part of me. There’s no time that I forget him, because I always, okay, now, he doesn’t have this and that, what am I going to do... So, we are those people, like he’s like my friend. (6 y, PG, LWC, SG 1, S 2)*

Kholwa thus constructs motherhood as central to her identity “like he is just part of me” and there is no time when she does not think of her son. While part of this is taking care of his needs “he doesn’t have this and that, what am I going to do”, motherhood isn’t constructed by Kholwa as a burden but rather as her source of joy “I think of him, I become happy.” Kholwa thus understands motherhood as a blessing which adds to her life and her child as an intimate companion “friend”, whose presence she misses when he is not around. Olwethu, the married student, also evidenced a core, stable mother identity throughout the group process.

Mothers who live away from their children might long for a maternal identity but are prevented from having this because they are not physically present to build a relationship with their child. I look at these mothers next.

### **5.2.3.3 Longing for a maternal identity**

The biggest challenge for students who live away from their children is losing out on a relationship with their child. Not being able to see one’s child can often mean that student mothers don’t get to know their children. Slindile explains:

*I hadn’t spend much time with her. It was only the December holidays yah uh, I’m not really used to being a mom or something. I haven’t been that close to her um since I’ve been here like most of the time.... I’m not used to her. (6 m, UG, LAC, I 1, S 1)*

In the extract above Slindile presents herself as not really a mother “I’m not really used to being a mom” and as not really having a relationship with her daughter “I haven’t been that close to her”, “I’m not used to her.” This isn’t presented as a regret but rather as her reality.

Students who live away from their children evidence a stronger student identity because this is a role that they perform regularly but their longing for something different, a mother identity, is evident from some of their accounts. This can be seen in the extracts below.

Dudu is not able to visit her baby regularly due to financial reasons. She is only able to go home when her son needs to be taken to the clinic and usually needs to come back to university immediately. Dudu however is full of regret at this situation:

*I can't see him every weekend, I can't see him after every 2 weeks..... It's only that day.... Sometimes I will just have to go for that day only and maybe come back.... it's just kinda hard.... Cause honestly, I would really love to see him like every day.... if not every day, then at least every week, cause home is not that far, it is in Durban....(4 m, UG, LAC, SG 2, S 1)*

Dudu presents herself as helpless to see her son regularly emphasised by her repetition of the word “can’t.” The repetition of and intensity with which Dudu speaks of “that day” highlights how important the one day of time with her son is to her as well as her sense of unfairness that it is for such a short duration. Dudu’s difficulty in being away from her son is evident in the understated phrase “it’s just kinda hard.” Dudu’s craving for more regular visitation with her son can be seen in her expression that she would love to see him “every day”, or at least “every week.” The irony of her being unable to do this is underscored by the fact that her home is comparatively nearby.

Zama, who only gets to see her son once every one to two months explains their relationship:

*He doesn't even know me that much. He's always rejecting meh hh. Like (.) I'm not (.) He (.) the only time he actually is okay with me being around and he kinda likes me is when we with the nanny but when the grandmother comes home, the father is there. (.) He doesn't know me. (2 y, PG, LAC, SG 2, S 2)*

Zama presents herself as taking the situation light heartedly “He’s always rejecting meh hh” with the (hhh) indicting her laughter but her hurt at this rejection and the doubt she feels about her relationship with her son is indicated by the uncertain phrase “kinda likes me” as well as by the frequent pauses in her sentences as she tries to describe this painful situation. Zama positions herself as a stranger in her son’s eyes “he doesn’t know me” and as such, that her presence is tolerated by her son “the only time he actually is okay with me being around.”

She positions herself as inferior in her son's affections to those preferred by her son "but when the grandmother comes home, the father is there."

Hlengiwe also describes feeling unimportant to her son:

*We're sleeping at night, he would wake....and say, "I want granny." .... it's like, "I'm here!" ...., "Don't you see me, I'm your Mom?" ....I had to wake up and take him to Granny." ... It was so painful. My child, like I was enjoying being with him, sleeping next to him and he's like, "No, don't know you." It gets hard sometimes, the connection." (24 m, PG, LAC, SG 1, S 2)*

Hlengiwe positions herself as available "I'm here!" and as enjoying mothering her child. She presents her son as rejecting her "No, don't know you" and as preferring her mother "I want Granny." Hlengiwe positions herself as confused by his rejection "Don't you see me?" and as piqued by having to take him to Granny. Hlengiwe's deep hurt at this rejection is captured by the phrase "It was so painful." Hlengiwe highlights the difficulty of establishing an attachment with her child by use of the phrase "It gets hard sometimes, the connection."

Mbali described a similar experience and drew attention to the loss of being called "mother". Mbali however, while part of her was longing for a maternal identity, had learnt to cope being away from her daughter. She explained that she used to have to go home every weekend when her daughter was younger because her elderly mother needed assistance but now, she only goes home on holidays:

*When she was like....12 months, my mind was with her while I was here. But (.) when she was one year old...I used to forgot...I'm a mom...then when I had to go home, no, I have to see my child and I remember that I'm a mom (3 y, UG, LAC, SG 1, S 2)*

Mbali positions herself as initially thinking of her child constantly when she was at university "my mind was with her while I was here", thus her maternal identity is evident but as her child gets older and she goes home less frequently, she forgets that she is a mother "forgot...I'm a mom" and only remembers this identity when she goes home. This "forgetting" the mother identity seemed to have helped Mbali cope with being a student mother as, perhaps not needing the support, she dropped out of the support group process after the second session. Hlengiwe, in the early group sessions, also reported sometimes forgetting that she was a mother while she was at university. Hlengiwe however sees her child more frequently than Mbali does and thus is perhaps reminded of her mother identity more often.

Having a child can make the mother identity more prominent for some student mothers and can then cause them to feel disconnected from their childless peers. I turn to this section next.

#### 5.2.3.4 Feeling different from other students

Student mothers, constrained by limited time and preoccupation with child-related responsibilities or desperately missing their children, can also feel different to other students and that their conversation about their children is not valued by childfree peers. Dudu, explains:

*I think I no longer fit in their world..... I'm just, no longer interested in...a lot of things, anymore, .... I'm all talk about my son.....I'm boring them, I'm boring them (laughter) (4 m, UG, LAC, SG 2, S 1)*

In the extract above Dudu positions herself as changed after the birth of her son “no longer fit into their world” and as there being a disconnect between her peers’ interests and her own. Ntombi also commented on the gap she feels between herself and her friends.

Feeling different to other students and not having time to socialise or meet up to study (for mothers who live with their children) can lead to student mothers feeling isolated. Kholwa, describes this isolation:

*I was alone because I used to close myself in the cubicles....So like sometimes I would just sit and cry. (6 y, PG, LWC, I 1, S 2)*

Hlengiwe and Olwethu described similar experiences of isolation. Student mothers can also distance themselves from others for fear of judgement. I turn to stigma next.

#### 5.2.3 Baby Mamas

The participants used the term “baby mama” frequently to refer to the way others stereotyped them. When the researcher asked for clarification on the meaning of this term, they explained that it was a colloquial term used by the father of an illegitimate child and others to refer to the child’s mother. They also explained that it came with a variety of negative connotations which have been publicised through American Hip Hop lyrics, such as the rapper, Krazy’s song “I Hate my Baby Mama”; the Outcasts’ song “Ms Jackson”; and Three 6 Mafia’s song, “Baby Mama”. These songs present “Baby Mamas” (the mothers of illegitimate children) as irresponsible, dishonest and manipulative. For example, Thenjiwe describes a “baby mama” as “*These psycho people that are going to call and demand this and demand that, they sort of give everyone that has a child a bad name.*” (13 m, PG, LWC, SG 9, S 2).

The participants explained that these negative connotations associated with the term “Baby Mama” caused them to have to position themselves in contrast to these connotations and that this had power outcomes in relation to their interactions with the father of their child.

The first time that student mothers encountered stigma was during their pregnancy where the evidence of unprotected sex was visible. They report that stigma was particularly bad at this time. Slindile explains how self-conscious she felt on campus:

*You feel as if people are judging you, they are talking about you even as you are walking around campus and someone is not even pointing at you and you are, "Okay. They are talking about me." Or if you are passing a group of students with a belly, this big stomach, it's like, "Oh my God." It, uh, it brings a lot of pressure that people are judging you in some way. (6 m, UG, LAC, SG 1, S 1)*

Slindile with her "big stomach" positions herself as a spectacle on campus which attracts scrutiny "people are judging you", "they are talking about you." Her sense of exposure is so intense that Slindile expects to be ridiculed and judged "pointing at you", even when this is not the case. The excruciating effect that this has on Slindile is captured by the invocation "Oh my God." Thenjiwe described a similar incident with a taxi driver when she was pregnant. Nqobile and Hlengiwe also reported feeling acutely self-conscious when pregnant and as being judged for their pregnancies. This was particularly difficult for Nqobile because she was a schoolgirl at the time. Ntombi and Zama did not report instances of stigmatisation from peers or the community when pregnant but Zama was judged by her father who did not speak to her for the entire pregnancy. All of these student mothers reported that their experience of stigmatisation became easier to deal with over time.

Surprisingly, peers often criticised the student mother using social media. Zama reflected that almost every day someone posted something negative about student mothers. Liyanda describes how an old high school friend of hers criticised her on Facebook for falling pregnant:

*She was like, you go to University and you become pregnant like all those kind of things .hhh you forgot the reason to be there and you play whada wha all those things and I'm like, "No, I can't let her win. I need to prove her wrong..." (2 m, UG, LAC, II, S1)*

Liyanda positions this criticism as being unimportant "whada wha" and predictable by her use of the phrase "all those kind of things" thus Liyanda positions herself as having heard this criticism before and as not really being affected by it. This is belied by her deep sigh half way through her recollection of the criticism "hhhh" which indicates her difficulty at recalling these words again. Liyanda's old school friend seems to be positioning Liyanda as wasting a valuable opportunity "you forget the reason to be there and you play." Liyanda then interprets the criticism as a challenge to herself that she is going to fail and thus feels that she needs to

“prove her wrong” and succeed despite the odds. Thenjiwe also reported that negative predictions of her future gave her extra drive to succeed.

Zama further illustrates this judgement of student mothers as she tearfully relates a hurtful post from a housemate on Facebook:

*She was like “I’m tired of people saying how, if you .... have a child in varsity it doesn’t mean that you don’t have a bright future.” ....and then they were like “Yeah, stuff it, you mothers! ~Stop making yourselves better about your situations~, yoh! “(2y, PG, LAC, SG 7, S 2)*

The housemate positions herself as disgusted with student mothers excusing their circumstances “sick of mothers saying” and positions student mothers as being unworthy of expecting to have a bright future “stop making yourselves better about your situations.” The words “stuff it”, indicate the vehemence of feeling from the housemate. Zama’s pain at this attack is evident by the quiver in her voice, indicted by the tildes (~) as she recalls the words.

Thenjiwe reports that judgement of being a student mother is common everywhere, even from clinic staff at the university clinic:

*I think the problem even starts from as low as clinic level, because when ....they tell you that you’re pregnant. Oh, my gosh, the earful you will get from them...they’re like “You’re supposed to focussing on your books and you’re busy focussing on a boy and you’ve opened your legs, etc” .... they go on and on. (13 m, PG, LWC, SG 4, S 2)*

Hlengiwe reports also encountering judgement from her lecturer when she was pregnant:

*My lecturer walked in the corridor and he was like shocked like, “°What happened to you?°” Like, like I didn’t know how to respond. And like I was so shy and embarrassed. Like I could see that he was disappointed, very disappointed. (24 m, PG, LAC, SG 3, S 2)*

Hlengiwe positions herself as paralysed with discomfort when confronted by her lecturer “I didn’t know how to respond.” She positions herself as having let her lecturer down, thus he was “disappointed, very disappointed” and she therefore feels shame for her pregnancy “I was so shy and embarrassed.”

Judgement also comes from the family. Thenjiwe describes how upset her brothers were that she had a baby shower because it meant her friends were “celebrating that you got pregnant out of wedlock.” (13 m, PG, LWC, SG 7, S 2)

Nqobile, whose child was the result of a rape, describes how even members of her family were against her mother sending her to university because she had a child:

*“You should be grateful to your mum, she sent you to have a great future after having a kid at a very young age, oh, oh.” Like, so what was she supposed to do, keep me at home just because I had a baby earlier? Was it my fault? It wasn’t they know but still they think I shouldn’t go to university. For what? (5 y, UG, LAC, SG 7, S 2)*

Nqobile positions herself as unfairly judged “Was it my fault?” and draws attention to the unreasonableness of this judgement “they know but still think I shouldn’t go to university.”

Nqobile resists the family members attitude that she should be punished for having a baby “at a very young age”, by not going to university “For what?”

Thenjiwe thinks that judgement is linked to being single.

*When you’re still with your baby daddy I feel the respect is still there. Like, they do give me a sense of respect but the minute they know that you’re a single mother it’s like, you just depreciate somehow. (13 m, PG, LWC, SG 9, S 2)*

*The minute you’re with the child alone, they start thinking, “There’s no ring. The man is not next to you, you’re a baby mama”. Like....it’s bad. (13 m, PG, LWC, SG 9, S 2)*

Thenjiwe positions her value and the respect with which she is treated as linked to her relationship status “with your baby daddy ...respect is still there.” “There’s no ring. The man is not next to you, you’re a baby mama” She presents being devalued as a single mother “you just depreciate somehow” and as being quickly labelled by the derisive term “baby mama.” (A baby mama is a colloquial term used by a man to refer to the mother of his illegitimate child. It carries several negative connotations.) Thenjiwe’s opinion is supported by Olwethu, the 40-year-old married student’s experience. Olwethu did not report any instances of stigmatisation perhaps due to her age and married status. She did however report being stigmatised because she was foreign.

Thenjiwe describes that this judgement has driven her to buy and wear a ring to protect her from comments and from having to explain her circumstances.

*Okay, fine, I’ll just wear my ring so you think I’m someone’s wife. Then you’ll give me some sort of respect, clearly. °Heh, heh, heh, heh.° (13 m, PG, LWC, SG 9, S 2)*

Student mothers thus experience many challenges. Many are constantly trying to mother according to the ideals of “intensive mothering” which causes undue pressure and guilt for them in trying to live up to impossible standards. Others are trying to negotiate their different identities and are fighting against losing their sense of self and still others are injured and scarred through not being able to have a maternal identity because they live away from their children. They also experience stigma and judgement in all areas of their lives. Who supports these student mothers in negotiating these challenges? I look at systems of support next.



### 5.3 Existing support

Family support was crucial in allowing student mothers to continue with their studies. Childcare was usually provided by a maternal or paternal grandmother either in a full-time capacity where the student mother lived away from her child in order to attend university, or in a part-time capacity, where childcare was provided during the day while the student mother was attending classes. Where grandmothers were in paid employment, the child was cared for by a nanny or was sent to creche during the day and the grandmother or student mother then took over childcare in the evening. Slindile explains:

*It hasn't been that bad because Mom is like, " >Everything is ok:ay, just do your work there and I've got everything under control, you don't have to worry. You don't have to do this<. "(6m, UG, LAC, I 1, S 1)*

Here Slindile positions herself as managing being a student mother as shown by her use of "hasn't been that bad" because her mother has taken over responsibility for her child indicated by "I've got everything under control." Slindile can thus turn her attention to her university work and does not have to worry about mothering.

While having a supportive family member look after one's child enables the return to university, it can also come at a cost. I look more closely at this cost next.

#### 5.3.1 Ownership – whose child?

Zama, whose son lives with his paternal grandmother describes this cost:

*When she talks, it's like it's her last born. She only has one child so....it's like her last born. This is my son, my last son. (2 yr, PG, LAC, SG 2, S 2)*

In the extract above, Zama positions the paternal grandmother as talking about her son as if he were her child "my last son". By doing the work of mothering in Zama's absence, the grandmother appears to also claim maternal rights to the child, indicated by the repetition of the possessive "my". Zama further describes how the paternal grandmother will call and check on the child when he is staying with Zama:

*She calls, "Is he eating?" I'm like, "Huw, so you the mother now?" Is ....is he eating? Is he okay? Does he sleep properly at night? (2 y, PG, LAC, I 1, S 2)*

In the above extract the grandmother positions herself as the mother concerned with the nurturing and wellbeing of the child. Her sense of entitlement to do this is illustrated by the rapidly fired questions demanding answers. The irony of the grandmother enquiring this from

the child's own mother is summed up in Zama's indignant reaction of "so you the mother now?"

Being absent can also mean that other rights which usually fall to the mother of the child are uncertain. Dudu, whose son lives with her mother, positions herself as powerless to control how her child will be raised due to her physical absence in his life:

*I want him to grow up to be that ° like um disciplined°.... but then we have >no control over that< because I'm not always at home and I have no say when I get home because like, "You can't say that to my child". It's more like it's her child, you know? (laughter). (4 m, UG, LAC, SG 3, S 1)*

Dudu's repetition of the negative "no control", "no say" reinforces the lack of power she feels. In addition, she highlights her inability to challenge this as she is not the person doing the 'work' of mothering indicated by "It's more like it's her child" and thus due to her absence, she has lost the right to control how her son is raised.

Lack of control in childrearing is not just an issue for mothers who live away from their children. Thenjiwe, whose son is taken care of by her mother during the day, speaks of her frustration at her mother's refusal to adhere to her wishes and not let him have a late afternoon nap:

*I will get home .... and I will be like, ">But Mom, why are you putting him to sleep at 5<?" And then he's going to get up at 7 and then he's only going to sleep at 10/11. So, when I'm there, I can control it...My mom just doesn't get this whole routine th(h)ing. >She's like "No, when a baby wants to sleep, a baby should sleep"< and I'm like "N(h)o.; don't do it like that!" (13 m, PG, LWC, SG 3, S 1)*

Thenjiwe positions herself as incapable of preventing her son from napping unless she is physically present "I'm there" to contest her mother's ideas and keep him awake. She positions her mother as not understanding the value of a routine and therefore rejecting her wishes but what is not said is her indebtedness to her mother and thus her powerlessness to assert her own wishes.

Some student mothers also found that they clashed with their parents over their views about adhering to traditional practices. Thenjiwe explains:

*Cause I think being in varsity now has sort of broadened our thinking ....so we are not as traditional as our parents any more. They'll .... "Don't do this with the child, you need to do this." Really Mum, it just doesn't make sense....but you'll just do it because you don't want to get into an argument with her" (13m, PG, SG 1, S 1)*

In the extract above Thenjiwe positions herself as broad minded “broadened our thinking” and thus as wanting to reject traditions that don’t “make sense” to her but as supressing this desire “you’ll just do it” in order to avoid upsetting her mother “you don’t want to get into an argument with her”. There is a sense of needing to be compliant and accommodating in order to keep the peace. Dudu reported similar issues with her parents.

While most families provided support in the form of childcare and financial support in the form of an allowance or a place to live, they did not always provide emotional support. I look at this next.

### **5.3.2 Craving emotional support**

Student mothers were often unable to talk with their families about their feelings, challenges and frustrations. Thenjiwe illustrates this:

*I know, even if it is 2 am, I can say, “Mum, he’s throwing up and I don’t know what to do.” Then she’ll get up and she’ll help but if It’s just me feeling overwhelmed, she’ll be, “You’ve got a boyfriend, so call.” (13 m, PG, LWC, I 1, S 1)*

In this extract Thenjiwe positions her mother as available to support her in the mothering work of childcare but as unwilling to offer emotional support which she feels is not her role and should rather be sought from Thenjiwe’s boyfriend.

Similarly, Hlengiwe, describes her mother’s reaction after she broke down on the phone to her mother about leaving her five-day-old son for the first time to come back to university in order to write a test:

*Cause even myself they were telling me, “Don’t cry (.) this much, cause it’s affecting the baby” I just said, I can’t cope. (24 m, PG, LAC, SG 2, S 1)*

While Hlengiwe’s mother provides financial support, for which Hlengiwe is grateful, she discourages Hlengiwe from speaking about her sense of loss at leaving her infant behind. Hlengiwe’s mother thus does not provide emotional support but instead draws on a traditional belief to hush Hlengiwe’s expression of emotion. This belief, which other student mothers also recognised, refers to the bond between mother and child and suggests that if the mother is unhappy, it will affect the health of her baby, even if they are separated by place. Dudu and Liyanda also described stopping themselves from crying upon leaving their young infants because they feared their negative emotions would affect their infants.

### 5.3.3 Childcare as a favour

Some participants who lived with their children stated that because families often do not understand that success in university requires work at home in addition to attending lectures, they were expected to take over child care duties as soon as they get home. Ntombi, whose stepmother used to look after her daughter and had her timetable, explained that she was expected home straight after lectures end which means she would not be able to study at university.

*And then, ~when I had to come back home~ she will just give me the child.~ And then, time for studying was really hard, because I had to study at night. And then.... I'll just wake up late, because I was so tired.~....I just find her heart so cold. (7 m, UG, LWC, F G 1, S 2)*

The strain that this lack of understanding puts Ntombi under is highlighted by the wobble in her voice (illustrated by the tildes, ~) as she explains how her stepmother would just hand the child back to her when she arrived home, irrespective of what her work pressures were. Ntombi positions her stepmother as recognising her stress but refusing to support further thus she finds “her heart so cold.” Thenjiwe reported a similar experience.

Thenjiwe further explains that because childcare from the family is a favour, it is not always something she can depend on:

*Sometimes she'll just get up and have a bath and tell you that's she's going out on my varsity days. And I .... she doesn't owe me anything. (13 m, PG, LWC, SG 1, S 2)*

The extract above illustrates how little control Thenjiwe has over her child care arrangements. Her mother is not obliged to take care of her child “she doesn't owe me anything”, and he is not her responsibility.

Needing to rush home to take over childcare also prevents student mothers from being able to take advantage of study groups and support from peers. Ntombi further explains:

*Other students get to meet up for study groups, maybe preparation for test. I don't get to go there because most of them are on Saturdays. Then, on Saturdays, I have to be at home watching over the child because Mom will definitely not watch over the child because I am not going to school. (7 m, UG, LWC, SG 3, S 2)*

I turn next to the contribution of fathers in providing support to student mothers.

### 5.3.4 Baby Daddys

Baby Daddys is used as the title of this section as it is how many participants refer to the father of their child.

While two of the student mothers (Zama and Olwethu, the married student) were in financially and emotionally supportive, committed relationships with their children's fathers, others had varying degrees of contact and support. Of the remaining nine student mothers in the study, five received no support whatsoever, one received financial support (Hlengiwe), two received emotional support and occasional financial support (Ntombi and Dudu) and the remaining student (Thenjiwe) received financial support when it suited her child's father. The majority of fathers of the student mothers' children were employed (Zama, Hlengiwe, Olwethu, Thenjiwe, Ntombi, Zodwa, Mbali) and only one father was a student (Dudu).

Ntombi, while she did not receive emotional support from her family, stated that she received this support from her boyfriend. Ntombi explains this emotional support:

*I do talk to him, he's like the only person I talk to (7 m, PG, LWC, I 1, S 2)*

Ntombi's use of the word "only" draws attention to the lack of other sources of emotional support in her life and thus to the importance of this support.

Other students have less positive experiences. Slindile, who has no contact with her baby's father, describes how he knew that she was pregnant but didn't take responsibility:

*I decided no let me not bother him again .... He knows he's going to be a father, he has to inform his family and then they will have to take some responsibility but somehow, they didn't. (6 m, UG, LAC, I 1, S 1)*

Some fathers had tried to be involved in their children's lives but were prevented from doing so due to cultural traditions. Mbali described that her child's father had not paid damages which is a financial payment to the girl's family as acknowledgement of responsibility for causing the pregnancy, so her family prevented Mbali from seeing him which caused him to withdraw all support. Similarly, Ntombi's baby's father, wanted to be involved in his daughter's life but is prevented from doing so due to the damage's payment:

*When they want to see her, I have to ask my mom and she'll be like, "No, she can't go there because ....the damages have not been fully paid...." (7m, UG, LWC, SG 2, S 2)*

Ntombi presents the unpaid damages as a barrier to her boyfriend being able to be an active father. This barrier prevents Ntombi from accessing additional support and ultimately forces Ntombi to care for her daughter alone. Not being able to take advantage of this potential support, also impacts on Ntombi's ability to cope.

Ntombi's boyfriend is the only one working in his household so he has to take care of home first and then his child which leaves Ntombi financially responsible for her daughter "Maybe

*he comes with the nappies money only or maybe he will come with the food money and then the rest will be up to me. ...” (7 m, UG, LWC, I 2, S 2)* Ntombi thus has to use her financial aid to buy items for her daughter and to pay creche fees.

Dudu explains that trying to maintain the relationship with the father of your child in addition to everything else can be challenging:

*You have to focus on your school work, ....and your baby....but then, a part of you....wants to make things work and want ....your baby.... to have two parents, ....it's just, it, one of the challenges. (4 m, UG, LAC, SG 2, S 1)*

Dudu presents working on her relationship as “one of the challenges”, in addition to school work, her baby and other commitments. She positions wanting to “make things work” with the father of her child as for her baby’s sake, for her “child to have two parents.” In this Dudu is drawing on the good mother discourse where the child’s needs and well-being are put first. Thenjiwe also described trying to make the relationship work so that her son would have two parents.

For some student mothers, the relationship with the father of their child is a great source of stress and unhappiness. Thenjiwe who was in a close relationship with the father of her child until he was born explains:

*I'm very angry at (.) myself, honestly, cause I'm like, “Oh gosh, why did I fall for whatever it is that he said or, whatever it is that he did, and now I'm stuck here and his life is going on. And, I have to juggle everything, when the baby is sick, when I have to have this whole plate and it's on me. So it, I think it creates a lot of hate and resentment and anger, it really does. (13 m, PG, LWC, SG 1, S 1)*

Thenjiwe positions herself as someone who has been hoodwinked “why did I fall for whatever it is that he said” and is thus “very angry” at herself for being gullible. She positions herself as immobile “stuck”, as unable to continue with her own life, while “his life is going on”, unaffected. Thenjiwe positions herself as having to take all the responsibility “it’s on me” for the child and as being overwhelmed “this whole plate”. She positions her life as being turned upside down “I have to juggle everything.” Thenjiwe speaks of the “hate, resentment and anger” that this creates but what is left unsaid are the unfulfilled promises over which she is grieving.

Another source of stress for Thenjiwe is that her child’s father is supportive when it suits him:

*He's, supportive when he wants to be supportive. So like he gets paid on the fifteenth, so he's a Dad on the fifteenth, sixteenth, seventeenth then after that he disappears.... then maybe at the end of the month, he'll call to say can he see his son and yeah I guess I'm supposed to be okay with that. (13 m, PG, LWC, SG 2, S 2)*

In the extract above, Thenjiwe positions her child's father's involvement as optional "when he wants to be supportive." The emphasis on the word "wants" implies that this support cannot be relied upon and can be withdrawn at any time. Conscious of this, Thenjiwe contests this partial parenting "I guess I'm supposed to be okay with that" but is careful not to challenge him too strongly in case she loses all support. Thenjiwe expresses her frustration that financial provision alone is seen as acceptable by friends and family, "*culturally...., if he is providing financially.... That's ....being a very good father....*" (13 m, PG, LWC, I 1, S 2) Thenjiwe feels that her child's father should also be emotionally present for him:

*It was meant to be a mother and a father for a reason so it's not just about (.) you supporting financially. I think that emotional bond of having a mother and a father is important. (13 m, PG, LWC, SG 2, S 2)*

Thenjiwe highlights the importance of a child having "that emotional bond" with both parents. This is taken as a truth "it was meant to be" thereby demonstrating that Thenjiwe is drawing on the discourse of intensive mothering. Drawing on this discourse, causes Thenjiwe to feel that, for her son's emotional development, she needs to forge a bond between him and his father. Thenjiwe reported facilitating contact between her son and his father by using Whatsapp video call in order to try to build a relationship between them. Mbali reported doing the same thing for her daughter with her daughter's father.

Increasingly, Thenjiwe's baby's father does not bring baby items when he has agreed to do so and will not respond to her messages, this burden then falls to Thenjiwe and thereby intensifies her stress. Thenjiwe discusses how her child's father not honouring his obligations and avoiding her phone calls, forces her to behave like the stereotypical "baby mama". "*I have to end up calling you...it's going to end up being like, now I'm actually being a baby mama.*" (13 m, PG, LWC, SG 9, S2) Thenjiwe is aware of the "Baby Mama" stereotype and takes great pains to position herself in opposition to this.

Many of these student mothers are lacking emotional support and a space to discuss their feelings and challenges. Some of them had been referred to the peer support group by counsellors due to being "at risk" of academic failure which required counselling as stipulated by academic monitoring. However, while monthly counselling was recommended, only two of them regularly saw a student counsellor, therefore while this avenue of support

was available, it was not well utilized. The overriding aim of this research was to create a peer support group process over time for student mothers and to see how participating in this process benefited them. The results show that the peer support group process was a source of empowerment for student mothers which directly impacted on their coping.

#### **5.4 Improved coping**

After participating in the peer support group process, student mothers described coping better. Thenjiwe explains:

*Speaking in the group made the good difference even though they weren't...., taking my son for the weekend and doing this and doing that. But speaking to them....calmed me down... there has been a lot of, a lot of change and a lot of impact on my life, and on my mothering and my life as a student as well... (13 m, PG, LWC, I 2, S 2)*

Ntombi explains that talking in the group has helped her cope better emotionally:

*I've been emotionally relieved if I may say. Because I wasn't coping ....I was always like a bit frustrated when something happens. I used to cry a lot but then I've been in the group and talking about it and I've noticed that it's okay for me to get frustrated sometimes. (7 m, UG, LWC, I 2, S 2)*

Hlengiwe also explains that being part of the group has helped her cope better to the point where she feels she can cope without anti-depressants:

*So it's really helped me a lot, because I'm even off my meds. Like I think it has played a part as well. (2 y, PG, LAC, I 1, S 2)*

I look now at some mechanisms inherent in the peer support group process that empower participants and facilitate coping.

##### **5.4.1 A space to express emotions with similar others**

Many participants described appreciating being able to talk to other student mothers about their experiences, Olwethu describes this benefit:

*I've discovered since.... joining the group, ....I get to say some things out and they say a problem shared is a problem solved, so I think for me it is actually helping. ....just having people.... you have something in common with. (3 y, 5 y, PG, LWC, SG 6, S 2)*

Thenjiwe explains that sharing experiences with other student mothers makes them realise that they are not alone in what they are going through:

*All just knowing that you are not alone....you are not the only one dealing with this....our situations may be different but they are the same (.) in a sense. (13 m, PG, LWC, I 2, S 2)*



Nqobile highlights how valuable it is to get talk to and get advice from peers who have probably experienced similar problems:

*But then, hearing from them having the problems at the same way that you are having them. At the same time probably, makes it much better. (5 y, UG, LAC, I 1, S 2)*

Kholwa explains that knowing that the group is coming up helps her cope:

*Sometimes you feel like drained and down but knowing that we are meeting at half-ten, like we're going to talk. You, we, that's how I cope with what I'm doing. (6 y, PG, LWC, I 1, S 2)*

Participants also valued the opportunity participation gave them to vent their anger, frustration or hurt in the group. Zama discusses how if something is bothering her, she will vent it in the group and then be able to cope better with her emotions and her work:

*If I do have something to let off, I will go on Thursday and just vent it out (laughter) .... I will just talk about it on Thursday... after the group at night I'd go to do my work, not because I'm stressed but I'm just happy...(2 y, PG, LAC, I 1, S 2)*

Sometimes it also helped to be able to laugh about their challenges together. Kholwa explains:

*going there listening, talking, laughing because we had a lot of laughing.... laughing at our heart issues and stuff..... It's because when you are alone you're thinking of your stuff and sometimes you don't even know that you can laugh out of it....it's a therapy on its own....(6 y, PG, LWC, I 1, S 2)*

Because student mothers all had children, they felt that they could talk about their children freely without feeling that they were boring their peers. Ntombi explains:

*I get to talk about my child to other people...most of the time when I meet with the others, I don't get that chance to talk....about her.... (7 m, UG, LWC, I 2, S 2).*

#### **5.4.2 Feeling understood and acknowledged**

Kholwa describes the group as a secure place where she can be weak and be open about how she is feeling:

*You have this place or you have this person where you can be weak. As much as I cry to God but sometimes I need a person...understands me..., you know. Just talking .... just offloading you know, cause it is heavy. (6 y, PG, LWC, I 1, S 2)*

Kholwa goes on to describe that the group is a place where participants can give and receive strength from others:

*You hear one situation and you feel, yoh, okay this person is strong, I'm weak. We are weak for each other, we are strong for each other, we are weak to each other and that helps. (6 y, PG, LWC, I 1, S 2)*

#### **5.4.3 A sense of belonging**

Student mothers stated that being part of the group gives them a sense of belonging. Ntombi articulates this feeling:

*I just felt safe like I belong here. Yeah. These are my people. (7 m, UG, LWC, I 2, S 2)*

Kholwa echoes this sense of family belonging:

*When we meet now it's different.... it's, like you're seeing a sister, "Hey, how are things?....You could say ....we're a kind of a family now." (6 y, PG, LWC, I 1, S 2)*

Kholwa's use of the terms "sister" and "family" demonstrate the sense of intimacy and closeness she feels to members of the group. Feeling a sense of belonging and intimacy means that when others in the group give reassurance or encouragement, they can be believed because they really know you. Kholwa explains this:

*The fact that she's saying, "No it will be fine". It's because she believes in me...(6 y, PG, LWC, I 1, S 2)*

#### **5.4.4 Decreasing isolation**

Meeting regularly with similar others who care can thus also decrease student mothers' sense of isolation and mediate their stress. Hlengiwe explains:

*I'm doing well....is has helped me like to feel less isolated like to know that okay every week I spend time with people. (2 y, PG, LAC, I 1, S 2)*

Olwethu similarly explains that being with others helped her to cope better:

*Initially you know I would be alone. I would just get so worked up. I would get so overwhelmed and I would just yell and I still yell though, heh, heh at the kids but it's better now. I'm coping much better... (3 y, 5 y, PG, LWC, I 1, S 2)*

Many participants also stated that they had made friendships in the group and that they communicated with other participants outside of the group. Olwethu describes this:

*It's gotten better since I joined the group because at least I have people I can talk with and I've expanded my.... friend, heh, heh, circle.... (3 y, 5 y, PG, LWC, I 1, S2)*

The mutual experience of being a student mother created identification within the group and a strong sense of empathy for one another. Reciprocal sharing of intimate experiences and emotions unified people and developed a sense of belonging and a culture of acceptance.

Being accepted and feeling a sense of belonging enhanced the self-esteem of participants. Participants also highlighted that they had learnt from one another:

#### **5.4.5 Learning from others**

Nqobile describes how she has learnt from listening to others:

*I can listen to their problems. I grow from their problems. I learn from their problems .... But then, with other people .... when they share their stories, sometimes I know what to expect. Then I share my story, they tell me it's a common thing, then I worry less. Oh, okay, so it's not me alone at least. (5 y, UG, LAC, I 1, S 2)*

Olwethu felt that she had learnt and grown by listening to some of the group members responses to problems. Olwethu refers to Kholwa in the extract below:

*Definitely we can't all be the same but her reaction to things and her answers .... they really resonated with me and kind of challenged the way I look at certain things and I have learned. (3 y, 5 y, PG, LWC, I 1, S 2)*

Thenjiwe, who took up jogging after she heard that it helped Kholwa to cope with stress, describes how she had learnt additional coping skills from hearing about the experiences of others. Thenjiwe relates:

*The way someone else deals with their things helps you with lots, so I think even in this sense as Kholwa is saying, is that the ways that she deals with stress could help me (13 m, PG, LWC, SG 6, S 2)*

Olwethu describes that she has learnt skills from others and that this has had an impact on her parenting and thus on her coping, in particular:

*I'm also picking up ....certain (.) parenting tips from the other ladies it has really helped and I'm trying ....put that into practice with my kids. And it is really helping. It is much better, heh, heh, heh, that is all I can say. (3 y, 5 y, PG, LWC, I 1, S 2)*

#### **5.4.6 Comparison with others**

Student mothers described being motivated to succeed by observing those who had older children and appeared to be coping.

Thenjiwe described how she had been inspired by hearing Kholwa's story of unsupported single parenting:

*Kholwa seems like .... a true like, example of what we could be like in future. In the sense that it seems as though she's been through what we're going through now. And seeing that her son is already six gives you ....that glimmer of light that, mmm, maybe we can actually do this. (13 m, PG, LWC, SG1, S2)*

Zama describes the effect that the strength of others has on her:

*I feel like .... the more people show courage, ....the more it motivates you to actually be strong, ....in a way that you never actually imagined you would be strong. (2 y, PG, LAC, I 1, S 2)*

Ntombi also describes the effect of comparing herself to those who are succeeding academically:

*I....got more motivation in the group because I was with people who are doing their masters...they are doing good and they are also mothers. (7 m, PG, LWC, I2, S2)*

Student mothers can also benefit by comparing their circumstances to those of mothers whose circumstances are more difficult than theirs. This puts their own circumstances into perspective.

Thenjiwe explains:

*So your situation is hard and if you are not comparing it with anyone else's for you it is the worst. But hearing, other people's experiences, it is like, "Okay, people have it hard", and in as much as I complain about my situation (.) their situation is harder and if I put myself in their shoes, I don't even want to put myself in those shoes kind of thing. (13 m, PG, LWC, I2, S2)*

Hlengiwe also describes the effect of this on her understanding of her own circumstances:

*I was crying for nothing, I can say. Now I'm going to have a different perspective now. (2 y, PG, LAC, SG 1, S 2)*

Student mothers also benefited from discussing their children's behaviour and development and comparing this with others. Nqobile explains:

*when you go through it alone you feel like this is me alone that's facing this thing. Maybe my child is the only child doing this and stuff. But then, when you get to hear people saying that, no, it's not yours alone. Then you feel like, okay, I guess it's normal, then it makes it better. (5 y, UG, LAC, I 1, S 2)*

Thenjiwe reports similar feelings:

*What my son is doing now is what Kholwa's kid did, so I'll get some sort of advice, some sort of relief, "That okay. So, he is not abnormal in any sense or there is nothing wrong with the ways things are going." (13 m, PG, LWC, SG 6, S2)*

#### **5.4.7 Helping others**

While all the participants shared experiences and received positive feedback from others for this, some participants described how the social feedback they received after helping others, actually helped them to cope. Kholwa reflects on her experience:

*Having been with the support group, it has helped me because like with the feedback that I have got from my co-group ....saying they like (.) me being there has helped them ....so in (.) like (they) think differently and stuff... (6 y, PG, LWC, I 1, S2)*

Similarly, Kholwa explains that this feedback is a source of strength and self-esteem to her:

*It has helped me because like they told me that they learned to be strong like looking how far I've come and things. Like you remember the other day they said, they even said they felt like they were being cry-babies.... (6 y, PG, LWC, I 1, S 2)*

The peer support group process thus empowered participants by providing social support in the form of a sense of belonging and acceptance and empathy; the opportunity to learn coping and skills from others; an opportunity to compare their circumstances with others and an opportunity to help others.

This sense of empowerment had outcomes for participants in the form of acceptance of circumstances and their own capacities, increased self-esteem, enhanced self-efficacy and increased agency. These empowerment outcomes can be seen in the way participants viewed and coped with challenges after group participation.

## **5.5 Shifts in responding to challenges:**

### **5.5.1 Balancing roles**

Ntombi evidences increased self-efficacy after hearing about Kholwa's experience:

*Hearing her, that she's been mothering her child all alone all these years is just amazing. Ja, I also feel like I can do it now (7 m, PG, LWC, SG 1, S 2).*

This caused Ntombi to believe that she too can succeed as a student mother and to develop an attitude of acceptance of her circumstances:

*Part of me that has accepted that it is going to be like this. Like more time with my daughter and then the free time that I have, have to go to my studies....There is no time for me to like chill a little. (7 m, UG, LWC, I2, S2)*

Ntombi increased self-efficacy leads to her finding a way to give enough time to her studies and to her mothering. She reports that she tends to her daughter in the evening, goes to sleep with her for a couple of hours and then wakes up and studies from 10:00 until 2:00 am.

Ntombi also reports that although she had not done well in the first semester, that she had passed in the second semester:

*I don't know if I'm balancing it or...But I get much time with her and then my results proved that I do get time to study and it works for me. (7 m, UG, LWC, I 2, S 2)*

Olwethu reported comparing her own circumstances with those of Thenjiwe's and realising that she was not doing too badly after all. This allowed Olwethu to accept her circumstances and that she was not going to be able to progress as fast as childless students:

*To actually relax and, you know, take things easier and not be so hard on myself...I mean that okay, you're a mother and you're juggling a lot of things right now and it's understandable, you know. (3 y, 5y, PG, LWC, 1, S 2)*

In the above extract Olwethu's acceptance of her circumstances is demonstrated by the phrase "you're a mother and you're juggling a lot of things." This acceptance of her circumstances allows Olwethu to forgive herself for not progressing as fast as she would like "it's understandable" and to be more gentle with herself "to actually relax ...take things easier and not be so hard on myself".

Thenjiwe also evidenced acceptance of her situation by comparing her circumstances with others and practicing gratitude for what she had:

*Some of them have six, seven-year-olds and they have no father and they are managing. It is not ideal....but they are managing with what they have. So, for me it was also like "You have a family, you have a job, even though it is not stable, but you have the basics there, so use what you have for now." (13 m, PG, LWC, I 2, S 2)*

Thenjiwe positions herself as having more than others "You have a family, you have a job" and as others coping with less "they are managing with what they have". This spurs Thenjiwe to make the best of her situation and "use what you have for now".

Comparing her own experience of motherhood to Kholwa's experience of being a student mother without any support and of Nqobile's experience of raising a child who was the result of rape, Olwethu's experience is put into perspective for her:

*You know all this while I've been thinking, like I'm going through the worst.... time and then listening to the two of you ....it just became clear to me that what I am going through pales in comparison to what the two of you are going through and I just made up my mind, like stop with all the complaining, like I'm doing actually doing good. (3 y, 5 y, PG, LWC, SG 5, S 2)*

Olwethu positions herself as someone who has been self-absorbed with her experience "I'm going through the worst". She positions Kholwa and Nqobile as worthier of sympathy than she is "what I'm going through pales in comparison". Thus, feeling a bit ashamed of herself, decides to "stop with all the complaining", realising that she is "actually doing good" in comparison. This prompts Olwethu to accept her circumstances and to show her self-efficacy in evaluating her options and splitting her time between university and her children:

*I have to shut out school and deal with the kids ....So, I think for me ....that's the balance. There's time for school, there's time for (. ) (3 y, 5 y, PG, LWC, I 1, S 2)*

Thenjiwe, who at the beginning of the peer supportgroups maintained that it was preferable to live away from your child as a student, reframed living with her child as a privilege rather than a burden, after comparing her circumstances to those mothers who were forced to live away from their children:

*As I much as I want time away from my son, I think I prefer it regulated by me than it being forced because he is so far and I need to be at varsity.... for me that is still like very, I think a privilege. (13 m, PG, LWC, I 2, S 2)*

The group process also allowed shifts in the way student mothers understood motherhood.

### **5.5.2 Shifts in the construction of motherhood**

Most of the participants drew, to greater or lesser extents, on the dominant ideology of motherhood in society, i.e. intensive mothering when explaining and practicing motherhood although some participants resisted aspects of this ideology. During the process of the groups, interaction over time with one another's accounts of themselves and their mothering practices shifts were produced in the construction of motherhood for some participants.

Ntombi for example, states, in contrast to feeling like she had to focus on her child and only come back to university when her baby is older, that listening to others in the group made her realise that:

*It is doable for me to better myself while taking care of my little child. I shouldn't have to wait for her to grow a little....I can still do it while she is also growing. (7 m, UG, LWC, I 2, S 2)*

Ntombi thus gives herself permission to work on the project of the self "better myself" now, "It is doable for me" when her child is still young. This is thus a shift from her previous construction of a good mother being physically available and accessible to her child. Ntombi states that her revised understanding of what a mother is was influenced by Thenjiwe who is also a mother to a young child:

*He is still young. But then she is bettering herself for him so ja, that gave me like a light to see that I can also do that. (7 m, UG, LWC, I 2, S 2)*

Thus, participation in the group induced Ntombi to incorporate bettering herself for the sake of her child as part of her construction of motherhood. Interestingly, in an interview after

group participation, when asked what the most important thing a mother could do for her child was, Ntombi answered:

*Make sure that the child is well taken care of but also that the mother is fine. Like emotionally, she is emotionally prepared to take care of her child and happy for her child, not just pretend to be happy for the child's sake. (7 m, UG, LWC, I 2, S 2)*

Ntombi also now highlights that a mother needs to take care of herself emotionally “that the mother is fine”, in order to be stable for her child. While emotional self-care is still ultimately for the sake of the child, participation in the group and perhaps the influence of others, like Thenjiwe who resists the all-encompassing nature of motherhood, has now allowed Ntombi to focus on the needs of the mother. Thus, she is able to consider her own needs, as well as those of the child and to incorporate this into her understanding of a good mother.

Participation in the group gave Thenjiwe permission to take time, which she so desperately needed, away from her child for herself and not to feel like a bad mother for doing this:

*I just .... tell my mom.... I have got lectures even though I don't have lectures just so that I get that time off. And then there were people reassuring that actually that is a good thing and you are not being a bad mother by doing that. So that reassurance for me was like, "Okay." (13 m, PG, LWC, I 2, S 2)*

Here, Thenjiwe recognising her need for a break from her child, and gaining reassurance from the group that taking this time doesn't make her a bad mother, changes her construction of the good mother. Thus, she incorporates into her construction, also giving yourself time in order to be in a good place to mother your child.

### **5.5.3 Shifts in identity**

The ongoing group process with its high levels of warmth and acceptance, also provided the ideal place for participants to renegotiate their identities by telling their stories and listening to those of others.

#### **5.5.3.1 Resolving tensions – identity integration**

Thenjiwe in the process of the peer support group sessions, begins to show more acceptance of her mother identity. In the extract below, she reflects on missing her son when he is with his father over the weekend:

*On Friday I couldn't fall asleep. Cause I was like, "Okay, there is someone missing here" ....I'm thinking I wonder if he hasn't jumped off the couch.... where he has broken his arm, you know... ....No, I won't survive a whole week*



*without my son, heh, heh”, because just the weekend on its own almost drove me crazy. (13 m, PG, LWC, SG 6, S 2)*

This shows a shift in identity integration from Thenjiwe’s earlier positioning of feeling like her self-identity is being overwhelmed by her motherhood role to acknowledging that her son is an integral part of her life “someone missing here”.

This process culminates with Thenjiwe, in the final peer support group, showing an integration in her identities:

*The minute you mention my name, Ayanda’s name is already there by default...you separating two things that cannot be separated...as much as I’m not defined by being a mother but I’m Thenjiwe, then I’m a mother (13 m, PG, LWC, SG 9, S2)*

Previously Thenjiwe was fighting against being engulfed by motherhood and seemed to be desperately trying to hold onto her own separate identity, even resenting her mother identity. This extract shows an acceptance of the entwined nature of her identity with her son’s in the words “two things that cannot be separated”. While Thenjiwe still argues against being characterised primarily by her motherhood role “I’m not defined by being a mother” she can now accept that it is a big part of her identity “I’m Thenjiwe, then I’m a mother”. While it is not obvious where this shift comes from, it is possible that by hearing others like Kholwa describe her child as part of her and as a blessing and in taking the time away that she so desperately needed, Thenjiwe was able to construct her identity to integrate her mothering role with her student role and personal identity in a way she can be comfortable with.

Nqobile also demonstrates an acceptance and integration of her identities. She reflects that at the beginning of the group process she used to feel embarrassed about being a mother and a student:

*I think I wasn’t (.) comfortable with the fact that I’m a mother and a student. I, > okay, I wasn’t accepting that much<. ... Even though I knew that I had a kid and stuff. But then it always hit me that, okay, I’m a student and a mom, it’s some sort of embarrassment or something. (5 y, UG, LAC, I 1, S 2)*

Nqobile reports that she felt less embarrassed about being a student mother since joining the group:

*And then, when I met the others then I realised it’s okay. It’s not that much of an embarrassment.... then it made me feel better. (5 y, UG, LAC, I 1, S 2)*

Through interacting with other student mothers “I met the others”, Nqobile demonstrates acceptance “it’s okay”, “it’s not that much of an embarrassment” that she is a mother and a

student, which helps her “feel better” about her situation. Being part of the group thus helps normalise Nqobile’s experience and legitimates her mother and student identities.

Nqobile also describes how hearing that other student mothers are happy with their children has further helped her accept that she is a mother and a student:

*Seeing other people happy with their kids. It's like, okay (.) I guess (.) I should just (.) accept this. Because I think I have accepted the fact that not many people have kids. Then, knowing that, okay, it's fine, this is me telling people that I have a kid just concluded the fact that okay, I'm a mom and I'm happy. (5 y, UG, LAC, I 1, S 2)*

Nqobile positions herself as getting to a place of peace about being a mother “I’m a mom and I’m happy” through hearing positive accounts from other student mothers “people happy with their kids” which helped her realise that she should “just accept” this as part of her identity.

Accepting her mother role as part of her identity causes Nqobile to develop more agency in relation to her son. In discussing whether the participants would leave their children at home if they got married, Nqobile says:

*I don't think I'd ever leave him, no. I think for me, I know how painful it is to grow without a mother. So, I don't want him to feel that things. I don't think I, I, I'll ever be comfortable being away from him. (5 y, UG, LAC, SG 9, S 2)*

#### **5.5.3.2. Claiming a maternal identity**

Hlengiwe also shows a stronger mother identity over the process of the peer support groups. In an interview after the support-groups, Hlengiwe commented that before participating in the groups, for her child to live away from her was normal and that it was not that important to her:

*Like, it was just normal like okay he lives at home like when I finished okay I go to job. Like I didn't, it was not that important to me, like I didn't see the importance that much... (2 y, PG, LAC, SG 2, S 1)*

When asked to define “mother” in the interview after the support groups, Hlengiwe says:

*I think for me, “mother” is someone who should always ....be there for her child. Someone .... who is everything to her child because nobody will ever be ay, like a genuine mother to my child. So, a mother is that like loving, caring and very supportive in an unconditional way human being in every child's life like. And especially it should be the biological one (2 y, PG, LAC, I 1, S 2)*

Hlengiwe thus shifts her understanding from it being normal to be away from her child to a good mother being physically present “always be there”. Someone who is very important to and involved with her child “who is everything to her child” and someone who is loving,

caring and supportive. Hlengiwe also uses the word “unconditional” which is a psychological term often used in parenting manuals to refer to loving a child without conditions attached to that love. These words show that Hlengiwe is now drawing on the intensive mothering discourse. This indicates that Hlengiwe who was initially suffering because she was longing for a maternal identity, is now claiming a stronger maternal identity and is positioning herself within the discourse of intensive mothering to do so. It is possible that Hlengiwe has been more influenced by the discourse of intensive mothering in the group process during her interaction with mothers who live with their children. Interestingly, Hlengiwe highlights that a mother should be “biological”, which is perhaps indicative that, she is now claiming precedence in her right to be a mother to her child based on the fact that she gave birth to him.

Claiming a stronger maternal identity makes Hlengiwe feel that she is missing out and makes her want to live full-time with her child and to be more involved in his life:

*To have a bond.... I am the one who should take that initiative because he is my child....I won't be able to do that.... if we live separately.... I was learning a lot from the group like the importance....of staying with your child (2 y, PG, LAC, I 1, S2)*

In using the word “bond” Hlengiwe is again positioning herself in the intensive mothering discourse which advocates that a psychologically close relationship with a parent is essential for healthy development. Similarly, being physically present and involved in your child’s life is also conceived as necessary to a child’s development.

Hlengiwe reports that she plans to make arrangements to live with her son as soon as she has a stable job. This increased sense of agency was also seen in Zama who arranged to take her son from his paternal grandmother and to live with him for a month and mother him herself.

Acceptance of one’s status as a mother and a strong identity integration can also empower student mothers to resist stigma.

#### **5.5.4 Baby Mamas - Shifts in responding to stigmatisation**

Through accepting their student mother status and celebrating their children, some participants were able to reject stigma: Kholwa, for example, evidences strong identity claims as a mother in the statement below. She reports that she does not hide her son from people:

*I talk about my son, like I talk about him. He is my everything, we stand together, who else am I going to talk to? (6 y, PG, LWC, SG 7, S 2)*

Kholwa positions her son as important “he is my everything” and thus as worthy of talking about. Kholwa highlights that she speaks openly, perhaps even defiantly about her son by repeating the phrase “talk about my son, talk about him.” Kholwa draws attention to the absurdity of not recognising her son who is such a big part of her life “who else am I going to talk to?”

She also refuses to feel embarrassed about him and has decided to use God as her judge and not other people:

*I decided I respect God, I respect people but I then turned and say, if God is happy and then if what makes me happy and God is not offended and then if it makes you sad, then I'm sorry that is not my business, heh, heh. (6 y, PG, LWC, SG 7, S 2)*

Thenjiwe, also claiming an empowered mother identity, contested the judgement that student mothers have to endure and reframed student mothers as worthy of respect for keeping their babies:

*I could have aborted this child, now give me respect because I actually kept my child and I'm being a mother to my child, come on. (13 m, PG, LWC, SG 9, S 2)*

Thenjiwe draws attention to the fact that she had a choice not to have her child “I could have aborted this child” and in doing so, chose the harder route “I’m being a mother to my child.” She positions herself as worthy of respect because of this choice and her mothering “now give me respect”. Thenjiwe’s exhortation of “come on”, indicates her exasperation with this unreasonable attitude.

Through realising common experiences of stigmatisation, participants were able to look outside themselves and to identity, unpack and contest discourses of stigma and judgement.

Olwethu, for example, highlights the double standards that operate with sexuality:

*It's bringing us down to the gender thing....They use different, whatever measures for the woman and the man gets off scot-free, so, everything boils down to...you are saddled with the responsibility of protecting yourself and then when you do get pregnant, you have to take responsibility all by yourself. (3 y, 5 y, LWC, SG 4, S 2)*

Olwethu draws attention to the gendered nature of sexual stigmatisation “double standards” where the woman is positioned as accountable for prevention of pregnancy “responsibility of protecting yourself”, is punished for becoming pregnant “whatever measures for the woman” and then has to take responsibility for the child alone “all by yourself” while the man escapes any sort of punishment. Olwethu’s emphasis of the phrase “all by yourself” highlights the unfairness of this practice.

Thenjiwe concurs with this:

*Because.... now you're the one that's pregnant, you're the one that's with the child. All the connotations fall on the woman all the time. (13 m, PG, LWC, SG 9, S 2)*

Thenjiwe positions women as bearing all the disgrace and shame “connotations”, because they bear the evidence of unprotected sex “you’re the one that’s pregnant, you’re the one that’s with the child”. Thenjiwe’s use of “all the connotations”, “all the time” highlights the relentless nature of these judgements.

Olwethu highlights the differences in gender socialisation of children and suggests that if they are treated equally from birth, it will assist in slowly changing the sense of entitlement that men have and the unequal treatment that women receive.

When there was a specific incident of stigma reported, participants through group discussion countered this stigma by working out how to position themselves differently in relation to it. For example, when Zama was upset about a Facebook post about student mothers, Kholwa suggested that the Facebook friend herself had an issue:

*Firstly....that lady has a problem. But unfortunately, you don't know ....I believe it's so related in, in having a baby or something....She has a problem, okay. How do we deal with things like that?... (6 y, PG, LWC, SG 7, S 2)*

Kholwa’s use of the word “we” indicates the solidarity of the group, that Zama is not alone in dealing with the incident and that, as a group, they will find a way to work out how to best manage the incident.

Kholwa thus gives Zama the following advice:

*He (God) gave us this responsibility, trust that. He has a reason for us to have kids. It might not have been planned, we are not married and everything, some of us, but a child is a blessing , they like saying a child is a blessing and yet they have sinned and they're keeping that sin (laughter). They say a lot of things, don't be offended.... just live your life....be happy...be free, ....be yourself and the world will adjust. (6 y, PG, LWC, SG 7, S 2)*

Kholwa positions student mothers’ as worthy in God’s eyes to be given responsibility for their children “He gave us this responsibility” and that the children are part of God’s plan “He has a reason for us to have kids”. Thus, Kholwa positions student mothers not as sinners but as chosen by God for a special role and children not as mistakes but as preordained “blessings.” She positions people’s judgements as insignificant “they say a lot of things” and draws attention to the contradictions in people’s judgements “a child is a blessing...keeping that sin”, further highlighting their unimportance. She advises Zama to focus on her own life

and happiness “live your life, just be happy” and to rise above the comments “don’t be offended”.

Zama, in an interview after the groups were finished, describes how being part of the group where there is love and positivity about children helps her balance the negativity from others:

*when you come to the group people have so many nice things to say about kids. How kids are a blessing. Then you actually be like (.) I actually almost forgot about kids being a blessing, how nice, okay. (2 y, PG, LAC, I 1, S 2)*

Viewing children as a blessing and discussing stigma in the group has helped to buffer her from the criticism. Zama explains:

*It is helping cause I cope (.) better now with people talking about, “Ay if you have a kid, ay, ay, ay” um I just don’t care anymore, it’s like okay fine (.) so what? Fine okay, that’s all you have to say about it, it’s okay. (2 y, PG, LAC, I 1, S2)*

While Zama positions herself as someone who doesn’t care when people criticise student mothers, she clearly does care indicated by her repetition of “fine” and “okay” which act as a defence interrupting the flow of criticism so that she doesn’t have to hear it. This also shows that though the group process she now takes a more active stance to protect herself against the stigma.

Nqobile, also shows shifts in relation to stigma. She hadn’t told people at university that she was a mother or even her close friends about the circumstances surrounding this. She explains:

*So unfortunately, I have been very, very, very private about things because I get hurt (.) a lot. (5 y, UG, LAC, SG 7, S 2)*

When Nqobile first joined the group, she revealed that her child was a result of rape. She received strong affirmations of her courage and strength from other participants. Kholwa said:

*Nqobile, you are a strong woman..... I respect you because ....we got pregnant and people who we thought they love us and everything, but it is still hard and I can’t imagine how it is with you, ... but you made a decision to, to love your kid. That is amazing. That is a blessing and God will bless you..... Um, there is nothing wrong with you... you don’t have to blame yourself ....(6 y, PG, LWC, SG 5, S 2)*

Kholwa, who is respected in the group for her wisdom and for raising her child unsupported, positions Nqobile as, “strong” worthy of respect, “I respect you” and blameless, “there is nothing wrong with you.” She also positions Nqobile as deserving God’s favour “God will bless you.” These would be powerful words for Nqobile who has risked making herself

vulnerable. Olwethu and Thenjiwe had very similar responses towards Nqobile. These positive statements of respect and admiration from three of the most vocal participants might be responsible for contributing to Nqobile's acceptance of her mother identity and to increasing her self-esteem:

*Thanks to these groups somehow I have been open. So I ... wrote a status on Whatsapp and said I miss my baby. And then this guy was like, "You have a baby?" and I said, "Actually I have four kids... so, I just miss the last one right now." (laughter)... slowly, slowly I'm getting used to this thing (5 y, UG, LAC, SG 7, S 2)*

Nqobile positions herself as becoming more comfortable with being a student and a mother and the circumstances which have caused this "slowly, slowly I'm getting used to this thing." Her ability to publicly declare her mother status indicates the shift in acceptance of her mother status as well as her increased self-esteem in contrast to her earlier hiding of her status. Her ability to joke about having many children when she actually only has one "actually I have four kids" evidences her increased confidence in dealing with possible discrimination.

Olwethu summarised the process she saw in Nqobile and other new participants:

*First there is this timidity and then later this, you know, courage and then boldness. (3 y, 5 y, PG, LWC, I 1, S 2)*

In addition to the emotional benefits of the group process, described above, participants also described tangible benefits. I discuss these next.

## **5.6 Tangible benefits of empowerment**

After participating in the group process and coping better with some of the challenges that student motherhood brings, some participants who had been failing modules before were now passing. Kholwa explains:

*I believe that I did well for this semester, unlike the first semester (6 y, PG, LWC, I 1, S 2)*

Participants also commented that they had used student support services less since they had attended the group. Nqobile explains the reason for this:

*Joining the group makes you less at need for the counsellor. You, you get to talk and everything. You get all the support, I suppose. (5 y, UG, LAC, I 1, S2)*

The peer support group process was thus hugely beneficial for student mothers but they also need institutional support. I turn next to how student mothers felt they could be accommodated at university.

## 5.7 Making space for student mothers

Apart from counselling services, student mothers were not aware of any existing support at university for pregnant or parenting students. Dudu explains that:

*There's none [There's none, we just go through everything on our own.] (SG 3, S 1)*

In the extract above, Dudu explains that there is not support for student mothers” there’s none” Hlengiwe interrupts her and reiterates what she says “there’s none” and explains that student mothers are unsupported at university “we just go through everything on our own.”

Ntombi also was not aware of support for student mothers and explains that she still breastfeeding her newborn baby when she returned to university “*I usually had a problem with leaking milk so I would just see myself be like, “Oh, I’m already worse....” (7 m, UG, LWC, I 1, S 2)*. Ntombi thus began expressing milk in the toilet “*The things I used to do, heh. I used to go to the toilet. I’m even ashamed to say it” (7 m, UG, LWC, I 1, S 2)*. Ntombi fortunately, saw a counsellor for academic monitoring who then arranged for her to express privately in a room at the campus clinic in the absence of a specific lactation room.

Like Ntombi, most student mothers return back to university within a few weeks of giving birth because they are worried about missing work and jeopardising their degrees. Hlengiwe explains:

*I only had like (.) 5 days with him and then I had to come back cause in that week I had a test, I had to subm::it, so like yeah, just 5 days...luckily it was vac when I gave birth that’s why I was able to be with him cause if it wasn’t vac then even after birth I would have come back to school. (2 y, PG, LAC, SG 2, S 2)*

Most student mothers felt that their lecturers were not aware that they were mothers. Liyanda explains that this is not information she would willingly volunteer:

*I was kinda asha::med ....and if to someone you say you have a child at, at my age they kind of be like disappointed (.) so I like to >run away< from those judgements, yah. (2 m, UG, LAC, I 1, S 1)*

While many students did feel that they would advise lecturers that they were mothers if the consequences of not doing so were severe enough, not all student mothers did this. Slindile reflects that she returned to campus after having her baby but felt too scared to tell anyone the reason for her absence, thus “*I had to face the difficulty because I missed so may lectures, tests uh pracs that some I didn’t do and °that affected me badly.°” (6 m, UG, LAC, I 1, S 1)*



Slindile's "affected badly" meant that she had to change degrees because she failed the major modules which then prevented progression onto subsequent years.

Some lecturers were sympathetic when students approached them to ask for accommodations because of childcare commitments. Ntombi explains her relief when she had to ask to write a test early otherwise, she'd miss the taxi to go home:

*I was so happy because he didn't judge, he didn't say that, "Well, that's your problem that you have a child" and all that. He was very supportive about that. (7 m, UG, LWC, I 2, S 2)*

Other participants did not find their lecturers as accommodating. Olwethu explains:

*I remember telling my supervisor....that I have two kids and I have to pick them up at 4 pm.... She said, "Well, there's nothing I can do. You can pick them up and bring them here." And I told her that my kids are very active. (Heh, heh). She said, "Well" there's nothing she can do and that is that. (3 y, 5 y, PG, LWC, I 1, S 2)*

Kholwa explains that field trips are really difficult for her because she lives alone with her son and has no support:

*He is 6...Like when I went on a field trip, he was alone but ....I was calling my neighbours to ask if maybe he didn't pick up the phone in the mornings...I just left all the uniform, the things that he is going to need, I ironed everything for the day like Monday, Tuesday, Wednesday, Thursday and then the food was there but my neighbour ....was preparing his lunchbox. He was just inside. He would go and play and come back and lock and sleep and wake up and bath and dress up. Then ....he understands ....when it is 07:15, please go by the gate. (6 y, PG, LWC, SG 5, S 2)*

Kholwa positions her 6-year-old son as coping with the situation because of all the groundwork she put in place "I ironed everything" "the food was there" "my neighbour...was preparing his lunchbox" "he understands ...when it is 07:15, please go by the gate." What is unspoken is Kholwa's desperation in having to resort to leaving her 6-year-old by himself and the child's anxiety at having to cope alone for four days.

Many student mothers have to use their National Student Financial Aid Scheme money (NSFAS) to support their children which leaves them short to pay for university related expenses. Slindile who has lost her financial aid due to not doing well when she was pregnant explains that she now has cut back on her basic needs:

*I have to save food not to ask for....more money from Mom...since I'm not eh financially funded (.) eh this year because I didn't do well last year during the pregnancy. (6 m, UG, LAC, II, S1)*

Some participants felt that student mothers should not be given financial assistance above what other students receive as it would be a form of unfair treatment and might encourage students to have children in order to receive the discount. Other students argued that student mothers are different from other students and do face additional challenges and therefore should receive assistance to help them graduate just as others students with sight, hearing or slow processing speed do. Thenjiwe who has a job in order to provide for her child, as she cannot rely on her child's father for financial support, expresses her views:

*So I, I'd appreciate any support honestly because we aren't the same. Ye:s, I had a baby, it's not your fault that I had a baby but I do have a baby, we can't change that so I need the support. The extra support that I'm getting doesn't take away from your student life in any way and it's not like they are taking from your funds. It is just something that would be provided for student mothers. (13 m, PG, LWC, SG 1, S1)*

Student mothers who live with their children have to rent accommodation off-campus as they are excluded from university residences. This is expensive and leads to financial stress.

Kholwa explains:

*I didn't have money, even to register. I registered, I got a bursary. With the bursary I paid a certain amount, I needed to rent. Like, that place is four point two, so it's just expensive. And trying to get a place here, I couldn't, I'm staying with my son. So, it's just hard. It's hard, its' hard. (6 y, PG, LWC, SG 1, S2)*

Kholwa positions herself as impoverished "I didn't have money, even to register". Her procurement of a bursary helped her to register and pay the rental deposit but it was soon exhausted. Kholwa is forced to rent expensive, off-campus accommodation as she lives with her son "trying to get a place here, I couldn't, I'm staying with my son". She presents trying to afford off-campus accommodation as very difficult "it's just hard". Her repetition of "it's hard" highlights the stress that finding this costly rent every month causes for her. In addition, Kholwa has to find money for food and school fees which leads to additional stress.

Olwethu also had to get a house off-campus to live with her children and explains that living off-campus means that a student mother misses out on facilities that are free when living at the university:

*When you live in a school, there's a lot of facilities that come with, like wi-fi, which is very expensive when you are not at school, which I spend weekly (3 y, 5 y, PG, LWC, F G 4, S 2)*

Olwethu also drew attention to the safety on campus which is a benefit for single mothers.

Many students who live with their children also travel long distances to and from university which is costly and uses up valuable time during which they could be studying. Thenjiwe describes the amount of time she spends travelling:

*I take two taxis every, single day...I know if I leave here at 4:30 pm, I usually get home at 5:30 pm or something like 6 pm so that's like 90 minutes travelling, which I could have used at the library doing work. (13 m, PG, LWC, SG 4, S 2)*

Some participants thus suggested a parenting or family residence where they could live with their children on campus.

Thenjiwe reflected that it would also be really helpful if there was some sort of flexible, affordable, quality child-care. Although there is a campus creche, student mothers felt that it was not adequate. Thenjiwe explains:

*It's just not clean....It doesn't smell right, nje, the kids are running around on dirty places...there's this lasting smell of urine or something...because last time I went, there was only one person watching like 20- - 30 kids. (13 m, PG, LWC, SG 4, S 2)*

Olwethu concurs, explaining that she had been warned by other students to avoid the campus creche “I have passed there and see kids playing outside unattended...once or twice I've seen a child outside the gate” (3 y, 5 y, PG, LWC, SG 4, S 2)

### **5.7.1 Ongoing support groups**

All students felt that they had benefited from the peer support groups and suggested that peer support groups for student mothers be ongoing. Some students suggested that these should be extended to those pregnant students who felt they needed support. Hlengiwe explains:

*something that would be ongoing so we know as soon as I fell pregnant, I will go there....cause ....if you fail coping when you are pregnant then that continues. So, if we could have people who (.) help us right from the start, than intervening when the damage is already done, like I've already stressed so much. (2 y, PG, LAC, SG 2, S1)*

Participants also felt that a group forum where one could share experiences and email other mothers for advice in between group meetings would be welcome. Thenjiwe explains:

*We have a group and you just drop a message, “Guys I need your advice on this” ... But there is some sort of platform, there is like a page where you can drop a message and someone you know responds to you, “Well this is how I dealt with it.” (13 m, PG, LWC, I 2, S 2)*

Student mothers tend to sometimes progress more slowly than childless students because of their childcare commitments which means that they sometimes miss lectures due to crises with their children or can take longer to complete modules due to time constraints. Some

participants thus felt that offering degrees over a longer period, without slow academic progress penalties, offering flexible lecture times where a lecture is repeated later on in the week and extending fee remission for post-graduate research from 12 months to 18 months would all be useful interventions.

The following chapter explores these results in relation to the theory presented in chapter two.

## **CHAPTER 6**

### **DISCUSSION**

The aim of this study was to examine whether ongoing peer support group participation has value for supporting student mothers. It aimed to investigate how participation in the peer support group process related to student mothers' existing systems of support and whether it affected the way they construct motherhood and negotiate challenges. It was also interested in whether, during the peer support group process, there would be shifts in identity.

The results of this study indicate that student mothers experience an extremely difficult time in tertiary education. Many of the participants in this study were not coping as student mothers which was impacting on both their mental health and academic performance. Some students evidenced high levels of depression and suicidal ideation as well as academic failure or unsatisfactory academic progress which had resulted in their referral to the support group.

This chapter will examine the challenges student mothers experience. It will then consider how participation in the support group process relates to student mothers' existing systems of support and will then explore how the peer support group process empowered student mothers. Next it will look at how empowerment impacted on student mothers' understanding and management of their dual roles; and how the group process allowed for alternative constructions and practices of motherhood and shifts in maternal identities. It will also consider how empowerment impacted on student mothers understanding of and positioning in relation to stigmatisation and will finally consider how the university can better support these students.

#### **6.1 The challenges facing student mothers**

##### **6.1.1 Balancing roles**

The findings indicate that mothers who live with their children struggle to find enough time to fulfil the demands of their student and mothering roles leading to them feeling overwhelmed, exhausted and in some cases, depressed. This finding supports previous research amongst student mothers at the University of the Western Cape (UWC), South Africa, where participants reported finding it very difficult to balance their mothering and student roles, resulting in exhaustion, stress and physical health consequences for some students (Funiba, 2011). College student mothers in America also reported finding it very challenging to find the time and energy to meet course obligations whilst mothering (Brown

& Amankwaa, 2007). A study amongst student mothers from two universities in New Zealand reported that participants were very stressed trying to juggle their time between children and their studies which negatively impacted on their health (Longhurst et al., 2012). In my previous study with a different group of student mothers at the same university, I found that student mothers who lived with their children were exhausted, stressed and overwhelmed (Corfe, 2015).

Mothers in the current study who lived away from their children were also challenged by trying to balance their time between their children and studies. They gave more time to their studies resulting in loss of a relationship with their child, which caused these mothers to feel deeply hurt and injured. This was also found in my previous study, where student mothers living away from their children felt that they were losing out on motherhood (Corfe, 2015). Similarly, undergraduate student mothers at a University in Namibia stated that, in having someone else caring for their child, they felt they were losing out on a relationship with their child (Taukeni, 2014). Student mothers at a university in the Philippines also reported that they spent more time studying than mothering and that this resulted in a disconnect from their child who was closer to the primary caregiver (Manalang et al., 2015).

#### **6.1.2 Constructions of motherhood**

The current study found that while there are some student mothers who resist aspects of the ideology of intensive mothering, most student mothers draw on it to various extents when practicing motherhood. They thus put their children's needs first, are self-sacrificing and feel accountable for their child's physical and emotional development. This was also a finding amongst student mothers at the UWC in South Africa where student mothers subscribed to these societal ideologies regarding mothering roles (Funiba, 2011). Understanding motherhood in this way can cause some student mothers to feel guilty that they are studying instead of caring for their child themselves. This can serve to intensify their challenges as students and mothers. This finding was also reported amongst student mothers at universities in New Zealand where they felt guilty for not being good enough mothers and for taking time away from their children to study (Longhurst et al., 2012). In my previous study, I also found that student mothers were influenced by the ideology of intensive mothering and felt guilty for leaving their children to attend university (Corfe, 2015). Lynch (2008) who interviewed graduate mothers in the United States found that her participants considered intensive

mothering the proper way to mother and as such, tried to meet this cultural norm by splitting their identities between being good stay-at-home-mothers and good graduate students.

### **6.1.3 Tensions in identity**

Some student mothers in this study evidenced stable maternal identities during the course of the study. This was perhaps because they were older and thus had a firm sense of self before childbirth or, in the case of Kholwa, perhaps because their child was older thus, she had had more time to integrate identities. It could also be, as in the case of Olwethu the married student, because her children were planned. Other student mothers however evidenced tensions in identities. Some student mothers were struggling to accept and integrate their mother identities with their personal and student identities leading to them feeling overwhelmed and resentful of their motherhood role; others were feeling embarrassed and in denial of their mother role; and still others were longing to claim a mother role. Some of the student mothers who lived away from their children coped with their dual roles by using Baxter and Montgomery's (1996, cited in Johnston & Swanson, 2006) concept of "selection", where they rejected their mother role when they were at university and only "remembered" that they were mothers when they went home. The degree that this happened varied across students and seemed to be dependent on the amount of contact that the student mother had with her child. Burke and Reitzes (1991) explain that commitment to an identity is contingent on the quality and strength of the relationships to whom one is connected through the identity. Thus, not seeing one's child frequently and therefore not being able to develop a strong relationship with him/her would render the mother identity less significant.

Interestingly, this strategy did seem to facilitate coping for some students, who, thus perhaps not needing the support of the group, dropped out relatively early in the process. Estes (2011) emphasises the need for students to integrate their parent identities with their student (and I would argue personal identities) in order to preserve the positive aspects of each and to construct an understanding of self which makes sense to them. Undergraduate student mothers at a university in the United States also reported difficulty in integrating their mother and student identities partly because the lack of a family friendly culture at the university forced separation of these identities (Yakaboski, 2010). Similarly, graduate students in the United States, interviewed by Lynch (2008) did not integrate their student and mother identities preferring to meet the conflicting cultural ideologies of each by segmenting these roles. Lynch (2008) highlights that the stress this identity dichotomy brings can result in motivational conflicts possibly leading to attrition.

#### **6.1.4 Baby mamas - stigmatisation**

Student mothers also experienced stigma in all aspects of their lives, as reported in the literature (Brown & Amankwaa, 2007; Corfe, 2015; Duquaine-Watson, 2007; Longhurst et al., 2012; Manalang et al, 2015; Naidoo & Kasiram, 2006; Taukeni, 2014). Stigma was experienced from the community, from family, from peers, and even from some academic and health care staff on campus. Student mothers report that the stigma was particularly strong when they were pregnant and the evidence of unprotected sex was detectable.

Whitehead (2001) suggests that this is reminiscent of Goffman's (1963) abomination of the body where the attribute worthy of stigma is visible. Goffman (1963) initially conceptualised abominations of the body as various physical deformities which reduce the possessor in the minds of others. The term is used more symbolically here as evidence of the transgression of sexual and religious norms. As premarital sexual activity amongst youth is considered deviant (Ellis-Sloan, 2014), the young woman can thus be viewed as immoral for engaging in it prematurely. Thus, the swollen body of the young, pregnant student is a bodily sign, a stigma, which conveys to others that there is something morally deficient about her. Further, young women in South Africa are positioned as responsible for protecting themselves from pregnancy (Mkhwanazi, 2010), thus having fallen pregnant, the young woman will be blamed for succumbing to sexual advances and for not guarding her reproductive power. The pregnant body thus advertises these disgraces and thereby invites the judgement of others.

While not all student mothers in the study reported heightened stigmatisation when pregnant, those that did reported that this lessened over time. This could be because they delivered their children, thus the bodily attribute was not constantly with them. It could also perhaps be because the shame they felt became diluted by the relationship with their child. Student mothers themselves understood stigmatisation as linked to being unmarried. This is supported by the married student's report of not being stigmatised. Macleod (2003) refers to the "conjugalisation of reproduction" where childbirth within a marriage between opposite sex partners is considered natural and facilitative of the normal development of children. Other family forms, like single mother families, which derail this nuclear family configuration are pathologised. Childbirth is thus endorsed only within a matrimonial coalition. This study found that these hegemonic moral and religious discourses are so powerful that the student mother is positioned as responsible for her situation and thereby worthy of punishment even when members of the family and community are conscious of the circumstances surrounding a pregnancy. Shefer, Bhana and Morrell (2013) in a study of South African teenage mothers,



reported that teachers also positioned the young mothers as responsible for their pregnancies, drawing on a moralising and exclusionary discourse even when they knew that the pregnancy could be related to sexual abuse or structural disadvantage, thereby ignoring the context.

Baker (2008) highlights that lack of consideration of context can result in a lack of empathy and withholding of support. Parker and Aggleton (2003) argue that the introjection of these hegemonic norms governing sexual morality becomes so rooted in the consciousness of the stigmatised that they accept and internalise the stigma. Student mothers thus expected ridicule and judgement from others in situations even when this was not the case. Macvarish (2010) states that internalisation is such that student mothers' expectations of stigma is often worse than the reality. She highlights the destructive impact that constant expectation of stigma has on a young mother's sense of self (Macvarish, 2010).

Student mothers reported that they received more respect from strangers and members of the community if the father of their child was physically present. This can possibly be explained by traditions of paternity acknowledgement which confer social legitimacy upon an illegitimate birth and thereby protect the respectability of the young mother (Varga, 2003). Thus, the father's presence tacitly signifies this acknowledgement of paternity. This is further reminiscent of Phoenix and Wollett's (1991, cited in Macleod, 2003) concept of "normalised absence/pathologized presence" where the discourse of the pathologized single young mother is dependent upon the discourse of the normalised nuclear family, which forms the absent trace but if the father is present, the parent axes are restored and the pathologizing is diluted. This caused some student mothers to wear a ring to perhaps invoke the appearance of this absent trace in protecting against stigmatisation.

A new finding in this study was that peers criticised student mothers via social media. The nature of their criticism seemed to be linked to student mothers having wasted a valuable opportunity in going to university and becoming pregnant. Student mothers were then positioned as unworthy of having a "bright future". This attitude from peers, might be linked to an understanding of the sacrifices that families from impoverished communities make in sending their children to university in order to secure the financial future of the entire family (Parekh & de la Rey, 1997). The shame that these attacks and the judgement causes in the student mother, motivates her to succeed in her studies to prove to her critics that she can succeed despite having a child. Student mothers in this study reported wanting to get their degrees in order to prove others wrong. Being motivated to succeed despite having a child was reported in other studies (Corfe, 2015; Longhurst et al., 2012; Manalang, 2015). This

motivation is similar to Probyn's (2005, cited in Longhurst et al., 2012) concept of shame as productive, where the experience of shame causes a re-evaluation of the self and a focus on future goals. Duquaine-Watson (2007) writing about American student mothers, explains that success at university and the increased earning power that this brings, can increase student mothers' self-esteem and often results in improved respect from family members. Moore (2013) in a South African study, reported that the stigma attached to single motherhood decreased if the mother had the financial means to support her child independently. Thus, as was found in my previous study (Corfe, 2015) obtaining a degree for the student mothers in this study was crucial to them regaining self-esteem and the means by which they can reclaim the respect of their families and communities and decrease the stigma of single motherhood.

## **6.2 The relationship of the peer support group process to existing systems of support**

### **6.2.1 Support from family**

Previous studies have presented familial support as beneficial and as a source of strength to young mothers, facilitating a return to their studies (Corfe, 2015; Kubeka, 2016; Willan, 2013) and providing them with emotional support (Chohan, 2010; Taukeni, 2004). An unexpected finding of this study was that the existing sources of support for some student mothers were complicated and often a source of stress in themselves resulting in student mothers experiencing disempowerment and feelings of frustration, resentment and anger, none of which they could express to their families. The peer support group process was thus all the more crucial for providing student mothers with a safe space to recognise, express and discuss these feelings. It was found that familial assistance with childcare for some participants resulted in issues of ownership, power and control over the child and how s/he is raised. Not doing the work of mothering can render student mothers undeserving of having a say in raising their children. Further, student mothers in this study, who lived away from their children sometimes felt that they had lost their child to the person who was doing that work, and who was, in many cases called "mother" by their child. In contrast to previous studies with student mothers which presented familial support as uncomplicated (Corfe, 2015; Kubeka, 2016; Taukeni, 2014) the ongoing process of this group enabled a different lens through which to examine these experiences and thus student mothers through sharing experiences over time, identified common themes and were able to reflect on specific practicalities and details. Issues around childcare have also been reported in other studies. Some of the South African teenagers who participated in a series of focus groups reported

that their mothers took over childcare to such an extent that they were even excluded from sleeping with their child (Parekh & de la Rey, 1997).

Parekh and de la Rey (1997) argue that the transgression of societal norms in having an illegitimate child obliges young mothers to become the dutiful, grateful daughter in response to the generosity shown to them by the family. Contestation of control in my study could however be seen in the mechanics of child rearing and in the daily, practical issues, for example in tensions between modernity and traditions and in issues around discipline. Adolescent mothers in the United States reported similar issues where they perceived their own mothers as interfering, particularly in issues of childcare (Richardson et al., 1991). Student mothers in this study, however, indebted for being pardoned for their transgression and for the provision of childcare their families provided, ultimately had to silence their opinions about raising their children and submit to their mothers' wishes. This lack of agency to contest the way things are done is also evident in the provision of childcare. As childcare is a favour from family, it is not dependable and can be withdrawn at any time, thus the student mother is at the mercy of the caregiver. This is also apparent in how student mothers who live with their children were expected to return home and take over childcare as soon as lectures were finished which prevented them from being able to study at university and at home. In a South African study, teen mothers stated that they also did not have time to complete their school work at home as relatives who provided childcare returned their babies to them upon their return home (Chigona & Chetty, 2008). Not being able to contest the way things are done can contribute to student mothers feeling frustrated, resentful and overwhelmed, emotions which they could not acknowledge or express. The group process thus gave student mothers a voice to express and understand these impermissible feelings.

Tensions between the need for emotional support and the provision of practical support also arose in the families of the participants in this study. While families were supportive in providing childcare and financial support, many participants did not get emotional support from their families. For some families there seemed to be a sense that it was not their role to offer emotional support which could, as in previous studies, be linked to a reluctance to assist the student mother too much for fear of appearing to condone her actions (Chigona & Chetty, 2008; Corfe, 2015). Some participants who lived away from their children reported that their families drew on traditional beliefs in discouraging them from expressing their emotions as it was thought to affect the baby emotionally or in terms of ill-health. Drawing on these beliefs caused the young mother to feel guilty for indulging her emotions and potentially upsetting or

making her baby ill. This concern for her baby then silenced the student mother's expression of grief and reinforced the assumption that a good mother, that is a mother who sacrifices her own needs and puts her child first, will silently bear her pain and be strong for the sake of her child. This traditional belief disempowers young women both by preventing them from articulating and thus understanding and coping with their feelings and also from examining and perhaps challenging the way things are done.

### **6.2.2. Support from peers**

Student mothers also did not receive emotional support from peers. They reported that their mother identity made them feel different to peers and that there was a disconnect between them which led them to feeling isolated. A sense of isolation seems to be a common experience for student mothers and has been reported in others studies. Namibian undergraduate student mothers reported feeling isolated and lonely (Taukeni, 2014); undergraduate student mothers in North America reported feeling isolated from the other students (Yakaboski, 2010); single mothers at a community college in North America reported having few friends due to limited free time and child related time constraints (Duquaine-Watson, 2007); North American graduate mothers also described feeling lonely and disconnected from other graduate students (Lynch, 2008); single mothers at university in New Zealand also highlighted their isolation (Longhurst et al., 2012).

Academic support that previous studies (Corfe, 2015; Kubeka, 2016; van den Berg & Mamhute, 2013) reported peers providing was not evident in this study. In my previous study, participants reported relying on the assistance of peers during study group sessions in order to prepare for exams (Corfe, 2015). Similarly, in a Zimbabwean study at a teacher training college, student mothers reported valuing the consideration of peers in lending them lecture notes and accommodating their time constraints when arranging study groups (van den Berg & Mamhute, 2013). Student mothers in the current study who lived with their children were expected to report home when lectures finished in order to take over childcare duties and were thus unable to benefit from peer study groups. In addition, due to childcare responsibilities, they were also unable to participate in these groups over the weekend.

### **6.2.3 Support from children's fathers**

While some fathers provided valued emotional support to student mothers in this study, the majority of fathers did not. Cultural traditions requiring *inhlawulo* (payment for impregnating the girlfriend) to the student mother's family were found to be a barrier to

young fathers actively participating in their children's lives as, in the context of poverty, young fathers could not afford these payments. Young fathers not being able to afford *inhlawulo* and thus being written off by the young mother's family has also been discussed elsewhere (Hunter, 2006). This then, in some cases, cut off a valuable source of support for the student mother.

The behaviours of some fathers were an additional source of stress for student mothers in this study causing depression and suicidal ideation due to feelings of frustration, disillusionment and rejection when the relationship failed. Some student mothers in Funiba's (2011) study at UWC also reported these feelings. In the current study only about four of the eleven fathers provided regular financial support for their children which supports data from the National Income Dynamic Study in South Africa (2008; 2010). Not receiving financial support from fathers positioned the student mothers and their families as responsible for their children's needs which was a huge source of stress for student mothers and often resulted in them having to use their funds from the National Student Financial Aid Scheme (NSFAS) to pay for childcare related expenses. Funiba (2011) draws attention to how lack of financial support exacerbated the challenges of participants in her study. Similarly, Zimbabwean student mothers also highlighted the stress that trying to afford food and child related items causes (van den Berg & Mamhute, 2013). In the New Zealand study, student mothers emphasised the enormous strain that juggling finances brings when there is no support (Longhurst et al., 2012). Financial support in this study appeared to be dependent upon the status of the relationship between the student mother and the father where those who were still involved with their child's father were more likely to receive financial assistance. This supports previous research which has reported a robust relationship between regular contact with children and financial support (Eddy et al., 2013). Regular contact with children would be more likely to occur if the parents were still romantically involved. Student mothers, motivated for their children to have a nuclear family and perhaps intuitively understanding the link between amount of contact and support, reported feeling pressurised to try to make a success of their relationships. In addition, as student mothers draw on the discourse of intensive mothering when practicing motherhood, they consider an emotional bond with both parents important for the child's well-being. This means that the student mother often has to suppress her own feelings of resentment and anger towards the father of her child in order to facilitate this bond, thereby safeguarding the healthy development of her child. Some student mothers, reported using their data to video call their children's fathers in order to maintain

visual contact between their child and their child's father. Although not reported by all student mothers, Thenjiwe stressed that this emotional bond should be created by greater paternal involvement and described her frustration that financial provision alone was culturally understood as good fatherhood. This change in role ideology for fathers was reported by Roy (2008) and Morrell et al. (2003) where women increasingly want fathers to be more involved in parenting activities. Teenage mothers in a South African study also reported valuing the involvement of their children's fathers in their children's lives, irrespective of marital status (Willan, 2013). Student mothers in the current study were disempowered from challenging the nature of male support because provision of financial support is socially understood as responsible fatherhood (Lesjane, 2006) and perhaps also because they feared risking what little support they had.

The sources of support which participants received outside of the group was positioned as different to the support which they received from inside of the group.

### **6.3 The value of the peer support group process**

The peer support group process was found to be valuable to student mothers and did improve their coping. The group process empowered participants. Pearsall and Hanks (1998, cited in Mok et al., 2004) describe empowerment as strengthening an individual and improving confidence to exercise control over their lives and to access their rights. Participants were empowered through the mechanisms of social support, learning from others, comparison with others and helping others.

#### *Social support*

The findings demonstrate that the peer support groups became a source of social and emotional support to participants increasing their social networks and thus the number of people they could rely on for support (Salzer, 2002) and in many cases, fostering friendships between participants. Regular participation in the group process created a sense of solidarity and belonging which helped to decrease student mothers' isolation. Some participants used a "family" analogy to describe this sense of belonging and cohesiveness. Participants in a cancer peer-support group also described their group as a "cancer family" thereby indicating their sense of community and belonging (Ussher et al., 2006). This finding was reported in other peer support groups with single mothers who were college students in North America (Bruns, 2004), with teenage mothers during a series of focus groups in a semi-rural area of South Africa (Parekh & de la Rey, 1997), with single mothers in Canada (Lipman et al.,

2010) and with participants of an internet illness support group (van Uden Kraan et al., 2008). The support groups became a safe space where participants could voice feelings of frustration, hurt or anger and reflect on experiences. Receiving empathy and support from other members who had undergone similar experiences, facilitated participants feeling understood and validated which decreased their stress. Student mothers reported enormous comfort in realising that others were going through the same experiences and that they were thus not alone. This supports Yalom's (1995) universality principle where an awareness of shared experiences and feelings functions to decrease a participant's perception of isolation and gives validation to their experiences. Group members also reported appreciating the therapeutic value of the shared humour in the group. Ussher, et al. (2006) explain that humour can maintain social cohesion and can be a particularly useful coping mechanism when dealing with painful issues. The group was also a space where participants could speak about their child to others who, in contrast to their childless peers, were interested and empathised with their feelings. Participants in van Uden-Kraan et al.'s (2008) internet illness peer support group also mentioned appreciating the opportunity to talk about their illness without fear of boring their social network. Student mothers in the current study reported increases in inner strength and evidenced improved self-esteem after participating in the groups. This was also found in a Canadian support group for single mothers (Lipman et al., 2010).

### *Learning from similar others*

Student mothers described appreciating the practical advice from others who had lived through similar experiences and challenges. This can be understood as experiential knowledge which is information gained by surviving a particular experience, the insights of which are specific to the situation (Brown et al., 2004). Sharing this knowledge also enabled student mothers to identify common themes and to generate solutions. In a study of teenage mothers in KwaZulu-Natal, South Africa (de la Rey & Parekh, 1996), participants also described that in the group process they realised that many of their individual challenges and experiences were actually shared by others.

Student mothers in this study also reported learning specific coping strategies and parenting ideas from other participants which improved their coping and parenting. This can be understood by Social Learning Theory (Bandura, 1977) where one is likely to emulate the behaviours of a peer who models appropriate coping behaviours. This then leads to self-

efficacy for the participant copying the behaviour. The learning of coping strategies from other participants was also reported in an internet illness support group (van Uden-Kraan et al., 2008).

### *Comparison with others*

Student mothers reported coping better after comparing their circumstances with those of others in the group. This benefit can be explained by Social Comparison theory (Festinger, 1954) where interaction and comparison with others who are coping better (upward comparison) results in increased self-efficacy, optimism and the desire to improve further. Conversely, comparison with those deemed worse off (downward comparison) enhances self-esteem by putting one's own circumstances in perspective. Upward comparison could be seen in participants comparing their circumstances to those whose children were older and who seemed to be coping or to those who were in a higher level of study. Downward comparison could be seen in participants comparing their circumstances to those of participants who had less support or whose circumstances were much more difficult to deal with. Downward comparison usually resulted in acceptance of one's circumstances, gratitude for what one has and a reframing of the situation from a problem to a solution focus.

### *Helping others*

One of the participants highlighted that the feedback she got from group members after she had given advice or shared an experience actually helped her to cope better. This can be understood from the Helper-Therapy Principle (Riessman, 1965) which states that participants who assist others often benefit from this process in terms of a feeling of achievement and enhanced self-worth from the social approval they receive (Skovholt, 1974, cited in Davidson, 2004). This benefit was not mentioned by other participants and the reason for this could be that this particular participant frequently gave support to others by sharing her experiences and motivational posts on her Facebook page. It is possible that she was therefore sensitised to the positive effect of helping others upon her own coping and thus was able to reflect on this aspect of the group more readily than other participants. Participants in the online illness support group also reported this benefit after helping other members (van Uden-Kraan et al, 2008).

Central to the empowerment process of the support groups were that the groups were undergirded by peer support, knowledge and experience rather than being therapist led. In addition, participants set the discussion agenda for the group and the researcher acted as the



facilitator. The empowerment process of the peer support groups resulted in various outcomes for participants such as acceptance of circumstances, increased sense of self-efficacy and agency; enhanced self-esteem and raised consciousness. These outcomes can be seen in the way participants responded to challenges.

## **6.4 Shifts in responding to challenges**

### **6.4.1 Balancing roles**

Student mothers who lived with their children reported that social comparison had been an important aspect of coping with their conflicting role demands of student and mother. Many of these mothers, after hearing about the circumstances of student mothers who were forced to live away from their children or of those student mothers whose circumstances were more difficult, developed an acceptance of their circumstances and demonstrated self-efficacy in working out the pragmatics of studying and mothering and the resolution of the role conflict that this brought. Hayes et al. (1996) explain that when people have accepted a situation, they can utilise their energy towards achieving their goals. Active acceptance of a situation over which one has no control is adaptive and is associated with positive psychological outcomes (Nakamura & Orth, 2005). Chinese cancer patients reported experiencing increased harmony with themselves and the world after accepting the limitation of their power to control their disease outcome (Mok, Martinson & Wong, 2004). Some mothers shut out university when they were at home and children when they were at university, employing a strategy called “segmentation” where work and mothering identities are kept separate (Baxter & Montgomery, 1996, cited in Johnston & Swanson, 2006). This was also a strategy employed by Lynch’s (2008) graduate student mothers, where family and university are kept as separate as possible. Other mothers practiced gratitude for the support they did have. Emmons and Shelton (2002) highlight that gratitude often necessitates comparison with the circumstances of others in order to appreciate what one has. These student mothers reframed living with their children as a privilege instead of a burden which motivated them to make best use of the resources they did have. Troy, Shallcross and Mauss (2013) argue that reframing is adaptive in an uncontrollable, stressful situation as the person regulates what they can, i.e. the self. Troy, Wilhelm, Shallcross and Mauss (2010) highlight that the use of reframing, in a highly stressful situation, can help to downgrade negative emotions and can thus protect against depression. Other student mothers accepted the demands of the situation and their own capacity and in doing so, forgave themselves for not progressing as quickly as they would

have liked. They also demonstrated a shift in self-esteem, realising that in comparison to others, they were actually doing well.

#### **6.4.2 Constructing motherhood**

Student-mothers in this study met the expectations of the ideals of intensive mothering by reframing what a good mother is, thus they reconstructed their understanding of the expectations of intensive mothering in a way that no longer caused tension between these roles. Reframing is one of the strategies mentioned in previous research to resolve the tensions between the ideology of intensive mothering and employment status (Baxter & Montgomery, 1996, cited in Johnston & Swanson, 2006). For example, through discussion in the group of what it means to be a mother and through being exposed to student mothers who resist some of the expectations of intensive mothering, Ntombi incorporated bettering herself for the sake of her child by returning to university when her child is young as part of her construction of a good mother. This is similar to what working mothers did in Johnston and Swanson's (2006) study where they constructed their work choices as beneficial to their children. Student parents in Estes' (2011) study also constructed their education as beneficial to their children for a variety of reasons. Ntombi stated that her revised understanding of what a mother is was influenced by Thenjiwe who is also the mother of a young child. Thenjiwe's influence on Ntombi's construction of motherhood can be understood by Social Learning Theory (Bandura, 1977) where Ntombi, viewing Thenjiwe as a reliable role model because they are both student mothers and because Thenjiwe has reached a more advanced level of study, would be likely to adopt some of Thenjiwe's attitudes and opinions. As Ntombi was struggling with guilt over leaving her child to come back to university, she would also be motivated to learn how to resolve this through observation of others and thus would pay particular attention to Thenjiwe's understanding of motherhood which would provide the intrinsic reward of resolution of the guilt.

After the group process, Ntombi also shows evidence of the influence of Thenjiwe's construction of mothering by incorporating emotional self-care into her construction of a good mother. While this is positioned as for the benefit of her child, thus her child is still the core focus, it is a shift away from her previous construction of the all sacrificing mother. Similarly, through discussion in the group of her need for time away from her son, Thenjiwe receives reassurance that this time away does not make her a bad mother, thus, she also reframes the expectations of intensive mothering to incorporate time away in order to be a

better mother. Working mothers in Mayer's (2012) study of an internet discussion board between working mothers and stay at home mothers, also highlighted that the personal fulfilment and time away from their children that their jobs allowed them, helped them to be better mothers when they were with their children. Thus, like Ntombi and Thenjiwe, a concern for self was also evident in their construction of motherhood.

The group process also allowed for shifts in identity. Ussher, et al. (2006) suggest that peer support groups because of high levels of warmth, empathy and reciprocal listening over time, provide an ideal space for participants to share their experiences and thereby re-evaluate and change identity.

### **6.4.3 Shifts in identity**

The findings show that while some mothers evidenced a stable identity during the peer support group process, other student mothers experienced various shifts in identity.

#### **6.4.3.1 Resolving tensions – identity integration**

Thenjiwe began the support group process by feeling that her self-identity (and student identity which was bound up in her self-identity) was being consumed by motherhood. Yaskowich and Stam (2003) suggest that people whose lives are suddenly and irrevocably changed by an event are impelled to reappraise their identity and to ascertain how the event fits into their life story. Thus, after the unplanned birth of her son and the ending of her relationship, Thenjiwe needed a space to make sense of these events and to integrate them into her sense of self. Some middle-class mothers in Frizelle and Kell's (2010) study also reported feeling that they had lost themselves after the birth of a child. This was explained by the authors as a renegotiation of identities where after giving birth, the constant needs of the infant make the mother identity more prominent than other valued identities resulting in the sense of a loss of self (Frizelle & Kell, 2010). During the process of the groups and through narrating her personal stories and receiving validation and counterviews from others, Thenjiwe manages to accept the entwined nature of her own and her son's identities and to integrate her self-identity and mother-identity in a way with which she can be comfortable. This process is called biographical work (Bury, 1982) and involves telling one's story in order to comprehend what has occurred and to integrate it into one's identity. Yaskowich and Stam (2003) describe cancer patients undergoing a similar process where the experience of cancer forces a change in identity in order to incorporate the disease experience into the patient's sense of self. Part of Thenjiwe's identity integration can further be understood by

social identity theory where Thenjiwe belonging to the social group of student mothers and forming increasingly strong and valued ties within the group, would become more committed to this social identity (Stets & Burke, 2000) and would be more likely to adopt the culture of the group (Ethier & Deaux, 1994). Mankowski and Rappaport (2000) posit that stories told by members of the group would resonate with other members as they include shared themes and experiences and would become community narratives which would form part of the social identity of the group and against which individual group members can understand their own experiences and construct their personal identities. The culture of the group was very influenced by mothers like Kholwa who had strong mother identities and positioned children as a blessing. In further support of this, Thenjiwe makes reference to appreciating advice about her son's development and learning coping skills from Kholwa, it is thus likely that as Kholwa's child is older, Thenjiwe considers Kholwa a role model. According to Social Learning Theory (Bandura, 1977) Thenjiwe would then be more likely to adopt Kholwa's modelled beliefs and attitudes about motherhood. Similarly, the community narrative would constantly be revised and changed by the stories of individual members like Thenjiwe.

Nqobile, through the group process, also shows an integration of her student and mother identities by moving from a place of embarrassment to developing acceptance of her mother identity. She reports that this is as a result of meeting similar others and of seeing people happy with their kids. Thus, participation in the group gives Nqobile the social identity of student mother which involves identification with similar others thereby legitimating and decreasing embarrassment of her student mother identity. The social identity of student mother also influences Nqobile to view children positively as the group does which further facilitates an acceptance of her student mother identity "I'm a mom and I'm happy" (5 y, UG, LAC, I 1, S 2).

#### **6.4.3.2 Claiming a maternal identity**

Student mothers who were longing for a maternal identity also claimed this as the group process unfurled. Hlengiwe, who was unconcerned about living away from her child at the start of the peer support groups but who felt deep hurt at his rejection of her, shows a shift in her maternal identity. She positions herself in the discourse of intensive mothering and posits that a mother should be physically present, loving, caring, supportive and should have a bond with her child. She also reports wanting to live with her child so that she can create this bond and states that she learnt the importance of staying with your child from her participation in

the group. Thus, through her membership in the group, she adopts the social identity of student mother and through this the responsibilities and values of her identity role of mother are communicated to her by other participants. The group is thus a vehicle for the ideology of intensive mothering to be transmitted. Hlengiwe then, because of her strong identification in the group, behaves in concert with the group norms and consolidates into her self these role related expectations, constructing her mother identity according to the intensive mothering ideology. Student mothers who claimed a maternal identity also demonstrated increased agency where they made active plans to live with their children in the future.

#### **6.4.4 Shifts in response to stigmatisation**

The results show that the group created the space for student mothers to consider their individual encounters with stigmatisation within a wider context (Johnson, 1996) and to link this to sexual double standards of gender-based behaviour (Varga, 2003). These student mothers were able to discuss the punitive measures and pathologizing discourses that young, single mothers are subjected to, like the “baby mama” discourse and to link this to relations of injustice, highlighting systems of patriarchal power. They were also able to consider how social change could be brought about and emphasised gendered socialisation as a factor. Thus, the group process, through discussion of mutual problems, facilitated a raising of consciousness for these mothers and provided the potential for social action (Gutierrez, 1990).

Through acceptance of their student-mother status and through developing strong mother identities, student mothers were able to counter stigma through positioning themselves differently in relation to it. Kholwa, for example, draws on the discourse of African motherhood as a role assigned by God. Akujobi (2011) discusses that motherhood in Africa is considered a God-given role, thus revered as a sacred gift. Turritin (2002, cited in Barnes, 2013) also highlights that children in Africa are viewed as a blessing from God and that motherhood is considered a special favour bestowed by God. Kholwa therefore introduces the discourse of “children as a blessing” to counter pathologizing discourses of “baby mamas”. Student mothers in the Philippines (Manalang, 2015) and Afro-American student mothers in the United States (Brown & Amankwaa, 2007) also highlighted this discourse, perhaps seeking to draw on the positive aspects of this discourse in order to protect themselves from pathologizing discourses about young, unmarried mothers. The “child as a blessing” discourse aligns student mothers with God’s plan and therefore raises them above people’s

insignificant and often contradictory judgements. Zama reports that drawing on this discourse helps her to counter stigma. In addition to this, some participants showed increases in self-esteem during the group process as a result of emotional support and acceptance from others and this further aided them in accepting their mother identity and in countering stigma.

### **6.5 Making space for student mothers**

The results showed that student mothers do not feel supported at university and are not aware of any specific services or policies to assist them. This is also a finding of previous research on student mothers (Brown & Amankwaa, 2007; Brown & Nichols, 2012; Corfe, 2015; Duquaine-Watson, 2007; Funiba, 2011; Longhurst et al., 2012; Taukeni, 2014; Yakaboski, 2010). Student mothers, through fear of judgement and moralising discourses positioning them as responsible for their circumstances, often keep their student-mother status hidden and this, together with lack of policy, renders them invisible and ignored on campus. Duquaine-Watson (2007) reports that in her study of student mothers at an American community college, they were, as a population, largely ignored and invisible on campus.

The findings showed that many student mothers, due to fear of jeopardising their degrees, leave their babies at home shortly after giving birth in order to return to university. This can be a source of emotional pain for these student mothers and can sometimes also jeopardise their health (Barnes, 2012; Corfe, 2015). It was found that while most student mothers do not willingly inform their lecturers that they are mothers, when they do, there is variable support suggesting that accommodations are up to the discretion of the lecturer concerned.

Findings showed that student mothers face greater financial challenges than their childless peers and thus often evidence increased stress. This was also mentioned in Funiba's (2011) study with student mothers at the UWC. Student mothers who live with their children have to source and pay for accommodation off-campus which is a big financial cost each month. Student mothers, who are often unsupported by the children's fathers, have to use their financial aid money to support their children which leaves them with insufficient money to meet their own needs at university.

Student mothers who live with children are at a particular disadvantage because they cannot take advantage of on-campus residence which includes benefits such as free wi-fi, 24-hour library access, access to study groups, good security and reduced travel time and cost. Not being able to live on campus was also found to be an issue in American universities (Brown & Nichols, 2012; Yakaboski, 2010).

While student mothers are not specifically expecting financial assistance from the university, there is a need for the university to appreciate the diversity of its student population. Barnes (2013) argues that it is essential not to assume that all students fit the traditional, single, male, childless student mould. Yakaboski (2010) similarly argues that the university cannot expect students to morph themselves into this traditional mould but rather that the university should adapt to its changing population.

### **6.5.1 Ongoing peer support groups**

All student mothers in the study stated that they had benefited from the ongoing support groups and requested the provision of further groups. Focus groups with student (Yakaboski, 2010) and teenage (Parekh & de la Rey, 1997) mothers reported similar results. Participants also suggested that ongoing peer support groups should be extended to include pregnant students as this is when many student mothers are most in need of support. Interestingly, only two of the eleven participants had entered the support group process independently. The majority of the participants had been referred by student support counsellors after attending personal counselling due to being at academic risk of failure. It is thus likely that student mothers, due to being overwhelmed with work and motherhood, will need to be identified via the academic monitoring process and enter the group in that way. This process involves students, who are underperforming academically, completing the online Learning Enhancement Checklist (LEC) assessment whereby their challenges to academic success would be highlighted. This process would connect them to personal counselling and it is from there, that they could be referred to future support groups in order to benefit from the group process. Apart from emotional benefits and improved coping, student mothers also described improved academic performance after participation in the groups. They also attended personal counselling less frequently which would make ongoing peer support groups for student mothers more cost effective for student support services.

Student mothers thus face innumerable challenges which can impact on their ability to obtain their degrees. Mothers who live with their children are often engulfed by the time and emotional pressures of their dual roles, while many mothers who live away from their children are deeply hurt by the lack of relationship they have with their child. In addition, student mothers draw on the discourse of intensive mothering in constructing and practicing motherhood which causes them to feel guilty for not being present to raise their child themselves. It also causes them to prioritise their child's needs, disregarding their own

emotions and wants and thereby preventing them from voicing and thus coping with these. Many student mothers after an unplanned pregnancy, also evidenced identity issues where there were tensions between their student, self and mother identities which further impacted on their ability to cope with student motherhood. Due to gendered sexual discourses, unmarried student mothers are also positioned as responsible for their circumstances and thus pathologized, regardless of the reasons for the pregnancy. Stigmatisation is experienced everywhere, even from peers, and causes student mothers to constantly expect judgement which impacts on self-esteem and their ability to accept their maternal identities.

This study, through the ongoing process, found that student mothers' existing systems of support are inadequate to sustain them in negotiating the challenges of tertiary education. Existing systems of support did not generally provide emotional support and often disempowered participants, obliging them to accept the support they were offered and silencing them from challenging the way things are done. In addition, the university, in assuming that students are all the same and thus not accommodating student mothers, contributes to their stress. This results in financial stress for those who live with their children and have to source accommodation off-campus and emotional pain for those living away from their children who leave their babies a few days after birth to return to university.

The peer support group process provided a safe space where participants could voice and explore these issues. Through increased social support, comparing their circumstances to those of others, learning from others and helping others, participants became empowered to negotiate their challenges differently. They developed acceptance of what they could not control and increased self-efficacy and agency in what they could change. Crucial to this empowerment process was that the group was peer rather than therapist led. The ongoing peer support group process with its high levels of warmth and empathy also provided the ideal space for a renegotiation of identity, where through accounts of themselves and via feedback from others, participants could integrate their various identities and, in some cases, claim longed-for identities. Participants reported improved self-esteem during the group process as well as less need for individual counselling services and improved academic performance.



## **CHAPTER 7**

### **CONCLUSION**

This study emerged out of my Honours research project where, after participating in a focus group, student mothers requested the provision of further such groups as they had found the group beneficial. This study aimed to contribute to the literature by examining how ongoing peer support participation has value for supporting student mothers in tertiary education. It was interested in how the group process related to the existing support that student mothers have and to the challenges that they face. It was also interested in whether participation in the group process would allow for shifts in the construction of motherhood and whether during the process there would be shifts in identity. The study also aimed to understand how the university can better support these students. It hypothesised that ongoing peer support group participation would be a source of support for student mothers in coping with the challenges of tertiary education. By analysing the peer support group process, this study aimed to provide a model for future support groups in higher education.

#### **7.1 Were the research questions addressed?**

The research questions were addressed by the study. Participation in ongoing peer support groups was found to be very valuable to student mothers and did help them to cope with the challenges of tertiary education, evidenced by improved emotional coping, enhanced academic performance and decreased use of individual counselling after group participation. The peer group process was positioned as a different from existing forms of support and provided student mothers with a much-needed source of emotional support. The group process also allowed for shifts in the construction of motherhood for student mothers and there were shifts in identity for some students. These shifts further assisted student mothers in coping with their dual roles. The study showed that student mothers feel unsupported by the University and suggested ways that the University could better support these students.

#### **7.2 Findings**

The data from this study found that student mothers have a difficult experience in tertiary education. Some of the main challenges experienced were balancing their student and maternal roles; their constructions of motherhood; tensions in identity and negotiating stigma. The findings suggest that the peer support group process improved coping by empowering student mothers. It did this by providing a base of social support wherein the student mothers

could gain emotional support, compare their circumstances with one another, learn skills and help one another. The empowerment process resulted in student mothers demonstrating increased acceptance of their circumstances, enhanced self-esteem, and increased agency and self-efficacy in negotiating challenges. Central to this empowerment process is that the participants themselves set the agenda for group discussions and provided support and experiential knowledge to one another. Discussing mutual problems in the group process also served to raise consciousness of wider issues of inequality and assisted participants in positioning themselves differently in relation to dominant discourses. The group process also allowed for a renegotiation of identity for some participants where students were able to integrate their maternal, student and personal identities ways in which they were comfortable. The ongoing nature of the group process provided a different, in-depth lens through which to understand student mothers' existing systems of support and an unexpected finding was that existing support is often complicated and can be a source of stress and disempowerment for student mothers. This finding underscores the need for a group process as a source of support for student mothers.

### **7.3 Strengths and limitations of the study**

The strengths of this study are that the ongoing process allowed me, the researcher to be immersed in the study community over a period of time, which allowed me to form close relationships with the participants. I was thus able to gain an insider understanding of the experiences of the participants which enhanced credibility. Further, the ongoing process allowed a deeper exploration of issues than a single interview or support group session would do. Credibility was also enhanced by using transcription symbols of Jeffersonian conversation analysis which are considered to facilitate objectivity due to the level of detail provided. Data triangulation also enhanced credibility where rich, everyday data (such as teasing and arguing) collected from support groups could be verified against the individual views raised in individual interviews. Individual interviews also gave participants the opportunity to comment on the influence of others which served to further elucidate processes and lend support to emerging hypotheses. Including all data in the analysis also enhanced credibility and guarded against anecdotalism. Further, this study had potential catalytic validity (Lather, 1986) in that it empowered the community under study thereby providing pragmatic proof of its truth value.

Transferability was enhanced by the provision of thick description of context and participants; the provision of motivations for method selection; as well as the provision of detailed description of all aspects of the analytic process. Future researchers will thus be provided with the required details to make an informed judgement about whether findings will be transferable to similar contexts. Dependability was enhanced by accounting fully for all research processes, by providing detailed information of data collection and analysis and by providing in-depth descriptions of how participant attitudes and behaviour unfolded in the group process.

As the researcher, I was reflexive throughout the research process and remained sensitive to and reflective of the influence of my presence and ideological stance on the data.

The study limitations were that due to the small and unrepresentative sample (the final sample was comprised only of black African women from the university population sampled and the majority of the students were from one college), results cannot be easily transferred to other university populations. In addition, as most of the participants were referred to the group from student support counsellors, it is possible that these students were in greater need of support for academic or personal issues and thus, that the sample suffered from volunteerism bias.

## **7.4 Recommendations**

### **7.4.1 Policy recommendations**

This study recommends that University Student Support Services provide ongoing support groups for student mothers. It provides a working model of the support group process which was successfully implemented in the same college in the subsequent year to the study. Given that most of the participants were referred to the group by student support counsellors, it is likely that, as in this study, student mothers will need to be identified through academic monitoring and offered referral to the group, in order to benefit from the group process.

The study reveals a need for the university to acknowledge its diverse population and to make provision for student mothers. Just as students with special needs have been historically accommodated at university, student mothers need to be supported in achieving their degrees. This might entail the provision of parenting residences where student mothers can live on campus with their children or of quality, subsidised, childcare facilities on campus. A private space for breastfeeding students would also be useful. Student mothers generally progress

more slowly than their childless peers due to childcare commitments and time constraints, thus, offering degrees over a longer period without slow progress penalties might also be a useful intervention. Similarly, the university might consider offering student mothers extended enrolled status over the maternity period with an extension of academic deadlines for postgraduate students, thereby protecting their eligibility for both bursaries and financial aid. This would enable young mothers to stay with their newborns for longer without jeopardising their degrees.

It would be helpful to student mothers if there was a uniform university policy across colleges which covered such issues as enrolment status over the maternity period, extension of academic deadlines, eligibility for financial aid and detailed attendance and submission policies which permit student-mothers to make-up work missed or gain extensions due to caregiving duties. These policies would protect student mothers from unfair treatment and provide consistency across schools instead of each case being taken on its own merit. In addition, a list of available supportive services and facilities should be drawn up for student mothers.

The findings also suggest that lecturers and healthcare staff need to be sensitised to student mothers' experiences and for lecturers to be made aware of the impact that some of their course requirements, for example, field trips, can have on student-mothers without support and thus to offer equivalent make-up content without penalty. Further, this study recommends that lecturers take an active stand against prejudice and stereotypes towards student mothers. In addition, it would be useful if lecturers, clinic staff and counsellors were all made aware of the supports in place for student mothers and were able to refer them to these as needed.

#### **7.4.2 Recommendations for further research**

This study, which has focussed on the experiences of student mothers, suggests the need for future research to focus on the experiences of student fathers in tertiary education. Future research might also explore the value of a support forum for student mothers. Were this study to be replicated in a similar setting, a more participatory method of data collection where the researcher is also a participant, might be worth exploring. It could also focus on facilitating student mothers empowering local communities, for example by speaking to high school learners or first year students about their experiences. Support groups for parenting skills and post-natal depression for student parents might also be useful areas to research further.

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Appendix 1a: REGISTRAR's permission to conduct the study at UKZN campus



23 March 2016

Ms Wendy Robyn Corfe (SN 922401332)  
School of Applied Human Sciences  
College of Humanities  
Pietermaritzburg Campus  
UKZN  
Email: [wendycorfe@yahoo.co.uk](mailto:wendycorfe@yahoo.co.uk)

Dear Ms Corfe

**RE: PERMISSION TO CONDUCT RESEARCH**

Gatekeeper's permission is hereby granted for you to conduct research at the University of KwaZulu-Natal (UKZN) towards your postgraduate studies, provided Ethical clearance has been obtained. We note the title of your research project is:

*"The value of focus group participation on the experience of being a student mother whilst pursuing tertiary education in South Africa".*

It is noted that you will be constituting your sample by performing interviews and/or focus group discussions with full-time students, over the age of 18 years old, and with at least one child, and student counsellors on the Pietermaritzburg Campus.

Please ensure that the following appears on your notice/questionnaire:

- Ethical clearance number;
- Research title and details of the research, the researcher and the supervisor;
- Consent form is attached to the notice/questionnaire and to be signed by user before he/she fills in questionnaire;
- gatekeepers approval by the Registrar.

You are not authorized to contact staff and students using 'Microsoft Outlook' address book.

Data collected must be treated with due confidentiality and anonymity.

Yours sincerely

**MR SS MOKOENA**  
**REGISTRAR**

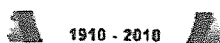
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**Office of the Registrar**

Postal Address: Private Bag X54001, Durban, South Africa

Telephone: +27 (0) 31 260 8005/2206 Facsimile: +27 (0) 31 260 7824/2204 Email: [registrar@ukzn.ac.za](mailto:registrar@ukzn.ac.za)

Website: [www.ukzn.ac.za](http://www.ukzn.ac.za)



1910 - 2010  
100 YEARS OF ACADEMIC EXCELLENCE

Founding Campuses: Edgewood Howard College Medical School Pietermaritzburg Westville





21 April 2017

Ms Wendy Corfe [SN 922401332]  
School of Applied Human Sciences  
College of Humanities  
Pietermaritzburg Campus  
UKZN  
Email: [wendycorfe@yahoo.co.uk](mailto:wendycorfe@yahoo.co.uk)

Dear Ms Corfe

**RE: PERMISSION TO CONDUCT RESEARCH**

Gatekeeper's permission is hereby granted for you to conduct research at the University of KwaZulu-Natal (UKZN), towards your postgraduate studies, provided Ethical clearance has been obtained. We note the title of your research project is:

*"The value of focus group participation in the experience of being a student mother whilst pursuing tertiary education in South Africa".*

It is noted that you will be constituting your sample as follows:

- with a request for responses on the website. The questionnaire and/or advert to participate must be placed on the notice system <http://notices.ukzn.ac.za>. A copy of this letter (Gatekeeper's approval) must be simultaneously sent to ([govenderlog@ukzn.ac.za](mailto:govenderlog@ukzn.ac.za)) or ([ramkissoonb@ukzn.ac.za](mailto:ramkissoonb@ukzn.ac.za)).
- by conducting interviews and/or focus group discussions with student mothers by putting up posters to recruit participants, via referrals from the campus clinic and via referrals from psychologists at all student support services and student support services, CAES on the Pietermaritzburg campus.

Please ensure that the following appears on your questionnaire/attached to your notice:

- Ethical clearance number;
- Research title and details of the research, the researcher and the supervisor;
- Consent form is attached to the notice/questionnaire and to be signed by user before he/she fills in questionnaire;
- gatekeepers approval by the Registrar.

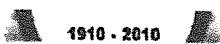
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**Office of the Registrar**

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Website: [www.ukzn.ac.za](http://www.ukzn.ac.za)



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Appendix 1b: Revised REGISTRAR's permission to conduct the study at UKZN campus (pg. 2)

You are not authorized to contact staff and students using 'Microsoft Outlook' address book.

Data collected must be treated with due confidentiality and anonymity.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Mr SS Mokoena', written over a horizontal line.

**MR SS MOKOENA**  
**REGISTRAR**



Appendix 2a: Ethical Clearance Certificate



INYUVESI  
YAKWAZULU-NATALI

23 May 2016

Ms Wendy R Corfe 922401332  
School of Applied Human Sciences - Psychology  
Pietermaritzburg Campus

Dear Ms Corfe

Protocol reference number: HSS/0573/016M  
Project title: The value of ongoing focus participation for supporting tertiary level student mothers in South Africa.

**Expedited Approval**

In response to your application dated 18 May 2016, the Humanities & Social Sciences Research Ethics Committee has considered the abovementioned application and the protocol have been granted **FULL APPROVAL**.

Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach and Methods must be reviewed and approved through the amendment/modification prior to its implementation. In case you have further queries, please quote the above reference number. Please note: Research data should be securely stored in the discipline/department for a period of 5 years.

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

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

Yours faithfully

Dr Shamila Naidoo (Deputy Chair)

/px

cc Supervisor: Dr M van der Riet  
cc Academic Leader Research: Professor D Wassenaar  
cc School Administrator: Ms Nondumiso Khanyile

Humanities & Social Sciences Research Ethics Committee

Dr Shenuka Singh (Chair)

Westville Campus, Govan Mbeki Building

Postal Address: Private Bag X54001, Durban 4000

Telephone: +27 (0) 31 260 3587/8350/4557 Facsimile: +27 (0) 31 260 4609 Email: [yimbap@ukzn.ac.za](mailto:yimbap@ukzn.ac.za) / [snymenm@ukzn.ac.za](mailto:snymenm@ukzn.ac.za) / [mohunp@ukzn.ac.za](mailto:mohunp@ukzn.ac.za)

Website: [www.ukzn.ac.za](http://www.ukzn.ac.za)



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Founding Campuses

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Howard College

Medical School

Pietermaritzburg

Westville

Appendix 2b: Revised ethical clearance certificate



10 November 2017

Ms Wendy R Corfe 922401332  
School of Applied Human Sciences - Psychology  
Pietermaritzburg Campus

Dear Ms Corfe

Protocol reference number: HSS/0573/016M

Project title: The value of ongoing focus participation for supporting tertiary level student mothers in South Africa.

**Approval notification – Amendment Application**

This letter serves to notify you that your application for an amendment dated 30 October 2017 has now been granted Full Approval.

- *To include additional Recruitment Strategy*
- *Change in Research Site*

Any alterations to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study must be reviewed and approved through an amendment /modification prior to its implementation. In case you have further queries, please quote the above reference number. PLEASE NOTE: Research data should be securely stored in the discipline/department for a period of 5 years

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

Best wishes for the successful completion of your research protocol.

Yours faithfully

Dr Shamila Naidoo (Deputy Chair)  
Humanities Social Sciences Research Ethics

/pm

cc Supervisor: Dr M van der Riet  
cc Academic Leader Research: Professor D Wassenaar  
cc School Administrator: Ms Nondumiso Khanyile

---

Humanities & Social Sciences Research Ethics Committee

Dr Shenuka Singh (Chair)

Westville Campus, Govan Mbeki Building

Postal Address: Private Bag X54001, Durban 4000

Telephone: +27 (0) 31 260 3587/8350/4557 Facsimile: +27 (0) 31 260 4609 Email: [ximbap@ukzn.ac.za](mailto:ximbap@ukzn.ac.za) / [snymann@ukzn.ac.za](mailto:snymann@ukzn.ac.za) / [mohunp@ukzn.ac.za](mailto:mohunp@ukzn.ac.za)

Website: [www.ukzn.ac.za](http://www.ukzn.ac.za)



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130

## ATTENTION: ALL STUDENT MOTHERS

**Would you be interested in participating in a discussion about your experience of being a mother at university?**

**Are you a mother to a child or children, an undergraduate or postgraduate, full time student from the University of KwaZulu-Natal and over the age of 18?**

**We are looking for students to participate in a study.**

**If you are interested or would like more information, please email:  
[studentmothersproject@gmail.com](mailto:studentmothersproject@gmail.com)**

<a href="mailto:studentmothersproject@gmail.com">studentmothersproject@gmail.com</a>
<a href="mailto:studentmothersproject@gmail.com">studentmothersproject@gmail.com</a>
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#### **Appendix 4: Letter to Risk Management Services**

RMS Building

Milner Road

Pietermaritzburg

3209

School of Applied Human Sciences

University of KwaZulu-Natal

P/Bag X01

Scottsville

3209

15 March 2016

Dear Mr Khumalo

#### **Re: Permission to put up posters on campus**

I am conducting research on the experience of student mothers in tertiary education and would like to recruit participants by putting advertisements up around campus. These advertisements are A4 size and would be discretely placed behind toilet doors in the ladies' toilets around campus.

Please consider this request and let me know if it meets with your approval. My contact details and those of my supervisor are included below.

Yours sincerely

Wendy Corfe

Tel: xxxxxxxxxx

Email: xxxxxxxxxxxx

Supervisor: Dr Mary Van der Riet

Ext: xxxx

Email: xxxxxxxxxx

## Appendix 5: Individual Interview questions prior to Group Participation (students)

1. How would you describe your experience as a mother in University?
2. What influenced your decision to come back to University and study after you had a child?
3. What has it been like being a student mother?
  - a. Can you discuss some of the benefits?
  - b. Can you discuss some of the challenges?
4. Can you give examples of coping strategies that you have used?
5. How would you describe your relationship with your child's father?
6. Do you feel that he is a source of support to you?
  - a. Please give examples of how he supports you?
  - b. Please give examples of ways you feel he doesn't support you?
7. Do you feel that you have a balance between work and motherhood?
  - a. Why do you feel this?
  - b. Can you give examples of how you achieve this balance?
  - c. Can you give examples of how you don't achieve this balance?
8. What did you imagine your student life and career would be like before you had a child?
9. What are your childcare arrangements?
  - a. Do you feel that these are best for your child?
  - b. Is there anything you would change if you could?
10. Can you describe your understanding of the term "mother"?
11. Can you explain where you think this understanding came from?
12. What in your opinion is the most important thing a mother should do for her child?
13. Do you think the University (Staff and administration) is aware that you have a child? Why? Why not?
  - a. Are there particular services that you have made use of at the University?
  - b. What could the University do to make life easier for you?

## **Appendix 6: Individual interview schedule after Group series participation (Students)**

1. Has your experience as a mother in University changed in any way this year?
2. Can you give examples of coping strategies that you have used this year?
  - a. Are any of those strategies different to the ones you would have used earlier in the year?
  - b. Can you give a reason for this?
3. Do you feel that you have a balance between work and motherhood?
  - a. Why do you feel this?
  - b. Can you give examples of how you achieve this balance?
  - c. Can you give examples of how you don't achieve this balance?
  - d. Has your attitude to this balance changed in any way this year?
4. How would you describe your relationship with your child's father?
  - a. Please give examples of ways in which he supports you?
  - b. Please give examples of ways you feel he doesn't support you?
  - c. Has your relationship with him changed at all this year?
5. Can you explain your understanding of the term "mother"?
  - a. Where do you think this understanding came from?
  - b. Do you feel that it has changed at all this year?
6. What in your opinion is the most important thing a mother should do for her child?
7. Do you think the University (Staff and Administration) is aware that you have a child? Why? Why not?
  - a. Are there any services that you have made use of at the University?
  - b. What could the University do to make life easier for you?
8. In your opinion has participation in the group sessions had an impact on your experience of being a student mother?
  - a. Can you tell me about the benefits (if any) that group participation has had on you?
  - b. Are there any disadvantages of participation in the group?
9. In your opinion, would an ongoing group for student mothers at the university, be useful? Why? Why not?



## **Appendix 7: Information sheet STUDENTS**

### **Information Sheet**

#### **The Study**

We are conducting research on the experience of student mothers amongst students enrolled at the University of KwaZulu-Natal. We would like to know about student mothers' experiences in tertiary education, particularly the challenges and supportive factors that they encounter and whether participation in an ongoing focus group has an impact on these.

A potential benefit of participating in this study is that you will meet other student mothers and will hear of their experiences which might provide a supportive function. An indirect benefit is that the results of this study could inform policy on the treatment of student mothers at the University.

You might be invited to participate in an individual interview and will also be asked to be involved in a series of groups.

#### **The peer support group**

The peer support group will take about 1 1/2 hours. It will be held in the Psychology laboratory in the Discipline of Psychology. It is a private setting. There will be about 4 – 6 other students of the same gender in the discussion group. The group will be conducted by a researcher of the same gender as the participants.

The questions will focus on what students' experiences as mothers at the university are, what they conceive to be the challenges and supportive factors and how participation in an ongoing group affects these. The questions will be broad and not directed to any individual in the group. There are no right or wrong answers. You are encouraged to express yourself freely and informally. You can answer questions you are comfortable to answer and leave the ones you wish not to comment on.

In the discussion we will not use your name or student number, instead we will use pseudonyms (false names). This means that in the final data from the project no one will be able to know who said what in the interviews or focus groups.

Because you are in a group setting, you will be requested to sign a confidentiality pledge saying that everything discussed in the group will be kept confidential. By signing, you are agreeing that you will not reveal and discuss what was said in the group. However, be advised that we cannot guarantee confidentiality even if a pledge is signed. For this reason, you will be asked general questions as a point of discussion. You are advised not to disclose any sensitive personal information about yourself during the discussion.

You may also be asked to participate in a separate, personal interview.

#### **The interview process**

The interview will take about 60 minutes. It will be held in a room in the Discipline of Psychology. The researcher will ask you questions about your experiences as a student mother. The study wants to find how you understand motherhood, and what impact motherhood has had on your studies. The study also wants to investigate whether participation in a support group has an impact on your understanding and experience of student motherhood. There are no right or wrong answers. You are encouraged to express yourself freely and informally. You can answer questions you are comfortable to answer and leave the ones you wish not to comment on.

The interview will be conducted by a researcher of the same gender as the participants

## **Recording**

With your permission, the interviews and support groups will be recorded so that the researcher can transcribe and analyse what people have said.

Please be advised that your participation in this study is voluntary. You are free to leave the study at any time of the process.

## **After the groups and interviews**

After the discussion we will take the recordings and transcribe them into a written form. In this process you will still be referred to by your pseudonym. The transcription will be analysed and reports will be written. This report will be used for post-graduate research projects. These will be examined by at least two examiners within the Discipline of Psychology.

The information may also be used in future research projects. The information collected in the research process will also be used to write research articles and to present at conferences so that other people may learn from the experience of our research. These written documents, will use only pseudonyms and not reveal any identifying information related to the participants in the study.

A synopsis of the results of the study will be made available to you upon request.

## **Storage of Information**

The information will be kept for future research purposes. It will be stored in a locked, filing cabinet for a period of five years, after which it will be destroyed. If data is in electronic form, it will be stored in password protected files which only my supervisor and I have access to. All audio-recordings will be erased after the study.

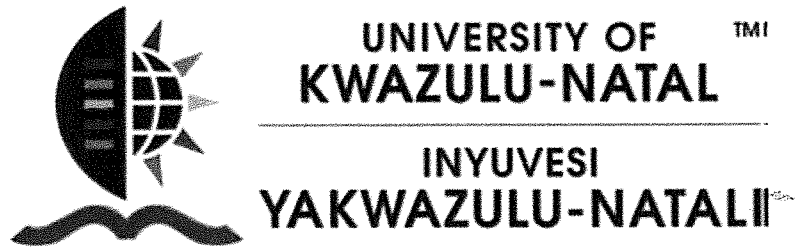
## **Anything else?**

If you need advice on further health management or the research raises other social or psychological issues you can visit the Campus Clinic or the Student Counselling Services. At the campus clinic you can get information and assistance on HIV testing, pregnancy testing, sexual advice, information and contraception. At the clinic you can book an appointment to either Sr Govender or Sr Peters via email [govenderma@ukzn.ac.za](mailto:govenderma@ukzn.ac.za) and [petersi@ukzn.ac.za](mailto:petersi@ukzn.ac.za). You can also approach the Child and Family Centre at the University, for an appointment with an intern psychologist (Ms N Naidoo: [naidoon2@ukzn.ac.za](mailto:naidoon2@ukzn.ac.za); 033 260 5166)

If you have any concerns about this study you can also contact Ms Phume Ximba of the Humanities and Social Science Research Ethics Committee (031 260 3587; email [ximbap@ukzn.ac.za](mailto:ximbap@ukzn.ac.za))

If you have any questions about this study, then please talk to the researcher, Wendy Corfe (tel xxxxxxxxxx; email xxxxxxxxxx) and or email the supervisor of this research study Dr Mary van der Riet (tel xxxxxxxxxx; email xxxxxxxxxx).

## Appendix 8: Consent form for groups and Interviews (students)



I hereby agree to participate in this study. I have had an opportunity to read and understand the information sheet given to me.

The purpose of the study has been explained to me. I understand what is expected of me in terms of my participation in this study and the time commitment I am making to participate.

I understand that my participation is voluntary, and I know that I may withdraw from the study at any point, without negative consequences.

I understand that there is a limit to confidentiality in a group setting as the researcher cannot guarantee that the other participants will adhere to the conditions of the confidentiality pledge.

I understand that my data will be stored securely for a period five years and may be used for future research. I understand that measures will be taken to ensure that my identity is protected and my participation in this research will be completely confidential in this regard. I understand that no identifying information about me will be published.

I have the contact details of the researcher should I have any more questions about the research. In the unlikely event that any personal issues should arise during the research, I have been given contact details for counselling and campus clinic services.

I have also been given contact information of the Research Ethics office.

Signature of Participant.....

Date.....

## Appendix 9: Consent to audio record interview/groups (Students)



In order to be able to understand clearly what has been said in this interview/group, and to remember it, we would like to record the discussion on this small digital recorder. We will then listen to the recording and write it down word for word.

After this transcription has been made, we will then delete the recording on the digital recorder.

We assure you that your name will not be linked to the recording or the written information from the recording. We will give you a code name, using numbers, for example Participant 1\_Interview 3. Or Group 3.

**I hereby provide consent to:**

**Audio-record my interview/group discussion**

☐

**I AGREE**

☐

**I DO NOT AGREE**

**SIGNATURE OF PARTICIPANT :**

**DATE:**

---

## **Appendix 10: Group Questions for Introductory Session**

### **Activity 1: Drawing of a Family Genogram including Child/Children's Father**

- On the piece of paper provided please draw a simple family genogram of your immediate family.
- On the same piece of paper please write what your childcare arrangements are.
- If you would like to, please participate in the discussion by sharing this information with the group.

### **Schedule of Questions to Guide Initial and Subsequent Groups**

1. How does a student's life change when she has a child?
2. Does being a mother make one feel different to other students?
3. How does having a child affect a student's studies?
  - 3a. What impact does motherhood have on academic achievement?
4. What do students do to balance their lives as student mothers?
5. What are the sources of support for student mothers?
6. What challenges do student mothers encounter?
7. What kind of coping strategies do student mothers use?
8. Do you know of any support systems available at the University for student mothers?
  - a. Has anyone made use of these systems?
  - b. Is there any way the University could support student mothers better?

## Appendix 11: Permission from the Child and Family Centre



03 March 2016

To whom it may concern

This letter serves to provide the assurance that should any participant interviewed by Ms Wendy Corfe (Psychology Masters student) require psychological assistance as a result of any distress arising from the research project on *"The value of focus group participation on the experience of being a student mother whilst pursuing tertiary education in South Africa"*, the service will be provided by Masters one Psychology students and intern psychologists at the University of KwaZulu-Natal, Pietermaritzburg Campus Child and Family Centre – phone 033-2605166.

Yours sincerely,

K.P Maruping

Coordinator of University of KwaZulu-Natal, Pietermaritzburg Campus Child and Family Centre

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Founding Campuses: Edgewood Howard College Medical School Pietermaritzburg Westville

## Appendix 12: Confidentiality Pledge



As a member of this Group, I promise not to repeat what was discussed in this group with any person outside of the group. By signing this pledge, I hereby promise to keep the comments made by the other group members confidential.

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

## Appendix 13: Transcription conventions

### Jefferson Transcription Notation (Jefferson, 2004)

Underlining	underlining for a raise of volume or emphasis on the part underlined
CAPITALS	capital letters indicate something was said loudly
↑↓	arrows to indicate pitch movement
(.)	a period within parenthesis to indicate a micropause
(0.2)	parenthesis and the time in seconds to indicate timed silences
oka:y	colons show the prolongation of the sound preceding them, the more colons, the more elongation of sound
>they asked <	greater than/less than symbols to indicate rushed talk
<she told him >	reverse order indicates that the talk is more drawn out
[ ]	square brackets indicate interrupted speech
thi(h)ng	When a bracketed “h” appears it means that there was laughter within the talk
hhh	Aspiration (out breaths)
.hhh	Inspiration (in-breaths)
Heh heh	Voiced laughter

### Additional notation for crying and emotional expression from Hepburn (2004)

degree signs (°)	are placed around talk that is markedly quiet
°°stop°°	double degree signs indicate whispering
.shih	Wet sniff
.skuh	Snorty sniff
~grandson~	Wobbly voice – enclosed by tildes
K(hh)ay	Aspiration in speech – an “h” represents aspiration: in parenthesis indicates a sharper, more plosive sound
Hhhelp	Outside parenthesis indicates a softer, more breathy sound
Huhh. Hhih	Sobbing – combinations “hhs”, some with full stops before them to indicate inhaled rather than exhaled