

**Teenage mothers' experiences of motherhood- schooling, stigma and learned responsibility: a case study of teenage mothers of school going age in a peri-urban area in Kwa-Zulu Natal.**

**By**

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## **Declaration**

By submitting this thesis electronically, I declare that the entirety of the work contained therein is my own original work, that I am the authorship owner thereof (unless to the extent explicitly otherwise stated) and that I have not previously in its entirety or in part submitted it for obtaining any qualification.

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## **Abstract**

This study seeks to contribute to research that seeks to understand experiences of teenage motherhood. Drawing on the experiences of fifteen (15) teenage mothers between the ages of 15 to 19 years old, in and out of school, this study investigates the experiences of motherhood among a sample of teenage mothers in a peri-urban area in KwaZulu Natal. Utilising the qualitative approach in the form of semi-structured interviews, the study aimed to investigate teenage mothers' experiences of motherhood. The focus of the study is mainly on understanding factors that lead to teenage pregnancy, teenage mothers own risky sexual behavior and lack of access to contraceptives and how this has a bearing on teenage pregnancy. The study further examines the stigma experienced by teenage mothers as well as the gendered notions of this experience. Teenage mothers' reasons for staying in school, as well as the factors leading up to those decide to leave school are also explored in the study.

Findings suggest that teenage motherhood presents with feelings of fear and sadness at the realisation of the pregnancy. Family reactions at finding out also differ with some experiencing anger, and disappointment at the pregnancy. Often, participants reported that they were not aware that they were pregnant and had symptoms of teenage pregnancy and for some; knowledge of their pregnancy came from the boyfriend and father of the child before their realised that they are pregnant.

The participants related reasons for returning to school as influenced by their need to have a better job in the future and to take care of their children. Others returned to school because of influence by parents who had been teenage mothers and returned to school. Some of the participants argued that support from teachers played a role in decisions to stay in school. Those participants who left school did so due to lack of support from family and friends and teachers attitudes towards them during and after the pregnancy, as well as financial constraints and not having anyone to take care of the child while they are in school. I conclude that understanding how teenage mothers themselves experience motherhood will assist in unravelling the complex situations and inform policy on structural, context-specific interventions that will help keep teenage mothers in the education system.

## Opsomming

Hierdie studie poog om by te dra tot navorsing wat daarop gemik is om ervarings van tienermoederskap verstaan. Teken op die ervarings van vyftien (15) tienermoeders tussen die ouderdomme van 15 tot 19 jaar oud, in en uit van die skool, die studie ondersoek die ervarings van moederskap onder 'n monster van tienermoeders in 'n peri-stedelike gebied in KwaZulu-Natal. Benutting van die kwalitatiewe benadering in die vorm van semi-gestruktureerde onderhoude, die studie is daarop gerig om ervarings van moederskap tienermoeders 'te ondersoek. Die fokus is van die studie is hoofsaaklik op die begrip van faktore wat lei tot tienerswangerskappe, tiener moeders besit riskante seksuele gedrag en 'n gebrek aan toegang tot voorbehoedmiddels en hoe dit 'n invloed op tienerswangerskappe. Die studie ondersoek verder die stigma ervaar deur tienermoeders asook die gendered begrippe van hierdie ervaring. Redes tienermoeders 'vir die besluit om te bly in die skool, asook die faktore wat gelei het tot die besluit om die skool te verlaat, word ook ondersoek in die studie.

Bevindinge dui daarop dat tienermoederskap presenteer met gevoelens van vrees en hartseer by die verwesenliking van die swangerskap. Familie reaksies by om uit te vind ook verskil met 'n paar ervaar woede, teleurstelling en die swangerskap. Dikwels, deelnemers het gerapporteer dat hulle nie bewus was dat hulle swanger was en het simptome van tienerswangerskappe en vir 'n paar; kennis van hul swangerskap het van die kêrel en vader van die kind voor hulle beseft dat hulle swanger is.

Die deelnemers verwante redes vir die terugkeer na die skool as beïnvloed deur hul behoefte om 'n beter werk in die toekoms te hê en om te sorg van hul kinders. Ander teruggekeer na skool as gevolg van die invloed van ouers wat tienermoeders was en teruggekeer na die skool. Sommige van die deelnemers het aangevoer dat die ondersteuning van onderwysers 'n rol gespeel in die besluit om te bly in die skool. Die deelnemers wat die skool verlaat het so weens 'n gebrek aan ondersteuning van familie en vriende en onderwysers houdings teenoor hulle tydens en na die swangerskap, sowel as finansiële beperkinge en nie met iemand om te sorg van die kind terwyl hulle in die skool. Ek aflei dat die begrip van hoe tienermoeders self ervaar moederskap sal help ontrafel die komplekse situasies en inlig beleid oor strukturele, konteks-spesifieke ingrypings wat sal help om tienermoeders in die onderwysstelsel.

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## **Dedications**

I dedicate this thesis to my mother who passed away after a long battle with Cancer in  
May 2014.

To my daughter Amanda: Thank you for continuing to be a driver for the completion  
of this thesis. May you one day learn from this work and be the young woman I  
dream for you to become.

## List of Abbreviations

CSG	Child Support Grant
DoE	Department of Education
HIV	Human Immunodeficiency Virus
HSRC	Human Sciences Research Council
SA	South Africa
UNICEF	United Nations International Children's Emergency Fund

## TABLE OF CONTENTS

<b>Declaration</b>	<b>2</b>
<b>Abstract</b>	<b>3</b>
<b>Opsomming</b>	<b>4</b>
<b>Acknowledgements</b>	<b>5</b>
<b>Dedication</b>	<b>6</b>
<b>List of Abbreviations</b>	<b>7</b>
<b>CHAPTER ONE: INTRODUCTION TO THE STUDY</b>	
1.1. Introduction	11
1.2. General overview of teenage pregnancy attitudes	13
1.3. Key Research Questions and aims	15
1.4. Study Context and Rationale	17
1.5. Conclusion and dissertation outline	20
<b>CHAPTER TWO: LITERATURE REVIEW</b>	
2.1 Introduction	22
2.2 Teenage Pregnancy and motherhood in South Africa	25
2.3 Feminist developmental Framework and the gendered perspectives on teenage pregnancy	29
2.4 Access to contraceptives and reproductive health services	30
2.5 Relationships with older men	30
2.6 The payment of damages as acknowledgement of the child and effects on	



teenage mothers	34
2.7 Teenage mothers and schooling	35
2.8 Conclusion	39
<b>CHAPTER THREE:</b>	
3.1 Introduction	41
3.2 Research approach and design	41
3.3 Getting to know the participants	43
3.4 Methods of data collection and data analysis	45
3.4.1 Semi-Structured interviews	46
3.4.2 Snowball sampling method	47
3.4.3 Data analysis method	49
3.4.4 Ethical Considerations	49
3.4.5 Validity	50
3.5 Conclusion	52
<b>CHAPTER FOUR: Factors leading to the pregnancy</b>	
4.1 Introduction to the chapter	53
4.1.1 Finding out about the pregnancy	53
4.1.2 Risky sexual behavior	56
4.1.3 Lack of access to reproductive healthcare	59
<b>CHAPTER FIVE: Experiences of motherhood</b>	
5.1 Introduction to the chapter	61
5.2 Teenage motherhood and learned responsibility	61
5.3 Gender narratives and the experiences of stigma	63

## **CHAPTER SIX: Teenage mothers and schooling**

6.1 Introduction to the chapter	66
6.2 Reasons for staying in school: accounts of eight teenage mothers	66
6.3 Reasons for leaving school: accounts of seven teenage mothers	70
6.4. Conclusion	72

<b>CHAPTER SEVEN: Conclusion and recommendations</b>	
7.1 Summary of Findings	76
7.2 Concluding remarks	77
7.3 Recommendations	78
BIBILOGRAPHY	79
<b>Appendix A- Permission letter to chief in the area</b>	<b>84</b>
<b>Appendic B- Consent form for participants</b>	<b>85</b>
<b>Appendix C- Questionnaire for fieldwork</b>	<b>89</b>

## Chapter 1: Introduction to the study

### 1.1 Introduction

In the year 2013, the Gauteng Department of Social Development released a study on teenage pregnancy entitled: Factors Associated with Teenage Pregnancy in Gauteng. In her presentation of the findings of the study, the then Gauteng Minister of Social Development MEC Nandi Mayathula-Khoza, reported that findings from the study suggested that issues of culture, where teenagers are subjected to family pressure and girls wanting to prove their womanhood were amongst the causes of teenage pregnancy in Gauteng. She further reported that a lack of parental guidance also contributes to the rate of teenage pregnancy in Gauteng. On 17 June 2015, the television show *Checkpoint on ENCA* aired a teenage pregnancy episode focusing on Seme Secondary school in Daggakraal, Mpumalanga, where school pregnancy is perceived as “unacceptably high”.

The show further suggested that according to figures submitted to Parliament in the 2013/14 financial year, Seme Secondary School had the highest number of pregnancy in the country, with 77 learners having been pregnant. However, upon investigation by the ENCA team, it was revealed that one of the problems of Seme Secondary School is that some of the learners are “adults in uniform”. While this does not justify the pregnancy rate in the school, it accounts for understanding of the pregnancy statistics in the school and social factors associated with these. Mainly, social issues reflecting non-attainment or late enrollment of young men into schooling that affects their behaviour in instances where these young men view themselves as “old” or “grown up”, or old enough to engage in sexual intercourse. During an interview with one of the teenage fathers in the school during this episode, he argued “the biggest problem is that the girls don’t know how to protect themselves from falling pregnant”. This narrative clearly reflects the “gendered” perspective of teenage pregnancy and how the bearing of children and consequences of teenage pregnancy are often left to the girls, and young men are seen as having no role to play in ensuring teenage sexual health.

Since 1994, South Africa, particularly the South African Education Department has gone to considerable strides in ensuring equal education, specifically for young girls. As one of the priorities of the department, education of young girls remains a critical step in ensuring economic and social stability for these girls. It is against this priority that young girls now make the majority of enrolments in schools (DoE, 2009). However, while teenage enrolments in schools reflect positive outcomes for teenage girls, teenage pregnancy remains a challenge for

school completion. According to a study conducted by the Human Sciences Research Council (HSRC), commissioned by the Department of Education in 2009, on teenage pregnancy in South Africa specifically focusing on school going girls, it was found that while teenage fertility has been declining over time, learner pregnancies continue to be concentrated in poorer provinces such as Kwa-Zulu Natal, Eastern Cape and Limpopo. Furthermore, in a country where HIV prevalence is at 18.8 percent, the high level of teenage pregnancy has heightened concerns for the health outcomes of teenagers.

Evidence from the HSRC HIV Prevalence Survey (2014) reflects that HIV prevalence in the 15–49 year group is currently standing at 18.8% with females remaining at higher risk of HIV and 1.6 times more likely to be HIV positive than males. In addition, research suggests that young adolescent girls are not only biologically more susceptible to HIV infection; they are more likely to have older sexual partners who use injecting drugs, thus increasing their potential exposure to HIV (UNICEF, 2011). In 2015, statistics released by revealed that the HIV prevalence rate among all young people between 15 and 24 in South Africa was 5.6%. Notwithstanding this, it is vital to ensure that teenage girls are protected from the epidemic of HIV and in so doing, as a starting point, understanding teenage pregnancy and childbearing can advance research knowledge into the factors associated with motherhood at a young age, and specifically taking into consideration teenage mothers own experiences.

Research focusing on the negative outcomes of teenage childbearing argue that a number of social and economic disadvantages are associated with teenage childbearing (Manzini, 2001; Kaufman et al., 2001). These disadvantages may include expulsion and exclusion from educational facilities, lack of material and social support as well as failure to continue with education (Ojwang and Maggwa, 1991, cited in Makiwane, 2010 p. 193). Furthermore, teenage mothers are often stigmatized, and the perception of their own world and understandings of their experiences received very little research attention. In many instances, research has mainly focused on the disadvantages of teenage pregnancy and motherhood on the lives of teenage girls and very little research emphasis has been placed on unravelling the lived experiences of teenage mothers. Most of the research has mainly focused on the outcomes of teenage pregnancy, with research suggesting that teenage mothers are more likely to have low-educational attainment, low occupational prospects thus leading to poor economic aspects later in their lives (Bacon, 1974; Furstenberg, 1976; Johnson, 1974). This suggests that while research on teenage pregnancy and motherhood is prevalent out there, there is still a big need to ensure understanding of the experiences on the ground in order to change the outcomes for

those who have a chance and ensure a mindset change about teenage mothers and their circumstances.

## **1.2 General overview of Teenage Pregnancy attitudes**

Policy-makers and wider societal discourse increasingly problematize teenage motherhood with teenage mothers perceived as a homogenous group of immature, benefit-dependent, irresponsible and unfit-parents (Yardley, 2010, p.671). This is also evident in the article found on the *eThekweni Community Church's* website addressing teenage pregnancy in South Africa (2011). The article begins by ascribing that “teenage pregnancy is a menace to our society’ and further states that teenage pregnancy is a struggle that needs more attention and focus just like the struggle of apartheid and HIV. Furthermore, the article argues that ‘sons of teenage mothers are more likely to end up in prison, increasing crimes and prison costs’. While some of these statements may be true, representations of teenage pregnancy and motherhood in media often dwell on the negative and are underpinned by particular perceptions of the teenage mothers as delinquent. Hatfield et al. (2007, p.258; cited in Yardley, 2008) argue “it is the minority of teenage mothers considered to be problematic who make headlines and are therefore stigmatized. Stories of teenage mothers doing well are not so newsworthy”. This suggests that there lies a need to ensure that research also tackles stories of teenage mothers themselves to ascertain whether there are in fact any positive outcomes from their relative experiences. This study attempts to do this by providing teenage mothers own accounts of their experiences of teenage motherhood as a way in which many of them learned responsibility, as discussed in detail in the findings of the study in Chapter Five of the presentation of findings.

Teenage childbearing is also widely regarded as the cause of poor labor market outcomes for mothers, adverse outcomes for their children and a cost to society. Researchers have found that teenage mothers have on average lower income, and lower educational levels than none-teen mothers do. Furthermore, in many parts of the world, teenage motherhood takes place outside of marriage, is unplanned, unwanted and occurs in unstable relationships thus raising concerns of religious, cultural and pragmatic basis (Vundule et al, 2001, cited in Mkhwanazi, 2010, p. 347). Researchers have also argued that adolescent mothers tend to have psychosocial dysfunctions, poor parenting and socio-economic disadvantages (Brehemy and Stephens, 2007, p. 334).

In South Africa, Education policy allows teenage mothers to return to school after the birth of the child; yet about half of teenage mothers drop out of school after the birth of the child

(Manzini, 2001; Kaufman et al, 2001). According to the department of Education, the adoption of the South African Schools Act No 84 of 1996 gave teenage mothers a voice and allowed them entry into school after the birth of the child. This is not only for the benefit of the learner but to ensure gender equality in the schooling system. This ACT was not only for the girls to return to school, but it proves that South African government has an interest in ensuring that teenage girls in schools are not discriminated by gender. Thus allowing them a fair and equal chance in education like their male counterparts.

This study therefore explores the experiences of teenage mothers in a peri-urban area in KwaZulu Natal. The study was inspired and is to some extent a continuation of my Honours Research study entitled: Perceptions and experiences of reasons for teenage pregnancy in peri-urban KwaZulu-Natal (2009). The Honours study yielded very rich data with findings related to issues of risky sexual behaviour and how teenage girls engage in sexual behaviour they do not necessarily see as a prerequisite to pregnancy. The role of income came out strongly in the discussions with the teenage girls that took part in my Honours study. They argued that teenage pregnancy had changed them, from being young girls relying on family, to becoming mothers with someone else relying on them, thus seeing themselves as responsible adults. According to the participants who took part in my Honours study, teenage pregnancy and in particular, motherhood was a revelation. It taught them not only independence, but also they had also learned to think and care for someone else other than themselves. This sentiment from the participants is also evident in studies conducted by Preston Whyte in the 1980s in various parts of South African, mainly black and coloured communities in which she found that some teenage girls in these communities see early childbearing as a way to move forward in social circles. These teenage girls came from families associated with poverty, high unemployment and high rates of school dropout (Mkhwanazi, 2001, p. 347). She further argued that, in apartheid South Africa, it was not regarded as a shame when an un-married teenager becomes pregnant as teenage childbearing was seen as an economic survival strategy in apartheid South Africa (Preston-Whyte and Zondi, 1992; Makiwane, 2010, p. 201). While analyzing the data from my Honours study, it was evident that some of the crucial themes needed further exploration, especially the issue of schooling and teenage motherhood. I was interested in understanding how teenage mothers navigate schooling, stigma and the pressures associated with these. It was also interesting to find that some of the teenage mothers argued that teenage pregnancy had made many of them learn to be independent at a young age. While this did not come without its pressures, the participants concurred that it was a start for them to focus on

building a future not only for themselves but also for the people whom they had brought into the world and were now responsible for.

This study therefore provides an in-depth insight into the lived experiences of teenage mothers, experiences of schooling, stigma, and gender narratives of the way in which they experience motherhood. It is no secret that the girls often bear teenage pregnancy consequences, and boys are often less seen in the consequences and narratives of teenage pregnancy. Cultural factors such as the way in which the African culture sees young girls as those having to care and raise the children and men as providers also exacerbates the way in which teenage mothers and particularly those in this study experience motherhood. My experience as a young African woman who grew up in rural Kwa Zulu Natal, having been a young mother myself, provides me with an even greater advantage as these young women convey their stories to me. It provided me with an ability to relate to some of their struggles and the “shared” understanding of motherhood in general assured them that their stories were really heard.

According to the National Development Plan (2030), South Africa has a goal of eradicating poverty, reducing inequality, growing the economy by an average of 5.4%, and cutting the unemployment rate to 6% by 2030. Education therefore remains critical to the attainment of these goals. In this regard, the education of young girls remains a critical step in ensuring that the country’s economy and growth is sustainable. It is also imperative that research into teenage pregnancy and motherhood provides insights that shed light into the lived experiences of teenage mothers taking into account the social and cultural gender perspectives that teenage mothers live in. This will be of assistance to policy makers into making evidence-based decisions when coming up with policies to either assist teenage girls who are already mothers into ensuring they are able to complete their schooling, and those teenage girls who have never been pregnant to ensure that they do not experience pregnancy as teenagers.

### **1.3 Key Research questions and aims**

This study explores the experiences of teenage mothers of school going age in a peri-urban area in Kwa-Zulu Natal and provides an in-depth insight into their lived experiences, stigma, and gender narratives of the way in which they experience motherhood. The study further explores the decisions related to staying in school and decisions that led those who chose not to stay in school. Following from arguments of the effects of teenage motherhood, I have formulated my research question to understand: How do teenage mothers rationalise their



position as mothers? What are the experiences that may have influenced them becoming pregnant as teenagers? What are the challenges faced by teenage mothers in completing school, and how they navigate these. Firstly I aimed to investigate why teenage mothers engaged in unprotected sexual behaviour given the risks of becoming pregnant. This was to ascertain what the factors were leading up to the pregnancies of the teenage mothers in the study.

Secondly, I aimed to investigate the reasons why teenage mothers leave school and others stay. The objective of this was to understand the pull factors that motivate teenage mothers to stay in school after the birth of the child, and the dynamics involved in juggling mothering responsibilities with those of completing school. I also aimed to understand the negative factors that prevent others from staying in school as these are important for policy implications.

Thirdly, I aimed to understand the stigma that teenage mothers experience either from the community, family or social circles and how teenage mothers are perceived in these respective environments. The objective is to understand the pressures that teenage mothers have to deal with in addition to caring for their children.

I set out to investigate teenage mothers' own experiences of motherhood and including the experience of finding out about the pregnancy, motherhood and its effect on their everyday lives. In light of the above aims and objectives of this study, I derived my questions from these. This study aims to answer the following questions derived from the objectives of the study.

*The following questions inform the research:*

- What are the experiences that lead to teenage pregnancy?
- How do teenage mothers navigate finding out that they are pregnant?
- Why do some teenage mothers stay in school and others leave?
- What are the factors that prevent teenage mothers from staying in school?
- What are the factors that allow an environment in which teenage mothers stay in school?

What follows is the discussion of the rationale for this study and community selected for the study. The section focuses on describing the community in which the study is based, to give an understanding of the type of homes the participants come from. In this section, I also provide the outline of the dissertation.

## 1.4 Study Context and Rationale

In light of the semi-structured interviews undertaken, the participants are all teenage mothers falling within the age group (15-19 years). Based on the data collected during the semi-structured interviews, I conclude that the participants in this study are all unmarried, 'black South African'<sup>1</sup>, teenage mothers in the age group (15-19) and living in poverty-stricken households. The participants are all isiZulu speaking, the main spoken language in KwaZulu-Natal. The interviews were conducted in this language, which is also the language of the researcher and interviewee.

The aim of this study is to explore the experiences of teenage mothers in a peri-urban area in Kwa-Zulu Natal, and provides an in-depth insight into their lived experiences particularly as teenage mothers, their navigation of schooling, stigma, and gender narratives of the way in which they experience motherhood. The study further explores why some of the teenage mothers who participated in this study chose to stay in school during and after the pregnancy. The interest in this was mainly on the factors associated with teenage motherhood in relation to access to education, risky sexual behaviour and experience of motherhood. Research has argued that early risky sexual behaviour has many other previous circumstances that are not necessarily sexual. These circumstances include poor school performance and a link between early school leaving, adolescent pregnancy and low-economic status (Kirby, 2001, cited in Grant and Hallman, 2006, p. 5; Hallman and Grant, 2003). Researchers have also argued that:

rather than pregnancy causing girls to drop out, the lack of social and economic opportunities for girls and women and the domestic demands placed on them, coupled with the gender inequalities of the education system, may result in unsatisfactory school experiences, poor academic performance and acquiescence in or endorsement of early motherhood (Lloyd and Mensch, 1995, p. 85, cited in Hallman and Grant, 2006, p. 5).

The setting in which the study was undertaken is an area called Mzingazi situated in Richards Bay, Kwa-Zulu Natal, which is a low-income village predominantly inhabited by black South African citizens. This area is situated a distance from the port of Richards Bay, with many of the inhabitants working in industrial companies doing manual labour with companies such as Richards Bay minerals (RMB), Richards Bay Coal Terminal (RBCT), TATA Steel, and

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<sup>1</sup> I acknowledge that the use of these terms is artificially based and their use is only to show continuing inequalities and the effects of these on teenage motherhood in South Africa.

Transnet amongst other big corporations in the area. In choosing Mzingazi as my research site, I found it convenient for my study and sampling as research has often found that teenage pregnancy often takes place among rural communities and communities with low socio-economic conditions. While the decision to choose this village was not to reinforce those ideas, but to understand what are the factors experienced by teenage girls in these communities that may have had an influence in them falling pregnant.

The decision to choose this area was also influenced by the fact that I found it easier to conduct this research among a group of participants whom I identify with in terms of language, to some extent background experience. As a young woman coming from rural KZN myself, raised by a grandmother with her pension money and later exposed to opportunities that allowed me to progress from that poverty. It proved to be gratifying for me to spend time with these teenage mothers and be able to engage with them on their personal stories and in that way build rapport and understanding. My fluency in isiZulu and knowledge of Zulu cultures and ideologies made it easier for me to conduct the study and to be able to understand the underlying nuances from the stories told by the participants. I was also able to translate the recorded interviews with clarity. To some extent I do claim to have a broad understanding of the experiences of the participants in this study, as a young mother myself, I am familiar with the life of poverty and I have lived in a rural area most of my life and are familiar with the effects of poverty and implications for ones future. Although I do claim to be more privileged than the participants in this study, in terms of education and opportunities available to me which they are not able to access. I established in the interviews that participants come from low-income families and often lived with extended family members in female-headed households.

Qualitative research places an emphasis on understanding the research question from the perspective of the participants, and to do this it is important to understand their fit into the study and how this may inform the information they choose to share (Terre Blanche et al, 2006). I conducted semi-structured interviews in order to allow participants flexibility in expressing their views and a chance to focus on their emotional understanding of their stories and experiences. Teenage pregnancy and motherhood has been a great subject of debate and attention among researchers, media and politics, with teenage mothers perceived as immature, irresponsible and unfit parents benefiting from state pensions. Much of the research on teenage motherhood is greatly focused on the negative effects of teenage pregnancy leading to a great focus on the negative and less attention afforded to the positive aspects of teenage motherhood (Phoenix, 1993; Coleman, 1998; cited in Bunting and McAuley (2004)). This study would shed

light into the lived experiences of the sample of teenage mothers to see how their own relations and experiences have been positive, in some cases.

My study focused on investigating the experiences of teenage motherhood, their decisions to stay in school which in itself is a positive thing. When a teenage mother concisely decides to stay in school given the social constraints and lack of support in the schooling system, it is important to unpack that decision to understand what factors allow for a teenager to make that decision as this information is useful for future policy on teenage mothers in school. Deducing from the interviews, it is clear that many teenage mothers felt that motherhood changes the way family and society perceive them and there exists a marginalisation in the life of a teenage mother after the birth of the child.

For the purpose of this study, teenage motherhood and teenage pregnancy are terms, which are used interchangeably in the study. For the purpose of this study, *teenage pregnancy* is defined as the birth to a teenage mother aged 15-19 years (Makiwane, 2010, p. 195). Therefore, a *teenage mother* is anyone who has given birth by the age 15-19 years, before 20 years, only limited to live birth.

This study cannot be generalised to any other teenage mother in Kwazulu Natal, Mzingazi area, as the sample size does not allow for large generalisations. It is a case study of a group of teenage mothers from a single village and even though these teenage mothers come from this village, the study is not a true reflection of all teenage mothers in the village. The study therefore serves as an account of the sampled teenage mothers. I do not claim to have exhausted all the experiences of teenage mothers in the area under study as I am only presenting a case based on a sample of the fifteen (15) teenage mothers interviewed for this study. I acknowledge that the study is not without limitations, as not all aspects could not be fully explored.

## 1.5 Conclusion and Dissertation Outline

This chapter aimed to provide the rationale and overview of research on teenage pregnancy and motherhood. The research locates teenage pregnancy in a broad context of teenage motherhood as problematic and teenage mothers as delinquent beings who are immoral in their life choices. The Research also provided context into teenage motherhood and schooling. This chapter introduced the location of the study and its context and the general perceptions of teenage pregnancy and motherhood. In this chapter, I also introduced the questions underpinning this study, as these shaped the discussion with the participants in the study. The study therefore provides an insight into the lived experiences of teenage mothers in relation to risky sexual behaviour, their status as mothers and their decisions to stay/leave school.

**Chapter Two** provides a discussion of literature on teenage pregnancy and motherhood. The chapter locates the social and cultural factors of teenage pregnancy as well as the use of contraceptives by teenage girls. The study further sheds light into literature on teenage motherhood and gender perspectives relating to women as having to raise children and bear the effects of childbearing, the relationships with older men and teenage mothers and schooling. The chapter generally provides an overview of literature on teenage pregnancy and motherhood to inform the study.

**Chapter Three** provides the methodological framework underpinning this study. It locates the study in a descriptive empirical framework in which a sample of fifteen (15) teenage mothers relay their stories. The chapter further provides the data collection methods that are utilised in this study, the research approach and data analysis approach to the study.

**Chapter Four** provides an analysis of findings as they relate to the factors leading to the pregnancy, including the risky sexual behaviour, lack of adequate access to healthcare and the lack of access to contraceptives among teenage mothers.

**Chapter Five** discusses the research findings in relation to how gender plays a role in the experiences of teenage mothers and raising the child. The narrative of teenage pregnancy as having positive prospects is also included in this section as teenage mother's relayed stories of the way in which being a mother has shaped their progress in life and their ability to envision a future for not only themselves, but also the human being they now have to provide for.

**Chapter six** discusses the findings as they relate to some of the reasons teenage mothers stay in school and the factors associated with this decision. The chapter further discusses reasons behind deciding not to stay in school, for those participants who opted for this decision.

**Chapter Seven** provides concluding remarks on the study and provides recommendation for future studies and policymakers on tackling teenage pregnancy and motherhood in the South African context.

## Chapter Two: Literature Review

### 2.1 Introduction

Teenage pregnancy and childbearing have been significantly debated in research and society at large. With attitudes towards teenage childbearing seeing it as a negative phenomenon that deprives a teenage mother of a full childhood experience. In South Africa, 'teenage childbearing and childbearing out of wedlock is frowned upon on moral and cultural grounds (Makiwane, 2010, p. 201). The aim of this study is to explore the lived experiences of teenage mothers and their navigation of motherhood, particularly; the study also examined paths to motherhood relating to key decision areas such as those related to contraceptive use, leaving or staying in school including the impact motherhood has on school-going teenage mothers in this study.

This chapter presents the literature on the feminist developmental framework in which this study is located. While teenage childbearing has been a concern in South Africa, overall fertility has declined considerably. Some researchers have argued that early childbearing is a result of teenagers' inability to access sexual health and reproductive health facilities. As a result much of early teenage childbearing is unplanned and unwanted (Richter et al, 2005; cited in Makiwane, 2010, p. 201). Research has demonstrated that unplanned teenage pregnancy corresponds with other life processes such as school going and can have negative consequences for the teenage mother and her child (Kaufman et al, 2001, Ashkraft and Lang, 2002, & Kirby, 2007). Understanding of teenage motherhood and its implications on the teenage mothers' life cannot be separated from the gendered perspective of teenage childbearing. In many cases, young women are the ones who bear the brunt on child rearing practices.

In understanding teenage pregnancy in South Africa, possible drivers of teenage pregnancy include gendered perspectives relating to how a girl child should act and way in which boys are socialised. These factors are linked to cultural and social expectations. Studies have also shown that poor access to contraceptives and termination of pregnancies, inaccurate and inconsistent contraceptive use; judgmental attitudes of many health care workers; high levels of gender-based violence; and poor sex education are all some of the factors that influence chances of teenagers to fall pregnant (Jewkes, Morrell and Christofides, 2009; Panday et al., 2009; Chigona and Chetty, 2007; Bearinger, 2007; Pettifor et al., 2005).

In addition, school dropout, lower family income, stigma and discrimination, and poorer educational outcomes for children are known consequences of teenage pregnancy (Panday, Makhiwane, Ranchod & Letsoalo, 2009, p. 26). Researchers have argued that that demands of parenting may make it difficult for teenage mothers to socialise with their friends and therefore isolate them from known friendship circles (Coley and Chase-lansdale, 1998; cited in Romi and Nadeem, undated). In addition, some teenage mothers experience greater need to overcome barriers of success because of their children. They often see a need to work hard and excel for the sake of their children (Romi and Nadeem, undated).

Economic factors are not divorced from accounts of teenage survival in low-income communities. A report compiled by UNICEF in 2009 provides basis insight into teenage pregnancy in schools. According to the report, teenage pregnancy can be widely attributed to social and economic conditions that adolescents find themselves in, as well as poverty and unemployment (UNICEF report, 2009). South African policy efforts on teenage pregnancy in schools have shown considerable progress. With gender parity in education, receiving the attention it requires from policy-makers. However, while Education Policy allows teenage girls to receive the support they need in terms of their right to an education, teenage pregnancy is still regarded by many as a big threat to gains achieved in public schools thus far.

This is evident from the statement made by the Minister of Education in a speech in 2009, that “teenage pregnancy undermines the Department’s efforts to ensure that girl children remain in school, in order to contribute towards a quality life for all, free of poverty’ (Minister of Education, cited in UNICEF, 2009). It is important to note and understand that when young women struggle to meet immediate material needs, they make trade-offs between health and economic security (UNICEF, 2009). Research has found that often, young people from low-income communities engage in early sexual activity as a way to receive an income. This often manifests in the “sugar-daddy” phenomenon”. In a study undertaken by the Gauteng Department of Social Development (ENCA, 2013) it was evident that, poverty in most instances leads young girls to seek financial security from older people, who in this case becomes an older man.

Furthermore, becoming pregnant and unmarried was not seen as an end to ones future, because findings suggested that having seen many successful unmarried women acted as a motivating



factor for some of the teenage mothers to see hope in their motherhood. The study further found that some teenagers from relatively deprived backgrounds might enter into motherhood in order to enter into the phase of adulthood with the aim to be independent. In addition, bride wealth has been found to act as a deterrent to teenage pregnancy, as this cultural practice asserts that the more educated a girl is the more bride wealth she is worth. As a result, many parents have aimed to keep their children in school because of this practice (Preston-Whyte & Zondi, 1989).

Studies have also revealed that the prevalence of teenage pregnancy and motherhood among women from low-income communities may represent the fact that women from deprived backgrounds are more likely to reject abortion than those from relatively affluent backgrounds. Those who keep their children may not be doing so because they want to, but rather because they reject the idea of an abortion (Preston-Whyte & Zondi, 1989; Turner, 2001; Allen and Dowling, 1998, Social Exclusion Unit, 1999; cited in Turner, 2004). This is on the premise that in most African families, a child is always welcome, no matter the circumstances leading to the conceiving of that child (Hunter 2005. cited in Nkani, 2012, p.44.). Furthermore, termination of pregnancy (TOP) is viewed on a negative light by the African families in that it goes against cultural norms and beliefs and is thus considered violation of these (Mkhwanazi, 2010). In addition, factors related to opting not to have an abortion have more to do with access to resources and health centres for safe abortion. Furthermore, research suggests that women from low-income background tend to wait too long to go in for the abortion procedure as it takes them too long to save money to go to a private facility, by the time they have saved enough money for an abortion; it is often too late as the woman has passed the legal gestational period.

A study undertaken by the University of California called the “Turn-Away” study, which studies the reasons for unsuccessful abortions in which women are turned away. This study found that many of the women were disadvantaged by economic factors, as many cited not having enough money for the procedure and travel costs to get to the clinic. Some women indicated they often do not have knowledge about where to go for an abortion (Culp-Ressler, 2013). Although it has been suggested that teenage girls fall pregnant to access state benefits, majority of teenage pregnancies are said to be unplanned. Making it difficult to ascertain the extent to which teenage girls fall pregnant in order to access state benefits. In South Africa, the Child Support Grant was introduced in 1998, in order to assist teenage mothers with basic needs for children. Therefore, emphasis has often been placed on the importance of support in

teenage motherhood as this plays a positive role in the lives of teenage mothers and improves parenting behaviours among teenage mothers (McAuley & Bunting, 2004; Kaufman et al, 2001). Pregnancy rates among teenagers are driven by many factors, including poor access to contraceptives and pregnancy termination facilities, poor sex education and poverty throughout South Africa.

The chapter further discusses teenage sexuality with a focus on factors that influence teenage sexual behaviour, access to contraceptives and sexual reproductive health services, gendered perspectives of motherhood, teenage pregnancy and motherhood in SA as well as implications of motherhood on teenage schooling. In an attempt to unpack the lived experiences of teenage mothers in Mzingazi Village, I consider research studies and what has been written about the topic. This chapter is therefore an attempt to further unpack this.

## **2.2 Teenage pregnancy and motherhood in SA**

Even though teenage pregnancy is no longer a strange occurrence in South Africa, it is still highly stigmatised. Young people often recall the negative responses they get from family and friends and the trauma they face in trying to decide who to tell about the pregnancy. Often teenage girls who fall pregnant fail to access health facilities due to the embarrassment and discrimination that young women face within the health care system (Kaufman et al, 2001 & Varga, 2003, cited in Doe, 2008). Researchers have argued that teenage pregnancy will continue to be marked by stigma due to its relationship to sexuality, HIV/ AIDS, contraceptive use. This stigma often leads to depression, social exclusions, low self-esteem and poor academic performance, which in turn affects prospects of employment in the future (Abe & Zane, 1990, cited in DoE, 2008). Furthermore, Richter et al (2006), argue young women who fall pregnant live in fear and silence, which prevents them from accessing the necessary resources. In the Birth To Twenty study (Richter et al, 2006) fear and shame are one of the challenges to assisting young people deal with a pregnancy since many of them fail to speak to people who can help. This therefore exacerbates the problems experienced by teenagers, as they are unable to speak about sexual health issues. Stigma remains one of the biggest challenges hindering teenagers from accessing the necessary information and resources.

Teenage mothers are stigmatised potentially on the basis that society has understood teenage pregnancy as a phenomenon associated with deviant teenage girls, therefore associating it with

personal irresponsibility from the teenage girls' side. Researchers further argue that while focus is on economic concerns associated with teenage motherhood, such as employment and education; social dimensions of teenage motherhood are often excluded. These dimensions often including stigma, and lack of support networks (Yardley, 2008, p. 763). Furthermore, there exists a clear disjunction in the way in which teenage motherhood is perceived; whilst policymakers identify teenage motherhood as evidence of low expectations, teenage mothers often value their motherhood and can see social and personal fulfilment in having a baby, thus having high expectations (Duncan, 2007).

Becoming a teenage mother is said to be socially, economically and physically damaging for the teenage mother and her child (Mkhwanazi, 2010, p. 347). Teenage mothers are not only considered more likely to be poor, but they are also considered to perpetuate the cycle of poverty in the lives of their children and that of their families. Arney & Bergen (1984, p.11-19), have demonstrated the replacement of the word 'illegitimate child' and 'unwed mother' with that of 'teenage pregnancy'. They argue that it is important to understand the meaning that the change in terminology has brought for the treatment of pregnant teenagers as moral problems to treating them as scientific problems.

Media portrayal of teenage motherhood has also had an impact on the widely held views of teenage motherhood as a social problem. The abnormal and undesired idea of teenage pregnancy arises from a certain point of departure. A departure that is founded from a particular perception of human development as it focuses more on the difference between a "children" and adults. Criticism has been voiced on such a school of thought and the use of the term "teenage pregnancy" or "adolescent pregnancy" which all arise from seeing teenage mothers as children. This notion of thinking than asserts views of motherhood in comparison to teenage and adult motherhood (Mkhwanazi, 2006, p. 98).

Graham and McDermott (2005; cited in Yardley, 2008, p. 681) have argued that the basis of teenage motherhood research has mainly focused on the quantitative aspect, thereby losing the experiences of teenage mothers in such data. This has resulted in policy-makers not gaining an accurate picture of teenage motherhood and the experiences of teenage mothers, as a result, policy responses fail to account for their differential values. Furthermore, focusing on the negative aspect of teenage motherhood does little in deterring those for whom it represents a

meaningful, normative and respected life choice, and whose mothers, grandmothers and aunts may have been teenage mothers themselves (Yardley, 2008, p. 681).

In addition, it is vital to note that teenage mothers are a highly heterogeneous group and many may have different circumstances to which their lives evolve. Some may continue to reside with their parents, while others may move to live with their partner, some may engage in employment, others in unemployment, some may continue with training while others postpone this till their children are older (Yardley, 2008, p. 681). This diversity is important to take into account as it may have implications for their transition into adulthood. Preston-Whyte and Zondi (1989, p. 48) argued for the importance of understanding teenage pregnancy by listening to what teenagers have to say, and by listening to their stories, it becomes apparent that their perceptions of early pregnancy are not the disaster their parents and community at large have considered it to be.

Research regarding adjustment to motherhood, suggested that teenage mothering is stressful with consequences including low personal self-esteem, and personal efficacy (Thompson & Peebles-Wilkins, 1992; cited in Paresh, A, & De la Rey, C, 1997). Researchers also argued that adolescent mothers, who deliver a second child soon after a first child is born, often become overwhelmed and are considered more likely to lose any hope for personal achievement (Seitz & Apfel, 1993; cited in Paresh and De la Rey, 1997). In addition, research suggests that young women do not frequently make decisions to fall pregnant, but many of them do nothing to prevent pregnancy (Wood and Jewkes, 2006; cited in Jewkes et al, 2009, p. 680).

Researchers have argued that family attitudes to teenage pregnancy vary and are often dependent on the circumstances of the pregnancy. As a result, many teenagers fear the response of the family to their pregnancy and in some cases punished and stigmatised in the community. In addition, these researchers argue that the decline in emphasis of confinement of sex to marriage has led to extra-marital pregnancy becoming common. It is now widely accepted, well accommodated and sometimes encouraged (Varga, 2003, Jewkes et al, 2009, p. 680). Often, teenage mothers are not expected to raise the child alone, family members available often support them at the time, usually grandmothers. Kaufman et al (2001) have argued that teenagers endure traumatising situations before the pregnancy and some during the pregnancy.

The CSG was introduced in 1998, with the recommendations of the Lund committee, which formed part of the ANC government's new mandate to focus on social security for children in poor communities (CSG evaluation, 2009-10). In South Africa, the teenage childbearing debate has been escalated by the introduction of the child support grant (CSG). Concerns have been voiced as others have argued that the introduction of the CSG has caused many teenagers to fall pregnant in order to access the money. Arguments also assert that the CSG encourages dependence on the state (DoE, 2008). However, research has proven that teenage pregnancy had been high before the introduction of the child grant and there is evidence that teenage fertility is declining even with the child grant in place. When analysing the Department of Social Development's (DSD), child grant beneficiaries database, it is evident that the number of CSG beneficiaries has grown considerably, however, a comparison between teenage mothers and older mothers on the database shows that teenage mothers accessing the grant remain considerably low (DoE, 2008). Research has shown that the CSG has positive impact on poor households.

According to the quantitative analysis of the impact of the CSG undertaken by the Department of Social Development together with the United Nations Children's fund (2008), children receiving the CSG are attending school at a considerable rate. The CSG also has an impact on school enrolment of the children receiving the grant when compared to those not receiving the grant at all. Research has found that cash transfers such as the CSG have considerable impact on human capital development, as they promote the ability to seek employment and reinforces long run employment impacts (Samson, 2009, p. 179). Case and Deaton (1998) state that social pensions are often pooled with other household income resulting in a potential effect on the labour market decisions made in the household (Cited in Samson 2009, p. 181).

Findings from a study released by the Health Systems Trust, in 2013, conducted among a sample of 3515 young people between the ages of 10 and 18 years in two urban and two rural health districts in the Western Cape and Mpumalanga, revealed that the CSG could assist in keeping the sugar daddies away. It was found that out of the sampled teenage girls, those who received the R300 support from government were less likely to have sugar daddies<sup>1</sup>. It is however important to note that the findings of this study are not arguing that the CSG makes teenage girls make more sensible decisions when it comes to safer sex, however, it argues that the grant promotes enough financial security for girls that they do not have to choose their

sexual partners through economic necessity<sup>2</sup>. In addition, during the 2012 assessment of the child support grant conducted by the government in conjunction with United Nations Children's Fund, evidence found showed that children receiving the grant were more likely have better early nutrition, have better health outcome later in life, complete more years of schooling than those not receiving the support grant.

In a study undertaken by Bhana et. al (2010) results showed that a supportive social environment enables a teenage mother to do well in school. In most cases, teenage mothers who come from supportive families, and who get support from teachers and friends often do better at school than those who lack support. Further to studies focusing on the negative implications of teenage pregnancy and motherhood, some studies have found positive correlations between teenage pregnancy and positive outcomes for teenage mothers own social development. In her study conducted on teenage childbearing in a black South African community, Preston-Whyte (1991) found that for some teenagers, childbearing presented an opportunity for upward mobility in their lives.

The study also found that cultural emphasis placed on fertility also provided an opportunity for these teenagers to fall pregnant in order to prove their fertility and demonstrate successful motherhood. Scholars have argued that, 'consequences of early childbearing may have been exaggerated because of the assumption that poverty and socio-economic circumstances are a consequence of teenage pregnancy'. However, research on negative life influences and early childbearing has found it difficult to attribute the link between pre-existing disadvantage and early pregnancy alone' (Kirby, 2007; cited in Panday, Makhiwane, Ranchod & Letsoalo, 2009, p. 26).

### **2.3 The Feminist developmental Framework and Gendered perspectives on teenage motherhood**

Research on teenage childbearing in school reflect that a high number of the disruptions experienced are mostly gendered, in that it is the young women who are faced with the consequences of childbearing and hardly the men. This becomes even more challenging for the young mother when she is unmarried as the burden of caring for the child falls on the family

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<sup>2</sup> <http://www.hst.org.za/news/child-support-grant-keeps-sugar-daddies-away>

and puts strain on an already struggling family (Jewkes et al., 2009) as seen in the narratives in this study by some of the teenage mothers. Given the discrepancies in sexual behaviours by gender, it is important to understand the potential factors that may exacerbate risks for teenage girls, such as gender norms and ideologies as these are an important starting point for prevention research.

The subordinate position of girls in hierarchical social norms such as childbearing poses a risk for their sexual health. Socially constructed ideologies about how girls should act in relation to men and how they should “carry” themselves in social situations is one of the issues hindering clear messages of ensuring healthy sexual behaviours. In many instances, and culturally, teenage girls are taught to take care of their families and children and the burden of teenage childbearing will mainly fall on the teenage girls. Much like the story cited above from Checkpoint on ENCA (2015), where a teenage father who was interviewed regarding teenage pregnancy rates in his school, where he argued “the biggest problem is that the girls don’t know how to protect themselves from falling pregnant”. This perspective on teenage childbearing is concerning as it implies that teenage boys do not have any responsibility for their and the girls’ sexual health.

According to Hanson et al (2014, p.2) socially constructed beliefs about femininity often encourage virginity and discourage sexual activity for young women, whereas beliefs about masculinity often encourage the opposite, valuing young men's sexual virility and promiscuity, even if they themselves prefer to be monogamous or abstain from sexual activity. The feminist developmental framework aims to influence thinking in policy to ensure social change and assist us in seeing the social world for social change. Learning from the historical trajectory of development theories and feminist perspectives allows policy makers to consider the centrality of gender in shaping every aspect of social life.

#### **2.4 Access to contraceptive and reproductive health services**

Contraceptives, emergency contraceptives and family planning services are available free of charge in South Africa, yet, despite this, adolescent mothers have failed to utilise these services and teenage pregnancy continues to take place in many parts of the country (Ehlers, 2000, p. 229). As pregnancy is regarded as a major problem for the adolescent and her family, having adverse effects on the adolescent’s life, effective utilisation of contraceptives could play a great role in avoiding such effects. Research has found that South African adolescents engage in early sexual activity, unprotected sex, sexual risk taking and low levels of condom use. In

addition, research on contraceptive use in South Africa displays a number of usage barriers (Wood & Jewkes, 2006, p. 110).

According to a study undertaken by Wood & Jewkes (2006) to gather information on the ways to improve access to contraceptive use and services for adolescent women in the Limpopo province, researchers found that adolescent girls experienced pressure related to contraceptive use. Some of the girls reported not being able to take decisions on pregnancy prevention and contraceptive use in their own right. They felt they were being obliged into using certain contraceptives, or to use a particular method of contraception and were not able to choose the contraceptive method convenient for them. In the same study, Jewkes and Wood (2006) found that teenage mothers did not use contraceptives because of beliefs that these are not good for their health and have negative effects on the ovum as these may cause rotting, thus rendering them infertile. Others cited problem with their partners not allowing them to make use of contraceptives in order to prove their fertility. Malema (2000, p. 4) argued that unmarried teenage mothers often fear accessing contraceptives especially in traditional societies where virginity before sex is emphasised. Access to contraceptives by these adolescents is often reduced by the restricted office hours utilised by the health facilities, and often nurses have negative attitudes toward adolescents who seek contraceptive services.

In her study on teenage sexual initiation and childbearing among adolescent girls in KwaZulu-Natal, Manzini (2001) confirmed that sexual activity begins early among many adolescents in KwaZulu-Natal, and nearly half of the girls surveyed reported to having used a contraceptive the first time they had sex, with contraceptive usage increasing with age. Many girls reported engaging in sex with partners older than themselves. In addition, among the girls who took part in the study, the condom was found to be the most widely used form of contraception to prevent pregnancy and sexually transmitted infections (STI's). Manzini (2001, p. 49) argues that studies need to focus on understanding barriers to contraceptive use and reasons why adolescents discontinue contraceptive use.

In addition, the study found that many adolescents who were engaged in sexual activity at a young age had no idea that they would be having sexual intercourse, while others reported not using contraceptives due to beliefs that contraceptive use could result in side effects and infertility. It was also found that condom-use often stops when the relationship evolves and is replaced by the use on non-barrier methods of contraception such as the pill and the injection.



This is usually a sign of trust in the partner, evident in many other studies. However, in a world of HIV/AIDS condom use continues to be an important contraceptive method (Manzini, 2001, p. 49).

In her study on adolescent mothers utilisation of contraceptives, Ehlers (2003, p. 236) found that 46.8% of the participants indicated having used contraceptives in their lives. A number of reasons were provided for their failure to utilise contraception, these included ignorance, or fear, fear of gaining weight, their mother's disapproval, fear to go to clinics in case their mothers found out and boyfriends not wanting them to use condoms. Ehlers (2003, p. 233) goes on to argue that if barriers to contraceptives use could be addressed, South Africa would have a better chance of getting more and more adolescents to make use of contraceptives services available to them. Prevention of unwanted pregnancies is an essential part of contraceptive use, and the availability of efficient and appropriate services is important. In a study undertaken by Wood, Maepa and Jewkes (1997) on adolescent sex and contraceptive use experiences in the Northern Province, they found that adolescents reported a lack of information regarding contraceptives from their elders. Communication about the use of contraceptives and different contraceptives was limited, and many adolescents who took part in the study, perceived this as a problem for them and relayed regret of not having had the opportunity to discuss such matters with their elders.

On teenage girls' views of teenage pregnancy, researchers report that some participants felt that they needed to fall pregnant in order to have their partners not abandon them as a result of not having a child with them. These teenagers often saw the need to have a baby and consequently practiced less contraceptive use. In the same study, a teenage girl argued that if a man gives you money for sex during the relationship, you feel more compelled to give him a baby in order to ensure that he continues to support you. Contraceptive use is therefore non-existent in such relationships as the focus is on falling pregnant for security and financial stability (Wood, Maepa, and Jewkes, 1997, p. 13). According to Boulton and Cunningham (1991, p. 106; cited in Malema, 2008, p. 6) adolescents in South Africa are handicapped by their youth, low-level of education and the understanding between onset between sexual intercourse and contraceptive use.

## 2.5 Relationships with Older men

Recent studies indicate that at least adult men father half of all babies born to teenage girls (Jewkes et al., 2001; Landy and Forrest 1995). Research suggests that currently one in five pregnant teenagers is infected with HIV. This creates a new imperative to understand teenage pregnancy and the pattern of high-risk sexual activity of which HIV is one consequence. Studies have also begun questioning the idea that sexual partners of teenage mothers are necessarily teenagers themselves. It has become apparent that teenage mothers are also more likely to be in relationships with older men, due to the social constructions and poverty challenges faced by South Africa specifically, with young women seeing relationships with older men as a way to receive money and gifts. Internationally, in their study of measure of age gaps between teenage mothers and fathers of their children, Landy and Forrest (1995) conducted a study amongst mothers aged 15-19 with partners aged 20 or older; in their study, 65% of 15-19-year-old mothers had a partner aged 20 or older.

Evidence also suggests that transactional sex, which is viewed as sexual relationships for money or gifts is common among adolescents throughout sub-Saharan Africa (Bledsoe, 1990; Castle and Konaté, 1999). This suggests that young girls may also be having sex for material gain. In many cases, transactional sex is between a younger women and older men, thus making the relationship dynamics marred by male dominance. The danger of these relationships is that young women are placed at greater risk as they are often unable to negotiate for the timing of sex, or the use of contraceptives and safe sex as they are often not able to voice their opinions about sex in these relationships. In addition, women who have little negotiating power with their partners to insist on use of condoms experience a higher risk of becoming pregnant and contracting sexually transmitted infections (STIs), including HIV/AIDS (Gregson et al., 2002; Longfield et al., 2002, cited in Chatterji et al., 2004, p,1). Past studies have shown the gender and age dynamics in negotiation of sex and condom use, showing that often peer pressure and pressure from the sexual partner are the main drivers of a teenager's early sexual debut. In these cases, the teenager is often pushed to engage in sexual intercourse with their partner to show trust and commitment (Jewkes et al, 2001. Varga and Makubalo, 1996. Vundule et al, 2001., Machel, 2001).

In South Africa, the sugar daddy<sup>3</sup> phenomenon, as cited by Aaron Motsoaledi, the current Minister of Health, is a big problem in teenage pregnancy as many teenage girls are falling pregnant due to having sexual relationships with sugar daddies. Earlier in 2013, Minister Motsoaledi referenced findings from a study conducted in the KwaZulu-Natal Midlands, which showed that at least 28 percent of schoolgirls were HIV positive compared to only four percent of boys who took part in the study sample. The Minister further added that the findings suggest that if young girls were being infected, it was not because they were having sex with their peers. “The issue, we believe, is the sugar daddy syndrome.” This reflects that government is aware of the importance of ensuring that teenage girls are protected from risky sexual behaviour with older men.

## **2.6 The payment of damages as acknowledgement of the child and effects on teenage mothers**

One of the most critical aspects of cultural beliefs and the acknowledgement of the child, lies in the payment of damages by the father. In this cultural practice, the young woman is taken to the family of the man who impregnated her. During this process, it is when the man will either admit or deny having made her pregnant. If he acknowledges this, he is then required to pay damages to the family of the girl to show that he admits that he is the father of the child and rightfully apologises to the family for impregnating their child out of wedlock. This process then allows the father to assume responsibility for the child in all respects. However, social and financial implications have shown that this practice has become negative for both the father and the teenage mother, as often, when the father is seen as unable to provide the amount requested during the damages, (which can be anything from R500 to R5000, paid as a cow in the past) he can be judged in terms of his ability to maintain the child. In a study conducted by Swartz and Bhana (2009) on teenage fathers in South Africa, it was found that for some families the damages started at a negotiated amount of R2500 and some families even demanding R10 000. In the South African social context with triple challenges of poverty, unemployment and inequality, this is extreme as young men who are unemployed are often discriminated by this practice. This discrimination is further trailed down to the teenage mother who has to bear the

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<sup>3</sup> Sugar daddy- is a word used in South Africa mainly to refer to a man who is in a relationship with a young woman old enough to be his own daughter. The word has connotation of material gain for the girl as “sugar” being the material gains.

consequences of raising the child alone when her family rejects the father of her child on grounds that he is unfit to raise the child with her.

The concept of damages is also damaging to the teenage mother in that should the father reject having impregnated her during this process, the teenage mother is stigmatised and judged. Denial of paternity is seen as a reflection of the girl's sexual behaviour as she is seen as sleeping around and not sure who the father of her child is. Similarly, Nduna and Jewkes (2012) found that participants in their study conducted in the Eastern Cape Province believed that denial of their pregnancy was a punishment for being careless, not taking contraceptives and falling pregnant. Furthermore, they found that participants were distressed by unresolved paternity and often constantly worried.

Some have argued that the concept itself is damaging to the teenage mother because it assumes that she is "damaged" and questions what man would want to stay with a damaged woman (Peter, 2011). This shows even more gendered perspectives on teenage pregnancy and the way in which society places the responsibility on the teenage girl and not the father. The payment of damages is also critical to the maintenance of the child, as in some families, fathers are denied access to the child if a father has not paid damages. As found by the study conducted by Swartz and Bhana (2009) on teenage fathers, the researchers found that while there is widespread talk that teenage fathers do not take care of their children, this study found on the contrary. It was revealed in the study that young fathers want to be part of their children but are often denied access due to unemployment, or not having paid damages and other cultural factors that hinder young fathers from being part of their children's lives.

This denial of access leaves the teenage mother with no choice but to be dependent on her family for all aspects of the child needs. While the family denies the father access, they also in some way punish the teenage mother as she is left to deal with the raising of the child and having brought an extra mouth to feed in the family.

## **2.7 Teenage mothers and schooling**

It is over a decade since the South African Schools Act (No. 84 of 1996) forbade discrimination in schools on the basis of pregnancy, stating that pregnant learners "have a right to basic education" (Clowe, D'Amant and Nkani; 2012, p. 35). This ACT sought to assist in keeping young pregnant teenagers in schools in order to fulfil their right to education. Some researchers have argued that teenage pregnancy is considered a setback in education for a teenage girl who

becomes pregnant at school. In South Africa, the South African Schools Act (No. 84 of 1996) allows teenagers to go back to school after the birth of the child; teenage pregnancy is still considered one of the major causes of school disruption, especially at the level of secondary schools (Mokgalabone, 1999, p. 60, cited in Chigona and Chetty, 2008, p. 261). In many cases, the birth of the child marks an end in schooling for the teenage mother.

Kaufman, Wet & Stadler (2001) have argued that there are many factors that influence the probability of whether or not a teenage mother will stay in school. These factors include the teenage mothers' ability to juggle her new role with her financial, social and material circumstances, and the 'factors associated with mothering and schooling simultaneously'. In addition, authorities in schools are often uncomfortable with having pregnant learners in the classrooms (Clowe, D'Amant and Nkani; 2012, p. 35).

While it is no longer advantageous to bar a learner from returning to school after the pregnancy, those teenage mothers who return to school face challenges and difficulties that make it hard for them to succeed in school. Evidence has shown that 29% of 14-19 year olds who drop out of school due to pregnancy are able to return to school by age 20, but only 34% of these girls complete grade 12 (Grant & Hallman, 2006; cited in Chigona and Chetty, 2008, p. 262). These researchers further argue that schooling disturbance problems are associated with society's problems that hinder teenage mothers from completing school. Many teenage mothers are said to return to school for the sake of their babies, at the same time, continuing schooling is often an unyielding burden especially for the teenage mothers living in unstable home environments (Pillow, 2004, cited in Chigona and Chetty, 2008, p. 264).

Bhana, Morrell, Shefer & Ngabaza (2010) conducted a study investigating the teacher's responses to teenage pregnancy and teenage mothers in schools. They found that teenage pregnancy is often shamed and punished in schools. Teachers had the ideology that teenage girls who fall pregnant in schools, bring a bad example to other girls and they therefore should not be allowed in schools. Fergusson and Woodward (2000), argues that the amount of support she gets from her family and the timing of the pregnancy in her life mainly influence the manner in which the teenage pregnancy affects the educational outcomes of a teenager. The more family support a teenage mother gets from her family, the more likelihood there is that she will return to school. According to the Department of Education's (DoE) Teenage pregnancy Report (2008) increasing access to education has had significant contributions to the fertility

decline in South Africa. This report further asserts that 'teenage mothers are concentrated among those with primary education only (38%), but declines progressively among those with secondary education -12% (DoE, 2008).

Studies show that education is considered an important part of girls who become pregnant. These girls often want to complete their education in order to enhance their chances of getting into the job market and out of the poverty cycle. Statistics have shown that teenage pregnancy is becoming more of a barrier to education (Chigona & Chetty, 2007, p.1). Early Childbearing is said to lower the labor force participation of teenage mothers due to the low compatibility of employment and child rearing (Chigona and Chetty, 2007, p. 2). However, some teenage mothers cannot return to school after the pregnancy due to financial issues that hinder them from going back to school because of needs to take care of the child and themselves. In these cases, researchers have argued that teenage mothers often turn to older men for support and survival in times of need. Meekers and Ahmed (1999; cited in Grant & Hallman, 2008) found that of the teenage girls who return to school after the pregnancy, highly motivated students and those with good academic performance before the pregnancy were most likely to succeed when returning to school. However, Chigona and Chetty (2008; cited in Bhana et al, 2010, p. 872) report that those teenage mothers who return to school after a pregnancy often face challenges including a lack of support from teachers, which may impede their ability to succeed. In addition these researchers found that the key to empowering teenage mothers in schools is the provision of support and guidance.

Bhana et al (2010, p. 872) argue that teachers support for teenage mothers is often hindered by the already existing perception of teenage motherhood, which locates teenage mothers within a problematic discourse full of sexual immorality and disruption in academic life. In addition, teachers viewed schools as places of sexual innocence and dealing with teenage mothers disrupted that knowledge and understanding of the school environments. In the study undertaken by Bhana et al (2010) in schools around the Western Cape and KwaZulu-Natal, aiming to understand teachers responses to teenage pregnancy and teenage mothers in schools, it was found that some teachers did not feel comfortable having teenage mothers at school. They often argued that teenage mothers would encourage other school children to view teenage pregnancy as a good thing, and therefore lead other teenagers into sexual anarchy. Teachers often found that they needed to protect the school against the pregnant teenager, as a place of sexual purity, noted in the extract below:

I think they should not be in school. It encourages the other girls to do the same-if she can get away with it, why can't I do it? Although the education department is saying that we must accept them etc.... [They] should not be allowed in school. [Mrs. Naidoo, Nehru High, a former Indian school in KZN] (Bhana et al. 2010, p. 873).

Understanding sexuality is important as teenage pregnancy and practices are strongly associated with structural conditions such as poverty, culture and class (Goldstein, 1999; Wardlouw, 2006; cited in Bhana et al, 2010, p. 875). According to Pillow (2011, p. 111, cited in Chigona and Chetty, 2008, p. 271) teen mothers are often assumed to be poor students, or incapable students who are thus incapable of achieving high standards at school. Studies also found that, often teen mothers were picked on their situation as mothers. Often when a teen mother quarrelled with another learner in class, the learner would choose to pick on the mothers situation. According to Chigona and Chetty (2008, p. 271) teenage mothers may do badly at school and fail to succeed due to the nature of support they receive at home. If the support was insufficient, the teenage mother would be less likely to succeed. They categorise support to for teenage mothers into three categories:

- Parents attitude due to stigma attached to teenage pregnancy
- Communication breakdown at home
- Socioeconomic status of the family

In terms of the attitude of parents, the researchers found that some parents may feel embarrassed and reluctant to support their children, resulting in them spending more time favouring other siblings to make the teenage mother feel bad/ or as a way of punishing her. Furthermore, the researchers argued that many teenage mothers come from financial challenges families with low-socioeconomic status, which results in having low support financially. Often, there is also a lack of support from the fathers of the children, and this may create a bigger challenge for the teenage mothers. According to the HSRC report (2009) on learner pregnancy as presented to Parliament in 2009, it was found that the rise in learner pregnancy was most likely the result of improved reporting rather than a real increase, in addition, learner pregnancy rates were found to be higher in schools located in poor areas and in schools that were poorly resourced. Furthermore, data presented from the report found that an increase in education resulted in a decrease in fertility, and that pregnancy was no longer causing students to drop out of school, although dropping out was a significant risk factor for early pregnancy and HIV.

Meaning that many of the learners who drop out of school are seen to be more likely to fall pregnant or contract HIV. The report also revealed that, in South Africa, only about a third of teen mothers returned to school.

### **3. Conclusion**

From the literature review, it is clear that a lot of research departs on the negative outcomes of teenage motherhood, while little attention focuses on the experience of motherhood from the perspective of teenage mothers themselves. Teenage motherhood is of concern for South Africa and the world, with researchers trying to understand the dynamics of this phenomenon. In addition, teenage pregnancy is still viewed as a problematic phenomenon and a disruption for a teenagers' life. Low levels of educational attainment and poverty are cited as some of the facilitators of teenage pregnancy and motherhood, as well as a lack of family and community support. Literature also suggests that an absence of structural and social support is can have negative effects on the outcomes of a teenager's life. Teenage mothers are also marginalised in their communities and often stigmatised due to the negative attitudes attached to teenage motherhood.

While there is a great focus on the negative outcomes of teenage motherhood, there are also a growing number of literatures focusing on the positive outcomes of teenage pregnancy. These include a goal oriented mindset and the influence the baby has on ones likelihood to complete school. Even though South African Education department allows teenage girls to go back to school, research has shown that many of these teenagers still dropout of school due to circumstances related to taking care of the baby and the lack of structures that support teenage mothers. Teenage pregnancy is still stigmatised and many teenage mothers fail to access resources because these resources are often not friendly to teenage mothers and often repel them from accessing the services.

Literature on children of teenage mothers often focuses on the educational and health outcomes of teenage mothers. In South Africa, the CSG has been updated to include certain policy rules that include having a child at school in order to access the amount and teenage mothers are requested to access health resources for their children. These have become pre-requisite conditions for accessing the CSG. Research on teenage mothers' survival strategies and the role that education plays in their lives and that of their children is important in coming up with



interventions that can help more teenage mothers cope with the burden of early parenting and curb teenage pregnancy. The following Chapter provides a discussion of the methodology utilised for the study.

## Chapter 3: Methodology

### 3.1 Introduction

This study is a descriptive empirical study aiming to provide insight into the lives of a sample of 15 teenage mothers' and their experiences of teenage motherhood. From the literature review it is clear that teenage motherhood and teenage pregnancy are still mostly understood in terms of the problems that these bring to society and the disruptions in the lives of teenage mothers; however more research needs to be conducted in order to understand the implications for the teenage mothers' life, access to education and risky sexual behaviour including access to healthcare services. While research focuses on answering questions and giving solutions to existing problems, there is a great need to give a voice to the ones we choose to study. This study therefore gives a voice to teenage mothers, allows them to express their lived realities, and constructs the importance of understanding these realities in their own ways and giving recommendations to improve these lived realities.

This chapter provides a discussion of the methods employed for the during the data collection process in the study. I will first begin by discussing the method used for the data collection process, and then I will discuss the advantages and reasons for selecting this particular method. In addition, I will also discuss the data analysis method utilised for this study. According to John Furedy (2007), “[a] *research participant* refers to one who makes an epistemological contribution to research” with that understanding, I feel that the participants in this study have made a considerable contribution because without them, there would be no study. As a result for the purpose of and thorough this study, *teenage mothers* in this study constitute the *participants* of the study and will be referred as such throughout this study.

### 3.2 Research approach and design

The approach used in the study, was the collection of data from a sample of teenage mothers. This is a qualitative study which investigated the aspects involved in the lives of teenage mothers especially focusing on access to education, risky sexual behaviour, access to healthcare and their experiences of motherhood. I also investigated whether teenage mothers experience any stigma as a result of the pregnancy or their role as teenage mothers. Qualitative research focuses mainly on the socially constructed nature of reality. It is interested in the intimate nature of the researcher with the participants in the study as well as that which is studied. Furthermore, qualitative research seeks to answer questions that ask *how* the social is

constructed and given meaning (Denzin and Lincoln, 2005 p.10). Seeing that the aim of this study is to understand the socially constructed nature of teenage motherhood from the realities told by teenage mothers; the study utilised the qualitative approach as the main data collection method. Semi-structured interviews were conducted with 15 teenage mothers from a rural village in KwaZulu- Natal. These teenage mothers were mainly from similar kinds of backgrounds and had some shared meaning in their lives with relation to their experiences of teenage motherhood.

This study focuses on the collection of primary data from the participants in a qualitative manner. It investigates the lived experiences of teenage mothers by focusing on sexual behaviour, access to resources such as education and healthcare services and their experiences of motherhood. In terms of access to education, attention is mainly afforded to the reasons for decide to leave or stay in school and what implication this has for the teenage mother. Semi-structured interviews were conducted with teenage mothers in a low-income neighbourhood in KwaZulu-Natal. This is a qualitative study focusing on the collection of primary data and utilising the interpretive approach to research. Qualitative research involves an *interpretive* and *naturalistic* approach, which studies things in their natural settings and attempts to interpret and give meaning to phenomena in terms of the meaning people bring to them (Denzin and Lincoln, 2000, p. 3).

According to Terre blanche, Durheim and Painter, (2006, p. 274) the interpretive approach does not focus on isolating and controlling variables, but on harnessing and extending the power of ordinary language and expression to help us understand the world we live in' . Interpretive work can help us ask the right questions and even give us additional confidence in our conclusions. But [it is] only with the methods of scientific inference will we be able to evaluate the hypotheses and see if it is correct (King, G., Keohane, R and Verba S; 1994, p. 40-42). The interpretive approach places much attention in explaining the meanings as well as interpretations of social actors in specific situations. Qualitative research focuses on the quality of the entities and the processes and meanings in phenomenon studied. Qualitative research is therefore interested in describing the actions of the research subjects in details and attempting to understand these in the actors own beliefs, history and context (Babbie and Mouton, 2001, p. 271), and therefore provides rich and detailed data and great attention to detail.

This study shows that teenage motherhood is a complex process that involves many a great deal of factors that integrate into the lives of teenage mothers and other complex issues.

Teenage mothers may experience the same kind of experiences in their lives as teenage mothers, but it is the different resources and social circles that make their experiences unique.

What follows is a brief summary of the participants involved in the study and gives a summary of their personal background. The participants are not too different from each other except in terms of age and educational status. All of the participants in the study are unmarried, isiZulu speaking, and live in a low-income village in KwaZulu-Natal. Eight of the girls in the study are still in school and the other 7 are out of school. They range from 15-19 years old and all come from households with extended family members. The study took place in a village in KwaZulu-Natal, known as Mzingazi agricultural Village.

### 3.3 Getting to know the participants

This section gives a synopsis of the profile of the participants in this study. The names of the participants are not used instead, are replaced with pseudonyms in order to be in line with the ethical requirements of research.

This section introduces the participants in the study by providing brief summary of their profiles as follows.

**Fikile<sup>4</sup>** is a 15 yr old, who currently studies grade 11. She is an orphan and lives with her aunts and sisters. She is vibrant, speaks fluent English and seemed to enjoy the interviews. She has a boyfriend who lives right next door to her home. She is also very religious. She regards herself as a shy girl but only opens up to warm people.

**Nomathemba** is 19; she works as a waiter in a food restaurant in town in Richards Bay. She has 2 children and has one stable boyfriend and a couple of other boyfriends she hides from her family. She is also the groovy type of girl, goes out with different guys often. Her sisters take care of her child while she is at work and sometimes while she goes out at night.

**Ntombi** is 19 years old, and an intelligent young lady who spends a lot of time studying. She is currently completing her grade 12 and stays with her boyfriend. She is currently pregnant with her third child. And explains that she had 2 still births before that. All

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<sup>4</sup> Not their real names-pseudonyms created by matching the real name with the pseudonym.

three pregnancies are with the same man. She says she has family but doesn't feel treated like family sometimes, so she regards her boyfriend as her family.

**Pinky** is 17 she is a bit shy, spends more time alone and only answers what you ask. She lives with her mother and siblings in the same area and only completed school up to grade 5. She currently works as a waiter. She has one child.

**Nomfundo** is 19; she lives with her aunt and sisters and is also an orphan. She completed her grade 12 in 2007 and is currently unemployed. She has a 4 yr old son. She had her son when she was in Grade 12 and she completed her schooling as she was allowed to go to school during the pregnancy.

**Philile** is 19 she is currently unemployed, lives alone in a rented room. She is currently a mother of 2 and spends her time taking care of them. Philile displayed a lot of sadness and pain during the interviews, mainly in relation to the condition of poverty that she finds herself in. She also talked about the way in which her pregnancy distanced her from many of her relatives as some say she is in the condition she is in because of the baby.

**Bongiwe** is a 17 yr old who lives with her mother, brothers and sisters. She is currently pregnant with her 2<sup>nd</sup> child. She is unemployed, has a stable boyfriend and spends a lot of her time doing house chores.

**S'phiwe** is in grade 9; she is 17 and has been pregnant twice with one miscarriage, both with the same boyfriend. She lives with her aunt and cousins and says she has some good friends.

**Thandeka** is a 17 yr old who lives with her sister in a rented room. She dropped out of school in grade 8 and decided to stay at home due to issues paying her school fees. She says she would have went back to school if she had a choice, but now she is happy not being back although she wishes she had someone to take her to school one day. She had her child after dropping out of school.

**Thobeka** is 18 she lives with her mother and sisters. She spends a lot of time away from home and she completed her grade 12 last yr. She has a baby boy.

**Nonkululeko** is 17, she is in grade 12. She lives with her mother and father. She has a stable boyfriend who is known at home, she is says she getting married at the end of

the year. She was able to complete school because her school allows pregnant teenagers to complete school and her teachers are supportive.

**Nokuthula** is an 18 year old currently pregnant and in grade 10. She lives with the boyfriend, and says this is because her boyfriend pays for her school fees since her mother is not working and she is trying to finish school.

**Zipho** is 17 and is in grade 9; she lives with her mother and two sisters. She appears shy and quiet but as the interview progresses she opens up and answers mainly what is asked.

**Nomusa** is 19 she is in grade 11; she is currently a mother of 2 and lives with her boyfriend because her family kicked her out after the 2<sup>nd</sup> child. She spends a lot of time with her kids, says she enjoys being a mother and although juggling school work with parenting is hard, it has taught her to manage her time well.

**Nosipho** is a 17 yr old currently in grade 9 and a mother to a one year old. She lives with her grandmother and younger brother. She is adamant about finishing school because her school does not kick out pregnant teenagers. But there is not support for them in the school, however that does not deter her from wanting to finish.

It is evident from the interviews and profiles of these participants that many of them come from similar backgrounds and structures of social support. All of them are disadvantaged participants from a low-income community with different experiences of motherhood. It is important therefore to understand their position as teenage mothers from a low-income neighbourhood and their position as such is important in understanding their constructions of teenage pregnancy and motherhood. There are observed differences between the lives of the teenage mothers who continued with their education after finding out they are pregnant and those who dropped out of school. These are important to take note of as they acknowledge the role of teenage pregnancy on school development and the positioning of the pregnancy on their lives.

### **3.4 Methods for data collection and data analysis:**

The following section provides an in-depth discussion of the data collection and data analysis methods that were utilised for this study. As stated previously, semi-structured interviews are the main data collection methods utilised in the study.

### 3.4.1 Semi-structured interviews

Semi structured interviews were utilised as a data collection method for this study as they allowed the researcher to have flexibility over the questions that are being asked. Minichiello et al (1990) defined semi-structured interviews as an interview in which neither the questions, nor the answers predetermined. These interviews often rely on the social interaction between the researcher and the informant. These interviews are also a way of understanding people's complex behaviour without imposing any categorisation, which might have a particular limit on the field of inquiry (Punch, 1998; cited in Zhang and Wildemuth 2009, p. 1). I chose semi-structured interviews as they allow for flexibility in the study and the researcher determines the focus of the interview as there may be certain areas that the researcher is interested in exploring.

Marvasti (2004, p. 19) argues that in-depth interviews have the potential to reveal a multiple attitudes about a given topic as they do not limit the respondents to a fixed set of answers. In addition, in-depth interviews encourage mutual self-disclosure as they allow respondents to delve deeper into their hearts to express freely their views and attitudes. Ferreira (1988, p. 205; cited in Crous, 2011, p. 51) argues that the qualitative researcher needs to provide a framework of themes that the subjects can respond to in a free and open manner. Zhang and Wildemuth (2009, p. 9) argue that semi-structured interviews are useful when one is working with an interpretive research approach, in which one will assume that reality is socially constructed and therefore, may rely on the reality of the participants in the setting of their interest. Since this study is interested in understanding the lived experiences of teenage mothers, semi-structured interviews proved to be useful in that teenage mothers were given the chance to express what they want to express without feeling limited by a set of questions.

In-depth interviews are also a useful tool when the researcher is interested in probing the participant's inner feelings and attitudes. The nature of in-depth interviews allows the researcher to get in touch with the participant and understand the subject through the lens of that participant's feelings and understanding. Noy (2008, p. 334) argues that in-depth interviewing and snowball sampling (sampling technique utilised in this study) are interrelated as they supply the researcher with the basis for the participants in the study. This is based on the premise that the informants supply the referrals; these informants are usually the ones interviewer prior to their referrals.

As a result, the quality of the referral is naturally related to the quality of the interaction that takes place between the informant and the interviewer. This demonstrates the importance of

the way in which informants perceive the interview encounter. Marvasti (2004, p. 15) argues that unstructured interviews: allow a more fluid interaction between the researcher and the participant, therefore not relying on stringent questions and answers that the participant can choose from, but instead, give the participant a chance to elaborate further.

The interviews were recorded using a digital voice recorder and then transcribed from the recording. The transcription of the data proved to be difficult in some instances as the quality of the tape proved to be disappointing, therefore in most cases the data was played out countless times to try and gather the exact quotations as described by the participants. This proved to be effective in capturing the important tones of perceptions and explanation used by a participant to communicate his/ her understanding of the topic. Out of the 15 participants interviewed, three of them were interviewed twice. The reason for the repeat interviews was because of the disturbances that took place during the first interviews, which then made the tape recording close to unusable. The participants were happy to be re-interviewed with no problems and of the three of them; two of them suggested a return interview. All the interviews were conducted at the homes of the participants and completed in 4 months following with gaps in-between the months.

### **3.4.2 Snowball Sampling Method**

Non probability sampling, in the form of Snowball sampling was used as the sampling method for this study. The sample comprised of 15, isiZulu-speaking, unmarried teenage mothers between the ages of 15-19 living in a rural village in KwaZulu-Natal. Out of the sample of the 15 teenage mothers, 12 of them live at home with extended family and the remaining three live alone in one-roomed rented houses, with the boyfriend occasionally visiting, not co-habiting. The study investigated the experiences of teenage mothers, their access to education, risky sexual behaviour and whether they experience any stigma as a result of their roles as teenage mothers. In order to select the sample for this study, the snowball sampling method was the more manageable and more appropriate method as it is useful when “the members of a special population cannot be located” (Babbie and Mouton, 2000, p. 167).

Researchers have argued that when snowball-sampling methods are employed in research, they lead to dynamic moments where social knowledge of an interactional quality can be generated (Denzin and Lincoln, 2005; Hay, 2005; Limb & Dywer, 2001; cited in Noy, 2008, p. 328). Given that the study focuses on teenage mothers only, it was going to be difficult to locate teenage mothers without knowing who is a teenage mother and who is not, and not being



familiar with teenage mothers in the area. It was therefore easier for me to locate one teenage mother and ask her to identify others who might be interested in taking part in the study.

Snowball sampling is also appropriate, as it is the method used to locate unknown or hidden populations. Locating teenage mothers can be complicated as they fall under a specific group of people with the same traits. In general, the observation is that people with similar life experiences tend to spend time with each other, or seek each other out. Therefore, snowball sampling uses that strategy to locate people who have similar traits and characteristics, which are important for the study. More often, when we find an appropriate case for the study, that person is able to lead to other people who have similar characteristics needed for the study. This, according to Terre Blance et al (2007, p. 291) is the characteristic of snowball sampling. The author argues that the snowball sample “grows” in the same way a snowball gets larger and larger as it rolls down a hill. This technique helps as in time one may find that they are able to choose the desired respondent from a group of respondents (Terre Blance et al, 2007).

The sampling technique used in this study was mainly concerned with the personal experience of teenage motherhood. Therefore, I specifically wanted a sample of “teenage mothers”. This was particularly easy to achieve by using the snowball sampling method, because it was useful in locating the sample of teenage mothers. According to Noy (2008, p. 331) snowball sampling is a particularly informative procedure, and therefore deserves to be employed in its own right and merit, and not as a default option.

In addition, Noy (2008) argues that the fact that information about the participants in snowball sampling is supplied by the informants themselves the researcher relinquishes the control over the sampling phase, to the informants. The researcher can direct the informants to the type of participants they are looking for, but in the end, it is the informants who drive the sampling phase of the study. This is important to note as a number of factors can influence it. According to Noy (2008), during the snowball-sampling phase, participants are likely to select potential participants based on their experience of the interview. If the interview proved to be depressing and lacked stimulation, participants are likely to select potential participants with bias of what to answer or they will cease to seek potential participants altogether.

### **3.4.3 Data Analysis Method**

The transcriptions were loaded onto the data analysis software Atlas Ti v5. The thematic coding of the data took place using this software. The coding involved grouping themes that emerge from the data and coding these themes against what the participants have said in order to make the data analysis process easier. Atlas Ti is qualitative data analysis software that uses coding as the method of data analysis. Given that I am very proficient in this software, I utilised it for making the coding process easier than using the manual process. Data was then analysed and grouped under the themes that emerged from the data. I undertook the coding process on my own. The themes were then examined in relation to what is known from the literature that was consulted on the subject. The themes were then evaluated against the literature to explore the way in which participants constructed meaning in their lives.

The participant's direct quotes were that used to complete the process of analysis. The quotations are integrated to the analysis and are in relation to the dominant themes in the study. The direct quotes have been translated from isiZulu to English. The English quotes will be the ones used to clarify analysis in order to produce a more coherent reading experience without distractions from moving in-between the two languages, isiZulu and English. The effect of using raw data from the participants in research is important in reflecting on the dominant ideas and shared discourses present in the participants' lives. The 15 narratives of data were scrutinised for the relevant themes and data emerging from these themes.

### **3.4.4 Ethical Considerations**

This section addresses the ethical reflections addressed in the study. Ethical considerations are important aspects of research and careful consideration of the participants' feelings and sense of personal space was taken into consideration. I was careful to not infringe on the rights of the participants and to take on the study in a way that did not do any harm to them and their lifestyles. At the beginning of the interview all participants were told of the importance of saying the truth about their experiences, but also that if they were to disclose anything that I am obliged to report to the police or social development, I would be obliged to report it. I did also state that, should they wish not to take part in the study, or not to answer certain parts of my guiding questions, they are free to do so, as this is their story, and I am mostly interested in

understanding it, the way they have lived it. Informed consent was provided by the participants and this was obtained by signing the consent form (See Appendix B).

Although this study is of sensitive nature, care was taken in affording the young women a chance to tell a story that they have been living. And this was refreshing for some of the participants and they needed to tell their stories to someone. The study was well-explained to the participants and all agreed to participate voluntarily. I often brought snacks to the interview site so as to ensure that the environment was welcoming for the participant to feel calm while expressing themselves. All participants were informed about the confidentiality of the information they share and although some of them began the first open ended question which said: “tell me about your life as a teenage mother” by first saying their names; an attempt was made into not recording those names during the transcription phase.

All participants were given pseudonyms during transcription. I took care in not recording their names but gave them pseudonyms during the transcription. At times this did prove to be problematic for me as at some points I had to keep going back to the recording when I couldn't make sense of the paragraph, and go listen to the voice again and the name to remind myself of the setting and the environment the interview took place in. The participants were happy to take part and many of them asked for the report when the study is completed.

My involvement in the study is also an important aspect to take into consideration. I was the researcher and the interviewer, but often during the interviews, I found it hard to separate my role as a researcher. Often when I came across participants who were really struggling with making it, I often took that emotional pain they felt and often found myself struggling with the personal feelings towards the participants, mainly feelings of compassion and wishing the best for them. In one case, I found myself going back to the home of this one participant to see how they are doing. I felt sadness and pain at seeing the situation she was living in without any family support. Although during the stage of establishing rapport, a lot of them regarded me as their friend, but in fact, I just came into their lives got their stories and left. Thus, I was left struggling with the pain of their experiences and had to seek some form of “debriefing” from a friend.

### **3.4.5 Validity**

Babbie and Mouton (2001, p. 122) define validity as the ‘extent to which an empirical measure adequately reflects the real meaning of the concept under consideration’. According to Maxwell (2005) researchers make use of a number of methods in order to ensure validity of a study.

As a novice researcher, I strived to collect rich data, but utilising the qualitative method which allows participants a chance to express their views in a manner that is varied and provides a clear understanding of their views in a manner that the full picture is exposed. I also utilised the triangulation method, where I interviewed a number of participants in order to understand their constructions of their own experiences of motherhood.

The findings of the study are analysed and presented from Chapter 4 to Chapter 7 of this dissertation.

### **3.5 Conclusion**

This section provided an in-depth discussion of the methodology utilised for this study. While the Researcher was conscious of her position among the participants, many of them regarded her as a friend and confidante during the discussions. They were able to open up with information of their pregnancies and experiences and made it easy for the researcher to engage on personal matters with them. By the end of the study, the participants were able to ask questions related to what would happen with their stories and what a thesis is and what value does it add to having told their stories. This was very inspiring and showed that, while many perceptions out there paint teenage mothers as unfit to think for themselves and understand implications of their actions, the participants in the study reflected on their capabilities and showed inquisitive mindsets.

The description of the findings of the study follows in the next chapter.

The findings are presented in the following chapter, from Chapter four, which focuses on the analysis of the participants' stories of risky sexual behavior and access to contraceptives. Chapter five presents the findings as they relate to the participants accounts of teenage motherhood as having taught them responsibility and care. This section speaks to the contrary of what research has often focused on the negative aspects of teenage pregnancy and motherhood, and the participants in the study argue that, while it may not have been easy to go on, they learned to be more responsible for themselves and others. The chapter is followed by the discussion of decisions on whether to stay in school, which are dealt with fully in chapter six. Concluding remarks and recommendations are presented in chapter seven, the final chapter of the dissertation.

## **Chapter 4: Factors leading up to the pregnancy**

### **4.1 Introduction to the chapter**

This chapter provides an analysis of the participant's pregnancy stories. The chapter departs on the premise of the analysis of the participants' stories from the time of discovering that they are pregnant. These reactions of family and their own are analysed together with literature to understand the different reactions to teenage pregnancy.

Focus is also given to discussion of the participants own risky sexual behaviors that led to the pregnancy. The chapter further discusses facilitators of teenage pregnancy as experienced by the teenage mothers in the study. These facilitating factors include the lack of access to adequate sexual and reproductive healthcare as it denies teenage mothers the ability to prevent unwanted pregnancies and puts them at risk of repeat pregnancies and HIV infections. Focus is also given to the participants explanations of their experiences, departing from the circumstances leading to the pregnancy and the point of finding out one is pregnant. The aim of this section is to provide an in-depth analysis of the participants lived experiences as they relate to their pregnancies.

#### **4.1.1 Finding out about the Pregnancy**

As discussed by Varga (2003; cited in Jewkes et al, 2009,p. 680), different families react differently to teenage pregnancy, as a result teenage girls are often afraid to disclose their pregnancy fearing for the response from the parents. Furthermore, some parents punish their daughters when they find out of the pregnancy.

*My mother beat me up so bad. I thought I was going to die. She beat me so hard I puked. It was so bad...I remember... I was in town with my boyfriend and we were busy trying to figure out how to tell her that I am pregnant. Then my older brother told her before I did. I am not sure how he found out. But when I got home, my mother was already waiting for me. She said "where do you come from?" I just stood there, looking at her, not knowing how to answer. She was sweating and breathing heavily, umh she does that when she is very angry. Then I just walked past her all the way to the girls' room. She followed me, and when I turned around she gave me a slap so hard I believe I saw stars (laughs), then she dragged me onto the floor and pulled out the shambok. I started*

*fighting back when I saw the shambok, all I kept thinking was, and I can't allow her to kill my baby. I was scared, but I didn't want her to hit my stomach (Nonkululeko, 17).*

Nonkululeko relays a very significant case of finding out she was pregnant, she goes on to state that although she had planned to tell her mother, her mother felt betrayed and beat her up to a pulp. What stands out in this story, is how at 17, she already had the instinct to protect her baby from her mother's beatings. This is a very strong feeling of motherhood and attachment that one feels for an unborn baby. Nonkululeko's story relays a widely held reaction and an instinct of parenting, which even though she knew she was wrong, still felt that her baby was not to be harmed in her punishment.

Scholars have argued that, despite the punishment, teenage pregnancy is becoming common with parents taking the responsibility of care for their grandchildren. Graham and Mcdermott (2005; cited in Yardley, 2008, p. 681) argued that focusing on the negative aspects of teenage motherhood does little in deterring those for whom motherhood represents a meaningful, respectable life choice. Parekh and De la Rey (1997) found that compensation in the form of umgezo<sup>5</sup>, where the teenage mother is cleansed of bad luck, acted as a form of acceptance of the pregnancy as the parents get compensation from the family of the man who got the girl pregnant. This was the case with Philile, whose parents were disappointed, but seek comfort in the tradition of umgezo.

*My mother was unhappy she was very angry; she wanted to beat me up. And she went to talk to the parents of my boyfriend and they agreed to bring the money for the damages, until my boyfriend passed away, then nothing happened after that (Philile, 19)*

Richter et al (2006) argue that teenage pregnancy is often marked by fear that prevents many teenage girls from seeking help in dealing with the pregnancy. Addressing these fears would help in policy implementation that helps deal with issues related to teenage motherhood.

*I missed my period, then I asked my friend to take me to a chemist and we bought a pregnancy test. I was vomiting all the time, feeling sick and always nauseas. So I thought I'm pregnant. When we got home I did the test and realized that there were two lines on the test, showing that I am pregnant. Then I told my parents, actually, I didn't tell them, my boyfriend did. He told my aunt, than the family called a meeting and they*

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<sup>5</sup> Cleansing ritual performed for girls who fall pregnant at a young age in order to drive away bad luck.

*said I must have an abortion because it will be good for me. I said no I will keep my baby* (Bongiwe, 17).

While research has argued that the African culture, rejects abortion and accepts a child no matter what the circumstances are, (Preston-Whyte and Zondi, 1989. Turner, 2001. Hunter 2005. cited in Nkani, 2012, p.44). Bongiwe relays the contrary, as she tells a story of how her family called a family meeting and asked her to abort her child. To which she refused. This refusal, showed that her strong belief in caring and protecting her child overcame the feelings of shame, which may be the reason her family wanted her to abort the child.

The participants express the difficulty in finding out that one is about to be a teenage mother, their experiences of life at that moment. All of the participants expressed feelings of pain, confusion and disbelief at finding out that they will be mothers. In addition, it is worth pointing out that seven of the participants had no idea they were pregnant, they only discovered when they were experiencing symptoms of pregnancy and followed up with pregnancy tests that they realized they were expectant. Research suggests that teenage pregnancy is associated with stigma and often teenagers from low-income communities are seen to be more likely to reject abortion due to the cultural factors associated with aborting an unborn child

#### **4.1.2 Risky sexual behavior**

Risky sexual behavior remains one of the biggest contributors to teenage pregnancy in South Africa. All of the participants in the study had unplanned pregnancies with many of them reporting that they were not expecting to fall pregnant. As discussed by Richter et al, 2005, Makiwane 2010, p. 201) much of teenage pregnancy is unplanned. Researchers have argued that teenage pregnancy and motherhood can be widely attributed to the social and economic conditions that adolescents and young women find themselves in and teenage mothers are said to endure traumatising conditions before the pregnancy (UNICEF, 200; Kaufman et al, 2001). This was the case in Ntombi's story, as she related her experience of repeat pregnancies, and the prior negative experiences in her life, which may have played a role in her eventually becoming pregnant.

*Umh, I was in a school far from home. So I moved and went to live with my aunt. Then while living there, things were not so good. She treated me like a maid, I had to take care of her children, bathe them, clothe them, clean, cook and do all that. I had no time*



*for my schoolwork you see. You see, I cannot sit in this interview and make excuses for how my life has turned out, but I am young and I am pregnant with my third child. I can say that is painful, but I am okay emotionally. I am doing well at school, and I have recently got good grades for my school work. I am not a bad girl; I don't see myself that way. I do sometimes feel that if I was living with my parents, my life would have turned out differently. I don't think I would have had 3 kids in my life by now and I don't think I would be living here. (Ntombi,19).*

In the African culture, a child is accepted no matter the circumstances, and abortion is frowned upon (Preston-Whyte and Zondi, 1989., Turner, 2001., Hunter 2005. cited in Nkani, 2012, p.44.). Research suggests that teenage pregnancy is associated with stigma and often teenagers from low-income communities are seen to be more likely to reject abortion due to the cultural factors associated with aborting an unborn child. In relaying the story of her repeat pregnancies, Ntombi argued that she is not a 'bad' girl; she doesn't see herself that way. This is key in her understanding of the perceptions and stigma attached to teenage pregnancy. While she argues she is not a bad girl, it displays her awareness of perceptions of teenage pregnancy and the delinquent behavioural attitudes attached to these.

As discussed by Hanna (2001, p.92) various lifestyle factors may expose teenage mothers to environments that may find them becoming pregnant, regardless of whether the pregnancy is wanted or unwanted. Her experience of being treated like a 'maid' by the people she trusted to take care of her and treat her like a child only accomplished pushing her into the arms of a man who made her feel special, loved and well-taken care of.

*In that same year I met this guy. He was great, loving and he did everything for me, took me to school, paid for my school fees, and even bought me clothes. In my whole life I had never had clothes that didn't previously belong to someone else. And this guy bought me new clothes all the time you see. He loved me, still does (laughs). I was happy with him, I guess I still am you see. But sometimes I wish I was at home, I wish I didn't have a child and turned my life upside down (Ntombi, 19).*

Studies have also referred to problems found in families of teenage mothers. These problems range from parents having a divorce, a family history of illegitimacy and alcohol as these problems are said to increase the level of frustration among teenagers and lead them into early childbearing (Carter and Spear, 2002). Socio-economic status and a sense of belonging have also been cited as factors that may lead to teenage pregnancy among adolescents.

*I can say that in the beginning when I didn't have a child I was not okay because my mother used to date many people and I thought I was the only child. And found out later that my mother had other kids but she never showed me any of them. She never took me home to meet my family. So I started dating a man and went to live with him and had a stable life after that. My boyfriend used to support me until the time when he's mother died, then things changed that time because the in-laws said that I have some knowledge of her death. Then I left there and went to live at my uncle's place. While I lived there I met the father of my current baby. My uncle passed away and I was left with my younger uncle, so I moved and went to live with my baby's father (Philile, 19).*

As discussed by Preston-Whyte, 1991; Kaufman et al, 2001, teenage mothers from relatively poor backgrounds are more susceptible to pregnancy and early childbearing as these teenagers often face challenges in their lives, which may lead them to pregnancy. Philile describes a situation in which her relationship with her mother was compromised by secrets between the two of them, which led her into feeling alone and lost as she was not allowed to see and get to know her brothers and sisters whom she says her mother hid from her. She argues that, it is that experience that made her feel more comfortable with her boyfriend and decided to move in with him then in the end resulted in her pregnancy.

When asked about their sexual behaviour and contraceptive use, five participants noted that even though they were sexually active, they never really thought they would fall pregnant. In addition, seven of the participants reported that they had never used contraceptives because they trusted their partner not to cheat on them and trusted that he was not having sex with other women. *We never used a condom. I think it's because we trusted each other you see. I was sure he would never do that to me. He loves me so we never even spoke about the condom. It was okay that time, but now I am tired of the pain of losing children and I want to do something about it (Ntombi, 19).*

Despite free availability of condom use, teenage mothers still experience barriers that hinder them from accessing these (Wood and Jewkes, 2006 and Ehlers, 2000). One participant argued that she never used condoms because of the inadequate time she had. She argued that at times when she had to go collect the pills, she had to be in school and decided to go to school instead, because she was afraid of what she would say at school if she didn't go. *No, I was not on any birth control because I was at school; I did not have time to get the pills from the clinic. If I*

*went I would have had to skip school for that day, I did not know how I would explain that at school (Pinky, 17).*

The consensus among the participants was that trusting the partner and being comfortable with each other led to the gradual non-usage of condoms and contraceptives. Research evidence has found that usually when teenagers trust their partner, they stop using contraceptives as a sign of their trust, however, this is problematic in a time of HIV as condom use needs to remain a priority (Manzini, 2001, p. 49).

*My boyfriend and I used to use a condom and then as time went by we just stopped using it. Then I got pregnant. After that I asked the hospital to close my womb because I didn't want to have a baby any more (Philile, 19).*

*I was not on any birth control, because at that time, I didn't even think about having a baby. So I didn't use any birth control. We used the condom in the beginning, but after a while we stopped, and in honesty, I never asked why we stopped using condoms, until I found out that I am pregnant (Nomfundo, 19).*

As evident in existing research Manzini (2001, p. 45; Kaufman et al, 2001) many adolescents in KwaZulu-Natal reported that they were not aware that they would be having sexual intercourse. Findings suggested that some teenage girls stopped using the condom because the trust they had in their sexual partner. Previous studies (Kaufman et al, 2001; Manzini, 2001) found that as time progressed in the relationship, condom use was usually substituted with a non-barrier method of contraception. As evident in the experiences of the participants in this study, often many of them asserted that they were not aware they would fall pregnant.

#### **4.1.3 Lack of adequate access to healthcare/ contraceptive use**

Malema (2004, p4) reveals that unmarried teenage mothers may find it difficult to access contraceptives as these may be restricted to office hours utilised by health facilities, and nurses' negative attitudes to adolescents who seek contraceptives and may engage in risky sexual behaviour such as unprotected sexual intercourse (Hanna, 2001, p.102). An emphasis is therefore placed on the importance of understanding reasons why teenage mothers fail to utilise contraceptives despite their availability (Wood and Jewkes, 2006), as this would assist in ensuring that teenage girls, especially those in school, do not fall pregnant while at school, thereby jeopardizing their likelihood to complete school.

*It's hard because we sit for a long time at clinics waiting for the nurses and when they finally come to you, they will tell you they need a break or they are going for tea. It's hard at times because you know you will have to spend the whole day there. Sometimes the nurses would say, kids of these days can't wait, they just do anything, and others say that kids fall pregnant to get the grant. Then they ask you if you are so poor that you would fall pregnant for money. It's hard to deal with them because some would really hurt you or your child if you talk back. You just have to take it so that your child leaves safe and alive (Nomfundo, 19).*

Participants expressed their disappointment at healthcare services in their area, and how inaccessible they are, as many have to wait the whole day to get assisted. This gives an indication of the need for healthcare services that are youth and teenage friendly, as well as an improvement in the current state of healthcare for expectant teenagers.

*I was careless about things. I never thought I would get pregnant until it happened to me, now I am more responsible. I am able to grasp what it means to be sexually informed about my love life and how to protect myself from everything like HIV, pregnancy, and unwanted pregnancy (Bongiwe, 17).*

As stated by Boulton and Cunningham (1991), adolescents in South Africa experience a lack of understanding between the onsets of sexual intercourse and contraceptive use. Often, adolescents fall pregnant because of the lack of knowledge of contraceptives and pregnancy prevention.

Bongiwe relates her pregnancy as an act of carelessness, she argues that her knowledge of sex, contraceptives and pregnancy was low and as a result, she fell pregnant. She acknowledges that she is now more aware and able to protect herself from pregnancy and sex.

Studies have reflected that poor access to contraceptives and termination of pregnancy, inaccurate and inconsistent contraceptive use, coupled with judgmental attitudes of health care workers, and high levels of gender-based violence, as well as poor sex education are all some of the factors that influence chances of teenagers to fall pregnant (Jewkes, Morrell and Christofides, 2009; Panday et al., 2009; Chigona and Chetty, 2007; Bearinger, 2007; Pettifor et al., 2005).

Wood and Jewkes (2006) argued that teenage mothers rarely plan the pregnancy but do nothing to prevent the pregnancy. This was evident for many participants in this study, as many of them stated that they have never used any condoms, despite being sexually active. It is evident from

the analysis that teenage mothers are a vulnerable group that needs proper guidance in light of the HIV pandemic especially in cases of lack of use of contraceptives to protect themselves from pregnancy and HIV. While some of them were aware of the potential risk of pregnancy, trusting their partner meant ensuring that he is able to trust them too, hence putting their lives at risk to gain that trust.

As expressed by Ehlers (2003, p. 233) barriers to contraceptive use should be addressed to ensure that adolescents in South Africa utilize contraceptives and healthcare services available to them.

## Chapter 5:

### 5.1 Introduction to the chapter

This chapter discusses the findings as they relate to positive outcomes of teenage motherhood as experienced by the participants in the study. This is not to say that teenage pregnancy in its form is positive, but to relay the stories of teenage mothers who have experienced motherhood and who are able to see positive outcomes in their own lives. The aim of this discussion is to reflect that while teenage pregnancy and motherhood is frowned upon and teenagers who fall pregnant are often seen as delinquent. It is necessary to uncover the positive experiences to acknowledge the role of motherhood on teenage girls who fall pregnant. It is especially important to discuss the teenage mothers' arguments of learned responsibility, as one of the outcomes as stated by the participants in this study. This section also provides an analysis of stigma as experienced by participants in the study. This is to show that despite the stigma experienced by some of the participants in the study, they still ensured and saw the positive in their experience.

### 5.2 Teenage motherhood and learned responsibility

Hanna (2001, p. 102) argues that teenage mothers may see motherhood as a way of achieving adulthood and a sense of identity and competence and may see motherhood as a positive outcome for themselves. Participants in the study, displayed evidence of this as they stated, positive outcomes relating to caring, loving and being responsible for someone else in their lives when they became teenage mothers. In addition, young women from impoverished backgrounds may see pregnancy as a way of finding love and a sense of belonging for themselves. Some studies indicate that some women place emphasis on the social value of having children than on the financial value (Fawcett, 1988; cited in Roxburgh, 1998, p. 55).

*Uhm...I have a job in town. So I take care of myself and my children. I am grateful for that because life would be much harder for me if I had to ask for money and food for my children. I would have to beg and sometimes my kids would go without food because sometimes I have to ask harder than the other girls here at home (Nomathemba, 19).*

Eight of the participants felt that having a child and being a mother has taught them to be less selfish, to care more and be able to think of someone else other than themselves.

*My life has changed in a good way and bad way. I was in a lot of stress when I was pregnant. Than I had the baby and things have changed. I became able to do things for myself and my child. I got a job and even though it doesn't pay much it's better than nothing. It helps me take care of my child without being a burden to my family (Pinky, 17).*

Pinky expresses that her life has changed in a good way as she is now more responsible and able to do things for herself. Nomathemba expresses an interesting sentiment, that had she not found a job, she would have to beg harder than most girls at home, because she is a mother. She expresses the pressure that comes with being a teenage mother and being understood differently in relation to other girls at home.

*I can see that having a child has taught me a lot. You learn to care for someone else and it's that care that teaches you another part of you. It's sad that I never got far with studying, but I am happy that I didn't turn to dating other older men and doing bad things because that's what young girls do these days (Thandeka, 17).*

These accounts of teenage motherhood contradict popular views of teenage motherhood as problematic and irresponsible parents and bad role models, and shows how for some, teenage pregnancy marks the beginning of an important phase in their lives, one marked by responsible behavior, care, love and courage. Studies have argued that the heterogeneous nature of teenage motherhood is an important aspect to take into account. Experiences of teenage mothers have found that some teenage mothers find fulfilment in having a child.

The participants in this study argued that it had taught them to be 'less selfish', be 'understanding of other teenage mothers', and independence. Preston-Whyte (1991) found that adolescents who took part in her study argued that teenage motherhood presented a chance for upward mobility among some teenage mothers. As discussed by Duncan (2007) whilst policy makers view pregnancy as a problem and setback for teenagers. Teenage mothers may see social and personal fulfilment in having a child, which displays high expectations for their lives.

Findings from some of the participants in this study show what even though family reactions about the pregnancy were not positive; the teenage mothers had positive attitudes of being a mother and often bonded with their children. These teenage mothers also had a feeling of protection for their children (Seamark and Lings, 2004, p. 814). These findings suggest that

even though teenage mothers may react in fear and sadness at realising that they are pregnant, these do not stop them from feeling the love and care they should maternally feel for their children. And quite often, disadvantage and poverty do not always stop them from making means to take care of their children, such as finding a job and being responsible mothers.

As evident from the responses of teenage mothers who argue that becoming mothers has made them responsible and able to care for someone else other than themselves, these accounts of teenage motherhood having the ability to create responsible human beings is at odds with the arguments that teenage mothers are irresponsible, irrational beings. The participants in the study point out the way in which becoming a mother helped them find a sense of fulfilment in their lives as they were able to understand someone else in relation to them, to be able to care for that person in a rational manner and be responsible for their wellbeing.

## **5.2 Gender narratives and the experience of stigma**

Shefer et al (2013) speak of the role of normative gender roles and female sexuality in perpetuating the representation of teenage pregnancy as social decay and degeneration. They argue that gender narratives of teenage pregnancy and motherhood are driven by discourses of what is understood as traditionally normal for a teenager. Evidence links traditional gender norms, unequal power in sexual relationships and intimate partner violence with negative sexual and reproductive health outcomes (Haberland, 2015).

*... when I was still pregnant, people used to stare at me and, make comments like, what is she doing, look at that? It's all because of the child support grant; these children just want to have some money' It used to hurt that people said those things. But it was okay. My mother asked me to stop going to church with her because people are talking. It was so painful (Pinky, 17).*

The stigma attached to the child support grant is also very significant, evident in Pinky's response as she refers to the way in which people judge her based on having a child as a teenager, thus assuming that she had that child to get the child support grant. In South Africa, the child support grant is paid by government to ensure that children of parents who cannot afford to care for their children are well taken care of. However, in recent times, the grant has been marred with debates on whether or not it is causing teenage girls to fall pregnant, with some arguing that it has a perverse incentive in that teenage girls create the circumstances (fall pregnant) they find themselves in, so that they can benefit from the grant.



However, a number of studies have contributed to a growing evidence base, demonstrating the successes of the CSG in terms of reducing poverty and promoting human capital development.<sup>6</sup> Considering the statistics of grant recipients in South Africa as cited from the Social Pension System (SOCPEN), which is the government's online database of grant recipients. Statistics reflect that, as at 2005, less than 3% of grant recipients were teenagers. This reflects that, while there is this stigma and correlation placed on teenage pregnancy and the child support grant, statistics, speak otherwise.

*There were these girls in my school, who used to point at me at break time and laugh. It hurt so badly. But I didn't let them take me down. I knew why I was at school (Nosipho, 17).*

Nosipho's story speaks to what researchers have argued, which is that a minority of teenage mothers are stigmatised and often shamed and punished in schools because of the belief that teenage mothers who fall pregnant at school will perpetuate the 'negative' inspiration of pregnancy to their peers (Hatfield, 2007, p. 258; Ngabaza, 2010).

*I know that people are still very judgmental when you are pregnant. I experienced very bad times when I was pregnant. I remember I was in the assembly at school, and this girl walked up to me and said, "I hear you are pregnant". I didn't answer her and she just touched my tummy really hard and walked away. I don't remember what happened after that, but I felt this hot feeling all over my body and I fainted. It was the worst day of my life. I wish people could just stop judging people they don't know. If I am pregnant, you don't know me, I don't know you. Why is it anybody's problem? (Zipho, 17).*

Feminist theories do not only place great emphasis on gender when engaging with effects of teenage pregnancy and motherhood, but also on gender inequalities and power relations, as evident in the participants' stories. These manifest in social expectations, which not only hold the young women as responsible for the pregnancy, but also stigmatizes them as immoral and deviant in ways that rarely apply to men. Jenny Billings (BBC, 2011), argues that stigma attached to teenage pregnancy and motherhood is mainly influenced by our line of thought. He argues that this line of thought rests on our understanding of sex and the thought of a teenager

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<sup>6</sup> Agüero, Carter, & Woolard, September 2007; Budlender & Woolard, 2006; Delany, Ismail, Graham, & Ramkisson, June 2008; Makiwane & Udjo, 2006; Samson, et al., 2008 (cited in DSD, SASSA and UNICEF. 2012).

having sex informs our thinking of pregnancy and thus stigmatises that teenager. She further argues that stigmatising teenage motherhood pulls all teenage mothers into one assumption, as though a 16 year old is the same as a 14 year old. She reflects on the heterogeneous nature of teenage mothers and teenage motherhood. This description is further explained by Shefer et al (2013) in their discussion of gender discourses and teenage discourses that drive the way *in* which teenage mothers are thought of, and pregnant teenagers frowned upon because of the general understanding of adolescence and particularly society's understanding of how teenage girls should behave. .

Stigma, as discussed by Goffman (1963) dwells on the characteristic of difference, a difference marked by a feature that is often less desirable. For teenage mothers, teenage pregnancy is marked by stigma due to its relation to adolescent sexual activity. Thus, teenage mothers continue to be stigmatised based on the association of pregnancy with deviant teenage girls. This idea of stigma based on the evidence (what is seen) is crucial as it assists in unpacking reasons other than the cultural norms and standards, by reasons that reflect why teenage boys are not equally stigmatized. There is no "visible" sign showing that they have impregnated someone as teenage boys themselves, hence they are not stigmatized based on the visible and the stigma falls on the teenage girls, who have a belly to show for their perceived shame. Often these young girls are stigmatised as they bear a moral or less desirable idea of teenage girls (Yardley, 2008). As discussed by Abe and Zane (1990) teenage pregnancy continues to be marked by stigma. Often the stigma experienced by teenage mothers is related to teenage pregnancy and the relationship between sex, HIV/AIDS and contraceptive use.

*The old people talk, they talk the whole time and it is especially hard when you are still pregnant because that time people can see the tummy and they can see that you are pregnant, so they say things behind your back. Some say God will punish you and that you are a sinner, others tell you that you have no morals because you decided to have sex as a child. You see, this place people are traditional so when you have a child at a young age it's hard because people just start judging you. They call you names and they tell you to repent. I am a Christian so most of the people I hang around are Christians and they often ask me to repent (laughs). My aunt was also very angry when she found out I'm pregnant. But now everything is okay, she takes care of the child (Fikile, 16).*

Although participants were not asked about the role of the child support grant in their lives, three of the participants referred to the grant during the interviews. They discussed the role of the child support grant as an additional or sole means of financial support for their children. As seen in the discussions above, for some, the Child Support Grant became a form of stigma in which they were judged based on. It is evident that there still exists the conception that teenage girls falls pregnant in order to access the child support.

## **Chapter 6: Teenage motherhood and decisions on schooling.**

### **6.1 Introduction**

This chapter presents an analysis of the findings as they relate to the participants' engagement with school. It explores the experiences of teenage mothers' education and their decisions to stay in school. According to the South African education policy, teenage mothers are allowed to go back to school after the pregnancy and studies have found that regardless of this right, teenage mothers continue to leave school, and those who do return, often do not complete school (Chigona and Chetty, 2008). This chapter explores some of the reasons why the participants in this study made a conscious decision to stay in school. The chapter also explores the reasons that make a teenage mother decide to leave school. Education of a young girl is not only good for the provision of services and a good lifestyle for her and her family, but it is also a good way to ensure that South Africa's economy and growth is sustained. It is often said, that when you educate a women, you educate a whole nation. This is especially true as women are often seen to be able to share their income with the whole family, thus contributing to the economy of the country in a wider spectrum. It is therefore imperative to uncover and understand reasons why teenage girls choose to stay in school and others not. How this decision is arrived at and what government could do in ensuring that young girls remain in school to better their chances at a better life.

### **6.2 Reasons for staying in school: Eight teenage mothers' accounts**

The South African Schools Act No. 84 of 1996 was an important moment for South Africa in ensuring the translation of the broader constitutional commitment to gender equality into the schooling environment. However, because of the dominant discourses on adolescence, and moralistic positions on young female sexuality, in particular, the position of young parents as learners in schools remains highly contested (Shefer et.al, 2013).

Kaufman et al (2001) argue that many factors determine whether a teenage mother stays in school or not. Such factors are related to the ability to juggle schoolwork, financial circumstances, as well as factors associated with mothering and those associated with being in school. Social factors are also seen to play a great role in determining the likelihood of a teenage mother to stay in school. As indicated by Meekers and Ahmed (1999, cited in Grant and Hallman, 2008) highly motivated students and those with high academic performance often do well when returning to school. In addition, those teenage mothers who return to school after

the pregnancy often face challenges, which may impede their ability to succeed; such challenges are related to support from teachers, support at home and motivation to succeed (Chigona and Chetty, 2008).

According to Shefer et al (2013) normative and gendered expectations of how teenagers should be and behave, has a bearing on the way in which teachers and principals relate to pregnancy and parenthood. Furthermore, when dominant systems of morality frown upon learners being sexually active and having children, it is likely that policy will be interpreted in ways that are not always supportive of learners who fall pregnant and parent at school. While these discourses of negativity exist and subject teenage mothers to negativity and stigma, Chigona and Chetty (2007, p.1) argue that teenage girls who become pregnant often regard education as an important part of their lives. Many of these girls often want to complete their education in order to increase their chances of getting into the job market and be able to move out of the circles of poverty. This was the case for the participants who opted to stay in school.

For those participants who reported staying in school after the pregnancy, many of the reasons centred on the desire to have a better job later in life. However, the main reason cited, was the wellbeing of the child.

*If I don't go back to school, then I will have no job later in life and will not be able to provide for my child (Sphiwe, 19).*

Shefer et al (2013) have argued that the discourses of teachers and learners in schools continues to reflect a construct of a shame and disgrace grounded by the concerns on moral integrity of the broader society. This is especially true in the story told by Ntombi, in which her teachers were disappointed and sad, but she argues, they still supported her and pushed her to continue with her schooling. Which is not always the case for some teenage mothers.

*You see in that year, my schoolteachers were very sad and disappointed because they believed in me so much, they helped me at times, and it was hard for them when they found out. I was so depressed because it was so painful that I had disappointed them. But they encouraged me to stay in school, they encouraged me not to drop out and become nothing. I am grateful if it was not for them, I don't know where I would be (Ntombi, 19)*

She went back to school because her teachers were supportive towards her. They therefore created an environment that allowed her to go back to school. In this instance, it is clear that

while teachers were aware of the normative ideas of when it is appropriate to be a parent, and that parenting as a child was not acceptable, they still felt that it was important for the learner to be given a chance to complete her schooling. In addition, to some extent, the teachers exercised that often disjuncture application of policy and allowed an environment in which the learner can still go on and excel in her school. In this way, the education policy on pregnant learners was applied to ensure equal education to the girl child as intended.

Furthermore, Chigona and Chetty (2007) argue that the key to developing teenage mothers in schools and empowering them is the provision of support, which proves to allow many teenage mothers to stay in school.

Other participants argued that they stayed in school for the sake of their child and being a good role model for the child. One participant argued that she went back to school because her parents were not aware that she was pregnant and to hide the pregnancy she had to go back to school so as to keep things normal.

*When my mother had me she did not leave school, she pushed on and for the fact that I knew that without my matric I cannot do anything (Nomfundo, 19).*

*I went to school after 2 weeks of having the baby. My aunt wanted me to go back to school so I did, and because she did not want people talking about her and all that (Fikile, 16).*

Often, girls who become pregnant choose to return to school in order to create better prospects for them and their children. As discovered in this study, some teenage mothers return to school because they had been children of teenage mothers themselves, and see the cycle of pregnancy as educational in that their parents did not leave school. Some studies have argued that because of the strength of the relationship between teenage pregnancy and school, staying in school often delays pregnancy and provides an education for the teenage mother. In addition, teenagers who are more involved at school, have supportive teachers and do well in class are less likely to drop out of school and often they cope well with their new role and going to school (Factsheet, 2010, p.1).

*Umh, I decided to stay in school, because my mother didn't know that I was pregnant. So it would have been hard to just drop out of school, and I was already pregnant and doing well in school, so I did not want to mess that up by leaving school. It would have made my mother really angry. She would have killed me. And anyway, I don't want my*

*child to look back and say “my mother also didn’t complete school”. It’s not right; I want the best for my child, not to be nothing (Nonkululeko, 17).*

A teenage mother’s ability to juggle her role as a mother and scholar is also an important contributor to the likelihood to return to school. If a teenager is well supported, feels comfortable at school, then they will be more likely to return to school than teenage mothers who are not supported (Kaufman et al, 2001). This reflects that instead of government putting in place policies to allow for teenage girls who fall pregnant to return to school, there should be a way to ensure that teachers and learners recognize that right and treat them in a fair manner and not stigmatize them and place unnecessary pressure on them.

Teachers should be in a position to ensure that they do not entrench their ideas of what is normatively accepted, and when it is acceptable for a teenage girl to become sexually active and to parent. This way, their role as teachers and motivators does not conflict with the policy on pregnant teenage girls.

### **6.3 Reasons for leaving school: Accounts of seven teenage mothers**

While South Africa’s education policy allows teenage mothers to return to school, contrary to this policy, many teenage girls continue to leave school after the pregnancy. Most importantly, researchers have discovered that some teenage mothers do not return to school because of financial problems related to going back to school and family. According to Luttrell (2003) and Macleod (2011, cited in Shefer et al, 2013 p.1), the context of teenage pregnancy is shaped by a wide range of discourses relating to teenage sexuality, pregnancy and motherhood.

In addition, young women from deprived areas where there are fewer resources are usually the ones in dire need of parenting guidance and support to ensure that they are not disadvantaged by the birth of the child. Panday et al (2009, cited in Factsheet 3, 2010 p. 01) have argued that only a third of teenage mothers return to school after the pregnancy. This is evident in the conversation with one of the participants below, who had to drop out of school because no one was there to take care of the child for her.

*Nomathemba-I had to stop going to school because I had to take care of the child. That was a painful time for me but I had to stop.*

*Interviewer: ok, did you ever think about going back?*

*Nomathemba: I used to, but now I think it's too late now. Now I just think about my wellbeing and my children.*

*Interviewer: why do you think it's too late now?*

*Nomathemba: Umh, I just don't think about it anymore. I am okay working where am working.*

It is evident from the conversation with Nomathemba, that returning to school after a pregnancy is not a given. Not everyone has the support networks necessary for the educational attainment of the teenage mother.

Furthermore, researchers have found that young women between the ages of 14 and 19 are more likely to fall pregnant if they drop out of school, than those who stay in school. Furthermore, young people who leave school are more likely to engage in risky sexual behaviour, which may lead to pregnancy and contracting HIV (Hargreaves et al. 2007; Lloyd et al 2008, RHRU 2003; cited in Factsheet, 3, 2010, p. 2. This is evident in Bongiwe's story, as she explains how she fell pregnant after she had dropped out:

*I stopped going because my mother could no longer afford to take me to school. I left school before I had the baby; I got the baby when I was already at home (Bongiwe, 17).*

In addition, school-dropout often precedes pregnancy as more teenage girls fall pregnant after having left school. Many teenagers who drop out of school often do not return because of the disengagement they had with school even before they dropped out, and their academic performance while in school also plays a role in the likelihood that the teenager may drop out (Factsheet 3, 2010). As discussed in Factsheet 3 (2010, p. 3) for every year that a teenage girl is out of school, chances of her returning decrease.

*I did not have anyone to pay my school fees for me. I was living with my uncles at home, so when I fell pregnant no one could pay for me. So I dropped out. I also didn't know who I would leave my child with (Thandeka, 17)*

According to Grant and Hallman (2006), returning to school after pregnancy depends on specific circumstances including whether there is a caregiver for the child and if they are able to share or relinquish childcare responsibilities. Some researchers have drawn a link between young women's economic status, family structure and labour demands on the young woman's likelihood to drop out of school. In addition, young women who have a child shortly after the



first birth are less likely to succeed in school if they return (Grant and Hallman, 2006, p.6). These findings suggest that teenage mothers' likelihood to return to school is influenced by a number of important factors. Understanding these different factors and personal situations is important in order to come up with interventions that can help teenage mothers cope well with school and help inform policy.

*No, I dropped out of school when I realised that I am pregnant. I was feeling so irritable and I was always distracting the other kids in the class, and I decided to drop out.*

*Interviewer: what do you mean you were distracting the kids in class, how?*

*Bongiwe: I think I was bitter because I had already given up on finishing school. Having the child set me back mentally as well, because I used to go to school for the sake of going. I didn't want to be at school anymore when I found out. So I was always saying bad things in class, distracting class concentration among my friends, so I decided to drop out.*

Bongiwe's story is concurrent with studies that have argued that there are significant characteristics that contribute to decisions to drop out of school. Including specific characteristic of girls who decide to drop out of school, which are "girls with poor school performance, girls who have experienced temporary dropout previously, low economic status, family migratory life styles and the consequent vulnerability of girls". Bongiwe relates how she decided to drop out of school because she felt irritable and gave up on completing her schooling. This made her a destructive to the rest of the class as she became disruptive, which led to her decisions to leave school.

It is evident that reasons for leaving school have to do with a myriad of effects and challenges experienced by the teenage mothers. Research and understanding of these factors is important to ensure that government creates a conducive environment for teenage mothers in school, to ensure that they stay in school are able to contribute to the economy of the country later in life. Education and gender constraints in education need to be addressed to ensure that findings suggesting that there are more dropouts in schools among teenage girls, than there are among boys, do not manifest themselves in the lives of especially teenage girls in already disadvantaged backgrounds and communities.

## 6.4 Conclusion

In this study, I explored the experiences of teenage mothers in a rural village in KwaZulu-Natal. Fifteen (15) teenage mothers were interviewed with the intention to understand their experiences of motherhood. The guiding questions for this study were; how do teenage mothers experience motherhood? How do they and family react from the time they discover they are pregnant? What circumstances are conducive for teenage mothers to return to school/ why do teenage mothers return to school? Given the understanding of those who return to school, why do other teenage mothers leave school? The study also investigated the role of social relationships available to teenage mothers. In this section, I discuss my conclusions related to this group's experience of teenage motherhood.

Contrary to the stigma associated with teenage motherhood, some teenage mothers in this study saw teenage motherhood as a positive thing because it taught them responsibility and care. The participants experienced teenage motherhood differently, although there were issues and concerns, which they raised such as stigma, which seemed to affect most of them.

Concerning teenage mothers and family responses to teenage motherhood, most of the participants relayed feelings of disbelief and fear in finding out they are pregnant. It was disquieting to find that many teenage mothers who had found out they are pregnant were not even aware of it. Some stated that they realised signs of vomiting, nausea and irritation, which made them feel that something was wrong. One participant argued that she was not aware until her boyfriend told her that she is pregnant.

Participants also relayed stories of the lifestyles that they believe had led them into bearing children at a young age. Family problems were also among the factors associated with early pregnancy for some of the participants as they relayed issues related to death in the family, moving from family to family and having to live with a boyfriend because of misunderstandings at home. Lack of knowledge about sex and contraceptives proves to be one of the challenges teenage mothers are faced with. Almost half the sample of participants argued that they were not aware that they would fall pregnant because they were not planning to have a baby, indicating the idea that teenage mothers are not aware of sex and contraceptive roles in their lives once they assume sexual intercourse.

The findings suggest that there is a need for health and reproductive services available for teenage mothers to access anytime they need, without the constraints of time that is allocated to health care facilities. Condom use was non-existent among the participants and this gives rise to a concern relating to rising HIV/AIDS infection among young people in South Africa, as knowledge about onset of sexual intercourse and contraceptives was minimal among the participants. One participant argued that although she had been taking her contraceptive pills everyday she continued to experience repeat pregnancies. This is evident that rather than just the knowledge of contraceptives being the problem, knowledge about the use of contraceptives seemed to be an even bigger problem for the participants.

Trust and the need to keep the relationship and make the partner happy was also among some of the reasons for non-use of condoms. Some argued that it is because of the trust they had for their partner that they decided not to utilise condoms. Participants did not seem to do anything about protecting their health when it came to HIV/AIDS as some of them engaged in early sexual activity. An important finding on contraceptive and condom use revealed the importance of educating teenage mothers' on the importance of taking charge in their relationships and being able to negotiate the use of a condom without making their partner feel like it is about mistrust. One participant had multiple pregnancies and it is in her third pregnancy that she acknowledges that she has a problem and needs help. These findings suggest the importance of contraceptive education and knowledge of sex on taking control of one's life.

The consensus among many of the participants is that of pregnancy having taught them a lot of responsibility. Some participants viewed motherhood as a good thing that happened to them as it served to teach them a few lessons about themselves, related to caring and being able to take care of someone else other than themselves. They argued that having a baby has taught them to do things for themselves. One participant argued that it taught her to get up, get herself a job, and not beg her family for money to take care of her child. It was evident from the study however, that not all teenage mothers found teenage pregnancy to have worked in their favour. Some argued that teenage motherhood had exposed them to problems they would not have otherwise experienced had they not had a child. This is critical in debunking the myth that teenage mothers are a homogenous group that experiences the same things and are in the situations they are in because they are delinquent beings. Experiences cited included family members no longer taking care of the teenager and placing more emphasis on the child, and others argued that they felt their parents longer loved them and resented them secretly.

These findings suggest a great need for support for teenage mothers and allowing them a chance to express their experiences in intervention settings. Five participants also expressed concerns about being stigmatised because of their status as teenage mothers. Some specified that this was when they were publicly visibly pregnant, while others indicated that they experienced stigma when they were seen with the child or by people who knew they were teenage mothers.

Some participants argued that they did not think people cared if they were teenage mothers, as long as they were happy while others stressed how differently people were treated because they were teenage mothers, and how sad this made them feel. When it came to decisions on handling schoolwork and taking care of the child, the main reasons participants gave for choosing to stay in school were either to please parents or to ensure that they and their child have a better future.

The importance of education was greatly emphasised among the participants who were still in school and those who returned to school after the pregnancy. These participants present important factors relating to their reasons for staying in school, support being one of the additional ones. Support was seen as an important factor in teenage motherhood as teenage mothers were able to return to school if they had a supportive partner or friend who took care of their other needs: social, financial and taking care of the child.

These findings suggest the need for context specific interventions to help curb teenage pregnancy, which places considerable burdens on teenage mothers. Even though some of the girls who were interviewed emphasised positive aspects of becoming mothers and how this had made them more responsible, becoming a mother seriously disturbs the flow of events of a teenage girl's life. Understanding teenage motherhood and the context under which it occurs is important to ensure that teenage mothers are accepted in schools and receive the necessary support to advance their knowledge and education.

Education about early sexual intercourse is also an important factor as participants in this study, argued that they were not aware that they would fall pregnant. This proves that knowledge and education that we often take for granted has not actually reached many teenagers in rural areas. Designing interventions that would target educating teenage girls about the different side effects and effects of particular contraceptives and the difference between condom-use and contraceptive pills as these protect against different effects. For teenage mothers, interventions related to curbing repeat pregnancies and support for teenage mothers would be helpful advance their transition into motherhood and ensuring they are able to juggle school and studying.

## **Chapter 7**

### **Summary of findings, Concluding remarks and recommendations**

#### **7.1 Introduction**

The aim of this study was to investigate the experiences of teenage mothers in a peri-urban area in Kwa-Zulu Natal. The study focused on understanding the participants' experiences of pregnancy and motherhood, factors leading up to the pregnancy as well as the attitudes of others towards them as pregnant teenagers as well as family reactions to the pregnancy. The study further investigated the participants' experiences of motherhood, specifically understanding that teenage mothers experience some positivity in becoming mothers. Gendered narratives of teenage motherhood are also explored and discussed in the study. The study further explores the experiences of teenage mothers on the schooling system, why some choose to stay in school and the reasons for those that do not stay in school.

#### **7.2 Summary of findings**

The findings of this study revealed that teenage mothers experience pregnancy and motherhood in different ways. It was evident that teenage girls engage in risky sexual behavior that they do not see as a risk to falling pregnant. Half the participants reported not knowing that they were pregnant until the partner pointed it out to them, or until they missed their period or experienced symptoms later. This reflects that there is still a great need to ensure that sex education is integrated into the everyday syllabus and to strengthen the Life Orientation classes for teenage girls, to empower them to understand the implications to unprotected sex and the high risk of pregnancy and HIV infection. Given the statistics released. The attitudes of teenage motherhood as a responsibility only for teenage girls and not boys needs to acknowledge equally, the responsibility of teenage boys in teenage pregnancy.

While studies have shown that half of the children born to teenage mothers are fathered by older men (Jewkes et al., 2001; Landy and Forrest 1995), research needs to investigate ways to ensure that fathers are also equally responsible for consequences of teenage pregnancy. South Africa is riddled with policies that are good on the paper, but fickle on implementation.

Contrary to the attitudes that teenage mothers are a homogenous group of delinquent, unfit parents, the participants in this study revealed experiences of teenage motherhood as having

been positive for some of them. They relayed stories of the ways in which becoming mothers had made them more responsible and caring.

The policy on education in South Africa aims to allow teenage girls the advantage of completing school when they are pregnant, without the problem of expulsion. However, this is not always the case, as often, teenage girls, as evident in the study, are forced to leave school due to circumstances that are not conducive for them to learn, and attitudes of othering that they are subjected to in the school environment.

In terms of participants who decided to stay in school, findings suggested that schoolteachers' attitudes towards them, which were motivating, allowed an environment for them to stay in school and work harder. Participants who were already doing well academically, before they fell pregnant seemed to receive more support from teachers during and after the pregnancy.

The study also found that teenage mothers who decided to leave school did so because of financial and social constraints that did not allow them to complete their schooling. Such constraints ranged from not having anyone to take care of the child, having to handle schoolwork and taking care of the child which put more pressure on them. They also experienced attitudes from family members, which were not conducive to them completing school.

### **7.3 Concluding remarks**

This study investigated the lived experiences of teenage mothers in a peri-urban area in Kwa-Zulu Natal. The study explored the risky sexual behavior that teenage girls engage in that they do not necessarily see as a prerequisite for teenage pregnancy. The study further investigated the experiences of teenage mothers in school and those who opted to leave school upon discovering the pregnancy. It is evident from the findings that education plays a key role in the way in which most of the participants see their future. They continue to reflect on the value of education in ensuring that they receive a bright future, not only for them but also for their children. This study further showed that while education policy allows teenage mothers to return to school during and after the birth of the child, attitudes of teachers and learners may not be conducive and hence lead to teenagers opting to drop out of school. The study further found that some of the participants received positive encouragement from their teachers allowing them to make the decision to stay and continue with their education.

The access to contraceptives and use of these by the participants was also explored, with findings reflecting that teenage girls are still unable to access contraceptives, due to barriers mainly due to attitudes of healthcare staff at clinics as well as times with clinics clashing with the teenage girls school times. Some of the teenage girls argued that negotiating condom use was also a barrier due to them not wanting to anger their partner who may think they are asking for condoms because they do not trust him.

There is a need to ensure sex education in school, not only through the Life orientation classes, but to find a way to integrate this into regular classes as well. There is also a need to strengthen the existing Life Orientation classes to ensure that teenage girls and boys equally get to understand the responsibility that pregnancy has n both of them

It is evident that teenage pregnancy consequences and those of raising the child often fall on the teenage girls and the boys are left out of the stigma and associated attitudes. This needs to change to ensure that fathers are also part of the consequences that are experienced by teenage mothers.



## 7.4 Recommendations

In the description of teenage mothers experiences of teenage motherhood in KwaZulu-Natal; their experiences of motherhood, stigmatisation and the reasons that encourage teenage mothers to stay in school, it is evident that there is a need to undertake a study on the teenage fathers and the fathers who impregnate teenage girls. It would be useful to investigate how they construct their everyday realities in the midst of the realities constructed by these teenage mothers. This would benefit in understanding whether teenage fathers who father children with teenage girls do think of the responsibilities that teenage girls have to deal with when they are pregnant. It would also be interesting to understand what the implications are for the teenage fathers in their own families.

The study would uncover the reasons for the “silence” assumed by teenage fathers. While Bhana and Swartz (2010) have argued for the value that teenage fathers place on fatherhood and their experiences of finding out they are fathers, it would be beneficial to conduct a similar study in Kwa-Zulu Natal, as this is the province with higher levels of HIV infections. Understanding how teenage fathers construct fatherhood and responsibility would assist with policy that can equally deal with not only pregnant schoolgirls, but also school boys who impregnate these girls, to come up with common ground that does not stigmatise the teenage girls in the process.

While government has introduced policy that allows teenage girls to stay in school during/ after the pregnancy, this is not always easy for the participants, as they have reflected. It would be beneficial for government to conduct road shows with schools, to ensure that their own moral beliefs of constructs of what is relevant behavior does not conflict with what this policy wants to achieve. That way, gender equality and fairness is achieved for teenage girls who find themselves pregnant and in schools.

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**Appendices: Appendix A**

**LETTER TO CHIEF -MZINGAZI VILLAGE**

Mzingazi Agri Village

Richards Bay

3900

Dear Chief

**REQUET FOR PERMISSION TO UNDERTAKE RESEARCH ON TEENAGE PREGNANCY AND MOTHERHOOD IN YOUR AREA-MZINGAZI AGRI VILLAGE.**

My name is Nothile Dlamini. I am a Researcher undertaking studies as a Masters student at the University of Stellenbosch. I am interested in undertaking a study in your area, entitled: *Teenage motherhood “is it so bad?” A case study of teenage mothers in peri-urban KwaZulu-Natal*. The study will mainly be focused on conducting semi-structured interviews with teenage girls in your area as a follow-up from a study undertaken last year as part of the honours project. I understand that I need to gain permission from you to conduct this study as this is much more in-depth than the honours project and your permission will be greatly appreciated. I may also need to interview some people from the nearest clinic in the area.

I am happy to make the research report available to the community should this be needed. Looking forward to working with you on this great project.

Yours faithfully

Nothile Dlamini

University of Stellenbosch

Cape Town

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Cell: 0605834518



## **Appendix B**

### **CONSENT FORM**

Hello, my name is ..... I am from the University of Stellenbosch and I am asking people from your community to answer some questions, which we hope will benefit your community and possibly other communities in the future.

I am a Masters student at the University of Stellenbosch and I am conducting research regarding teenage motherhood in your community. I am interested in finding out more about teenage mothers and how they cope with being teenage mothers. I am carrying out this research to help increase knowledge on the complexities involved in being a teenage mother.

I have chosen you because I have been told that you might be interested in taking part in the study. I am doing this in a number of different households in the area, and after combining all people's answers, I hope to learn more about teenage motherhood, which will help me make useful recommendations to the relevant authorities and organisations who work with improving access to services for teenage mothers.

Please understand that you are not being forced to take part in this study and the choice whether to participate or not is yours alone. However, I would really appreciate it if you do share your thoughts with me. If you choose not take part in answering these questions, you will not be affected in any way. If you agree to participate, you may stop me at any time and tell me that you don't want to go on with the interview. If you do this there will also be no penalties and you will NOT be prejudiced in ANY way.

I will not be recording your name anywhere on the questionnaire and no one will be able to link you to the answers you give. Only I will have access to the unlinked information. The information will remain confidential and there will be no "come-backs" from the answers you give.

The interview will last around 30 minutes .I will be asking you questions and ask that you are as open as possible in answering these questions. Some questions may be of a personal and/or sensitive nature. I will be asking some questions that you may not have thought about before,

and which also involve thinking about the past or the future. I know that you cannot be absolutely certain about the answers to these questions but I ask that you try to think about these questions. When it comes to answering questions there are no right and wrong answers. When I ask questions about the future I am not interested in what you think the best thing would be to do, but what you think would actually happen.

If I ask you a question which makes you feel sad or upset, I can stop and talk about it a little.

If possible, I would like to come back to this area once I have completed the study to inform you and your community of what the results are and discuss our findings and proposals around the research and what this means for people in this area.

**If you are harmed or have any concerns**

If you feel that you have been harmed in any way by participating in this study, please call the Department of Sociology And Social Anthropology on this no: Prof. R. Pattman. Tel: 021 808 2940.[This introduction and consent form as well as the questionnaire will be translated (and back translated) into the isiZulu which is the first language of all participants of participants].

## CONSENT

I hereby agree to participate in research regarding ..... I understand that I am participating freely and without being forced in any way to do so. I also understand that I can stop this interview at any point should I not want to continue and that this decision will not in any way affect me negatively.

I understand that this is a research project whose purpose is not necessarily to benefit me personally.

I have received the telephone number of a person to contact should I need to speak about any issues which may arise in this interview.

I understand that this consent form will not be linked to any questionnaire, and that my answers will remain confidential.

I understand that if at all possible, feedback will be given to my community on the results of the completed research.

.....

**Signature of participant**

**Date:**.....

I hereby agree to the tape recording of my participation in the study

.....

**Signature of participant**

**Date:**.....

## **Appendix C**

### **QUESTIONS FOR FIELDWORK**

*Introduce yourself. Describe study. Consent forms – please ask participant to sign one and allow them to keep one. Sign register*

- Check that they signed the consent form
  - Check that they understood the consent form
1. Tell me about yourself. Age, where you live, schooling, education level, your child, current occupation. etc
  2. Tell me about the time you became a mother, what happened, who was there to help you, how are you coping with the baby, who is supporting you financially.
  3. Were you on any birth control (contraceptives) that time? Tell me more.
  4. How do you feel about being a teenage mother now?
  5. How do you think people in your community feel about you being a mother? Do they treat you different etc.
  6. Where is your child? Who does the child live with etc?
  7. Do you take the child to the clinic often? Tell me about that experience.
  8. How is having a child and going to school working for you?
  9. Do you experience any problems for being a teenage mother in school/ in the community? Tell me more
  10. If you were to describe for me the time before you became a teenage mother and now that you are a teenage mother, tell me what has changed and how has it all changed?

Tell me about the people in your life, your friends, your family and your school teachers.

11. Have you had any change in attitude or behaviour since you had a child and now? Please explain.
12. Why did you decide to stay in school? Or to leave school if not in school.
13. Tell me about your access to education? Are you happy at school? If not why not. If not at school, why not?
14. How do you juggle being in school and taking care of your child?
15. Tell me about your boyfriend. Where is he now? Does he help take care of the baby?
16. What is your greatest wish for your child's future etc?
17. Is there any other way that you make money and take care of your child besides work?
18. If you were to picture yourself five years back? What would you have done differently?
19. What do you want to do in five years' time?
20. What advice would you give a young girl who has not been a teenage mother?

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<sup>i</sup> Sugar daddy is a term widely used in South Africa to refer to older men who date young girls. The term originates from the economic/ financial gains that a young girl would get from the so called sugar daddy.