AN EXPLORATION OF ADOLESCENT FATHERS' NEEDS, ATTITUDES AND BELIEFS REGARDING FATHERHOOD IN LIMPOPO

by

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submitted in accordance with the requirements

for the degree of

MASTER OF ARTS

in the subject

NURSING SCIENCE

at the

UNIVERSITY OF SOUTH AFRICA

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FEBRUARY 2017

DECLARATION

I declare that **AN EXPLORATION OF ADOLESCENT FATHERS' NEEDS, ATTITUDES AND BELIEFS REGARDING FATHERHOOD IN LIMPOPO** is my own work and that all sources that I have used or quoted have been indicated and acknowledged by means of complete references and that this work has not been submitted before for any other degree at any other institution.

10 February 2017

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SIGNATURE   **DATE**

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AN EXPLORATION OF ADOLESCENT FATHERS' NEEDS, ATTITUDES AND BELIEFS REGARDING FATHERHOOD IN LIMPOPO

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ABSTRACT

Purpose of the study: The purpose of the study was to explore the needs, attitudes and beliefs of adolescent fathers regarding fatherhood in Limpopo Province and to recommend health promotion initiatives that will address the unique needs of this group to enable them to manage this phase of their lives effectively.

The setting: The study was conducted in Unit F clinic situated in the Lepelle Nkumpi, a local municipality located in the Capricorn District.

Data collection methods: The study utilised qualitative, exploratory and descriptive approach. Non-probability purposive sampling was used to recruit adolescent fathers in Lepelle Nkumpi municipality to participate. Data were collected through semi-structured in-depth interviews to allow open and free expression. Interviews were tape recorded and transcribed.

Study population: The population of the study was adolescent fathers between 13 and 19 years of age belonging to the Bapedi ethnic group, whose babies' mothers were also adolescents.

Expected outcomes: Participants' beliefs and attitudes regarding fatherhood were highlighted. Their unique needs were identified and recommendations made for the health and social development practitioners on measures to address their needs.

KEY CONCEPTS: *Adolescent fathers, attitudes, beliefs, fatherhood, needs.*

ACKNOWLEDGEMENTS

Dedication

This study is dedicated to my husband and children, Stanley, Lerato, Lethabo and Lesego.

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LIST OF ABBREVIATIONS

DoH   Department of Health

FFRB   Fragile Families Research Brief

HSRC   Human Sciences Research Council

LO   Life Orientation

PHC   Primary Health Care

SACG   South African Child Gauge

Stats SA   Statistics South Africa

CHAPTER 1

ORIENTATION TO THE STUDY

1.1   INTRODUCTION

Fatherhood role is a complex but also, a very meaningful and influential part of a child's development (Hermansen, Croninger & Croninger 2015:500). The transition to fatherhood research highlights the unique experiences of 21st century fathers as they navigate the changing landscape of fatherhood (Carlson, Kendall & Edleson 2016:182). The task of being a father at an early age signifies a major change in the life of an adolescent, hence adolescent fathers face a unique set of challenges, including stereotypes that label them as absent or uncaring (Weber 2012:901). Moreover, the primary focus of family-centred child welfare services continues to be oriented toward adolescent mothers (Lemay, Cashman, Elfenbein & Felice 2010:221). Issues pertinent to adolescent fathers are not given much consideration. Despite the attention they receive and teen fathers have been noticeably absent from the discussions (Weber 2012: 902). Therefore, there is a need to understand how adolescent fathers transition to parenthood and take on the responsibility of rearing a child but, more importantly, what their needs are in order for the health and social development sector to design relevant health promotion programmes. This chapter gives an overview of the study, the background and research problem, including the methods used. The methodology is elaborated in the next chapter.

1.2   THE RESEARCH PROBLEM

Grove, Gray and Burns (2015:511) define a research problem as an area of concern in which there is a gap in the knowledge base needed for nursing practice.

1.2.1 Background to the problem

Adolescence is a challenging developmental period marked by profound physical, psychological and social changes. This is a time of pubertal change, the development of abstract thinking, increased self-consciousness, and changes in self-concept. It is a

developmental transition between childhood and adulthood entailing major physical, cognitive and psychological changes (Papilia & Feldman 2011:468). Being a father during this stage represents major changes that make adolescent fathers vulnerable; they struggle with issues of adolescence and this is complicated by challenges associated with becoming a father. In literature, adolescent parenthood is primarily conceptualised from a deficit perspective; adolescent parents are characterised by the extent to which they do not meet the ideal conditions for pregnancy and parenthood (Fletcher & Wolfe 2012:182-183; Paschal, Lewis Moss & Hsiao 2011:64).

Since few adolescent fathers share a household with their children the paternal involvement is known to decline over time. They are frequently less involved with their children than more mature fathers (Lemay et al 2010:222). They are also not taken into account by service providers, including health practitioners and researchers (Lemay et al 2010:221). However, results from the study 'Fragile Families and Child Wellbeing' by Fragile Families Research Brief (in Lemay et al 2010:222), showed that 93% of single mothers interviewed reported a desire to have the father involved in raising their child (Lemay et al 2010:222). The presence of the father for his child in most cases improves the social and psychological status of the father, mother and the child (Hermansen et al 2015:499).

In South Africa, the perspective of adolescent boys on fatherhood is particularly interesting because their "identities as men are being shaped in a situation of father's absence". Ratele, Shefer & Clowes (2012:553) argued that the absence of biological fathers in South Africa has been constructed as a problem for children of both sexes but more so for boys and they are constructed as either absent or 'bad'. A study conducted by the South African Child Gauge(SACG) (2010 in Meinties & Hall 2011:80) reported that in Limpopo Province 46,3% of children stay with mothers only whilst 1,5% live with the father. This implies that there are many children who grow up without fathers.

Limpopo consists mostly of Bapedi, vhaTsonga and Venda cultures. The Bapedi culture does not permit an adolescent father to be part of the parenting role; they are regarded in poor light in that they have ruined the future of a girl child (own experiences). Lepelle Nkumpi is situated in the Limpopo Province, about 55km south of Polokwane city, and is mainly rural. A study conducted by the Department of Health Limpopo (2011:31) reported that 57 pregnancies were reported at one of the schools in Limpopo during

January 2010. Provincially, out of the 94,378 babies born at Limpopo's public health facilities in 2010, teenage mothers accounted for 10,001 births. A study conducted by the Human Science Research Council called 'Teenage Tata' in 2013 found that 26% of South Africa's adolescent fathers were still at school and 40% were unemployed (Swartz, Bhana, Ritcher & Versveld 2013:1-2). Statistics from one of the Lepelle Nkumpi municipality level one hospitals showed that 290 teenagers gave birth between 21st August 2012 and 31st December 2012 (Maternity Register Book:2012). It is important to understand how adolescent fathers make sense of transitioning to parenthood. First time parents are more successful when they have completed their other transitions to education, to work, to citizenship and marriage (Kiselica & Kiselica 2014b:285).

1.2.2 Statement of the research problem

In 2012, Limpopo recorded a 10.2% increase in teenage pregnancies, and this was the highest rate across South Africa (Statistics South Africa 2013:30). One municipality hospital statistic showed that 290 teenagers gave birth between 21st August 2012 and 31st December 2012 (Maternity Register Book 2012).The researcher did not have actual statistics or percentage of adolescent fathers involved. However, Woolston (2014:3) posits that approximately 30%-50% of children born to adolescent mothers also have an adolescent father.

Adolescent fathers represent a vulnerable population with many characteristics similar to those of adolescent mothers (Lemay et al 2010:221). The extent to which a young man is ready for fatherhood and paternally involved tends to be influenced by how he views the father role (Paschal et al 2011:63). The transition from boyhood to manhood takes different forms in different societies; hence, an understanding of the complexities of boys becoming men must integrate their needs, attitudes, and beliefs regarding fatherhood (Lemay et al 2010:222). An understanding of how adolescent fathers regard their role is influenced by considering their needs and beliefs regarding the situation.

Although extensive and a variety of intervention programmes have been implemented for adolescent mothers, research focused on adolescent fatherhood continues to be limited, and research examining the psychological well-being of adolescents confronting fatherhood still lags far behind, hence the need for this study (Hunt, Caldwell & Assari 2015:3078; Lemay et al 2010:222).

1.3   RESEARCH AIM/PURPOSE

The study was intended to explore the needs, attitudes, and beliefs of adolescent fathers regarding fatherhood and to recommend health promotion initiatives that will address the unique needs of this group to enable them to manage this phase of their life effectively.

1.3.1 Research objectives

The study is based on the following objectives:

- To explore the adolescent fathers' beliefs and attitudes regarding fatherhood.
- To identify the unique needs of adolescent fathers.
- To make recommendations to health and social development practitioners on measures to address their needs.

1.3.2 Research questions

The following question guided the study:

What are the needs, beliefs, attitudes of adolescent fathers regarding fatherhood?

1.4   SIGNIFICANCE OF THE STUDY

Exploring adolescent fathers' needs, beliefs and attitudes about fatherhood may add to the nursing practice knowledge base. There will be a new understanding of the needs of this vulnerable group. The departments of Health and Social Development may be able to provide specific adequate support to enable them to understand the responsibilities and participate in the upbringing of their children. Service providers could improve the lives of adolescent fathers and educate them to avoid recurrence of the problem. Engaging with adolescent fathers may encourage a positive father-child relationship and facilitate positive attitudes among different organisations that provide outreach health and social services to young fathers.

1.5   DEFINITIONS OF KEY CONCEPTS

- **Fatherhood**

Fatherhood is the state or responsibility of being a parent (*Collins English Dictionary* 2014, sv "fatherhood"). This study explains fatherhood as the beliefs and attitudes of adolescent fathers about being a father to their children.

- **Adolescent father**

The concept refers to a young father who is between thirteen and nineteen years old (Lemay et al 2010:221). This study defines 'adolescent father' as a young man between 13 and 19 years who is a father and whose partner is also an adolescent. Focus is on mid and late adolescent fathers.

- **Beliefs**

According to Nilsson (2014:1), beliefs are ideas that an individual perceives as true and that constitute a large part of a person's knowledge of the world. This study refers to beliefs as how adolescent fathers interpret and understand fatherhood and their role as fathers.

- **Attitudes**

According to Cherry (2016), attitudes are a set of emotions and behaviours towards a particular object, person or event and are often the result of experience or upbringing. Attitudes within the context of this study mean a way of thinking and views about fatherhood and responsibilities as a father.

- **Needs**

Are things that are necessary to live, and can be objective, subjective and physical (Maslow 2009). In this study, needs refer to what adolescent fathers may verbalise as being what they need to manage this stage of their lives effectively.

- **Roles**

Roles are the parts played by a person in a particular social setting, influenced by his expectation of what is appropriate (*Collins English Dictionary* 2014, sv "role"). In this study, roles are referred to as the function adolescent fathers think they are responsible for during fatherhood.

1.6   RESEARCH METHODOLOGY

LoBiondo-Wood and Haber (2010:581) define research methodology as a controlled investigation and measurement of the means of gathering and analysing data.

1.6.1 Research design

The study utilised a qualitative, explorative and descriptive design. Qualitative studies are often conducted in natural settings, use data that are words or text rather than numerical in order to describe the experiences that are being studied (LoBiondo-Wood & Haber 2010:584). The descriptive research design is defined as an attempt to describe what is happening in more detail, filling in the missing parts and expanding understanding (Babbie & Mouton 2012:271). An explorative design investigates the full nature of the phenomenon, the manner in which it is manifested, and the other factors to which it is related (Polit & Beck 2012:727). Details are given in chapter 2.

1.6.2 Population

Population is a group of people or things that share one or more characteristics (Weathington, Cunningham & Pittenger 2010:72). The target population is explained by Saks and Allsop (2013:173) as the population 'of interest' to the proposed study, utilising the accessible population. The population of interest was adolescent fathers between 13 and 19 years of age belonging to the Bapedi ethnic group whose baby mothers were also adolescents. Therefore, the target population was mid to late adolescents.

1.6.3 Sample and sampling methods

According to Saks and Allsop (2013:476), sampling refers to the selection of specific research participants from the entire population or a process by which a sample is taken to allow defensible inferences to be drawn from the data and applied to populations. The non-probability sampling method was utilised in line with qualitative methods. The researcher was more concerned with understanding the experience of special segments in a view to explore the needs, beliefs and attitudes of the adolescent fathers regarding fatherhood. Criterion purposive sampling was employed to ensure that participants selected would provide rich data. Purposive sampling is based on the belief that the researchers' knowledge about the population can be used to hand-pick sample members (Botma, Greeff, Mulaudzi & Wright 2010:201).

The sampling strategy was appropriate to the study as it allowed the researcher to select participants who were knowledgeable about the problem as they were involved in fatherhood. Snowballing was employed to recruit participants because it was difficult to get the target population.

1.7   RESEARCH SETTING

The setting of the study was in a natural setting, where the population of interest was located, that is, one clinic and the three secondary schools situated in the Lepelle district, Lebowakgomo circuit. The population of interest was targeted from the clinic through their adolescent partners who attended the baby wellness clinic.

1.8   DATA COLLECTION

Data collection is the process of gathering information that is relevant to address the research problem (Polit & Beck 2012:725). Data collection is a means to achieve the objectives and fulfil the purpose of the study. In this study, the semi structured individual interviews were conducted. This method of data collection was appropriate for exploring the needs, beliefs and attitudes of adolescent fathers regarding fatherhood because it allowed the participants to talk about a particular aspect of their lives freely and openly (Polit & Beck 2012:537). The data collection and analysis are discussed in chapters 2 and 3.

1.8.1 Data collection instrument

A self-developed interview guide was developed and used to explore and elicit the attitudes of the adolescent fathers regarding fatherhood. Measures were taken to make the participants feel at ease and free to speak about their beliefs, needs and attitudes. The central probe was "Tell me about the needs, attitudes and beliefs of adolescent fathers regarding fatherhood." This was followed by further in-depth probing. Participants were allowed to use any language they felt would capture the essence of their feelings. Some used their local language.

1.8.2 Data analysis

In qualitative research data analysis involves management of raw, non-numerical data, and the analysis is conducted concurrently with gathering data, making interpretations and writing of reports (Leedy & Ormrod 2010:153). In this research, then, the data obtained from the adolescent fathers were analysed according to the steps proposed by Leedy and Ormrod (2010:153). These steps are discussed in chapter 2.

1.9   MEASURES TO ENSURE TRUSTWORTHINESS

Polit and Beck (2012:770) explain trustworthiness as the degree of confidence qualitative researchers have in their data, assessed using the criteria of credibility, dependability, confirmability and transferability. These four criteria for trustworthiness represent parallels to the positivists' criteria of internal validity, reliability, objectivity and external validity, respectively (Pilot & 2012:540; Streubert & Carpenter 2011:48). Measures to ensure trustworthiness will be discussed in detail in chapter 2.

1.10   ETHICAL CONSIDERATIONS

Ethical issues and standards must be critically considered in both quantitative and qualitative research, therefore nursing researchers have a professional responsibility to design research that upholds sound ethical principles and protects human rights (Streubert & Carpenter 2011:56).

Participants were informed of the nature and purpose of the study, the procedures to be followed and how the results will be published. Informed assent was first sought with guardians as participants were minors. Participants had confirmed their participation by attaching their signatures on the assent forms before the study and were also informed about their option to withdraw from the study at any time, if they so wished. Details will be provided in chapter 2.

1.11   SCOPE AND LIMITATIONS

There are many dimensions of adolescent fatherhood. However, this study focused only on needs, beliefs, and attitudes of adolescent fathers regarding fatherhood. The difficulties of identifying the target population resulted in a modest sample size. However, the researcher made concentrated efforts to find the appropriate sample that yielded in-depth data. The voluntary participation in the study might have influenced the number of participants.

1.12   OUTLINE OF THE STUDY

Chapter 1: Research proposal

Describes the problem and its background, the purpose, significance of the study and the research design and methodology, and defines the key terms.

Chapter 2: Research methodology

The chapter describes the research design that will be utilised in the study. It will further describe the setting and population of the study, which includes the sample, sampling methods, data collection, measures to ensure trustworthiness and ethical considerations.

Chapter 3: Data analysis

This chapter discusses the analysis of data and provides the research findings.

Chapter 4: Integration of findings and literature

Chapter 4 provide the discussion of the study findings and literature control and elaborates on how the findings were interpreted.

Chapter 5: Conclusion, limitations and recommendations

This final chapter provides the overview of the study including the concluding remarks, the recommendations and limitations identified during the study.

1.13 CONCLUSION

The chapter included the background and rationale upon which the research is based, the problem statement, the research and methodology, data collection and analysis, measures of trustworthiness and ethical considerations as well as the significance of the study that will guide the researcher. Key terms were defined. The next chapter discusses the research design and study methodology.

CHAPTER 2

RESEARCH DESIGN AND METHODOLOGY

2.1   INTRODUCTION

This chapter presents the research design and method. It highlights the population, sampling, data collection approach and methods, ethical considerations as well as the trustworthiness of the study. The researcher presents in-depth descriptions of adolescent fathers' needs, beliefs and attitudes about fatherhood. The non-probability sampling method was used for the selection of participants by applying non-random procedures (Polit & Beck 2012:734). Data were collected by using semi-structured methods such as in-depth interviews. Data were managed following the steps reviewed from Leedy and Ormrod (2010:153). Ethical standards for a qualitative study were considered.

2.2   PURPOSE OF THE STUDY

The purpose of the study was to explore the needs, attitudes, and beliefs of adolescent fathers regarding fatherhood in Limpopo Province and to recommend health promotion initiatives that will address the unique needs of this group to enable them to manage this phase of their life effectively**.**

2.3   RESEARCH DESIGN

Research design is an overall plan for addressing a research question, including specifications for enhancing the study's integrity (Polit & Beck 2012:487). An explorative and descriptive design used. An explorative design investigates the full nature of the phenomenon, the manner in which it is manifested, and the other factors to which it is related (Polit & Beck 2012:727). In the context of this study, the strength of the exploratory design was the ability to identify what was different and what was similar among the adolescent fathers (Saks & Allsop 2013:404). The descriptive research design is defined as an attempt to describe what was happening in more detail, filling in

the missing parts and expanding understanding of adolescent fatherhood (Babbie & Mouton 2012:271). The goal of this qualitative research was to describe ordinary experiences that included perceptions, beliefs and attitudes of adolescent fathers regarding fatherhood. The approach enabled an in-depth understanding of adolescent fathers' positions regarding fatherhood and the support they needed from the family, community, and health and social services.

2.3.1 Qualitative research

Qualitative research is a research approach that allows researchers to explore and understand the meaning individuals give to a social or human problem (Creswell 2014:4). Moule and Goodman (2014:209) explain qualitative research as an approach that facilitates the exploration of relationships and human experience within the research setting. In a qualitative study the researcher conducts a study in a natural setting that is familiar in terms of the environment by building a complex, holistic picture with participants and reports their detailed views regarding the study problem (Tappen 2016:43). The researcher was able to collect data in the natural or real world. The participants were followed in their natural environment which was the school and community clinics (Moule & Goodman 2014:208). Qualitative research allowed the researcher to focus generally on the participants' views, attitudes, beliefs, experiences and perceptions.

Holloway and Wheeler (2010:3) cited that qualitative researchers focus on the 'emic' perspective, i.e. the views and perceptions of the people involved in the research. The 'emic' perspective is explained as the subjective nature of social reality, which provides insight from the participants' perspectives (Tappen 2016:55). A qualitative design allowed the researcher to listen, question and ask questions with the intention to obtain rich data on participants' needs, attitudes and beliefs on fatherhood. Participants were allowed to express their feelings freely, thereby allowing the findings to reflect their perceptions.

Qualitative research was appropriate for this study as it promoted flexibility in thinking and in the research process; the researcher was less likely to become stuck in conventional thinking and could adjust the approach in the interpretation of data (Saks & Allsop 2013:27). The researcher obtained insight from the participants' thinking

concerning fatherhood. The voices of both the researcher and the participants were reflected in thick descriptions. This research method enabled the researcher to obtain detailed information from the adolescent fathers, and allowed exploration of their attitudes, beliefs and needs.

2.3.2 Exploratory design

An exploratory design investigates the full nature of the phenomenon, the manner in which it is manifested, and the other factors to which it is related (Polit & Beck 2012:727). The strength of exploratory design was the ability to identify what is different and what is similar about adolescent fathers in the region (Saks & Allsop 2013:404). Little was known about this phenomenon; therefore, by utilising the exploratory method, the study was able to delve deeper to gain an understanding of issues related to their unique needs, beliefs and attitudes about fatherhood, including the underlying factors that influenced those beliefs and attitudes. Exploratory research helps the researcher to answer the research questions and provides information needed to achieve the purpose of the study (Polit & Beck 2012:728).

Babbie and Mouton (2012:270) state that explorative design is conducted to satisfy the eagerness and the desire for better understanding, to test the feasibility of the researcher to undertake a more extensive study, to develop the methods to be utilised in the study, to derive the central concepts of the study and to determine priorities for future research. This approach enabled an in-depth understanding of adolescent fathers' position regarding their responsibilities towards the children as well as their unique needs and the support they might need. Exploratory research was appropriate for this study as it is designed to shed light on the various ways in which a phenomenon such as adolescent fatherhood is manifested (Polit & Beck 2012:728).

2.3.3 Descriptive design

The descriptive research design is defined as an attempt to describe what is happening in more detail, filling in the missing parts and expanding understanding (Babbie & Mouton 2012:271). Descriptive research provides an accurate account of characteristics of particular individuals, situations, or groups (Grove et al 2015:33). It describes the phenomenon in real-life situations. The use of descriptive design was justified by the

fact that the views and beliefs of adolescent fathers were systematically described and the unknown needs were articulated. The researcher was able to discover new meanings from what was articulated by the participants. The researcher described and presented complete data about adolescent fathers' perceptions regarding fatherhood.

2.4   RESEARCH METHODS

Research methods refer to data gathering that include sampling, role of the researcher and methods for data gathering, data analysis and ensuring rigor in research (Botma et al 2010:199).

2.4.1 Research setting

The research setting is an environment in which the study is conducted (Burns, Grove & Gray 2011:40). The study was conducted in a natural setting; that is, the environment which the population of interest was located, Unit F clinic and the three secondary schools situated in the Lepelle Nkumpi, a local municipality located in the Capricorn district in Limpopo Province. Its villages include Lebowakgomo, Zebediela, Mathabatha and Mafefe. It is situated south of Polokwane municipality and has a population estimation of 230 350 thousand (Lepelle Nkumpi Municipality 2017:1). The area is mainly rural.

The population of interest was targeted from the identified clinic and three secondary schools in the Lepelle municipality through their adolescent partners who attended the baby wellness clinic. The approval was granted by the Education Circuit Manager in Lebowakgomo. The participants were invited to the clinic for interviews.

Figure 2.1 Map of Lepelle Nkumpi Municipality

(Source: Lepelle Nkumpi Municipality 2017)

2.4.2 Population

Grove et al (2015: 46) define the population of a study as all the elements (individuals, objects or substances) or aggregation of cases that meet certain criteria for inclusion in which the researcher is interested. The population for this study was adolescent males who were fathers and were between ages 13 and 19 years, who belonged to the Bapedi ethnic group and whose babies' mothers were also adolescents. Therefore, the target population was mid to later adolescents.

Eligibility criteria for the inclusion in the study were:

- Adolescent fathers between the age of 13 and 19 years.
- Their partners were also adolescents.
- Adolescent Bapedi fathers residing within the Lepelle district and its rural areas.
- Willingness to participate in the study and guardians providing informed consent.

Exclusion criteria

- Adolescent fathers who were above 19 years

2.4.3 Sampling

Sampling is the process of selecting a portion of the population to represent the entire population (Polit & Beck 2012:275).The sample refers to a subset of the population and a group of individuals that represent a broader population (Grove et al 2015:46). Non-probability was utilised using non-random procedures (Polit & Beck 2012:734). Brink, Van der Walt and Van Rensburg (2012:135) described non-probability sampling as more convenient and economical and uses the judgment of the researcher to select the subjects who know most about the phenomenon. Qualitative research uses a principle of substantial criteria as specific features of an individual or group are relevant for deciding to include the individual in the sample (Flick 2014:168).

The study intended to purposively gain personal accounts from participants who were already adolescent fathers. Purposive sampling is based on the belief that the researcher's knowledge about the population can be used to hand-pick appropriate adolescent fathers (Botma et al 2010:201). Thus, the sample structure was organised around sampling dimensions that had been defined beforehand (Flick 2014:168). The researcher identified adolescent mothers at the baby wellness clinic; those who reported that their partners were adolescents were followed up and invited to the study, while some were recruited when they accompanied their partners to the clinic.

Since it was challenging to recruit participants with characteristics that conformed to the criteria, snowballing was employed to recruit more respondents from local secondary schools. The researcher visited the local secondary schools to recruit participants. Friends and Life Orientation (LO) teachers assisted in the recruitment. The researcher made appointments to meet with them individually to confirm if they met the criteria; if they did, they were invited to participate in the study.

2.4.4 Data collection

Data collection is a systematic process of collecting information from respondents in order to resolve the set research question (LoBiondo-Wood & Haber 2014:577). According to Grove et al (2015:45) the data collection process is a precise, systematic gathering of information relevant to the research purpose, or the specific objectives, question or hypothesis of a study. The researcher used a semi-structured data

collection approach in the form of an in-depth interview, inferring that it will provide an opportunity to allow the participants to talk about their needs, attitudes and beliefs regarding fatherhood, freely and openly (Polit & Beck 2012:537). A Semi-structured interview employs open ended questions and allows freer responses from the participants and allows the interviewer more opportunity to explore answers for clarification or ask for more in-depth clarification (Tappen 2016: 261-262).

The rationale for the approach was that the participants had more power and control over the discussions. Semi-structured methods are more flexible and allow the researcher to identify emergent themes and follow the lead of the participants as to how they construct their understanding on the phenomenon (Streubert & Carpenter 2011:34; Holloway & Wheeler 2010:89). The method was appropriate for this study as it allowed the researcher to meet in person with the participants to elicit in-depth understanding of issues related to adolescent fatherhood. The researcher created time to establish a trusting researcher-participant relationship (Polit & Beck 2012:517; Christensen, Johnson & Turner 2011:159), as this was a very sensitive topic.

2.4.5 Data collection process

The researcher had first met with some participants at the clinic and briefed them about the purpose of the study and invited them for interviews. They were given consent forms for their parents or guardians to sign to enable them to participate in the study. It was critical at that point to create a trusting relationship with the potential participants to ensure that they returned. Appointments were made only after they returned the consent forms. The purpose of the study was explained and they were provided with the information leaflet. The consent forms were signed. The researcher met with participants on a selected date at the clinic. The staff members of the clinic were made aware of the interviews. A private room was prepared for the interviews and the seating arrangement was made comfortable for the participants. An audio recorder was prepared.

2.4.6 Conducting the interviews

The room was welcoming and there were some refreshments as some were coming directly from school and the researcher assumed that they could have been hungry. The seating arrangement was adjusted to ensure that the researcher and participants were sitting in a way that they could see one another face to face. The participants were made comfortable, and the purpose of the study and their rights were repeated in order to make them relax during the interview. They were reassured that data they shared would be kept confidential. The interview started with general talk about themselves; they were asked to talk about school, home and community to create a relaxed atmosphere. This was followed by the interview using a self-developed interview guide based on the study objectives.

The interview guide ensured that the researcher collected similar types of data from all the participants and that saved time (Holloway & Wheeler 2010:89-90). However, probing was unique to each participant's responses. Measures were taken to make the participants feel at ease and free to speak about their beliefs, needs and attitudes. The style of questioning encouraged the participants to elaborate. This allowed the researcher to understand and interpret adolescent fathers' thoughts and to confirm that what was being said was understood by both interviewer and the interviewee. Participants were allowed to use any language they felt would capture the essence of their feelings. Some used their local language. The researcher allowed the participants to add if there was anything they deemed significant to obtain deeper understanding.

2.5 DATA ANALYSIS

Holloway and Wheeler (2010:281) explain data analysis as an iterative activity that allows the researcher to refine the questions they ask from the data. It is a complex, nonlinear process, systematic, orderly and structured. In qualitative research data analysis involves management of raw, non-numerical data, and the analysis is conducted concurrently with gathering data, making interpretations and writing of reports (Leedy & Ormrod 2010:153).

This form of analysis requires reading through data repeatedly, and breaking the data down by thematising and categorising, and by building it up again in novel ways of

elaborating and interpreting (Leedy & Ormrod 2010:154). Data analysis was done manually and simultaneously with and after data collection until no new meanings or data emerged. The interviews were transcribed verbatim, and audio clips were given to the local linguist to compare the recordings with the transcripts to ensure accuracy. To ensure an audit trail before the final analysis, the audio clips were shared with the supervisor together with the transcripts that were reviewed and corrected by the linguist from the local university.

The researcher analysed data using the data analysis steps described in Leedy and Ormrod (2010:153) as follows:

- The researcher studied the recordings for interviews and transcribed them.
- The researcher read the transcripts to identify the key concepts from what was verbalised by participants.
- Data which seemed to be concrete were derived from aims of the research to develop broad topics and were grouped into codes.
- Coded sections were read repeatedly to stimulate the expansion and transformation of the data. Sections that fitted into the topic were analysed, and similar data were grouped from quotes and classified to develop themes, sub-themes and categories.
- Description of themes was done by developing meanings into sub-themes and categories.

2.6   TRUSTWORTHINESS

Taylor and Francis (2013:197) explain trustworthiness as an alternative term for 'rigor' which must be used to ensure that the successive steps in a study have been clearly undertaken with scrupulous attention to detail so that the findings can be trusted. Polit & Beck (2012:770) explain trustworthiness as the degree of confidence qualitative researchers have in their data, assessed using the criteria of credibility, dependability, confirmability and transferability.

These four criteria for trustworthiness represent parallels to the positivists' criteria of internal validity, reliability, objectivity and external validity respectively (Pilot & Beck

2012:540, Streubert & Carpenter 2011:48). The researcher adopted the following trustworthiness strategies discussed below:

2.6.1 Credibility

Polit and Beck (2012:724) describe credibility as a criterion for evaluating the integrity and quality of the study. The researcher enhanced credibility by using prolonged interviews and being knowledgeable about the research topic. The researcher spent considerable time with adolescent fathers to create a researcher-participant trusting relationship so as to encourage participants to participate freely. The researcher recorded the interviews using an audio recorder that enabled the raw data to be scrutinised by other experts. The researcher used the member checking strategy by summarising, repeating and paraphrasing the participants' words.

2.6.2 Dependability

The concept refers to reliability of collected data; in qualitative studies, it is the criteria used to evaluate the integrity of the study (Polit & Beck 2012:725). The researcher aimed to meet consistency by enhancing the dependability of a study by maintaining a thick description of all data. The processes within the study were reported in detail, and the supervisor reviewed the transcripts and audio tapes to confirm that data was correctly interpreted and analysed by the researcher.

2.6.3 Confirmability

This is the probability that the study findings will have meaning for other people in similar situations. Determining whether the findings are transferable rests with those who might use the findings, and not with the researcher (Streubert et al 2011:49). It provides guarantee that the findings, conclusions and recommendations are supported by collected data and that there is internal agreement between the researcher's interpretation and the actual evidence (Polit & Beck 2012:725).

To enhance confirmability, a detailed documentation of responses of adolescent fathers was done effectively. The audit trail was maintained to show how data eventually lead to the recommendations provided. The researcher ensured that the interpretation of

results was the reflection of the participants' voice and conditions of inquiry, not the researcher's perspectives.

2.6.4 Transferability

It is the degree to which the study findings can be transferred to or have applicability in other settings, and transferred to other participants (Polit & Beck 2012:725). The knowledge acquired in one context will be relevant in another and future researchers will be able to apply certain concepts initially developed by other researchers (Holloway & Wheeler 2010:303). The findings of the study were specific to the Lepelle Nkumpi Municipality. The researcher ensured transferability by selecting information-rich information from adolescents and by providing in-depth accounts of their needs, beliefs, and attitudes toward fatherhood and providing dense descriptions of the research data, including verbatim quotations.

2.7 ETHICAL CONSIDERATIONS

Ethical issues and standards must be critically considered in both quantitative and qualitative research; therefore, nursing researchers have a professional responsibility to design research that upholds sound ethical principles and protects human rights (Streubert & Carpenter 2011:56).

The ethical considerations taken into account during the study are discussed below.

2.7.1 Permission to conduct a study

The researcher obtained ethical approval for the study from the Higher Committee of the Department of Health Studies at the University of South Africa (Annexure H), the Department of Health Limpopo South Africa (Annexure F), the Department of Education Limpopo Lebowakgomo Circuit (Annexure G).

2.7.2 Autonomy

Respect for autonomy means that the participants in the research must be allowed to make free, independent and informed choices without coercion (Holloway & Wheeler

2010:54). The principle of autonomy includes the right to self-determination and the right to full disclosure. Participants were enabled to make decisions voluntarily and freely without any form of pressure. They were given full information regarding the intended study, including their rights. Participants were not forced to participate in the study.

2.7.3 Privacy, anonymity and confidentiality

The principle of justice includes participants' right to fair treatment and the right to privacy (Holloway & Wheeler 2010:54). The right to privacy for participants was respected by making them aware of their rights to determine the extent to which they can disclose private information about their beliefs, needs, and attitudes regarding fatherhood. Interviews were conducted in a private room. Appointment date and time were made conveniently for participants.

Anonymity occurs when the researcher cannot link a participant to the information gathered (Sreubert & Carpenter 2011:64). Anonymity was practiced when participants were given numbers for identification instead of names. Confidentiality is the pledge that any information participants provided will not be publicly reported in a manner that identifies them (Streubert & Carpenter 2011:63). Confidentiality was maintained when the researcher did not provide the information to unauthorised persons. The researcher was the only person who conducted the interview and transcribed the data. The researcher ensured that raw data would not reveal the identity of the participants. Interviews were conducted in a private room.

2.7.4 Protection from discomfort and harm

The principle relates to the benefit research will have to the participants (Holloway & Wheeler 2010:55). It covers acts of kindness or charity that go beyond strict obligation. The principle imposes the right to freedom from harm and discomfort with the inclusion of the right to protection from exploitation. During the study, adolescent fathers were protected against risk of psychological stress and any other form of harm. The researcher ensured that participants were comfortable and established a sense of trust by starting the interviews with some humor to make them feel at ease. The researcher had to stop the interview whenever a participant showed any form of discomfort and the

interview continued when the participant was ready. The principles of openness, respect, appreciation and responsiveness between the researcher and participants were practiced throughout.

2.7.5 Non-maleficence

The essence of the principle of 'non maleficence' includes doing no harm to others (Christensen et al 2011:107). The researcher ensured that the probability to harm participants was minimised and benefits maximised. The researcher facilitated debriefing by giving participants the opportunity to ask questions. Utmost sensitivity was demonstrated during data collection.

2.7.6 Scientific integrity of the study

Scientific integrity refers to honest respect practices commonly accepted within the community for proposing, conducting or reporting research (Brink et al 2012:43). All the sources and references used were acknowledged, and the measures which the researcher applied to enhance the trustworthiness of the study also served to ensure its scientific integrity.

2.6   CONCLUSION

In this chapter research the design and the research method were discussed. Data collection and instrument, including the research setting, were outlined. The rights of respondents and ethical considerations were also considered during the study. Data was analysed briefly.

The next chapter is on data analysis and interpretation of the results.

CHAPTER 3

PRESENTATION AND DESCRIPTION OF THE RESEACH FINDINGS

3.1   INTRODUCTION

This chapter presents the research findings based on the analysis of data obtained from the semi-structured interviews conducted with the adolescent fathers. The aim was to explore the needs, attitudes, and beliefs regarding fatherhood and to recommend health promotion initiatives that will address the unique needs of this group to enable them to manage this phase of their lives effectively. Sources of data were adolescent fathers who are residing at Lepelle Nkumpi Municipality, Limpopo Province.

Data analysis involved management of raw, non-numerical data and was conducted concurrently with data gathering, making interpretations and report writing (Leedy & Ormrod 2010:153). The data that emerged from the descriptions given by the participants during interviews had to be reported exactly as described by participants. After collection of data, the recordings were listened to and verbatim statements made by respondents were transcribed. The data analysis steps described by Leedy and Ormrod (2010:153) were used to analyse data.

The researcher immersed herself in the data to identify and write down meaningful statements relevant to the purpose and objectives of the study as expressed by the participants during the interviews. Similar data were categorised in categories and themes, during analysis, utmost care was taken not to lose data as data were interlinked. However, categories were differentiated on the basis of the strength and frequency of codes.

3.2 PRESENTATION OF FINDINGS

3.2.1 Biographical information of participants

Table 3.1   Biographic information of participants.

Chronological age	Participants (n=13)
18 years	9
19 years	4
Initiation of sexual activity	
14 years	2
15 years	5
16 years	5
17 years	1
Fatherhood age	
16 years	3
17 years	7
18 years	3
Living arrangements	
Living with mother	6
Living with father	1
Living with both parents	6
Relationship with father	
Good	6
Poor	3
No relationship	4
Relationship with mother of the child	
Still together	6
Separated	7

Nine participants were 18 years old and four were 19, they were all Pedi speaking. Seven participants had their first baby at 17 and three at 16, another three at 18 years of age. Each participant had one child. Out of 13, four participants were no longer at school, six were at school, three were employed in seasonal jobs, one was a part-time student and he was amongst the three employed. Much as other risk behaviours were not within the scope of this study, information was sought to identify concurrent problem behaviours such as substance abuse and aggression problems. None of the participants reported any.

3.2.2 Research setting

Data collection occurred in a clinic and the three schools. Unit F clinic was used for interviews. It is situated about 1,7km west of Lebowakgomo Parliamentary Offices and about 4km west of Lebowakgomo Hospital. There are three secondary schools that were also used for recruitment. Unit F clinic renders the following preventive, curative, promotive and treatment services: child care, acute and chronic conditions, mother and

child care. The clinic has a maternity section that has rooms for all stages of labour care.

3.3 THEMES

The following four themes emerged during data collection and were considered in analysing the data:

Theme 1: Responses to pregnancy.
Theme 2: Beliefs regarding fatherhood.
Theme 3: Being a father.
Theme 4: Needs of adolescent fathers.

3.3.1 Theme 1: Responses to pregnancy

In theme 1, Responses to pregnancy by adolescent fathers, three sub-themes emerged: realisation of full impact of pregnancy, family responses and community responses. The sub-themes and categories in theme 1 are presented in table 3.2.

Table 3.2   Theme 1: Responses to pregnancy

Theme	Subtheme	Category
Theme 1 Responses to pregnancy	1.1 Realisation of full impact of pregnancy	1.1.1 Shock, disbelief and frustration 1.1.2 Disappointment, fear, regret and guilt 1.1.3 Sense of disequilibrium and helplessness
	1.2 Family responses	1.2.1 Feelings of frustration and anger 1.2.2 Accepting the inevitable 1.2.3 Dealing with shame
	1.3 Community responses	1.3.1 Traditions and customs 1.3.2 Societal expectations

3.3.1.1 Sub-theme 1.1: Realisation of full impact of pregnancy

Participants had different reactions when the full impact of pregnancy dawned upon them. Probing questions were asked in order to understand their initial response regarding pregnancy and the baby. Their reactions were categorised as: shock, disbelief and frustration, disappointment, fear, regret and guilt, sense of disequilibrium and helplessness.

3.3.1.1.1 Category 1.1.1: Shock, disbelief and frustration

In response to how they reacted to the news of pregnancy, participants described their reactions as that of shock, disbelief and frustration. Most of the participants expressed that when they got to know about pregnancy. Their initial response was that of disbelief and frustration. They described various emotions such as denial and mistrust as some had had experiences of cheating by their partners.

The findings are supported by the following quotes:

> "Mmmm, when she told me that she was pregnant, I did not believe her, I thought she was playing and lying. I was thinking too much and I thought the child was not mine. I thought she was telling lies, but at the end I agreed to the pregnancy as I was the only one coming to her home to pick her up."
> "Eish at first I refused I did not believe that. She left for another place and when she came back we did blood test and I found that the child was mine. The reason I refused was that I travelled to Soshanguve (a township outside of Limpopo Province) for a few days, (and) when I came back my friend told me that she had been cheating…"

> "I was shocked, frustrated and anxious about the pregnancy due to the fact that I was not ready to be a father, still at school and depending on my parents for everything."

3.3.1.1.2 Category 1.1.2: Disappointment, fear, regret and guilt

Feelings of disappointment, embarrassment and fear were expressed by most participants. Fear seemed to be the dominant reaction as they were young and did not

know how they would handle the responsibility associated with pregnancy and a baby. It appeared that the pregnancy made them realise the consequences of their actions regarding fatherhood and the need to pay maintenance to the partners. Participants expressed regret and guilt that they engaged in unprotected sexual activities that resulted in pregnancy and that, most of all, they felt the shame that they brought to their parents who always advised them to stay away from girls. The following quotes support the findings:

> "I was disappointed and afraid to tell my parents. I've even thought of running away from home, but I did not do that considering that nothing will be fixed without my involvement. I realised that I messed up and will have to face the consequences."

> "I knew that I will be regarded as a failure. My parents used to advise me not to hang around girls. I did not listen to them. I have disappointed them."

3.3.1.1.3   Category 1.1.3: Sense of disequilibrium and helplessness

Participants indicated that they experienced a sense of disequilibrium and helplessness and had difficulty in coping with educational activities and could not concentrate on studies. Some of the participants described a sense of helplessness, not knowing what to do, thinking that they will not be able to make any meaningful contribution to their partners and the babies. It was also difficult for most to disclose the pregnancy to the parents.

This was supported by the following quotes:

> "Eish I felt bad, I didn't know what to do. I had nothing I could assist the mother of my baby with; I knew that I would not be able to support her because I did not have any source of income."

> "It was hard for me after my girlfriend told me about the pregnancy, because I was still at school, and it affected my performance at school. I started to think illogically, I felt helpless, stressed and I didn't tell my family."

3.3.1.2   Sub-theme 1.2 Family responses

Family responses refer to the reactions from the family members towards the pregnancy news. Participants indicated that their parents were not happy when they got the news of pregnancy; they did not take it well. They explained that their parents expressed frustrations and they blamed them for the pregnancy. They indicated that even though they blamed them initially, parents had accepted the inevitability of pregnancy and assisted them in taking care of the babies. The parents had to deal with the shame of young men becoming fathers in a conservative area. The categories were summarised as feelings of frustration and anger, accepting the inevitable and dealing with shame.

3.3.1.2.1   Category 1.2.1: Feelings of frustration and anger

Participants reported that their families did not take the pregnancy news well; they were frustrated and angry and expressed that as they had hoped that they would complete schooling. Some of the participants reported that their girlfriends were chased away from their homes and one came to the boy's family, and that exacerbated his situation with his parents. The following quotes supported the findings:

> "The girl's family came for 'damages' (this is the traditional fine for impregnating a girl before marriage) that was only then my parents got to know about the pregnancy. They were very angry and after that kept on reminding me about our poor situation and lack of money. They put blame on me and expressed that they had wanted me to go to school to have a better future. They kept on asking me how I could do such a thing."

> "The girl was chased away from her home by her parents; she came to stay with us because her mother did not take it well either. It was very bad at home, I could not continue with school and I had to find a part-time job to help out where I could. My mother was very angry all the time; even when I made a small mistake, she would shout at me."

3.3.1.2.2   Category 1.2.2: Accepting the inevitable

It was explained earlier that participants' parents had difficulty in dealing with the pregnancy. Participants explained that it took a long time before their parents could

eventually accept the inevitable. Some only showed acceptance after they had paid the traditional fine. It was evident that the adolescent fathers were also saddened by the inconvenience they had brought to their families. The statements are captured below:

> "It was hard too for my parents, but they accepted that I have impregnated a girl. They changed and showed concern about the health of the girl. My mother wanted to know if the girl was doing well."

> "My parents seemed to relax and only accepted the pregnancy after a traditional fine was paid. I could see that my parents 'had to accept' the situation. It was very difficult to experience all that."

3.3.1.2.3   Category 1.2.3: Dealing with shame

The majority of the participants reported that their families have acknowledged the pregnancy; they also reported that their families had to find ways and means to deal with the shame they had brought to the family. Their parents paid the 'damage' as it would be frowned upon in the village if they had failed to do so. They also had to make some contribution towards the medical and baby expenses. The following verbatim quotes support the findings:

> "I have put my mother into a stressful situation. She is unemployed, we depend on her pension money, she was willing to help the girl but it was very difficult for her but she encouraged the girl to come and visit to show that she cared, otherwise the family would be called names in the community."

> "My parents felt they needed to do something to show they were a respectable family. They stayed with the girl after her parent got rid of her. They had to support her with basic things she needed until she delivered. However, after the delivery, there were family discussions and the girl returned home."

3.3.1.3   Sub-theme 1.3: Community responses

A community is described as a group of individuals, objects or substances that meet certain criteria (Botma et al 2010:200). For the purpose of the study, community responses refer to the reactions or remarks made by one or more people within the

community towards adolescents becoming fathers. In the sub-theme, Community responses, two categories emerged: traditions and customs, and societal expectations.

3.3.1.3.1   Category 1.3.1: Traditions and customs

The participants were all from the Bapedi culture; according to the local tradition, when a girl gets pregnant out of wedlock, her parents select representatives (uncles and aunts), send them to the boy's family to report the pregnancy. The outcome of this visit is a fine that will be imposed on the boy's family when the boy accepts responsibility. All participants indicated that their families still followed the traditional norms and values of their community and the families came together at the negotiation table to resolve the matters. To support the findings the following quotes were extracted from the data:

> "The girl's family came to report the pregnancy because I am not married to their daughter, and my family had to pay the fine; it was not easy for them…"

> "I am aware of what needed to be done to lessen the anger of the girl's family. It took my parents a long time to initiate the discussions because the girl's family did not come as per norm. My parents sent representatives to her family to 'own up' and pay whatever they asked for".

3.3.1.3.2   Category 1.3.2: Societal expectations

For many cultures adolescence reflects a 'coming age', that is, approaching adulthood and that needs to be provided with specific rituals and practices in preparation for adult responsibilities and privileges (Leemay et al 2010:221). Bapedi culture expects a person to have a child after marriage. Participants reported that some of the community members showed their disapproval by pointing fingers at them, blaming them, as they believed that they had deviated from the local traditions and the fact that they were way too young to have children. The findings are supported by the following quotes:

> "People were also shocked and saying 'not so nice things' about me. They did not expect me to be a father. They used to see me going for soccer, not hanging out with girls. Some even asked me how I will take care of a pregnant girl at my age."

"I did not have the courage to tell my parents about the pregnancy, because people were gossiping that I was a shame and humiliated my parents; and that was the time when my mother heard about the pregnancy…"

3.3.2 Theme 2: Beliefs regarding fatherhood

In theme 2, Beliefs regarding fatherhood, three sub-themes emerged: fathers as role models, fathers as providers and advisers and being present and personal involvement. The sub-themes and categories in theme 2 are outlined in table 3.3.

Table 3.3   Theme 2: Beliefs regarding fatherhood

Theme	Sub-theme	Category
Theme 2 Beliefs regarding fatherhood	2.1 Fathers as role models	2.1.1 Feeling and expressing affection (caring and loving) 2.1.2 Taking and assuming responsibility 2.1.3 Creating enabling environment
	2.2 Fathers as providers and advisers	2.2.1 Provision for basic needs 2.2.2 Controlling children's behaviour
	2.3 Being present and personal involvement	2.3.1 Available to children

3.3.2.1   Sub-theme 2.1: Fathers as role models

Participants were granted the opportunity to explain the importance of a father in the family. Different views were expressed; however, there were commonalities that indicated that a role model is a person whose behaviour or success can be emulated by others, especially young people. Three categories emerged from the sub-theme: feeling and expressing affection, taking and assuming responsibility and creating an enabling environment.

3.3.2.1.1 Category 2.1.1: Feeling and expressing affection (caring and loving)

Slater and Bremner (2011:717) describe affection as a state of showing emotions. Participants described a good father as the one who takes care of their children, protects them and shows them love. They further described that a good father needs to have good relationships with their children and be attached to them. In supporting the findings, the following statements were made:

> "A good father needs to be caring for the children and their mother, and he must not abuse his family, be it physically or psychologically, that is, the children and their mother must feel safe around him."

> "A good father must show and give love to his children, and again he must be committed to them and that will teach them to be loving fathers too."

3.3.2.1.2 Category 2.1.2: Taking and assuming responsibility

Participants reported that fathers need to show leadership and be responsible for the well-being of their children. They indicated that responsibility goes hand in hand with accepting their own roles and obligations. They described a responsible father to be concerned about his children's state of health and future. The quotes below support the findings:

> "Taking responsibility is an important thing a good father does. A good father will ensure that his children attend school to have a brighter future. A good father will show leadership in the family."

> "A good father will accept any challenge he might come across within his family. He will also make sure that his children get medical attention when sick."

3.3.2.1.3 Category 2.1.3: Creating enabling environment

Creating an enabling environment reflects a situation where children need to grow with the knowledge and information that lead to healthy and better lives. It plays an important role in supporting and extending children's development and learning. Participants reported that children need fathers for discipline and encouragement on good things.

They further indicated the importance of respect of children from the father. The following verbatim quotes support the findings:

> "A good father shows respect to his children, does not shout nor beat children. If they did something that he does not like, he speaks with them with authority but in a caring manner. The children feel good to be around him, they feel empowered."

> "A father creates a good environment for his children and he takes needed steps to ensure their children grow well. That will help them to respect, be responsible and to make right decisions."

3.3.2.2   Subtheme 2.2: Fathers as providers and advisors

Fathers were regarded as authorities that offer a good service to their children. They were also described as mentors who give advice to their children. Two categories emerged, namely: provision for basic needs and controlling children's behaviour.

3.3.2.2.1   Category 2.2.1: Provision for basic needs

Participants described that a good father needs to ensure that his family (wife and children) is well catered for regarding food, shelter, clothes and school. They believed that a father goes out of his way to provide for his family. They further reported that fathers need to protect their families emotionally and physically. The following quotes support their responses:

> "A good father supports his family by providing them with adequate food and shelter. He always makes sure that children do not sleep on an empty stomach, have clothes, including school uniform. Children need to eat so that they grow well".

> "A father needs to make sure that his children do well in school, be active in school matters and meetings. Whether called by a class teacher or the principal for school meeting, he should attend."

"A father must take care of their children and mother, because if the father is abusive, children will grow knowing that a woman is to be abused, which is not acceptable. A father needs to protect his family so that they feel secured."

3.3.2.2.2 Category 2.2.2: Controlling children's behaviour

Parents need to take control of their children's behaviour; they need to guide and advise them. Participants reported that a father is responsible for mentoring his children in terms of morals and traditions. The following statements support the findings:

"A good father needs to advise a boy child. Children need to grow under the care of both parents who will always advise and guide them on good behaviour."

"A mother alone will not be able to advise and guide the children, for example there are certain things that need to be communicated by a man to a boy child. A woman cannot teach boy on how to be a man."

"A father needs to give guidance to their children, guide them on life issues; what to expect when they reach different levels of development such as adolescent issues, diseases and preventative measures."

3.3.2.3 Sub-theme 2.3: Being present and personal involvement

The participants reported the importance of the father's presence in the children's lives. Participants expressed that good fathers need to be available for their children whether they live with them or not. Fathers need to be involved in the child's life activities and provide a sense of security.

3.3.2.3.1 Category 3.3.1: Available to children

The participants have regarded availability of a father to their children as a very important aspect of fatherhood. They reported that children need to feel the presence of a father even though a father does not live with them. The following statements below support the findings:

"A good father is present in their children's lives. He shows interest, gets involved in their lives. He stays at home and encourages the children especially boys to open up and talk to him."

"He needs to be reachable – emotionally and otherwise, be available to his children. They must feel his presence in their lives. Even if a father is far from home because of employment reasons, he needs to maintain regular contact to ensure that everyone does not feel his absence."

3.3.3 Theme 3: Being a father

Theme 3, being a father, reflected attitudes towards fatherhood, and two sub-themes emerged: acceptance of responsibility and transition to fatherhood. The sub-themes and categories in Theme 3 are presented in table 3.4.

Table 3.4   Theme 3: Being a father

Theme	Sub-theme	Category
Theme 3 Being a father	3.1 Transition to fatherhood	3.1.1 Behavioural and lifestyle change 3.1.2 Effect of fatherhood on self 3.1.3 Adjustment to fatherhood
	3.2 Acceptance of responsibility	3.2.1 Expectation to acknowledge the baby 3.2.2 Relationship with the partner 3.2.3 Moral decision to support the baby

3.3.3.1   Sub-theme 3.1: Transition to fatherhood

Participants described their experiences as they entered the fatherhood stage. Three categories emerged, namely: behavioural and lifestyle change, effect of fatherhood on self and adjustment to fatherhood. When a person is faced with challenges to his identity, a psychological process ensures where the person attempts to fit the various pieces together into a cohesion sense of self (Bade 2012:20).

3.3.3.1.1   Category 3.1.1: Behavioural and lifestyle change

Participants described the change in their behaviour ever since they became parents; there were some variations in their descriptions. Some reported feelings of apprehension about being fathers at an early age. Others seemed to miss the real stage

of being an adolescent. However, some adjustments had to take place. The following quotes support the findings:

"It is very challenging to have a baby at this young age. I must now play the father role, spending time with my friends is no longer an option. Inside me, I still feel like a boy with no strings attached. But, I need to wake up to reality and change."

"I had to get a part-time job so that I could contribute something toward my child. What my mother used to do for me is now done for my baby, and this has put an extra burden on my family. I am too young to be working and studying, but there's no time for regrets now, things have changed."

"Financially, it is a difficult situation. I used to buy things for myself with the money I got from where I work on weekends, but now I have to spend it on my baby. And I try to balance between my needs and the baby's."

3.3.3.1.2 Category 3.1.2: Effect of fatherhood on self

Participants acknowledged that being fathers at their age was not good and some seemed to struggle with a sense of identity, with a mix of regret and wanting to be good; others just resigned themselves to the situation. All found it difficult, and expressed that they were not ready emotionally. The following statements below support the findings:

"Emotionally, I am not ready, if I hadn't had a baby I would be going to college, but I had to show my family and my peers that I am aware of what I did and intend to correct my mistakes."

"At the present moment I feel bad; my life has changed I have to act and think like a father. I don't know how fathers feel. I think about it most of the time and this affects me and disturbs my school work."

"This is a very difficult situation. I cannot say that I am coping with it no matter how hard I try. Some days I feel happy that I have a baby, other times I become fearful that I am going to fail as a father."

3.3.3.1.3 Category 3.1.3: Adjustment to fatherhood

Participants expressed the need to adjust to fatherhood as there were no other options available for them. During this stage they were still experiencing the emotional and psychological adjustments associated with adolescence and yet expected to be fathers. As indicated earlier, they were caught up in a struggle. They indicated that it was very difficult for them to adjust but they had to navigate the unknown terrain. A few expressed gratitude for parental support during this stage. The findings are supported by the following quotes:

"I can say having a child has made me to grow fast and think like an adult. When you are been told that the child is sick, they expect you to do something and I have learned to balance my studies with these new expectations."

"It was tough for me initially, Looking at my father taking care of us helped me to make the necessary changes in my life and ready myself for the new role. If only the families understood that we need to feel and act life fathers and help us."

"The support my parents give me helps a lot, much as I disappointed them and they had to deal with the shame. They have forgiven me and we discuss issues related to fatherhood that I need to do; that has made me to grow up."

3.3.3.2   Sub-theme 3.2: Acceptance of responsibility

Participants expressed their readiness to do what is right and accept the responsibility. Three categories emerged: expectation to acknowledge the baby, relationship with the partner and moral decision to support the baby.

3.3.3.2.1   Category 3.2.1: Expectation to acknowledge the baby

Participants highlighted that taking responsibility means that no matter how difficult the situation was, they needed to account for their own actions. As stated previously, their initial response was challenging; however, they indicated that they had to acknowledge the baby's existence because it was the right thing to do; they were also expected to do

so. The fathers, customs and traditions seemed to influence the adolescent fathers' attitude towards acknowledging the baby. The following statements support the findings:

"It was difficult and scary at first but I knew I had no other way, I had to accept the consequences of my actions. Also, in our community, it is expected to not abandon the baby. I accepted the pregnancy and now that the baby is born I feel better and I have to take responsibility and be a good father to my child."

"My father told me that we couldn't abandon the baby, much as I did not feel ready to be a father, I had come to terms with it as it is the right thing to do. I'm now a father. I guess the meeting between the families helped me, because it is easier for me to show them that I am responsible."

3.3.3.2.2 Category 3.2.2: Relationship with the partner

Participants acknowledged that supporting each other is very important in this situation to ensure acceptable development for the baby. Some indicated that they continued the relationship with the mother of their child whilst others said that their relationships with their partners were not as good as they had hoped. They seemed to relate this relationship to their involvement in their children's lives. The following quotes support the findings:

"We are still in a relationship, but because we are now parents we do not see each other like we did before. I support her emotionally, even though it is hard for both of us, a child needs both parents so that he grows knowing them."

"I will not say we are still in a relationship as we are no longer dating and I do not know how it happened we just kept a distance from each other without communicating. She is the one who stays with the child and this means that the child will only know the mother and will not recognise me as the father."

3.3.3.2.3 Category 3.2.3: Moral decision to support the baby

Most participants acknowledged that accepting responsibility is to show willingness to be involved in the children's lives and their mothers. The majority appeared to have accepted that there is a huge responsibility awaiting them and they had to at least 'do

something' for the baby even though most had no income and relied on their parents to assist them. Some found part-time jobs to assist wherever they could. However, a few believed that both partners must share the responsibility. The quotes below support the findings:

"I have a part-time job which does not give much, but the little I have I share with my partner for the baby. It is not enough, but that is the least I can do. Once I finish school I will do more."

"Most of the things are done by my parents who assist in taking care of the baby; I do not know what to do to support the child. I have nothing, taking care of the child should be a shared responsibility, not me only."

"I want to help my partner but no one is working at home. I have no income, I have been thinking of dropping out of school because this is a mess, I messed up…"

3.3.4 Theme 4: Needs of adolescent fathers

In theme 4, Needs of adolescent fathers, two sub-themes emerged: need for a better life and type of support needed. The sub-themes and categories in theme 4 are presented in Table 3.5.

Table 3.5   Theme 4: Needs of adolescent fathers

Theme	Sub-theme	Category
Theme 4 Needs of adolescent fathers	4.1 Need for a better life	4.1.1 Ambitions for progress 4.1.2 Need to have access to baby and partner
	4.2 Type of support needed	4.2.1 Access to information 4.2.2 Family support 4.2.3 Need for acceptance

3.3.4.1   Sub-theme 4.1: Need for a better life

In the sub-theme 'Need for a better life', two categories emerged from the sub-theme, namely: ambitions for progress and need to have access to the baby and the partner.

3.3.4.1.1   Category 4.1.1: Ambitions for progress

The majority of participants reported that they needed to turn things around for themselves. They expressed the desire to progress in life so that their children could have a better life than what they had. The findings are supported by the following quotes below:

> "I need to change from being dependent on my parent to take care of myself and my child. I need to go back to school to complete my studies so that I go to university, get a qualification and get a good job."

> "I have volunteered in Love Life programmes where we are targeting teenagers and teach them on adolescence issues and I am also learning new things that are important. I have to be a good father to my child despite the hardships; he needs a better life."

3.3.4.1.2 Category 4.1.2: Need to have access to baby and partner

Most participants expressed the need to be recognised as fathers by both families. They believed that this access and relationship with the baby would help them become better young men. Only two had free access, whilst others indicated the dissatisfaction of not being allowed to see the baby due to perceptions families had of them. The findings are supported by the following quotes:

> "I need to be recognised as the father by maternal parents; I need them to give me the opportunity so I can have a part in raising my child. Develop a bond with the child and my partner."

> "Since I had a child, I am not allowed to hang around with my partner and I am not seeing my child as I would like to because I have not paid 'lobola' (a bridal price) for the girl. I am willing to be there for my partner as we did this together."

"I am in a good relationship with my partner. We see each other at school and she updates me on our child's development and health on daily basis; what worries me is that we do not see each other at home because our parents do not allow us."

"I do have access to my baby and I believe that has helped me to become a better person as I learn everyday what parenting is all about. My partners' parents are also helpful. It is good for all of us".

3.3.4.2 Subtheme 4.2: Type of support needed

Participants expressed various needs for the support. Three categories emerged, namely: access to information, family support and need for acceptance.

3.3.4.2.1 Category 4.2.1: Access to information

Access to information is vital during this stage as it will equip adolescent fathers with knowledge and skills to take the initiative and make better decisions. Participants expressed the need for services that address challenges of adolescent fathers and some required assistance with being an 'absent father'. The following verbatim quotes support their responses:

"I think that the social support organisations like churches, schools and health care facilities would be helpful to young fathers like me in providing us with information to help us accept and cope with this new role of fathering."

"At school we need counsellors to support young fathers who will be returning to school so that we learn new skills and have hope for the future. When the news break out at school, you become apprehensive because you do not know how the teachers and other learners will respond to you."

"I wish there were services that could recognise adolescent fathers, where they will advise and guide us so that we are prepared for fathering at this early age; I think the services will help us to be better fathers."

3.3.4.2.2   Category 4.2.2: Family support

Family is the first most important support system everyone needs before looking for external support. Participants expressed the need for emotional support from their immediate family. Some seemed to have lost the good relationship they had before the baby and they felt they needed to rebuild it. The findings are supported by the following quotes:

> "My greatest need right now is emotional support from my parents. They are trying their best to help with the baby, but there seems to be a wall between us."

> "I need to have a good relationship with my parents; I do not need to be reminded of my mistakes. If they can advise and encourage me on how to be a good father, it will be better."

> "My parents have withdrawn privileges which they were providing; I understand because of the situation at home. However, having open discussions will be much better."

3.3.4.2.3   Category 4.2.3: Need for acceptance

Throughout the interviews, it became apparent that participants were longing for some kind of support, relationship with their parents and social acceptance. Some of the statements related to relations and support have already been discussed. The issue of acceptance appeared to be a thread throughout the discussions.

Some of the statements are presented below:

> "I have made my mistakes. I never listened to my parents and teachers at school. However, life should not be made more difficult for me, people make mistakes all the time and they are forgiven and accepted. I also need to be accepted as I am; that would help me a lot."

> "I do not want to carry a bad label all the time. I am human and caused both parents grief. All I ask is for everybody to accept me and my baby so that I can have my sense of pride back."

"I went to the clinic with my partner. When the nurse found out that I was the father, she made funny remarks which I thought were insensitive. Why should I be ridiculed?"

3.5   CONCLUSION

This chapter presented the themes concerning the adolescent fathers' needs, beliefs and attitudes in fatherhood, such as: responses to pregnancy, beliefs regarding fatherhood, attitudes toward fatherhood and their needs as fathers. The sub-themes and categories were supported by quotations from the participants in order to explore the adolescent fathers' needs, beliefs and attitudes regarding fatherhood.

Chapter 4 presents the literature that supports the themes, sub-themes and categories that emerged from the findings.

CHAPTER 4

FINDINGS AND COMPARISON WITH THE LITERATURE

4.1   INTRODUCTION

The first section of this chapter presents the reviewed literature to provide a broad understanding of construction of fatherhood. Social interpretations and discourses on fatherhood and masculinity are discussed. The second part discusses the themes, sub-themes and categories that emerged from the data presented in chapter 3. In this chapter, literature is used as a basis to compare and contrast emergent data (Creswell 2014:30).

4.2   LITERATURE REVIEW

This section provides an overview of the broad perspectives dominant in societies regarding fatherhood and parenting.

4.2.1   Theoretical perspectives on parenting

Parenting refers to the aspect of raising a child by promoting and supporting the physical, emotional, social and intellectual development from infancy to adulthood. There are different views on parenting, some emphasize the importance of relational connection between parents and children and others model a hierarchical relationship between parents and children (Kim, Knudson-Martin, & Tuttle 2014:56). There are many approaches to parenting and society also influences particular gendered parenting roles. African concepts of parenting stress the needs of the child and the importance of adults meeting those needs (Morrell 2006:13). Societal norms and expectations suggest how parents and children should relate. These variations to parenting vary on individuals,families and communities. Parenting is thought to differ in mothers and fathers, but most parenting research still focuses on mothers (Bornstein 2012:26). (Marshal 2012:4) argues that past theorists of parenting and fatherhood in particular, have identified many areas in which fathers matter for their children's health and development.

A father's involvement has been shown to improve social and relational functioning in childhood and adulthood. It also decreases behavioral problems and increases educational success. Paternal involvement patterns show several factors that affect father involvement with their children, such as the profiles of fathers, the social environment, perceptions of their own parental efficacy, their expectations and beliefs (de Montigny, Lacharite & Devault 2012:16; Meteyer & Perry-Jenkins 2010:381). Pleck (2010:31 believes that holding particular self-conceptions about being a parent can influence the initiation of parenthood.

4.2.2 Fatherhood and masculine identity

Fatherhood and masculinity potentially intersect in multiple ways. The Fatherhood-Masculinity Model by Pleck (2010) describes a broad set of possible linkages between fatherhood and masculinity in relation to child outcomes and for fathers themselves. This model suggests that men's definition and performance of their gender identity affects their practices (Pleck 2010:39). (Morrell, Jewkes & Shefer 2012:12) point out that there is a difference between biological fathers and the social role of fathering. Masculinity is neither biologically determined nor automatic, it is socially constructed, can take different forms and can change over time.

Fatherhood is associated with manhood, and a man is expected to be able to play the father role, it is an integral element in the construction of masculinities, but may be interpreted in different ways (Morrell 2006:12). Young men often understand manhood as the time when they assume certain rights. In their desire to become men and pressured by peers to claim this status, boys may mobilise their sexuality and power over girls (Morrell 2006:13). Fatherhood as parental status includes not only whether one is a father, but also other dimensions such as the father's age at becoming a parent (Pleck 2010:39). The timing of parenthood can influence how parents act and how they think of themselves as parents. Young men can define themselves as acceptably masculine by creating certain identities in their understanding of parenthood (Enderstein & Boonzaier 2013:3).

Jaime et al (2016:273) argues that the paternal movements in the United States advanced a definition of fatherhood that prioritises men's biological or financial connection to their children over their identification with and participation in paternal activities. The authors view these definitions as a compromise to the realities of

parenting in low-income communities. In South Africa, Middle-class men most often take up the fatherhood role, which entails being a protector, provider and caregiver, as they have means to do so (Koenig-Visagie & van Eeden 2011:3). However, fatherhood research is expanding; measurement and conceptualization of father involvement continue to be refined and new dimensions are emerging (Jaime et al 2016:278). According to Enderstein and Boonzaier (2013:2), early fatherhood could be a "site for the development of alternative masculinity".

Gender stereotypes of parental roles still prevail in some families. There could be a need to review the contradictions within formations of masculine identity, for example, father as both provider and carer. Traditional fathering role has focused on providing financially for the mother and child, it is important to consider a wider variety of ways in which fathers may influence their children's lives (Mollborn & Lovegrove 2011:6; Morrell 2006:15). This argument implies that those fathers who do not have the means to make financial contributions might add value to the life of their children in other ways.

The role of the father continues to transform from a traditional role to one that is more varied. To meet the current demands of fathering/parenting and the expectation that a father should be involved in all aspects of child care and child rearing activities (Hauari & Hollingworth 2009: 1). Bade (2012:13) reported that many young parents are already living in poverty, when their financial needs are increased by the arrival of a child, their involvement often depends on their ability to provide. Therefore, a debate about the fathers' possible contributions to the lives of their children is particularly significant.

There is a need for more research about fathers' influences on their children's well-being (Paschal et al 2011:65). These influences could be direct or indirect through having good relations with their children's mothers, or getting involved in some aspects of bringing up the child. Lack of financial means, as in the case of adolescent fathers, could create a crisis of masculinity. Koenig-Visagie and van Eeden (2013:1) reported that regardless of the levels of willingness to participate in fatherhood on the part of the biological father, begetting a child signals achievement of adult manhood, as it carries expectations of assuming responsibility.

4.2.2.1   Socio-cultural context of parenting

Socio-cultural context describes how a particular population perceives the process of parenting with regard to their beliefs and values, norms and customs that govern their culture. Every culture is characterised by deep-rooted and widely acknowledged ideas about how one needs to feel, think, and act as a member of that culture. Therefore, such beliefs and behaviors tend to persist over time and constitute the valued competencies that are passed to new members of the group (Bornstein 2012:2). This study views fathering as everyday practice as well as a set of institutionalized and gender differentiated norms and expectations (Morrell 2006:14). Societal expectations and cultural beliefs have implications on the young fathers' identities, relationships and lived experiences of fatherhood.

However, there are also changes taking place within family structures regarding issues of gender and role sharing. There seems to be a general understanding that fatherhood is undergoing notable transformations (Shirani, Henwood & Coltart 2012:274). The authors seem to suggest that the changes are somewhat affecting the beliefs of the breadwinner/provider role as an aspect of men's fatherhood identity. Non traditional family structures are emerging, men are assuming the role of step fathers, single fathers and non-resident fathers, thus challenging the common idea of fathering (Morrell 2006:14). Little is known about how men respond to these changing socio-cultural ideals of fatherhood and masculinity and their experiences of themselves as fathers. Young men have ideals of what it means to be a good father and adopted similar standards for themselves as fathers (Morrell 2006:14). Cultural definitions influence availability of social support and young men's conceptions of an ideal father.

4.2.3   Empirical understanding of teenage fatherhood

There is lack of literature on young fatherhood in the developing nations. There are many adolescent fathers but they are largely invisible in public discourse (Mollborn & Lovegrove 2011:3; Jaime et al 2016:272). This section situates teenage fatherhood against the background of the self and societal expectations.

4.2.3.1 Adolescence

Adolescence is a developmental stage characterized by significant physical, emotional and cognitive growth. The primary developmental tasks of adolescence is achieving independence and establishing identity(Leather 2009:296). There tends to be pre-occupation with self- discovery and exploration of sexual relations. Adolescents appear to be determined to push and cross those boundaries (Leather 2009:296). Adolescents experience new demands and expectations in school-related and personal goals. Failure to adjust to the demands may be linked to a sense of failure (Keshavarz & Baharudin 2013:253).

In the context of this study, unprotected sex is viewed as one of those risks. This behavior is understood as a struggle against authority and a mechanism for creating a discourse of their own. Adults define what is sensible or appropriate, they define the boundaries between what is acceptable and what is considered deviant(Swartz et al 2013:3). Generally, parents set the early course for the development of the child's attitudes, values and identity long before they are exposed to other socialization institutions, parents also remain dominant influences on their beliefs about gender and parenting (Swartz et al 2013:3). It is important to identify how adolescents deal with stressors and challenges in their life. Young men with focus and control tend to take responsibility for their behaviors even when the outcome is negative or disappointing (Keshavarz & Baharudin 2013:254).

4.2.3.1 Transition to fatherhood

Young fathers begin their parental journey being at odds with the sequence of development, consequently, a deficit model of development has been adopted to understand teenage fatherhood (Paschal et al 2011:60. They are often stereotyped as negligent and irresponsible as they lack clear cultural norms to guide them (Parra-Cardona, Sharp and Wampler 2008: 369, Chideya 2013: 209). Existing research on early fatherhood focuses on risk factors and associated negative life outcomes. Many research findings emphasize the negative outcomes of adolescent parenthood such as high rates of school drop-outs, increased poverty, a cycle of teen and/or single parenthood, and low-income jobs (Paschal et al 2011:62; Mollborn & Lovegrove 2011 :4).

There is a small number of studies that explore the experiences of young fathers (Enderstein & Boonzaier 2013:5). Jacobs and Marais (2013:1) lament the dearth of research on adolescent fatherhood in South Africa. However, they agree with earlier studies that adolescent parenthood (both mothers and fathers) is associated with low socio-economic background, lower educational attainment and fewer employment opportunities than their childless peers. Adolescent fathers are expected by the society to become providers for their children. However, South African adolescent fathers face negative consequences (Chideya & Williams 2013: 209).

Over the past several decades, teenage parenthood has received increased attention in research. In the United States, African Americans experienced higher birth rates than that of other racial/ethnic groups especially among 15 to 29 year olds (Paschal et al 2011:63). Some studies on teen parenthood have focused on teens' transition to their parent roles and the approaches they employ to adapt to the changes that come with young parenthood. Contrary to the understanding of young fathers in terms of risk profile, (Enderstein & Boonzaier 2013:2) argue that adolescent fathers actively formulate and re-define their identity through fatherhood, creating potential sites for the alternative understanding of masculinity. Parental support, continuity of relations with the mother of the baby, her family, societal response and financial resources define the social environment within which adolescent fathers must learn to navigate olds (Paschal et al 2011:63).

4.3 Factors related to adolescent fatherhood in South Africa

In South Africa, poverty, unemployment, low levels of education and overcrowding appear to be linked to higher levels of adolescents' sexual activities and to adolescent child bearing (Chideya & Williams 2013: 212). The perspective of the teenage boys and fatherhood is particularly interesting because their identities as men are being shaped in a fatherless environment. South Africa has a high rate of absent fathers, with only one-third of pre-school children living at home with both their parents. Reasons for father absenteeism include migrant labour, delayed marriage, gender-based violence and increasing female autonomy (Richter et al. 2012).

The discourse on adolescent fatherhood is significant and impacts on the quality of services made available to them. Society has expectations that might influence how teenage fathers adapt to their new role. According to Swarts, Bhana, Richter and Versveld (2013: 3), the South African policy on parental rights in children's Act (No 38 of

2005) seeks to act in 'the best interest of the child'. However, they contend that the Act is complex, especially regarding responsibilities to the maintenance of the child. "Paternity requires that maintenance for the child is paid, but does not confer the rights and responsibilities of care, contact and guardianship".

Marais & Jacobs (2013:1) raise important issues that hinder young fathers' involvement with their children, such as financial pressures associated with their masculine role as a provider, resulting in their exclusion in child care activities and social discrimination. For young, black African men, involvement in their children's lives is also hampered by cultural expectations. The young man's parents may also warn him against claiming paternity if 'damage' payments will force him to abandon his education or strain the family's meager resources (Morrell et al 2012:21). Many factors may deter young fathers from getting involved in the lives of their children. These factors are often out of their control, such as rejection by the family of the mother of their child because they fail to live up to provider role expectations (Mazembo, Thomson-de- Boor & Mphaka 2013:36).

The authors recommend a review and change in dominant ideologies of fathers as merely financial or material providers. There should be recognition of alternative fatherhood roles such as care and affirmation. This will alleviate pressure of adolescent fathers who are not able to provide financially, but show willingness to get involved in their children's care activities. Mazembo, Thomson-de- Boor & Mphaka (2013:37) acknowledge the role of communities in the review of some traditional practices such as 'damages' in order to address the way they affect young fathers. The 2012 draft White Paper on Families recommends that one of the strategies for the promotion of family life should be to "Encourage fathers' involvement in their children's upbringing". One of the suggested actions listed for this strategy is to "Elaborate or revise current laws and social policies that restrict fathers from being involved in their children's lives" (Swarts et al 2013:4).

4.3   DISCUSSIONS OF THE FINDINGS

4.3.1 Theme 1: Responses to pregnancy

In theme 1, Responses to pregnancy, three sub-themes emerged from the data.

Participants described their responses toward pregnancy, including the responses from their family and the community in which they live. The three sub-themes, realisation of the full impact of pregnancy, family responses and community responses, are important aspects that are discussed in an integrated form as they are interrelated.

4.3.1.1   Sub-theme 1.1: Realisation of the full impact of pregnancy

Adolescent fathers shared their responses to pregnancy. It appeared that they experienced a variety of emotions, which they articulated very well after realising the impact of their actions and the responsibilities involved. They did not take the pregnancy news well initially; they described their emotions using various concepts to demonstrate the depth of their feelings. Some experienced frustration, others disbelief, mistrust and helplessness in the fact that they had impregnated someone. One in particular, said his partner had a history of cheating and they had to confirm the pregnancy with a blood test. All were fearful of their parents' reaction. Kiselica and Kiselica (2014a:262) cited that it is common for young fathers to experience a wide range of ambivalent emotions, such as happiness and acceptance about being a father as well as anger, sadness, nervousness, tension and helplessness.

Adolescent fathers further expressed disappointment and fear; the latter seemed to be a dominating emotion. They reported that they feared the consequences of becoming a father at an early age, thinking of how they would be able to care for their partners and the children. They also felt guilty that they had disappointed their parents. It is well known that having a child is recognised as a life-changing event that could entail a dramatic re-allocation of time and financial expenses (Fletcher & Wolfe 2011:2). The findings give evidence that participants realised the burden of pregnancy on them and the fear of facing the consequences thereafter, with some having to leave school to find employment. They viewed pregnancy as having negative effects on their lives. That concurs with Lemay et al (2010:221) that adolescent and young fathers are most often from the low socio-economic group, have lower educational attainment and fewer employment opportunities than adolescents who are not fathers. Adolescence is a time of pubertal change, increased self-consciousness, and changes in self-concept. It is a developmental transition between childhood and adulthood entailing major physical, cognitive and psychological changes (Papilia & Feldman 2011:468). Being a father during this stage represents major changes that make adolescent fathers vulnerable;

they struggle with issues of adolescence and this is complicated by emotions and fear associated with becoming a father. Jaime, Robbins and De Los Santos (2016:271) confirm that early fatherhood is challenging and young men may suffer from anxiety and depression.

4.3.1.2   Sub-theme 1.2: Family responses

Participants explained the frustrations and anger of their families towards the pregnancy news. Their parents did not take the pregnancy news well; they were frustrated because they were looking forward to seeing their sons continuing with their schooling; instead, their future was being jeopardised by pregnancy. Participants explained that their parents put blame on them. Even though they had acknowledged the pregnancy they kept on blaming them in a way that some were reminded of the poor situation in their homes. Family plays an important role in addressing teen pregnancy. The birth of an unwed teen's child may cause increased family stress and conflict associated with a lack of a clear primary parental figure for the newborn, but may also lead to greater cohesion and commitment within the family (Jaime et al 2016:271).

Participants reported that after the initial shock, anger and stress, their families had to accept the inevitable even though it took them a long time to acknowledge the pregnancy. According to the participants, their parents showed willingness to support their children and some of the families accepted the pregnancy after they had paid a traditional fine for impregnating a girl before marriage. All the participants acknowledged the shame and financial burden their families had to deal with, they indicated that It was hard on the families as some were dependent on pension funds with no other source of income. Many young fathers were aware that they lacked the financial resources needed to fulfill their father role.

4.3.1.3   Subtheme 1.3: Community responses

Botma (2010:200) describes 'community' as a group of individuals who meet certain criteria. Rural communities tend to follow their traditions strictly. Anything that is perceived as 'deviant' is usually frowned upon. Teen fathers seemed to be located in a difficult position of having violated societal expectations such as continuity with education, job, marriage, then family. Participants experienced disapproval and isolation

by some community members, they reported that the members of the community were not pleased; they disapproved of their behaviour by saying not so good things about them and gossiping. They indicated that the families met to discuss the pregnancy as per traditions and customs, and their families paid the required 'fine'. Swartz et al (2013:03) confirm these findings and say that according to the cultural expectations, especially in the case of an unmarried couple; a father is required to make 'damage payments' (fine paid by the man's family to the pregnant woman's family). If the family fails to pay the fine, the woman's family will most likely deny the father access to his child.

4.3.2 Theme 2: Beliefs regarding fatherhood

Literature refers to fatherhood as both a privilege and a responsibility and some fathers are unaware of the role they play in the lives of their children (Kirven 2014:85). Participants described their beliefs regarding fatherhood. They regarded fathers as role models, advisers and providers. They had different and common views on what they believed would be a good father. The question of their beliefs about fatherhood was important for this study as it was assumed that data would shed light on the impact of these beliefs on their own attitudes toward being a father.

4.3.2.1 Sub-theme 2.1: Fathers as role models

A role model is a person whose behaviour can be emulated by others, especially young people. Most participants believed that a good father is caring and loving, takes and assumes full responsibility for his children and wife. They described a good father as the one who shows his family love, has a good loving relationships with their children and is attached to them. Richter, Chikovore and Makusha (2010:361) agree and postulate that when a man becomes a father, he is treated with the respect attached to the role when he takes the responsibility for his family and becomes a role model of appropriate behaviour for young men. Chideya and Williams (2013:211) further elaborate and argue that role models, who are older men, are the ones who are expected to be teaching and sharing their knowledge of fatherhood with adolescent fathers.

Bade (2012:12) shows that most parents believed that feelings of love and attachment and the need to be involved in good, loving relationships with their children as important

aspects of a good father. Kirven (2014:86) supports that and says father's love is as important as a mother's love. Participants believed that a good father will not be involved in family violence; his children and their mother will feel safe around him. Participants portrayed a father as a figure who needs to assume responsibility at all times. He needs to be responsible for the health of their children and to ensure that they get education. They, furthermore, described a good father as an authority who needs to create an enabling environment so that the children are able to be independent and self-sufficient when they grow up. The father's presence and involvement in the children's lives appeared to be significant. Kirven (2014:86) reports that children with involved, loving fathers are significantly more likely to do well in school, have healthy self-esteem, exhibit empathy and pro-social behaviour compared to children who have uninvolved fathers.

4.3.2.2   *Sub-theme 2.2: Fathers as providers and advisors*

Participants described their views of a good father as the person who needs to provide for basic physiological needs. Their description is aligned to Maslow's (2009) hierarchy of needs theory that describes different types of needs for humans from basic physiological needs through to self-actualisation needs. The fatherhood role is explained by Coakley (2013:630) as those parenting responsibilities assumed by fathers to ensure children's development and wellbeing; therefore, fathers are perceived as financial providers, nurturers, teachers and disciplinarians in support of the study findings.

Recent South African studies confirmed that dominant discourses of fatherhood are characterised by masculine control and gender power that relate to pressure on men to fulfill the expectations of providing for the family (Ratele et al 2012:558). Adolescent fathers also reported that a good father does not have to be abusive as the children will realise and learn that this is an acceptable thing to practice in the family. Participants explained that fathers who control the behaviour of their children are regarded as being good for the fact that they are striving to pave a good path for their children's future so that they are able to stand up and do things on their own.

Participants reported that both parents are needed in advising and guiding their children on various issues including prevention of diseases. A boy child needs a father's advice,

especially on men issues. Hermansen et al (2015:496) state that both mothers and fathers need to share parenting responsibilities; however, each may have different potential to contribute to their children's development. Wilkes, Mannix & Jackson (2011:181) indicate the positive effect of fatherly involvement in the lives of mothers and their children while, on the other hand, paternal absence is associated with adverse life events. Lemay et al (2010:222) also show that involvement of fathers with their children may help promote the father's psychological development, contribute to the father's self-esteem, and strengthen the father-child relationship.

Participants expressed the importance of fathers making themselves available to their children even though they are working far from home; they need to show care to their children. Involvement in their children's life activities was described as being concerned with the child's performance at school and to know how their children are coping with the outside environment and to further teach them skills of living. This was confirmed by Coakley (2013:628) that father involvement positively impacts children's psychological, academic and permanence outcomes.

4.3.3 Theme 3: Being a father

In theme 3, being a father, two sub-themes emerged from the collected data. Participants described a father in terms of accepting the responsibility and the transition to fatherhood.

4.3.3.1   Subtheme 3.1: Transition to fatherhood

The transition to fatherhood was described as filled with various ambivalent emotions. Some participants reported feelings of apprehension. They described the change in their behaviour ever since they become parents. They had concerns over their inability to provide for the children, while some viewed fatherhood as having an abrupt break from the old way of doing things and losing friends and the burden of finance. This finding is supported by Kiselica and Kiselica (2014a:262) who assert that during the period of transition, it is common for young fathers to experience a wide range of ambivalent emotions, such as happiness and acceptance about being a father, as well as anger, tension and helplessness. Santrock (2014:14) shows that adolescence is a time of both opportunities and risks; they are on the threshold of love, of life's work, and

of participation in adult society. The transition to fatherhood represents a major developmental transition for adolescents that can be particularly stressful. Adolescent fathers are a group experiencing, intersecting identities and they have been neglected (Shade, Kools, Weiss & Pinderhughes 2011:100). Despite emerging interest, research examining the psychological well-being of adolescents confronting fatherhood still lags far behind the extensive studies characterising the adolescent mothers' experiences (Hunt, Caldwell & Assari 2015:3069).

Participants described the situation as being difficult because whatever was reserved for them by their parents was now channeled to the needs of the baby. Further studies report that insufficient coping skills of emotional control and the challenges of forming an identity often compromise the adolescent male's ability to effectively deal with the stressors of parenthood (Hunt et al 2015:3068). As adolescent fathers are susceptible to parenting stress, they will be more likely to withdraw from parenting when stressors associated with the parenting role grow.

Participants seemed to be helpless and not know what to do with the realities of fatherhood. They described that they were not emotionally ready to be fathers but they had resigned themselves to the situation. Cervone and Pervin (2013:106) reported that in 'identity moratorium' (the process of identity formation), individuals are still struggling with just who they are and what they are about and they are less prepared than the identity achievers to make commitments. Males are often left to define their own identity and meaning as fathers due to the decline in the consensus regarding fatherhood and the lack of clear cultural norms to guide them (Chideya & Williams 2013: 209). As young fathers, this identity need could easily escalate into a crisis if not well managed.

Participants expressed that they continued to have guilt feelings over their educational goals and that they would be going to colleges if they were not having children. They also expressed that they wanted to show their families and others that they are aware of their mistakes and they are willing to correct them. The fact that parents had to offer support to the baby did not sit well with all them. Some were emotional about their parents having to assist and that affected them mentally and disturbed their school performance. Some participants expressed feelings of happiness that they had children but they feared being a failure as a father, thus, they tried to cope with the situation

even though it was hard. Nevarez, Weinman, Buzi and Smith (2009:775) indicate that young fathers frequently acknowledge that their children were not planned but they are highly motivated and feel obligated to participate in the fathering experience.

Participants acknowledged that they needed to adjust to fatherhood roles as there were no other options available. It was difficult for them to adjust but they felt a push to incorporate the father role. Some showed appreciation for the support from their fathers in giving them courage to adjust to fatherhood. Cundy (2016:148) also showed that the transition to fatherhood is a time when young men experience an increased sense of responsibility and greater ambition to achieve, as well as the need to provide financially.

4.3.3.2   Sub-theme 3.2: Acceptance of responsibility

Participants viewed their own status of being fathers as a condition of non-return to what and where they were before, and indicated that they were expected to accept the responsibility. They had to acknowledge the baby's existence to show that they cared. They reported that it was difficult at first but they had to accept the baby and the responsibilities involved. Chideya and Williams (2013:209) reported that in South Africa, a good father might put emphasis on accepting responsibility for the paternity, take care of the child and be a good role model.

Having a relationship with their partners was cited as important. Some expressed that they were still in a relationship, whilst others parted ways with their partners. They all expressed that being together with the baby's mother is good for the baby. Kiselica and Kiselica (2014a:262) supported these findings and argued that relationships between many adolescent parents are unstable and tend to deteriorate over time; therefore, adolescent fathers tend to reduce contact with their children either because they are pushed away by their partners or they develop a new relationship. The ability to get along with mothers of their children is an important component in the father's involvement and a difficult relationship with the mother of a child often results in a father disengaging from the child (Bade 2012:44).

Participants expressed a deep sense of responsibility for their children even though most of them were still dependent on their parents for basic needs. Some of them had to take part-time jobs to be able to buy food and clothes for their children as the

situation was dire at home. Studies have demonstrated that financial support is related to how and whether a young father can be available for his child and it affects the father-child relationship (Lemay et al 2010:229; Nevarez et al 2009:775).

4.3.4 Theme 4: Needs of adolescent fathers

In the theme: Needs of adolescent fathers, two sub-themes emerged: need for a better life and type of support needed.

4.3.4.1   Sub-theme 4.1: Need for a better life

All participants expressed the desire to making a better life for their children. They indicated the need to progress and complete their studies and have a better career. Thomson (2016:273) confirms that recent studies on the outcomes of adolescent parenting point to poverty. He posits that many adolescent parents live in poverty and continue to experience its many obstacles. Teen parents have lower socio-economic attainment than those who do not have children in adolescence and they are more likely to drop out of school, more likely to be unemployed, and more likely to live in poverty as adults than their peers (Carlson et al 2016:182). These young men were aware of the financial difficulties facing them and appeared to be willing to turn things around for themselves and their offspring.

Adolescent fathers further expressed their need to be given the opportunity by their parents to have access to the baby and partner, as most were being denied. Some expressed their appreciation of their partners' parents for allowing them access to the baby which they believed would help them in becoming better fathers. It is important to recognise the importance of network building and interactions such as personal encounters with the mother in order to help promote feelings of being connected to the child and the parenting role (Nevarez et al 2009: 773; Kirven et al 2014:87).

4.3.4.2   Sub-theme 4.2: Type of support needed

Participants indicated that they were not aware of any social or health services that catered for adolescent fathers. They expressed the need for access to information and social support from the schools, churches and health care facilities in helping them to

cope better with parenting. While a large literature estimates the effects of teenage motherhood on young adult outcomes, much less research has examined the effects of teenage fatherhood (Fletcher & Wolfe 2011:2). Therefore, their needs go unnoticed. Cundy (2016:145) argues that by assessing young fathers' needs at an early age, services will equip them to support their children in the long term. An enhanced collaborative and multidisciplinary network needs to be designed to meet adolescent parents' needs within the community. Cultural norms and traditions related to pregnancy, parenting and family structure might need to be assessed and integrated into individual care (Thomson 2016:275).

Participants also expressed the need to have a good relationship with their parents as they can advise and help them on how to be good fathers. The emotional and physical distance between fathers and adolescent fathers has been found to be detrimental. If adolescent fathers are without much needed support to see them through their transition to fatherhood, they may experience serious personality adjustment challenges because the adolescent's relationship with his parents influences his adjustment to parenthood (Chideya & Williams 2013:210-211). Swartz et al (2013:02) also agrees that the relationship between adolescents and their parents needs to be good so as to encourage support and advice for fatherhood.

The issue of acceptance appeared to be a thread throughout the discussions. Participants expressed their concern regarding parents' and social acceptance. Although they had accepted their mistakes, they wanted to be forgiven and be accepted. Negative attitudes from the nurses at clinics seemed to be a problem due to their funny remarks on adolescent fathers. Lemay et al (2010:222) supported that young fathers often view service providers and social institutions not only as unsupportive, but as an actual barrier to parental involvement with many believing that the staff of hospitals, schools, and social service agencies hinder rather than facilitate their efforts to get involved in parenting. There is a need for acceptance in the community and the partners' family as paternal involvement has the potential to benefit both maternal and child outcomes and can have positive impacts on maternal depression, breastfeeding rates and children's health (Thomson 2016:275).

4.5   CONCLUSION

This chapter discussed and presented relevant literature supporting the themes, sub-themes and categories that emerged from data analysis of descriptions expressed by the participants. The chapter further highlighted the family and community responses regarding pregnancy and the need for support to empower them in being good fathers.

Chapter 5 presents an overview of the study, and discusses the conclusions drawn, limitations that occurred during the study and the recommendations made.

CHAPTER 5

CONCLUSIONS AND RECOMMENDATIONS

5.1 INTRODUCTION

This chapter presents the conclusions and recommendations emerging from the findings. It also presents the contributions made by the study and its limitations.

5.2 RESEARCH METHOD AND DESIGN

The qualitative, explorative descriptive design was used to explore the needs, beliefs and attitudes of adolescent fathers regarding fatherhood and to recommend health promotion initiatives that will address their unique needs.

The objectives of the study were:

- To explore the adolescent fathers' beliefs and attitudes regarding fatherhood.
- To identify the unique needs of the adolescent fathers/to be.
- To make recommendations to health and social development practitioners on measures to address their needs.

The population of the study consisted of adolescent fathers in the Lepelle Nkumpi Municipality within the Capricorn District. Thirteen adolescent fathers were interviewed in-depth individually. Data from the interviews were analysed qualitatively.

5.3 FINDINGS AND CONCLUSIONS

Based on the findings presented in chapter 3 and the literature review in chapter 4, it is concluded that much as the adolescent fathers went through negative emotions initially, they demonstrated full understanding of their obligations towards the children and some towards their partners. It is evident from the findings that there was no other option for them as their parents managed the crisis the traditional way by accepting the wrongdoing of their boys by paying the necessary 'fines'. They had to accept the

responsibility. The findings showed a strong belief in the supporter and provider roles of the father in the family, which could have had an influence on how they perceived themselves as fathers as well as their aspirations to progress in life and be good fathers to their children. Participants' socio-cultural environment might have contributed to needing to be involved in their children's lives. They were all from the low income group and they realised the consequences of their risky behaviour on the already financially depressed families. However, they expressed the need to overcome traditional barriers and wanted their families and the community to forgive and accept them and allow them to participate in their children's upbringing.

5.3.1 Responses to pregnancy

The findings of this study indicate that adolescent paternity is a consequence of high risk sexual behaviour and early sexual initiation. Two adolescents engaged in sexual activity when they were 14 years old, five were 15, the other five were 16 and one was 17. They indicated that they were exposed to sexual education at school and parents discussed issues of sexuality with them albeit few did. Child fatherhood is the consequence of a series of decisions regarding initiation and maintenance of sexual activity and the use of contraception (Landers, Mitchell & Coates 2015:1686). The participants appeared to have gone through the normal stages of stress reaction by experiencing mixed emotions dominated by anxiety, fear, helplessness and frustration when they realised the consequences of their risky behaviour. Fletcher and Wolfe (2011:3) posit that the probability of becoming a father as a teen is tied to certain risk factors, which are likely to influence future outcomes such as dropout from school, early marriages and cohabitation. Hunt et al (2015:3068) assert that adolescent males are often ill-prepared for the responsibilities associated with fatherhood.

Developmental characteristics of adolescence such as insufficient coping skills, lack of emotional control and challenges of identity often compromise the ability to effectively deal with stresses of fatherhood. Therefore, their initial reaction to the pregnancy confirmed that they were also aware of the anguish and embarrassment they had caused their parents and seemed remorseful. It appeared that their families also went through shock, disappointment and despair because of the cultural and traditional expectations of young males in that community but most importantly, due to shame. The financial strain of raising a grandchild whilst living in poverty and also taking care of

the adolescent was an additional burden to families. The findings also show that these young men had to contend with the shame and isolation in the community as such behaviours are frowned upon. The issue of adolescent parenthood provides a challenge to cultural expectations; the question of when a child is old enough to become a parent focuses on social expectations regarding maturity, responsibility and adulthood. Some cultures suggest moral and social undesirability (Tuffin, Rouch & Frewin 2015:485).

5.3.2 Beliefs regarding fatherhood

Participants constructed idealised beliefs regarding fatherhood. Six of them lived with both parents, six lived with the mother and one participant stayed with his father only. They had positive images of a good father and expressed beliefs regarding fatherhood that were consistent with the general or mainstream expectations of the father's role in the family. They believed that a father is an important authority figure in a family who needs to show love and affection for his wife and children, be the provider for their basic needs, teach them fundamental values and, most importantly, be 'present' in their lives.

According to Landers, Mitchell and Coates (2015:1687), the extent to which a father is involved greatly shapes the young man's commitment and responsibility. The provider and disciplinarian roles were highly regarded to prepare young men to be better adults in the future. Hunt et al (2015:3068) confirmed that most adolescents conceptualised the father role as providing a financial contribution to their children. All participants experienced helplessness due to lack of the financial resources needed to fulfil the constructed father role.

Young fathers have frequently been portrayed in the media as unwilling to take responsibility for their children. In contrast, a recent HSRC research study shows that many young fathers want to be active parents and have a strong sense of responsibility towards their children (Human Sciences Research Council 2013:02). This image they had constructed of a 'good father' might have had an impact on how they felt about their predicament and the responsibilities facing them. The involvement and support fathers gave to these adolescent fathers was highly regarded. The lessons regarding being responsible were seen as important for them to come to terms with the situation.

5.3.3 Being a father

It is well-documented that adolescence is a very critical developmental stage. Adolescent fatherhood is a turning point in any young man's life. Participants reported that they felt difficulties in adjusting to the idea of being a father. However, they had no option but to accept the outcomes of their decisions for early sexual encounters. They had to negotiate a unique and often challenging terrain of searching for identity as well as transitioning into fatherhood. They needed to transition and adjust to the new self and they experienced fear, helplessness and anxiety. Individuals who are in an identity crisis tend to struggle with who they are and what they are about (Cervone & Pervin 2013:106). They were aware of the financial needs of the children and, with the images they created of the characteristics of a good father, they needed to straddle the world of adolescence and fatherhood very fast in the best way they knew. They did not have the emotional nor cognitive tools to negotiate this new identity. They simply resigned themselves to the eventuality of no longer receiving the basics from their parents because the little money available was used to cater for the babies' needs.

They were also dependent on their parents, and some showed some level of maturity because they took some part-time jobs to cater for their needs as well as their babies'. Adolescence fatherhood is often associated with reduced educational attainment and greater financial hardship, and it makes it difficult for young males to successfully transit into fatherhood.

They expressed challenges of not being able to fully meet the expectations of fatherhood; however, they were motivated to work harder towards creating a good future for themselves and their children. Their financial dependence seemed to strain relationships with parents as they were constantly reminded of their deeds and were prohibited from continuing the relationship with their partners. They believed that their parents were anxious that they will impregnate the girls again. It is evident that this was a rocky and difficult transition. What was peculiar about them was the sense of hope that seemed to dominate, irrespective of the picture of gloom they painted about their situation. The remorse that was apparent in their voices seemed to suggest a growth point in their lives. Landers et al (2015:1685) argue that research on adolescent fatherhood has largely ignored the possible positive effects that fatherhood poses for

this sub-group. It is plausible that investment into the role of a young father may act as a protective factor against further risky behaviour.

5.3.4 Needs of adolescent fathers

The study showed that adolescent fathers had ambitions for progress and seemed to be having positive plans for the future. It could be the hardships they experienced due to lack of basics that influenced this attitude. They aspired to be involved in their children's lives and acknowledged the importance of the child growing up knowing both parents. Tuffin et al (2015:485) show that, until recently, the adolescent literature was focused on mothers and that the neglect of fathers might have been influenced by a displaced view that fathers were irrelevant to the child's psychological development or from Western beliefs about the prime significance of motherhood. This highlights the inadequate literature on adolescent fatherhood. If there is less published about the young fathers, their needs will be unknown and neglected.

The deficit views focus on discussions of young fathers as absent and unable to meet their responsibilities. This negative construction of adolescent fathers deflects attention from their needs (Tuffin et al (2015:486). There may also be a need for a new psychology of men, as many models emphasise a deficit and remedial approach to men and boys. A positive psychology of boys and men accentuates positive aspects of masculinity, male development and the male socialisation process. Through generative fatherhood, men foster the positive emotional, educational, intellectual and social growth for their children; therefore, understanding adolescent fathers from this perspective could provide a broader understanding of their needs as they straddle the worlds of adolescence and fatherhood (Carlson et al 2016:198).

The participants articulated their needs with passion. They expressed a need for both parental, health, social welfare and community support to assist in their new father roles and continue to fund their education to enable them to realise their dreams and goals for a better future. Khurana and Gavazzi (2011:758) show that the poor academic histories of teen fathers are known to limit their access to stable, well-paying jobs and the vicious cycle repeats itself. Maternal parents were seen as the barrier between the adolescent fathers and their children, that is, denying them access to the baby. Their ambitions of being good fathers were thwarted by parents who discouraged and

prohibited contact between them and their partners. They needed to successfully negotiate that terrain by proving to the families and the communities that there has been a growth point in their lives. Hunt et al (2015:3069) assert that the extent of the father's involvement with his child is shaped by his residential status. Non-residential fathers normally forgot the benefits of involvement and interaction allowable. However, these young men demonstrated the need to be involved in their children's life. Their need for access to information on parenting confirms the level of their commitment. Adolescent fathers needed to be accepted and be forgiven for their mistakes. Emphasis on positive psychology as mentioned earlier, could change the way health and social welfare practitioners respond to the needs of adolescent fathers. The study assumes that it would be demoralising if they continue to be ostracised in the community, irrespective of their desires to turn their lives around and participate in co-parenting.

5.4   LIMITATIONS OF THE STUDY

The following limitations of the study were noted: the study was conducted in one district in the Limpopo Province with adolescent fathers who had adolescent partners.

The researcher used non-probability sampling, which meant that the sample was selected non-randomly, this did not give the potential participants an equal chance of being included in the sample (Flick 2014:174). However, this sampling approach was appropriate for this study. In qualitative research sampling is a very important step, sampling decisions are often taken during and as a result of data collection and analysis. Eligibility criteria; - Recruitment of participants was a challenge, hence the small sample. Most of the boys referred were beyond adolescence stage, so inclusion of young males up to the age of 20 could have yielded more data. However, in-depth data were collected from the participants.

5.5   RECOMMENDATIONS

The ultimate aim of this study was to recommend health promotion initiatives that will address adolescent fathers' unique needs**.** Based on the findings of the study, the researcher makes the following recommendations for further research and health promotion:

5.5.1 Further research

There is a need to research this area further and the factors related to early initiation of sexual activity, including the socio-cultural experiences and the impact on their risky behaviour. It is recommended that further research be conducted on the following topics:

- Impact of social expectations on those without financial resources.
- Precursors of adolescent fatherhood in rural areas.
- Impact of social isolation on masculinity of the young fathers.
- The evaluation of teenage pregnancy programmes.

5.5.2 Support services for adolescent fathers

- Development of programmes that involve young fathers in their children's lives: literature, as described in chapter 4, shows the benefits of young fathers' involvement in raising their children.
- Intersectoral collaboration in health promotion campaigns in order to provide young fathers with relevant and adequate information regarding co-parenting, and to empower them to make good decisions regarding sexual activity.
- School counsellors and mentors need to be made available for adolescent fathers who might be returning to schools to help them cope.
- Nurses to put emphasis on health education on specific needs of adolescent fathers, family planning for the prevention of further pregnancies without being judgemental. Measures to mediate premature role transition could be developed.
- Educational and career development: Adolescent fathers tend to drop-out from schools and lose hope for the future. Support programmes in the community in which they reside would be beneficial. Strategies are needed to support young fathers in acquiring skills to assume financial independence and financial roles for their children.
- Policies that help meet their expectations of being good fathers: Policies on child support, custody and visitation are needed which will help adolescent fathers to have access to their children as most are been denied involvement.

- Community services*:* The service will educate the members of the community to understand adolescent fathers and this will lessen discrimination and involve young fathers and help them develop co-parenting skills.
- Social services*:* Adolescent fathers and their partners could be assisted on promoting healthy relationships with the children. Promotion of healthy fatherhood to minimise risks of another pregnancy is important.

5.6   CONTRIBUTIONS OF THE STUDY

Findings showed that the greatest risk period for becoming an adolescent father was between 15 and 18 years. The study revealed that those adolescents who stayed with both parents have described the main responsibilities and characteristics of a good father better than those who stayed with their mothers. The study also showed that the extent to which a young man is ready for fatherhood is influenced by meaning, interpretations and models participants had regarding fatherhood.

The study highlighted the emotional and psychological difficulties young men go through when confronted with premature role transition. There is scarcity of literature on adolescent fathers, so this study has added to the literature available in South Africa. Contrary to the deficit view of adolescent fatherhood portrayed in literature, this study revealed willingness of these young men to improve and progress, carve a better life for themselves and their children. They also demonstrated willingness to learn co-parenting skills and participate in raising their children. The young fathers had no or less access to financial resources, yet they displayed intention and willingness to participate in the children's lives, they aspired to be different and embraced a more engaged and present fatherhood. However, it is not known how the parental involvement and community traditions and customs influenced this need. It was not the intention of the study to address that aspect.

The importance of healthy relationships between the young men and the children and the mothers is highlighted. The continued relationships may indicate a strength upon which effective parenting skills can be built and promote healthy fatherhood. The presence of a father figure seemed important in participants' views. They believed that a good relationship with a father would influence the manner in which the children view

challenges in life including issues related to paternity. The study had also revealed that many adolescent fathers aspired to have a relationship with the partners so to participate in the upbringing of the child, a positive finding which is contrary to generalised stereotypes about the adolescent father being deviant and uncaring.

5.7 CONCLUSION

This study has explored the needs, beliefs and attitudes among adolescent fathers in Lepelle Nkumpi area. The importance of considering and understanding challenges facing adolescent fathers is acknowledged. Adolescence is a period characterised by unique identity issues, and the struggle of transitioning into adulthood presents special or unique needs that require multi-sectoral interventions. A well-planned systematic analysis of their needs is paramount so that health promotion and health and social care interventions could be tailor-made to the needs, models and interpretations of fatherhood that adolescent fathers expressed. The needs that have been highlighted in this study could form the basis of client-centred policies and community-based services. Parenting programmes need to be accessible to these young fathers and delivered in a non-judgmental manner. Families and communities could also get involved in developing specific social services that address the needs of these young men. Forgiveness and acceptance will be paramount to how they learn their responsibilities and participate in co-parenting. The need for support from social welfare, health services and communities is important.

LIST OF REFERENCES

Ayton, J & Hansen, E. 2016. Complex young lives: a collective qualitative case study analysis of young fatherhood and breastfeeding. *International Breastfeeding Journal* DOI 10.1186/s130006-016-0066-9.

Babbie, E & Mouton, J. 2012. *The practice of social research*. 14th edition. Cape Town: Oxford University Press.

Bade, E. 2012. Teen dad. Young fathers and identity integration. MSW dissertation. St Catherine University. Minnesota.

Bellamy, JL & Banman, A. 2014. Advancing research on services of adolescent fathers: A commentary on Kiselica and Kiselica. *Psychology of Men and Masculinity*, 15(3):281-283.

Botma, Y, Greeff, M, Mulaudzi, FM & Wright, SCD. 2010. *Research in health sciences*. Cape Town: Juta.

Brink, H, Van der Walt, C & Van Rensburg, G. 2012. *Fundamentals of research methodology for health care professionals.* 3rd edition. Cape Town: Juta.

Burns, N, Grove, SK & Gray, J. 2011. *Understanding nursing research: Building an evidenced-based practice*. 5th edition. St Louis: Elsevier.

Burger, JM. 2011. *Introduction to personality*. 8th edition. Wodsworth: Johannesburg.

Cabrera, NJ, Fitzgerald, HE, Bradley, RH & Roggman, L. 2014. The ecology of father-child relationships: An expanded model. *Journal of Family Theory*, 6(1):336-354.

Carlson, J, Kendall, A & Edleson JL. 2016. Becoming a good father: The developmental engine of first-time fatherhood. *Fathering* , 13(3):182-202.

Cervone, D & Pervin, LA. 2013. *Personality theory and research.* 12th edition. USA: Kendallville.

Cherry, K. 2016. *Attitudes and mindset.* From: http://www.verywell.com/kendra-cherry-p (accessed 5 January 2016).

Chideya, NJ & Williams, F. 2013. Adolescent fathers' exploring their perceptions of their role as parent. *Journal of Social Work*, 49(2):209-221.

Christensen, LB, Johnson, B & Turner, LA. 2011. *Research methods, design and analysis.* 11th edition. Boston: Allyn & Bacon.

Coakley, TM. 2013. An appraisal of fathers' perspective on fatherhood and barriers to their child welfare involvement. *Journal of Human Behavior in the Social Environment*, 23(1):627-639.

Collins English Dictionary. 2014. Sv "fatherhood" and sv "role".12th edition. Glascow: Harper Collins.

Creswell, JW. 2014. *Research design: Qualitative, quantitative and mixed methods approach.* 4th edition. Thousand Oaks: Sage.

Cundy, J. 2016. Young dads' journey through fatherhood. *Social Policy and Society,* 15(1):141-153.

de Montigny, F, Lacharité C & Devault A. 2012. Transition to fatherhood: Modeling the experience of fathers of breastfed infants. *Advances in Nursing Science*, 35 (3) 11-22. doi:10.1097/ANS.0b013e3182626167 (Accessed June 5 2017).

De Vos, AS, Strydom, H, Fouché, CB & Delport, CSL. 2011*. Research at grass roots for the social sciences and human service professions.* 4th edition. Pretoria: Van Schaik.

Fletcher, JM & Wolfe, BL. 2011. The effects of teenage fatherhood on young adult outcomes. *Journal of Human Resource*s, 44(1):1-20.

Flick, U. 2014. *An introduction to qualitative research.* London: Sage.

Grove, SK, Gray, JR & Burns, N. 2015. *Understanding nursing research: Building an evidenced-based practice.* 6th edition. St Louis: Elsevier.

Hauari, H &Hollingworth K. 2009. Understanding fathering: masculinity, diversity and change. https://www.jrf.org.uk/report/understanding-fathering-masculinity-diversity-and-change (accessed January 2017).

Hermansen, S, Croninger, B & Croninger, S. 2015. Exploring the role of modern day fatherhood. *Journal of Social Work*, 50(1):495-500.

Holloway, I & Wheeler, S. 2010*. Qualitative research in nursing and health care*. 3rd edition. USA: Blackwell.

Hunt, TKA, Caldwell, CH & Assari, S. 2015. Family economic stress, quality of paternal relationship and depressive symptoms among American adolescent fathers*. Journal of Child Family Study,* 24(1):3067-3078.

Jaime, JA, Robbins, LK & De Los Santos, L. 2016. The talk of unwed adolescent fathers of Mexican origin: A discourse analysis. *Fathering*, 13(3):271-288.

Keshavarz, S & Baharudin, R. 2013. Perceived parenting style of fathers and adolescents' locus of control in a collectivist culture of Malaysia: The moderating role of fathers' education. *Journal of Genetic Psychology*, 174 93): 253-270.

Khurana, A & Gavazzi, SM. 2011. Juvenile delinquency and adolescent fatherhood. *Journal of Offender Therapy and Comparative Criminology*, 55(5):756-770.

Kim, L, Knudson-Martin, C & Tuttle, A. 2014. *Family Process*, 53 (1): 55-66.

Kirven, J. 2014. Helping teen dads obtain and sustain paternal success. *Journal of Child Education,* 29(2):85-88.

Kiselica, MS & Kiselica, AM. 2014a. The complicated worlds of adolescent fathers: Implications for clinical practice, public policy, and research. *Psychology of Men and Masculinity,* 15(3):260-274.

Kiselica, AM & Kiselica, MS. 2014b. Improving attitudes, services, and policies regarding adolescent fathers: An affirming rejoinder. *Psychology of Men and Masculinity*, 15(3):284-287.

Landers, MD & Mitchell, O & Coates EE. 2015. Teenage fatherhood as a potential turning point in the lives of delinquent youth. *Child Family Study*, 24(1):1685-1696.

Leather, C. 2009. Risk taking behavior in adolescence: a literature review. *Journal of Child Health care,* 13 (3):295-304.

Leedy, P & Ormrod, JE. 2010. *Practical research: Planning and design*. 9th edition. New Jersey: Pearson Education.

Lemay, AC, Cashman, SB, Elfenbein, DS & Felice, ME. 2010. A qualitative study of the meaning of fatherhood among young urban fathers. *Public Health Nursing*, 27(3):221-231.

Lepelle Nkumpi Municipality. 2017.
From: http://www.goggle.co.za/#lepelle+nkumpi+ map (accessed 24 January 2017).

LoBiondo-Wood, G & Haber, J. 2010*. Nursing research methods and critical appraisal for evidence-based practice.* 7th edition. St Louis: Mosby Elsevier.

LoBiondo-Wood, G & Haber, J. 2014. *Nursing research methods and critical appraisal for evidence-based practice*. 8th edition. St Louis: Mosby Elsevier.

Maslow, AH. 2009. Maslow's hierarchy of needs. From: http://www.learning-theories.com/maslows-hierachy-of-needs.html (accessed June 2015).

Maxwell, N, Scourfield, J, Featherstone, B, Holland, S & Tolman, R. 2012. Engaging fathers in child welfare services: A narrative review of recent research evidence. *Child and Family Social Work,* 17 (2): 160-169.

Maxwell, JA. 2013. *Qualitative research design: An interactive approach*. 3rd edition. Thousand Oaks: Sage.

Mazembo, ME, Thomson-de-Boor, H & Mphaka, K. 2013. So we are the ATM fathers: A study of absent fathers in Johannesburg, South Africa. From https://www.uj.ac.za/faculties/humanities/csda/Documents/Absent-fathers-full-report%202013.pdf   (Accessed June 06 2017).

Meteyer K., Perry-Jenkins M. (2010). Father involvement among working-class, dual-earner couples. *Fathering*, 8, 379-403. doi:10.3149/fth.0803.379 (Accessed 5 June 2017).

Morrel, R. 2006. Fathers, Fatherhood and Masculinity in South Africa, In Richter L. & Morell R. (Eds.), Baba: Men and Fatherhood in South Africa. 13-23. Cape Town: HSRC Press.

Morrell, R, Jewkes, R & Lindegger, G. 2012. Hegemonic masculinity/masculinities in South Africa: culture, power and gender politics. *Men and masculinities*, 15 (1): 11-30.

Moule, P & Goodman, M. 2014. *Nursing research: An introduction*. 2nd edition. Thousand Oaks: Sage.

Nevarez, L, Weinman, ML, Buzi, RS & Smith, PB. 2009. Ethnic and marital differences in family structure, risk behaviors and service requests among young minority fathers. *Journal of Human Behavior in the Social Environment*, 19(1):773-786.

Nilsson, A. 2014. *Humanistic and normativistic metaphysics epistomology and conative orientation:* Two fundamentals systems of meaning. From: http://books.google.co.za (accessed 20 January 2017).

Papilia, DE & Feldman, RD. 2011. *A child's world: Infancy through adolescence*. 12th edition. McGraw-Hill: New York.

Parra-Cardona, JR, Wampler, RS & Sharp, EA. 2006. 'Wanting to be a good father': Experiences of adolescent fathers of Mexican descent in a teen fathers' program. *Journal of Marital and Family Therapy*, 32(2):215-231.

Paschal, AM, Lewis-Moss, RK & Hsiao, T. 2011. Perceived fatherhood roles and parenting behaviors among African American teen fathers. *Journal of Adolescent Research*, 26(1):61-83.

Pinzon, JL & Jones, VF. 2012. Care of adolescent parents and their children. *Journal of Peadiatrics*, 130(6):e1743-e1756.

Pleck, J. 2010. Fatherhood and masculinity. From: https://www.researchgate.net/publication/242655048 (Accessed 12 January 2017).

Polit, DF & Beck, CT. 2012. *Nursing research. Generating and assessing evidence for nursing practice.* 9th edition. Philadelphia: Lippincott.

Ratele, K, Shefer, T & Clowes, L. 2012. Talking South African fathers: A critical examination of men's constructions and experiences of fatherhood and fatherlessness. *Journal of Psychological Society of South Africa*, 42(4):553-563.

Richter, L, Chikovore, J & Makusha, T. 2010. The status of fathering in South Africa. *Child Education*, 86 (6):360-365.

Saks, M & Allsop, J. 2013. *Research health: Qualitative, quantitative and mixed methods.* 2nd edition. Thousand Oaks: Sage.

Santrock, JW. 2014. *A tropical approach of life span development.* From: http://books.google.co.za (accessed 16 September 2015).

Shade, K, Kools, S, Weiss, SJ & Pinderhughes, H. 2011. A conceptual model of incarcerated adolescent fatherhood: Adolescent identity development and concept of intersectionality. *Journal of Child and Adolescent Psychiatric Nursing*, 24(1):98-104.

Shirani, F, Henwood, K & Coltart, C. 2012. Why aren't you at work?: Negotiating economic models of fathering identity. *Fathering*, 10 (3): 274-290.

Streubert, HJ & Carpenter, DR. 2011. *Qualitative research in nursing: Advancing the humanistic imperative.* 4th edition. Philadelphia: Lippincott.

Swartz, S, Bhana, A, Ritcher, L & Versfeld, A. 2013. '*Teenage Tata': voices of young fathers in South Africa*. From: http://www.hsrc.ac.za (accessed 14 January 2017).

Taylor, B & Francis, K. 2013. *Qualitative research in the Health Sciences: Methodologies, methods and processes*. USA: Routledge.

Thomson, G. 2016. Meeting the needs of adolescent parents. *Pediatric Child Health* 21(5):273-278.

Thompson, SD & Johnson, CA . 2013. *Risk and protective factors related to adolescent fatherhood: A multi-ethnic comparison*.
From: http://www.search.proquest.com/docview/3568886767accountid=14648
(accessed 17 October 2016).

Weathington, BL, Cunningham, JL & Pittenger, DJ. 2010. *Research methods for the behavioral and social sciences*. 2nd edition. Hoboken: New Jersey.

Weber, JB. 2012. Becoming teen fathers: Stories of teen pregnancy, responsibility and masculinity. *Journal of Gender and Society*, 26(6):900-921.

Wilkes, L, Mannix, J & Jackson, D. 2011. 'I am going to be a dad': Experiences and expectations of adolescent and young adult expectant fathers. *Journal of Clinical Nursing,* 21(1):180-188.

Woolston, C. 2014. *Best fiction for young adults*. From: http://www.ala.org/yalsa/2014-best-fiction-young-adults (accessed 12 January 2016).

ANNEXURES

ANNEXURE A

Parents' information/assent form

I confirm that the person asking my permission for my child's participation in the study explained to me the contents of the information sheet, and I have read all of it and understood it. I am aware that the researcher will hold in confidence all information gathered during this study and that the results will be anonymous and will not be linked to my son. I hereby grant permission for my son to take part in the study voluntarily.

I am also aware that confidentiality and privacy will be maintained throughout the study.

Parent/guardian's   name
(please print)

Parent/guardian's
signature and date

Childs name (please print)

Child's date of birth

Investigator's name

ANNEXURE B

Participant information leaflet and informed consent form

TITLE OF THE STUDY: An exploration of adolescent fathers' needs, attitudes and beliefs regarding fatherhood in Limpopo Province

Dear participant

1. Introduction

You are invited to take part in a research study. The information leaflet is provided to help you decide whether you wish to participate in the present study.

Please take time to read the following information carefully and discuss it with others if you wish. Ask the researcher if there is anything that is not clear or if you would like more information.

2. The nature and purpose of the study

The purpose of the study is to explore the needs, beliefs and attitudes young men have regarding their roles as fathers in order to propose strategies and identify health care modalities to support them. Information obtained will result in knowledge to propose strategies and recommendations to support adolescent fathers.

3. Risks and discomfort involved

It is possible that you might experience emotional or psychological discomfort while sharing your views. Everything possible will be done to make you comfortable.

4. Possible benefits of the study

Participation in the study will give you the opportunity to share your views in a safe environment. Your contribution will benefit yourself and other teenagers through future implementation of proposed recommendations by the relevant health authorities. When the study is completed, you will be notified about the results and outcome of the study if you so wish.

5. Participants' rights

Participation is voluntary. You may decide to stop participating at any time, without any punishment or penalty.

The researcher will ask for permission before the start of the study, and you can stop at any point.

Feel free to ask questions at any time. If you have any questions as a result of reading this information sheet, you should ask the researcher before the study begins.

6. Time commitment

The study typically takes about 60 minutes per session. The researcher will ensure your sense of dignity and respect.

Your participation is voluntary. No compensation will be given for your participation in the study.

7. Confidentiality

The information collected will be treated as confidential. The data will not be linked to any identifying information (e.g. name, address or email) that you have supplied. The data collected will be presented in academic publications and only averaged data over many participants will be identifiable. The interviewer will be the one transcribing the interviews and the independent research expert will sign the confidentiality clauses to ensure that information remains confidential.

8. Ethical approval

This study will receive written approval from the Research Ethics Committee of the Faculty of Health Sciences at the University of South Africa (UNISA) as well as the authorities in Limpopo prior to implementation.

9. Contact details

The contact persons for the study are:

The researcher: Ms. RG Monepya at (072) 327 2226

The supervisor: Dr. MM Ramukumba at (012) 429 6719 during office hours.

Circle the number which suits you:

1. **I volunteer to participate.**
2. **I do not wish to participate.**

Your participation is appreciated.

ANNEXURE C

Letter seeking permission from Department Of Health, Limpopo

<div align="right">

PO Box 2042
GROOTHOEK
 0628
17 September 2015

</div>

The Senior Manager PHC
Private Bag X9302
POLOKWANE
O700

Dear Sir/Madam

Request for permission to conduct a research study

I am a student at University of South Africa (UNISA) currently registered for a Masters' degree in Nursing Science. I hereby request permission to conduct a research study at Lepelle Nkumpi Municipality at the following clinics: Lebowakgomo and Unit F.

My research supervisor is Doctor MM Ramukumba, Department of Health Studies, UNISA. The study is entitled: **An exploration of adolescent fathers' needs, attitudes and beliefs regarding fatherhood in Limpopo Province.** The aim of this study is to explore the needs, attitudes, and beliefs of adolescent fathers regarding fatherhood and to recommend health promotion initiatives that will address the unique needs of this group to enable them to manage this phase of their lives effectively**.**

I require adolescent fathers aged between 13 and 19 years to assist me with obtaining data. Participants will fill consent forms and their guardians/parents will also be consulted in this regard. No interview will be conducted without their consent. Individual interviews will be conducted.

Attached are the research proposal and the ethical clearance certificate from UNISA.

Thank you in anticipation of a positive response and for the efforts to be taken to assist me in this regard.

Kind Regards
Monepya Refilwe Gift
Email: refilwemonepya@gmail.com
Cell no: 072 327 2226

ANNEXURE D

Letter seeking permission from Department Of education, Limpopo, Lebowakgomo Circuit

PO Box 2042

GROOTHOEK
0628
16 February 2016

The Circuit Manager
Lebowakgomo Circuit
Private Bag X 25
CHUENESPOORT
O745

Dear Sir/Madam

Request for permission to conduct a research study

I am a student at University of South Africa (UNISA) currently registered for a Masters' degree in Nursing Science. I hereby request permission to conduct a research study at Lepelle Nkumpi Municipality at the following secondary schools: Mosepedi, Mogodumo and Lebowakgomo.

My research supervisor is Doctor MM Ramukumba, Department of Health Studies, UNISA. The study is entitled: **An exploration of adolescent fathers' needs, attitudes and beliefs regarding fatherhood in Limpopo Province.** The aim of this study is to explore the needs, attitudes, and beliefs of adolescent fathers regarding fatherhood and to recommend health promotion initiatives that will address the unique needs of this group to enable them to manage this phase of their lives effectively.

I require adolescent fathers aged between 13 and 19 years to assist me with obtaining data. Participants will fill consent forms and their guardians/parents will also be consulted in this regard. No interview will be conducted without their consent. Individual interviews will be conducted.

Attached are the research proposal and the ethical clearance certificate from UNISA.

Thank you in anticipation of a positive response for and the efforts to be taken to assist me in this regard.

Kind regards

Monepya Refilwe Gift
Email: refilwemonepya@gmail.com
Cell no: 072 327 2226

ANNEXURE E

Interview guide

SECTION A: BIOGRAPHIC INFORMATION

Ensuring that study participants fall within 'adolescents'

How old are you?

Can early involvement of adolescent issues affect adolescent fathers?

How old were you when you become sexually active?

Does the participant live with any of the supporting systems?

Are you living with both parents?

What type of relationship do you have with your father?

Other supporting systems

Have you ever received any guidance or education about adolescent issues at school or at home?

Conditions within the family

Can you classify your family as being rich, middle or poor?

Number of children

How many children do you have?

Confirming the age for the first involvement, concerns how serious support is needed

How old were you at your first child's birth?

SECTION B: GRAND TOUR QUESTIONS

Opening questions, setting the scene:

1. What was your reaction when you were told about the pregnancy?
2. How did the community/family respond to you as an adolescent father?
3. What challenges do you experience being a father?

Attitude and beliefs regarding fatherhood

4. In your view, what are the characteristics of a good father?
5. How do you view yourself as a father?
6. How do you feel about being a father?

Needs during this stage

7. What are your plans regarding the baby?
8. What do you need in order to achieve your plans?
9. How much support do you think you need?

ANNEXURE F

Permission letter from Department of Health, Limpopo Province

LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF HEALTH AND SOCIAL DEVELOPMENT
CAPRICORN DISTRICT

Enq	: Malema DMM
Tel	: 015 290 9266
From	: Primary Health Care
Date	: 30 September 2015
To	: RG Monepya Groothoek 0628
Cc	: Lepelle Nkumpi Municipality facilities
Subject	: An exploration of adolescent fathers needs attitudes and beliefs regarding fatherhood in Limpopo

The above matter bears reference

1. Permission has been granted to conduct the above mentioned research.

2. Kindly be informed that :

   - In the course of your research there should be no action that disrupts the services.
   - After completion of the research, a copy should be submitted to the Department to serve as a resource.

Your cooperation will be highly appreciated.

P.P. MH Shabalala
Action Senior Manager PHC

30/09/2015
Date

ANNEXURE G

Permission letter from Department Of Education, Limpopo, Lebowakgomo Circuit

LIMPOPO
PROVINCIAL GOVERNMENMENT
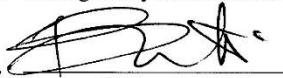REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF EDUCATION
Lebowakgomo Circuit Office

Ref.N : 17/P Enquiries: Dibetso R F Tel No: 015 633 5059 Date: 02 March 2016

To: Principals
Lebowakgomo Circuit Secondary School
Lebowakgomo

SUBJECT: REQUEST FOR PERMISSSION TO CONDUCT A RESEARCH STUDY

1. The abovementioned matter refers
2. This office was approached by Ms RG Monepya to request permission to conduct research in your school and her research is aimed at adolescents aged between 13 and 18 years.
3. She is studying towards her Master's degree in Nursing Science with the University of South Africa and intends collecting data from participants which will be treated with confidentiality.
4. You are kindly requested to assist her with whatever information she may require from your school at your earliest convenient time.
5. We regret any inconvenience caused.

Pheme ND
Circuit Manager

02/03/2016
Date

2016 -03- 0 2
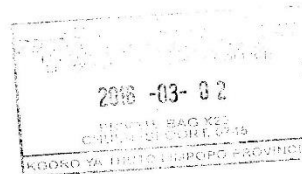
DEPARTMENT OF EDUCATION,
Lebowakgomo Circuit Office
Tel 015 633 5059 Fax No. n/a

The heartland of Southern Africa – development is about people

ANNEXURE H

Department of Health Studies, Higher Degrees Committee, Unisa: Ethical Clearance Certificate

UNISA | university of south africa

UNIVERSITY OF SOUTH AFRICA
Health Studies Higher Degrees Committee
College of Human Sciences
ETHICAL CLEARANCE CERTIFICATE

REC-012714-039

HSHDC/427/2015

Date: 15 July 2015   Student No: 4464-138-9

Project Title: Exploration of adolescent fathers' needs, attitudes and beliefs regarding fatherhood in Limpopo.

Researcher: Monepya Refilwe Gift

Degree: MA in Nursing Science   Code: MPCHS94

Supervisor: Dr MM Ramukumba
Qualification: PhD
Joint Supervisor: -

DECISION OF COMMITTEE

Approved   √   Conditionally Approved   ☐

Prof L Roets
CHAIRPERSON: HEALTH STUDIES HIGHER DEGREES COMMITTEE

Prof MM Moleki
ACADEMIC CHAIRPERSON: DEPARTMENT OF HEALTH STUDIES

PLEASE QUOTE THE PROJECT NUMBER IN ALL ENQUIRES