

The effects of teenage pregnancy on the behaviour of learners at secondary schools in the Mankweng area, Limpopo

by

MALAHLELA MOYAGABO KATE

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Supervisor: Professor R. Chireshe

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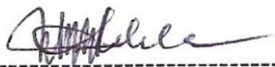
ABSTRACT

The aim of this study was to investigate the educators' perceptions of the effects of teenage pregnancy on the behaviour of secondary school learners in Mankweng area, Limpopo province. The study sought to establish whether teenage pregnancy has an effect on school attendance, school performance and emotional behaviour of pregnant learners as perceived by educators. Fourteen educators from seven secondary schools in Mankweng area were purposively sampled for the study. Data was collected using in-depth interviews to allow the researcher a platform to ask open-response questions and to explore the educators' perspectives about the effects of teenage pregnancy. The data was analysed thematically by carefully identifying and expanding significant themes that emerged from the informants' perceptions about the effects of teenage pregnancy. The study revealed that teenage pregnancy has a negative or detrimental effect on the school attendance, academic performance, emotional behaviour and relationships between pregnant teenagers, their peers and educators. The study recommends that sex education should be taken seriously in secondary schools; educators should liaise with health professionals in the community; pregnant learners to be supported and not humiliated or stigmatized by school stakeholders; educators to encourage teenagers to use preventative and protective measures and to encourage learners to delay engaging in sexual relationships.

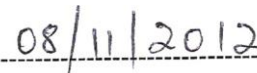
Key terms: Teenage pregnancy; Educators' perceptions; Effects; School attendance; Secondary school; School performance; Behaviour; School dropout; Relationships; Strategies

DECLARATION

I, Moyagabo Kate Malahlela, solemnly declare that the dissertation hereby submitted to the University of South Africa for the degree of Master of Education in Inclusive Education has never been submitted by me or any other person at this or any other University, that this is my own work in design and execution, that I am aware of the implications of plagiarism as academic dishonesty, and that all sources of reference used have been duly acknowledged.



Signature



Date

ACKNOWLEDGEMENTS

Above all, I would like to thank God Almighty for being with me throughout my period of study.

Special thanks to my Supervisor, Professor Regis Chireshe for his immeasurable and exceptional academic support and guidance to make me succeed.

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DEDICATION

I would like to specially dedicate this Dissertation to my husband Pastor Malahlela L.J for his immeasurable support and love. May God richly bless you “Mohlalerwa!”

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CHAPTER 1

ORIENTATION TO THE STUDY

1.1 INTRODUCTION

The aim of this study was to establish the views and opinions of secondary school educators concerning the effects of teenage pregnancy on the academic performance, emotions and school attendance of the affected learners in Limpopo Province, Polokwane. This chapter covers the background to the study, statement of the problem, sub-research questions, objectives of the study, significance of the study, theoretical framework, limitations of the study, delimitation of study and definition of terms.

1.2 BACKGROUND TO THE STUDY

Globally, 15 million women under the age of 20 give birth, representing up to one-fifth of all births and 529, 000 women die due to pregnancy and childbirth related complications every year (Dev Raj, Rabi, Amudha, Van Teijlingen & Chapman, 2010:4). Teenage pregnancy is a major concern to world communities with the US being at the top with almost 1,000,000 teenage pregnancies each year (Williams, 2010:1). The United States has the highest pregnancy and births among adolescents (Coley & Lansdale, 1998) cited in Chang'ach (2012:3). According to the Inter-press Service (2011), the global rate for teenage pregnancy for the year 2011 was 52, 9 pregnancies per 1,000 female adolescents. In, 2000 the total number of teenage pregnancies in the United States was 821, 81 (84 pregnancies per 1000 people), as compared to Canada whose total rate of teenage pregnancies in 2000 was 38,600 (38 pregnancies per 1000 people) (Chang'ach, 2012:4).

In England there are nearly 90,000 teenage conceptions per year ; around 7.700 to girls under the age 16 and 2,200 to girls aged 14 or under (Holgate, Evans & Yuen, 2006:9). The Department of Health (United Kingdom) in Macleod (2011:137) reports that in England and Wales, more women in their early twenties find themselves with unwanted pregnancies that end in abortion. The United States has the highest teenage birth rate of all developed countries (Crosson-Tower, 2007:280). This statement is also verified by McWhirter, McWhirter, McWhirter, and McWhirter, (2007:160) when they maintain that the United

States has the highest teen pregnancy and birth rates among comparable industrialised nations which is twice as high as Great Britain and ten times higher than the Netherlands. In the United States, 800,000 to 900,000 adolescent girls who are 19 years of age or younger become pregnant each year (Centres for Disease Control and Prevention, 2000). The UK has the highest rate of teenage pregnancies in Western Europe and between 1998 and 2006 the under 18-conception rate in England and Wales remained higher than other western European countries, three times higher than in Germany (Lemos, 2009:14).

According to Inter-Press Service (April 2011), teenage pregnancy accounted for 40 per cent of maternal deaths in Sierra Leone, where early marriage is supported by traditional practice. Seventy per cent of teenage girls in Sierra Leon are married (World Health Organisation, 2008). The WHO figures show that the global average number of pregnancies for every 1,000 girls in the 15-19 age group is 65. In Asia it is 56, and it rises to 70 in Thailand. In the Indian subcontinent, early marriage sometimes means adolescent pregnancy, particularly in rural regions where the rate is much higher than it is in urbanized areas. The rate of early marriage and pregnancy has decreased sharply in Indonesia and Malaysia, although it remains relatively high in the former.

In Africa, the sexual behaviour of urban adolescents in Nigeria and Liberia is now very similar to that of people in the same age category in the USA and Europe (UNICEF, 2006). In the same continent (Africa), girls are often married at a young age and are under pressure to give birth to children. According to UNICEF (2006), Bangladesh has almost 16 per cent of fifteen-year old girls who are pregnant or already have children, whereas 75 per cent of girls in the Democratic Republic of Congo and over half of all girls in Afghanistan and Bangladesh are married before the age of 18. The survey conducted by a leading International Organisation called "Save the Children" stated that annually 13 million children are born to women under the age of 16 years and more than 90 per cent in developing countries. It is also said that the highest rate of teenage pregnancy in the world was found in the sub-Saharan Africa (Chang'ach, 2012:3).

In sub-Sahara African countries, girls and women are losing the battle for equal access to secondary education. In South Africa, 61 per cent of the uneducated adult population are women (James, Auerbach, Desai, Giliomee, Jordan, Krog, Kulati, Lehoko, Leibowitz & Tlakula, 2000:18). In many developing countries such as Kenya, teenage pregnancy has been one of the major hindrances to the educational success of girls. As more young women

remain in school past puberty in sub-Saharan Africa, more students are exposed to the risk of becoming pregnant (Mensch, Clark, Lloyd, & Erulka, 2001:285; Eloundou-Enyégué, 2004:509).

According to the Education Management Information systems (EMIS) data for 2004-2008, the Education Department in South Africa registered 51 pregnancies for every 1000 female learners and that there was a steady increase in the proportion of learners who had become pregnant during the period. Runhare and Vandeyar (2011:4105) support this statement when they postulate that due to the democratisation of education in South Africa, there are indications that the population of pregnant and former pregnant learners in formal schools is on the increase. A study, using 2001 data from KwaZulu-Natal, found that 32 per cent of 14-19-year-olds who have ever been pregnant were currently attending school (Grant & Hallman, 2006:3).

According to Department of Health records, over 70 000 termination of pregnancies were reported in South African public health facilities in 2003, representing a 20,0 per cent increase (Bradshaw, Boumne & Naman, 2003:40). Health Statistics (2007) showed that teenage pregnancy rate in South Africa is 90 per cent and the implication thereof is that the majority of teenagers do not complete their secondary schooling. The report from SABC (Infocus , South Africa, News headlines 10a.m – April 14, 2011) says, “ South Africa’s health ministry recently released statistics showing that almost 5,000 school girls in Johannesburg became pregnant in just one school year”, VOA’s Paul Ndiho reports. Provinces that currently showed high pregnancy rates in South Africa include the Eastern Cape with 68,81 pregnant pupils per 1,000 registered, KwaZulu-Natal with 62,24 and Limpopo , with 60,36 (SAPA News 24’s Comments Policy of 2009-08-28 22:18). Chang’ach (2012:4) maintains that figures released by the South African provincial education department indicate that school girl pregnancy have doubled in the past years, despite a decade of spending on sex education and that the number of pregnant school girls jumped from 1,169 in 2005 to 2,336 in 2006 in Gauteng, the country’s economic heart land and most populous province. This information has been released by the provincial parliament (Johannesburg, 6th March 2007).

A consensus has still not been reached with regard to the prevalence of behaviour problems in pregnant and parenting adolescents (Sieger, 2007:588). Some studies (Milan, Ickovics, Kershaw, Lewis, & Meade, 2004:329) have shown that behaviour problems are common in

pregnant and parenting learners, with both groups demonstrating similar rates of such problems. The high proportion of unintended pregnancies for teenagers in South Africa remains a serious challenge to both the schools as learning institutions, the Department of Education, and various community stakeholders. It is against this background that this study sought to investigate educators' perceptions on the effects of teenage pregnancy on the behaviour of learners from rural secondary schools around Mankweng area.

1.3 STATEMENT OF THE PROBLEM

In many developing countries such as Kenya, Zimbabwe and Zambia, teenage pregnancy has been one of the major hindrances to the educational success of girls (James, Auerbach, Desai, Giliomee, Jordan, Krog, Kulati, Lehoko, Leibowitz & Tlakula, 2000:18). As more young women remain in school past puberty in sub-Saharan Africa, more students are exposed to the risk of becoming pregnant (Mensch et al. 2001:286 ; Eloundou-Enyégué 2004:509). This study attempted to answer the following main research question:

What are educators' perceptions of the effects of teenage pregnancy on behaviours of learners in rural mainstream secondary schools?

1.4 SUB-RESEARCH QUESTIONS:

The following sub-research questions were addressed in order to answer the main question of the study.

- i) To what extent do educators perceive teenage pregnancy as affecting school attendance rate?
- ii) How do educators perceive the emotional behaviour of pregnant teenagers?
- iii) What are educators' perceptions regarding the school performance of teenage girls who fall pregnant at secondary school level?

1.5 OBJECTIVES OF THE STUDY

The objectives of the study were to:

- find out from educators whether or not teenage pregnancy has an effect on school attendance.
- discover the educators' perceptions about the emotional behaviour of pregnant teenagers.
- examine the effects of teenage pregnancy on the performance of teenagers who fall pregnant while attending secondary school.

1.6 SIGNIFICANCE OF THE STUDY

The results of this study will to a larger extent be useful to the practitioners in the Department of Education such as educators at secondary school level and the Department of Health and Social welfare. Educators at secondary schools will acquire knowledge on how to handle the behavioural problems related to teenage pregnancy. The rural secondary schools and their communities will be educated and encouraged to prevent more incidences of teenage pregnancy.

The department of health and social welfare can use the information or the results of this study to assist the affected learners. The study is directed towards the knowledge base of the social work profession so as to create a better understanding of the issues teenagers are confronted with. Social workers would probably also gain more insight into the phenomenon which will enable them to respond positively and effectively towards extending a helping hand to learners who fall victim to teenage pregnancy.

The authorities and policy-makers in the Department of Education may use information derived from this study to come up with policies to address the phenomenon called teenage pregnancy. The results of this study may also be used by the researchers as a baseline study for future studies in the area.

1.7 THEORETICAL FRAMEWORK

The theoretical framework of this research draws particularly on Rational Emotive Behaviour Therapy (REBT) which was developed by Albert Ellis (1913-2007) early in 1955 (Corey, 2009:273-275). This theory is based on the assumption that cognitions, emotions, and behaviours interact significantly and have a reciprocal cause-and-effect relationship. Ellis contends that human beings are born with both rational (straight thinking) and irrational (crooked thinking). Since this study is aimed at finding the perceptions of educators about the effects of teenage pregnancy, the researcher will be able to detect various ways of thinking on the side of educators concerning the research problem.

The A-B-C framework which is central to REBT theory and practice is closely related to this study because it will provide a useful tool for understanding the educators' feelings, thoughts, and their views concerning the effects of teenage pregnancy. With regard to this model of the REBT theory, 'A' is the existence of a fact, an activating event. In this study, it elucidates the existence of a fact or activating event, which is 'teenage pregnancy'. 'B' is the behaviour or an attitude of an individual, or the person's belief about 'A'. The behaviour of a pregnant teenager which usually triggers undesirable consequences such as among others, dropping-out of school or poor academic performance, might to some extent be the result of their attitude towards the incident of being a victim of teenage pregnancy. 'C' denotes the emotional consequence, which is largely caused by 'B' (the person's belief about 'A') (Corey, 2009:278). If a girl learner at secondary school experiences depression as an emotional behaviour after falling pregnant (which is one of the consequences or effects of teenage pregnancy), it may not be pregnancy itself that causes the depressive reaction, but her beliefs about being a failure, and having lost her reputation and identity as a young person by being a mother-to-be before the appointed time.

1.8 LIMITATIONS OF THE STUDY

The study was limited by the following constraints which ultimately influenced the acquisition of knowledge gained about teenage pregnancy: interviewing the participants after working hours made some of them feel they were being deprived of their leisure time; interviews were conducted at the time when schools were about to close for winter vacations

and some of the participants were under duress; some educators had to reschedule their interview appointments with the researcher for another date due to their personal reasons; the researcher experienced financial constraints such as transport costs when moving from one school to another.

1.8.1 Overcoming the Limitations

The researcher ensured always being on time for interview sessions after working hours and working within the perimeters of the duration of interviews agreed upon to avoid anxiety on the side of the participants.

The challenge that was posed by limited time due to closing of schools was dealt with by working very hard and at a faster pace in order to acquire enough and relevant information about the study.

The researcher made sure to accommodate those participants who rescheduled their appointments for interviews for others dates to allow them time for mental relaxation so that they could expand their views about the effects of teenage pregnancy in their interview sessions.

In order to overcome the problems related to financial constraints, the researcher persevered and did all means possible to achieve good results in the study.

1.9 DELIMITATIONS OF THE STUDY

This research was undertaken in Mankweng Cluster secondary schools, Capricorn district in Limpopo Province. The cluster comprises of secondary schools located in places such Makeketela, Mamotintane, Segopje, Ga-Thoka and Mankweng unit A and D. The focus of this study was on the effects of teenage pregnancy on the behaviour of learners from rural secondary schools as perceived by educators.

1.10 DEFINITION OF CONCEPTS

The following concepts are to be defined in this study:

1.10.1 School performance

School performance is how well students meet standards set out by the institution or school itself, which catches the attention of parents, legislators and government education department alike (Bell, 2011:1). In this study, school performance entails the outcomes of the evaluated learners' tasks for regular grading whereby learners in rural secondary schools demonstrate their knowledge by taking written and oral tasks, perform in presentations and participating in class activities and discussions, which also include standardised tests geared towards specific ages in a school and based on a set of achievements learners in each age group is expected to meet (Bell, 2011:1).

1.10.2 Emotional behaviour

Emotional behaviour is defined by Saunders (2003) as a state of arousal characterised by alteration of feeling tone and by physiologic behavioural changes, such that the physical form of emotion may be evident to others, as in crying, laughing, blushing, or a variety of facial expressions. Emotional behaviour in this study entails the behavioural patterns manifested in pregnant or mothering teenagers at secondary school level, which emanate from anxiety and stress disorders that account for their learning difficulties, low self-esteem and a feeling of being more grown-up than their peers, denoting that the feeling of being a school girl is no longer appropriate when they are mums (Holgate, Evans & Yuen, 2006:70).

1.10.3 Teenage pregnancy

Teenage or adolescent pregnancy means pregnancy in a woman aged 10 to 19 years (Treffers, 2004:5). The *eHow* (Spencer, 2011) defines teenage pregnancy as pregnancy occurring in a young girl between the age of 13 and 19, whereas Macleod (2011:45) defines teenage pregnancy as a social problem in which adult practices and functions (sexual intercourse, reproduction, mothering) are displayed by a person who, owing to her age and developmental status, is not-yet-adult, that is, adult, but not adult, child, but not child. Teenage pregnancy in this study entails falling pregnant and parenting of younger girls in secondary schools, aged between 13 and 19 and enrolled in grades 8 to 12, which have various effects on one's educational progress and negative implications for one's future adjustment into life in general.

1.10.4 Rural secondary schools

These are schools found in rural areas that do not have sufficient teaching and learning aids to enhance the teaching and learning process (Wanda, 2007:1). According to this study, rural secondary schools are public schools which are attended by children from poorer families who are generally deprived of essential services, living below the poverty line where drop-out rates and grade repetition are higher with only a small part of the population completing secondary education (Macedo, 2003:5).

1.11 CHAPTER OUTLINES

The Study is divided into the following chapters:

Chapter 1 : Orientation to the Study

This chapter covered the background to the study, statement of the problem, sub-research questions, objectives to the study, significance of the study, theoretical framework, limitations of the study, delimitation of study, and definition of terms.

Chapter 2 : Literature review

This chapter reviews literature under the following subheadings: teenage pregnancy and school attendance, teenage pregnancy and emotional behaviour, and teenage pregnancy and school performance.

Chapter 3 : Research Methodology

The research methodology in this chapter deals with design, sample, instrumentation, procedure, data analysis, and ethical issues such as: permission, informed consent, confidentiality, and anonymity.

Chapter 4 : Data Presentation, Analysis and Discussion

This chapter outlines the presentation of data derived from primary sources of information such as educators. It also encompasses these educators' various perceptions about the effects of teenage pregnancy, data analysis and discussions about the findings.

Chapter 5 : Summary, Conclusion and Recommendations

This chapter will summarise all the findings and discussions made, give conclusions about the effects of teenage pregnancy and the recommendations on how to deal with or to prevent future occurrences of teenage pregnancy in rural secondary schools.

1.12 CONCLUSION

This chapter has covered background to the study, statement of the problem, sub-research questions, objectives of the study, significance of the study, theoretical framework, limitations of the study, delimitation of the study, and definition of terms. Chapter two covers review of literature.

CHAPTER 2

LITERATURE REVIEW

2.1 INTRODUCTION

The aim of the study was to discover educators' perceptions of the effects of teenage pregnancy on the behaviour of learners from rural secondary schools in Mankweng area, South Africa. This chapter outlines the review of literature. The literature is presented under sub-headings derived from the study's sub-research questions. The sub-headings are: Teenage pregnancy and school attendance, teenage pregnancy and emotional behaviour, and teenage pregnancy and school performance. Gaps to be filled by the present study are highlighted.

2.2 TEENAGE PREGNANCY AND SCHOOL ATTENDANCE

The effects of teenage pregnancy which involve among others, grade repetition and periods of temporary withdrawal from school lead many young women in sub-Saharan Africa to remain enrolled at the primary or junior secondary level well past puberty and into their late teens, thus increasing their risk of pregnancy-related school disruptions (Grant & Hallman, 2006). In the same breath, Chigona and Chetty (2007:2) maintain that there are some schools that do not allow pregnant girls and young mothers to attend classes in sub-Saharan countries of Africa. According to the Forum for African Women Educationalists (FAWE), Executive director indicates that in Zambia alone, 2,230 girls had been forced to drop out of school for the last years because they fell pregnant. Most studies (Natalie-Rico, 2011:10) found that dropping out of high school is a negative effect of teenage pregnancy. Teenage pregnancy is commonly associated with school non-attendance and dropout. Pregnancy and its complications often predispose youths to permanently leave school. In addition, sudden, frequent absenteeism may be a signal of pregnancy and accompanying symptoms to educators and others. Studies conducted in Canada and the United States have shown that young mothers are at a greater risk of leaving school or attaining a lower level of education, and therefore reaching professional dead-ends or missing out on job opportunities (Tipper, 1997) cited in Gouvernement du Québec (2011:1). The present study attempted to establish

if educators in Mankweng area have the same views about teenage pregnancy and school attendance.

Studies conducted by Hofferth, Reid and Mott (200), cited in Kearney (2008:458) have shown that there is a difference between the number of years spent at school between teenagers who gave birth at high school level than those who waited until they were matured by stating that teenage mothers complete fewer years of schooling than women who do not give birth prior to the age of 30.

In a conference held in Nairobi, it was disclosed that up to 42 million children who do not attend schools in Africa, almost 60 per cent are girls and this is due to teenage pregnancy (Chang'ach, 2012:4). Similarly, Hosie (2002) revealed that the minority of teenage women who conceive under the age of 16 and whose pregnancy lead to a disruption of education – including formal exclusion by school authorities, had a limited range of opportunities available to them with regard to their continued education. The present study intended to find out from educators if many pregnant teenagers in Mankweng area are not attending school as reflected in the above studies.

In Kwa-Zulu Natal Province of South Africa, the governing body of a particular school expelled 30 pregnant teenagers (e-TV, 3rd Degree, 20h00, 23 October, 2002). Mokwena (2003:49) maintains that this attitude makes it difficult for pregnant teenagers to attend school and complete their studies. Teenage mothers are only half as likely to complete high school as their non-mother cohort (Howel, 2001:4). Chigona and Chetty (2008:4) are against this practice by sub-Saharan countries of Africa and some of South African schools of not allowing pregnant teenagers to attend school. They bring their ideas to the surface by reflecting on the Bill of Rights, as contained in the Constitution of the Republic of South Africa (RSA) 108/1996, Section 29 which affirms that everybody has the right to basic education. They further contend that it may be wrong to deny teenage mothers to continue with their schooling when they are ready to do so. The present study sought to establish educators' perceptions on pregnant teenagers attending school in Mankweng area.

The Australian Bureau of Statistics (2009) states that one of the most long term implications for teenage mothers is not completing their education, and that this lack of education can result in long term unemployment or job options that are poorly paid and insecure. This statement is supported by Williams (2010:1) who states that “teen mothers usually never finish high school, let alone enter a collage, so that the lower level of education doesn't allow

them to get a proper job or be prepared for the parenting that is ahead of them". Clarke (2005:187) states that teenage mothers are less likely to complete their high school education. Due to limited education the teenage mother will not have the required level of education or sufficient skills to enter the open labour market and she will remain dependent both on the state and or her parents. To add on this, Marule (2008:223) maintains that two out of three pregnant teenagers drop out of school. Studies on schoolgirl pregnancy by Grant & Hallman (2006), Manzini (2001), Mokgalabone (1999), Gordon (2002) and Chigona and Chetty (2008) cited in Runhare and Vandeyar (2011:4105), focused on how teenage motherhood is a contributory factor to school dropout, poor performance and grade repetition. Recent research has revealed that teenage pregnancy is the reason why young women drop out of school and fail to finish their education and has highlighted that many young women have either been officially excluded from school or have effectively disengaged themselves from education (Hosie, 2002:5). Almost half of childbearing mothers fail to complete their high school education, thus increasing the probability of persistent economic and social disadvantage (Barnet, Arroyo, Devoe & Duggan, 2004:262). Grant and Hallman (2006) conducted their study on teenage pregnancy and school attendance and drop out in Durban Metro and Mtunzini Magisterial District of KwaZulu Natal. The present study was conducted in secondary schools around Mankweng area in South Africa.

According to Kearney (2008:451), teenage pregnancy and its complications often predispose school non-attendance, dropout and permanent leaving of school. Teenage parents are more likely to drop out of school, continue to have non-marital pregnancies, change jobs more frequently, be on welfare, and have mental and physical health problems (Malhotra, 2008:89). The most salient consequences of teenage pregnancy are, according to Chang'ach (2012:4), school drop-out or interrupted education, school advancement difficulties for teenage mother as well as repeat pregnancies. Contrary to the aforesaid statements, Hubbard (2008:233) maintains that governments are obliged by the Charter on the Rights and Welfare of the African Child, to ensure that children who become pregnant before completing their education shall have an opportunity to continue with their education on the basis of their individual ability. Chigona and Chetty (2008) looked at teen mothers' views on the effects of teenage pregnancy on school attendance. The present study endeavoured to look into educators' views.

In the study conducted by Macleod (2011:45), the tagging together of the words ‘teenage’ and ‘pregnancy’ has important effects, implying that these young women are engaging in age-inappropriate behaviour such as having sex, mothering, while reducing their chances of age-appropriate activities such as continuing with education. Although the timing of school dropout and pregnancy coincide for some girls, for the most, pregnancy follows school dropout (Imamura, Tucker, Hannaford, da Silva, Astin & Wynes, 2007:631). The study conducted by Sodi (2009:21) reveal that in many cases, teenage mothers are not in a position to go back to school after delivery as they are forced to look after their children and others are threatened by their physical health conditions which do not make it conducive for them to go back to school. The present study tried to establish whether or not educators share the above views on the effects of teenage pregnancy on school attendance.

Mensch et al. (2001:289) and Eloundou-Enyégué (2004) maintain that although the literature addressing adolescent fertility and childbearing in the developing world is large, few studies focus on the prevalence of schoolgirl pregnancy and its relationship to prior school experiences and subsequent educational attainment. Runhare and Vandeyar (2011) argue in their study which compared Zimbabwe and South African educational policy frameworks that there is educational access to all children, including pregnant teenagers. They found that both countries have Constitutional Bills of Rights and Acts of parliament that give equal educational rights to all citizens, including teenagers who fall pregnant. The present study tried to find out if educators in Mankweng area share the same views about school attendance of all learners including pregnant teenagers.

The Australian Bureau of Statistics (2009:1) states that although educational policies aim to ensure that pregnant students and young parents are not disadvantaged, in reality many girls do not feel supported by the school environment and stop attending. Varga (2003:162) contends that “even though girls are legally allowed to attend school during and after pregnancy in South Africa, they are often confronted by the stigma of teachers and peers in the school environment”. Teenage mothers are 20 per cent more likely to have no qualification at the age of 30 than a mother giving birth aged 24 and over (Lemos, 2009:14). On the contrary, Runhare and Vandeyar (2011) in their study maintain that there is a policy on mainstreaming pregnant teenagers in formal education by the Ministry of Education, Sports and Culture (both South Africa and Zimbabwe), which states that learners are allowed to continue learning till delivery time and come back. They also state that educators who knew the school-girl pregnancy policy had made informal observations and ensured that

pregnant learners were not expelled from school. This is not the case with Ladbrook (2009:4) who maintains that in some schools, principals do not fully understand the implications of the policy on inclusion or they feel the educators are inadequately skilled to accommodate children or learners with special needs or barriers to learning (which include, for example, migrant learners, learners who have inadequate schools or inappropriate curricular and teaching or learners who are pregnant) such that the needs of learners with barriers to learning are not being adequately met in mainstream classroom settings.

Gultig, Hoadley and Jansen, (2002:89) postulate that the inclusive education system in South Africa has been initiated and structured through National Education and carries a message of support from 'top down' to the classroom with networking on all levels, so that all learners are expected to reach the same critical outcomes as formulated by the South African Qualification Authority (SAQA, 1997). These outcomes are aimed at promoting among others, a country free of discrimination and prejudice. Farrel (2000:154) and Farrel (2001:7) brought forth their ideas revolving around the theme of the Jomtien World Conference of Education For All (EFA) of 1990, that mainstream schools should cater for all their pupils as 'inclusive schools for all' and children should take a full and active part in the life of a mainstream school, be welcomed as full members of the group and valued for the contribution they make, with value invested in diversity. This study tried to establish whether or not educators have the same views about inclusion and accommodation of pregnant teenagers for attendance in mainstream secondary schools.

There is a strong link between teenage parenthood and lack of participation in education, training and employment at age 16 and 17, but some 90 per cent of teenage parents receive income benefits which will improve their educational and employment opportunities (Swann, Bowe, McCormic & Kosmin, 2003:14). Mpanza (2006:25) adds to this version that there is an advantage in having a child whilst still a teenager, believing that teenagers gain adult status and social identity, need for moral improvement which means they become less selfish and learn to share, experience expansion of the self when someone dies, affection, creativity, power and influence on the baby, stimulation and fun, comparing one's child with children of others, economic utility, that is, contribution to family's income through state's child support grant. The present study attempted to find out whether or not educators share above views on the effects of teenage pregnancy on school attendance.

Swann et al. (2003) argue that if young parents are given the support to continue with their education, they will improve their educational and employment outcomes, especially if they receive early educational interventions. To add to this statement, Seamark (2004:813) maintains that being a teenage mother does not mean that someone's life and future are all over. Motherhood and bringing up children are in his study, valued as the girls' opportunity to make plans about their future and to develop their careers. Seamark (2004:813) argues that women who become pregnant in their teens may well have their education interrupted, but it is important to be aware of the fact that this may have happened before pregnancy, and that there are increasing opportunities for people to continue their education at older ages or it may also be appropriate to consider educational status later in life rather than at the time of a teenage pregnancy. The present study sought to establish whether or not to establish if educators have the same views about teenage pregnancy with regard to school attendance.

In his study about teenage pregnancy and school attendance, Hosie (2002) employed various alternatives as methods of investigation wherein data was collected through in-depth interviews with pregnant school girls and young mothers, teachers, Reintegration Officers and Specialist Learning Mentors. The present study wanted to use in-depth interviews as a method of investigation.

2.3 TEENAGE PREGNANCY AND EMOTIONAL BEHAVIOUR

Adolescents do not usually plan to get pregnant when they engage in sexual behaviour. Teenage pregnancies that are unplanned may lead to impulsive decision-making, and pressure from parents, peers, society and school may have an impact on the decisions teens make (Wirkus & Maxwell, 2012:5). Their inability to see future consequences for their behaviour as well as psychological immaturity puts them at risk (Mokwena, 2003:49). Adolescents who have suffered the death of a loved one, separation or divorce of their parents or a major change such as moving or changing schools may have depression and a subsequent increased vulnerability to teen pregnancy (Varga, 2003). Early sexual activity, teenage pregnancy and multiple partners are also associated with pain and suffering from broken relationships, a sense of betrayal and abandonment, confusion about romantic feelings, altered self-esteem, depression, and impaired ability to form a healthy long-term relationship (Malhotra, 2008:89). According to Seabela (1990:25), teenage pregnancy presents itself to an affected

teenager as an experience associated with a variety of psycho-socio-economic implications for the child, the mother and the society as a whole.

Abe and Zane (1990:37) aver that the combination of poverty and existing distress is a good predictor of teenage pregnancy, and the stigma during or after pregnancy can lead to depression, social exclusion, low self-esteem and poor academic performance. Depression and anxiety in pregnant teenagers can be linked to struggles such as school problems, relationships with peers, and difficulties at home (Hong, 2009:5). The negative impact of teenage pregnancy on the teenage mother is clearly revealed when she tends to face psychological, economic, and social problems which may lead to the interruption of the developmental stage of self-identity formation, depressive symptoms, overdependence on parents, high levels of frustration, and problems with forming and maintaining personal relationships (Thompson, 2004:6). Loignon (1996) cited in the Québec (2011) maintains that teenage mothers often face consequences such as social isolation, poor life habits, low education level, maltreatment, stress, and depression. Acharya, Bhattarai, Poobalan, Van Teijlingen and Chapman (2010:6) maintain that pre-delivery, still birth, foetal distress, birth asphyxia, anaemia, low birth weight, and pregnancy-induced hypertension (PIH) are encountered as consequences of teenage pregnancy. Apart from medical consequences of teenage pregnancy such as pregnancy-induced hypertension (PIH), there are many adverse social consequences such as lower access to higher education, weak and unhealthy children and emotional effects of single motherhood (Dev Raj, Rabi, Amudha, Van Teijlingen & Glyn, 2010:7). On the contrary, Lemos (2009:6) contends that being pregnant may attract welcome care and attention from parents, professionals, friends and, of course, the boyfriend and young fathers – some or all of whom may want to be, young mothers and fathers such that having a baby stirs powerful emotions of love and tenderness in almost everyone, with these feelings being overwhelmingly positive, regardless of the long-term negative consequences. The present study tried to establish whether or not educators have the same feelings about teenage pregnancy and its emotional consequences.

Endersbe (2000:14-15) maintains that many teenage mothers feel angry towards the father of the baby because it would appear the pregnancy does not physically change him, and this makes teenage mothers develop feelings of failure and find themselves alone. The girl faces confusing advice from many people regarding child-rearing practices and this undermines confidence in her ability to cope (Mpaza, 2006:2). The shock of an unwanted pregnancy can be emotionally traumatic for the young teenage mother-to-be and in situations where there is

no emotional support, some teenagers may experience increased anxiety and frustration, while others may develop depression, emotionally reject the existence of an unborn baby, become alienated from life, break communication with family and friends, and may eventually commit suicide (Bezuidenhout, 2009:38-39). Severe emotional disturbance (SED) has been defined as the display of behavioural difficulties in pregnant adolescents, sometimes as a result of internal distress (feelings of sorrow, anger, anxiety, frustration, disappointment), that are persistent over time and disrupt learning (Yampolskaya, Brown & Greenbaum, 2002:65).

Depression can be described as feelings of sadness, loneliness and futility combined with fatigue, disturbed sleep patterns and confusion (Mirowsky and Ross, 2003:98). Hong (2009:5) found that in the United States depression was not significantly associated with teen pregnancy or sexual activity. The present study tried to establish whether or not what was established in the United States is also applicable to Mankweng area in South Africa.

Pregnant teenagers experience the trauma, fear, shame, and embarrassment of having to reveal an early pregnancy to family, partners and peers (Richter, Norris & Ginsburg, 2006:2). Young people who are sexually active often have coexisting (simultaneously occurring) mental issues, such as depression and learning difficulties which include learning problems, truancy and non-specific but chronic academic and behavioural problems (Bourke & Donohue, 1996; Morenz & Becker, 1995) cited in Geldard, (2009:157). Female teenagers who suffer from severe emotional disturbances and negative behaviour patterns experience extreme challenges in many, and sometimes all, of the social arenas in which they live (Holgate, Evans & Yuen, 2006:189). Depressed young stars may perceive themselves as less interpersonally competent, have negative views of peers, have problematic social problem-solving styles, and exhibit distortions in processing of social information (Rudolph & Asher, 2000) in Wick-Nelson and Israel (2009:172). According to Bunting and McAuley (2004:207), with good support from families, the young teenage parent have an increased likelihood for positive parenting. More positivity on the emotional behaviour of pregnant teenagers can be attained as it is verified by recent studies which state that some sexuality and HIV- education programs have been proven to sustain positive effects on emotional behaviour of pregnant teenagers, and a decreased pregnancy rate (Klein, Barrat, Blythe, Diaz, Rosen & Wibbelsman, 2005:281). A different view is brought to the surface by Block (2009:5) when he states that pregnant teenagers experience many changes in their brains and bodies and they are often on an emotional roller coaster, whereby they become happy one

minute, totally despondent and the next, moody and tired, taking risks and challenging authority, suddenly wise beyond their years, which means teens are evolving and seeking to find out who they are. The present study sought to find out whether or not educators perceive the emotional behaviours of pregnant teenagers the same way.

The Science-Daily (July 28, 2009) maintains that “psychological distress does not appear to be caused by teen childbearing, nor does it cause teen childbearing, except apparently among girls from poor households”. Bettsnirvana (2009) in Science-Daily (July 28, 2009) postulates that health, social and emotional problems are common among teenage mothers. Teenage pregnancy lead to worry and emotional distress, painful symptoms emanating from STIs, and trips to doctor or clinic for treatment – all of which impact negatively on the emotions and the general behaviour of a pregnant teenager (Bridges & Alford, 2010:2). Denial and an initial shock can make a pregnant teenager develop mood swings, abnormal reactions, conflict with loved ones resulting from anger, hurt, or disapproval and a serious emotional distress. (Wirkus & Maxwell, 2012:5).

A teenage mother generally lacks parenting skills, fails to understand what her child needs and does not realise the importance of smiling, touching or verbally communicating with her child – anger against society is taken out on the child and physical abuse is possible (Agarwal, 2006:8). On the contrary, Seamark (2004:6) postulates that previous research has been preoccupied with demonstrating that early child-bearing creates serious disadvantages and overlooked the fact that young mothers are able to overcome obstacles and even derive psychological benefit from child-bearing and rearing. The present study endeavoured to establish whether or not these emotional behaviour patterns such as anxiety disorders or depression are also applicable to pregnant teenagers in rural secondary schools around Mankweng are, South Africa, and to investigate educators’ perceived emotional behaviour among pregnant teenagers in the above-mentioned rural secondary schools.

In his study about the emotions and behaviour of pregnant teenagers, Hong (2009:5) deployed a mixed methods approach through surveys (quantitative method) of mostly low-income high school pregnant learners such as cross-sectional, correlational explorations of the relationships between attitudes, future aspirations and depression, as well as interviews (qualitative method) to capture the thoughts, opinions, and reflections of teenage mothers in Bethlehem, United States. The present study has carried in-depth interviews with educators in

secondary schools around Mankweng area, South Africa, to get more information on the phenomenon.

2.4 TEENAGE PREGNANCY AND SCHOOL PERFORMANCE

Falling pregnant while still at school or at an educational institution generates a set of problems for which the teenager has to find a solution (Bezuidenhout, 2004:40). She has to decide if she carries the unborn baby to full term or to have an abortion. Should she decide to carry the unborn baby to full term, her studies are obviously going to be interrupted and she would immediately be placed in a disadvantaged position, especially when having to rear her own baby (Bezuidenhout, 2004:40), and poor academic performance leads to poor employment and financial prospects, which in turn may have detrimental effects on all the other aspects of the life of the mother and her baby (Enderbe, 2000:16). Conversely, several long-term follow-up studies indicate that most former adolescent mothers are not welfare-dependent; many have completed high school, have secured regular employment, and do not have large families, and that comprehensive adolescent pregnancy programs seem to contribute to good outcomes (Klein et al. 2005:282). The study conducted in California about the Hispanic teens brings to the surface parents' views about teenage pregnancy which is according to them, "a symbol of achieving womanhood or manhood", even though the affected teenagers appear to be experiencing limited opportunities for academic and career advancement, the Africa-American families largely condone teen motherhood (Russels & Lee, 2004:5). The present study did not focus on parents' views, but on the views of educators.

When pregnancy interrupts an adolescent's education, a history of poor academic performance usually exists (Jonathan, Klein, MPH & the Committee on Adolescence, 2005:57). Jonathan et al. (2005) further state that having repeat births before 18 years of age has a negative effect on high school performance and completion and that factors associated with school performance and increased high school completion for pregnant teenagers include race, being raised in a smaller family, presence of reading materials in the home, employment of the teenager's mother, and having parents with higher education. In the Daily News (23 July 2011) Allen quotes a statement by Thompson (2009) that "Teenage pregnancy is associated with poor high school performance and decreased earnings later on in life". Mpaza (2006:25) maintains that once the baby is born, the teenage mother needs more time

parenting the baby and much of the responsibility is carried out during the night, which leaves the teenager with less time to study and do homework – the ultimate consequence of this being a teenage mother failing to concentrate in the classroom because she would be feeling drowsy and exhausted, leading to poor performance in school subjects and failure. This study tried to establish whether or not educators perceive teenage pregnancy as having a negative effect on school performance.

According to Ashcraft and Lang (2006), teenage pregnancy can have a profound impact on young mothers and their children by placing limits on their educational achievements and economic stability, and predisposing them to single parenthood and marital instability in the future. Studies have shown that early motherhood is associated with low educational achievement, long-term benefit receipt, low or no income, low occupational status, or unemployment and this can affect teenage girl's well-being (Tsai & Wong, 2003:351). Bridges and Alford (2010:21) maintain that though students who are involved in teenage pregnancy experience difficulties or challenges such as STIs or HIV as major obstacles to their academic success, schools have the opportunity to help students avoid these barriers to success. They further state that on the one hand comprehensive sex education can help students protect their sexual health, promote academic performance and help them avoid negative outcomes while on the other hand, teenage pregnancy has a profound effect on school performance in that a higher percentage of teen mothers fail to complete school than teenagers who do not have children, for example, “less than one-third of teens who begin families before age 18 ever complete high school” (McManis & Sorensen, 2000:3).

Teenagers who give birth tend to complete fewer years of schooling than those who delay parenthood and every additional year that passes without a live birth positively corresponds with an increase in educational achievement (Moore & White, 1977 ; Card & Wise, 1978 ; Carlora, 1998) cited in Natalie (2011:8). MacManis and Sorensen (2000) maintain that teen parents are likely to do more poorly in school and repeat grades more often than teens that are not parents, and that high-risk sexual behaviour among teenagers, such as multiple partners and not using protection, can also lead to HIV/AIDS, other STIs and impaired school performance. Agarwal (2006) supports this statement when he states that after giving birth, the young mother finds it difficult to keep up with her peers where academic performance is concerned and she is forced to repeat classes and exhibit poor scoring in standardized tests. The present study wished to establish whether or not educators in Mankweng area believe

that teenagers who fall pregnant in rural secondary schools do perform adequately in the classroom situation as compared to their peers.

Chigona and Chetty (2007:1) contend that teenage pregnancy has militated against the educational success of girls in South Africa, and that though the girls are allowed to return to school after becoming mothers, they face many challenges in trying to balance motherhood and the demands of school. According to the Alan Guttmacher Institute (1994) as well as Coley and Lansdale (1998) in O'Hollaran (1998:2), adolescent mothers who stay in school are almost as likely to graduate (73 per cent) as women who do not become mothers while in high school (77 per cent) and children of teen parents perform worse in school than children of older parents. The National Campaign To Prevent Teen Pregnancy (March 2010) also reports that children of teen mothers do worse in school than those born to older parents, do not perform on measures of child development and school readiness such as cognition, language and communication, interpersonal skills and have lower performance on standardised tests. The National Campaign To Prevent Teen Pregnancy (March 2010) further reports that children of teen mothers are less likely to read simple books independently and to demonstrate early writing ability compared to the children of mothers aged 20 – 30, and that they are less likely to complete high school and have lower performance on standardised tests than children of older mothers.

Teenage pregnancy is part of the “cycle of poverty” in which very young mothers stay poor, and their children go on to experience teen pregnancy, poverty and lower academic outcomes (Brigdes & Alford, 2010:4). Most teenagers face years of regret for their decisions to have sex, their potential as young adults is never realised, and they become a burden on their families and society because their poor performance at school placed a limit on their educational and economic stability (Gallop, 2004:10). According to Mpaza (2006:16), educators believe that when pregnant school girls absent themselves from school to attend ante-natal clinics, this occasional disruption of schooling may lead, in the long run, to underachievement, which will lower the school's pass rate. Mohase (2008) looked at pregnant and mothering teenagers' views on the effects of teenage pregnancy on school performance. The present study delved into educators' views.

Children of teenage parents are at a high risk of courting problems ranging from lower intellectual and academic achievement to behavioural problems, and are less likely to graduate from high school (Wirkus & Maxwell, 2012:5). O'Hollaran (1998) states that early

childbearing contributes to lower levels of educational attainment for the adolescent mother and her child, high rates of single parenthood, larger family size and increased reliance on public assistance. Mohase (2006) conducted his study about teenage pregnancy and school performance in Soshanguve secondary schools, Pretoria, where he found that learners who have children do not perform better in general terms than those who do not have children. Mohase (2006) used quantitative method. The present study used in-depth interviews to get more information on the phenomenon.

2.5 CONCLUSION

This chapter has reviewed literature under the following subheadings: teenage pregnancy and school attendance, teenage pregnancy and emotional behaviour, and teenage pregnancy and school performance. The following chapter will cover the research methodology to be followed in this study.

CHAPTER 3

RESEARCH METHODOLOGY

3.0 INTRODUCTION

The aim of this study was to establish educators' perspectives on the effects of teenage pregnancy on the behaviour of learners in secondary schools around Mankweng area, South Africa. This chapter covers the research design, sample, instrumentation, procedure, data analysis, and ethical issues such as: permission, informed consent, confidentiality, and anonymity.

3.1 RESEARCH DESIGN

The research approach which has been used in this study was qualitative because the study sought to discover the educator's perceptions, opinions and feelings about the effects of teenage pregnancy on the emotional behaviour, school attendance and performance of the affected secondary school learners (McMillan & Schumacher, 2006:315). Patton (2001:39) states that qualitative research uses a naturalistic approach that seeks to understand phenomena in context-specific setting, such as "real world settings [where] the researcher does not attempt to manipulate the phenomenon of interest". Since this study sought to understand teenage pregnancy and its effects in the secondary school context as perceived by educators, the researcher found qualitative design relevant.

In a similar vein, Denzin and Lincoln (2000:3) maintain that qualitative research involves an interpretive and naturalistic approach which means that "qualitative researchers study things in their natural settings, attempting to make sense of, or to interpret, phenomena in terms of the meanings people bring to them". The present study sought to establish educators' perceptions of the effects of teenage pregnancy in the natural settings of their secondary schools.

Qualitative research is an enquiry in which researchers collect data in face-to-face situations by interacting with selected persons in their settings, describing and analysing people's individual and collective social actions, beliefs, thoughts, and perceptions (McMillan & Schumacher, 2006:315). It provides information about the "human" side of an issue – that is,

the often contradictory behaviours, beliefs, opinions, emotions, and relationships of individuals. Qualitative methods are also effective in identifying intangible factors, which include social norms, socio-economic status, gender roles, ethnicity, and religion, whose role in the research issue may not be readily apparent (*Qualitative Research Methods: A Data Collector's Field Guide*, 2012). The phenomena is to be interpreted in terms of the meanings that people assign to them, which makes qualitative research a system of inquiry which seeks to build a holistic, largely narrative, and description to inform the researcher's understanding of a social or cultural phenomenon (Wiersma, 1995: 211). This study attempted to understand teenage pregnancy as social phenomena from the participants' (educators) perspectives.

Shank (2002:5) defines qualitative research as “a form of systematic empirical inquiry into Meaning”. Qualitative research is an approach to inquiry that stands on its own and best allows a researcher to attain ‘a glimpse of the world’ (Ospina, 2004:9). Qualitative methods are typically more flexible – that is, they allow greater spontaneity and adaptation of the interaction between the researcher and the study participant. For example, qualitative methods ask mostly “open-ended” questions that are not necessarily worded in exactly the same way with each participant. With open-ended questions, participants are free to respond in their own words, and these responses tend to be more complex than simply “yes” or “no” (*Qualitative Research Methods: A Data Collector's Field Guide*, 2012). In this study, participants were free to express their own perceptions on the effects of teenage pregnancy on secondary school learners in their own words hence, the suitability of the qualitative design.

3.2 SAMPLE

A sample is a representative subset of the population from which generalizations are made about the population or sampling is simply stated as selecting a portion of the population, in the research area, which will be a representation of the whole population (Michael, 2012:24). The participants for this study will be educators selected from rural Mankweng Cluster secondary schools in Capricorn district of the Limpopo Province. Seven schools in Mankweng Cluster are to be used as areas of focus of study whereby two educators from each school are to participate in this study to make a total number of 14 participants. This study employed a combination of quota and purposive sampling because this will include both the number of participants and a steadfast requirement – that is, it will entail more specific

corresponding proportions of gender as a variable of interest to investigate how secondary school educators perceive the effects of teenage pregnancy on teenage girls. Quota sampling (maximum variation sampling) in this regard features where the sample would seek an equal balance of male and female educators in a given area of Mankweng (Mankweng Cluster secondary schools) in Limpopo Province, South Africa, assuming a 1:1 gender ratio in a population, even though sample sizes may not be fixed prior to data collection, depending on the resources and time available, as well as the study's objectives (*Qualitative Research Methods: A Data Collector's Field Guide*, 2012:5). The participants in this study consisted of seven male educators and seven female educators.

The sample of this study was drawn through purposive sampling which is, according to McMillan and Schumacher (2006:319), "selecting information-rich cases for study in-depth". Purposeful sampling was done to increase the utility of information obtained from small samples. According to Ma.Dolores, (2007:147), the purposive sampling technique is a type of non-probability sampling that is most effective when one needs to study a certain cultural domain with knowledgeable experts within and it is a sampling technique, also called judgement sampling, which is also a deliberate choice of an informant due to the qualities the informant possesses. Purposive sample sizes are often determined on the basis of theoretical saturation (the point in data collection when new data no longer bring additional insights to the research questions). Purposive sampling is therefore most successful when data review and analysis are done in conjunction with data collection (*Qualitative Research Methods: A Data Collector's Field Guide*, 2012:5). It is a non-random technique that does not need underlying theories or a set number of informants (Ma.Dolores, 2007:147).

The researcher in this study decided what needed to be known and sought people who could and were willing to provide the information by virtue of knowledge or experience (Bernard, 2002:231; Lewis & Sheppard, 2006:292). Purposive sampling is especially exemplified through the key informant technique (Bernard, 2002:231; Garcia, Bearer & Lerner, 2004:56), wherein one or a few individuals are solicited to act as guides to a culture. Key informants are observant, reflective members of the community of interest who know much about the culture and are both able and willing to share their knowledge (Bernard 2002:231).

3.3 INSTRUMENTATION

The study used in-depth interviews. This instrument gave the researcher the platform to ask open-response questions about teenage pregnancy so that the participants were able to explain or elucidate on issues concerning this problem of research (De Vos, Strydom, Fouché & Delport, 2005:292). In-depth mode of interviewing is flexible and encourages the research participants to speak at length, introduce and articulate their own concerns (Boyce & Neale, 2006:2). The in-depth interview is, according to *Qualitative Research Methods: A data Collector's Field Guide* (2012:29), a technique designed to elicit a vivid picture of the participant's perspective on the research topic, whereby the person being interviewed is considered an expert and the interviewer is considered the student, and the researcher's interviewing techniques are motivated by the desire to learn everything the participant can share about the research topic.

Researchers engage with participants by posing questions in a neutral manner, listening attentively to participants' responses, and asking follow-up questions and probes based on those responses (Boyce & Neale, 2006:2). They do not lead participants according to any preconceived notions, nor do they encourage participants to provide particular answers by expressing approval or disapproval of what they say, thus collecting data on individual's personal histories, perspectives and experiences, particularly when sensitive topics are being explored (*A data Collector's Field Guide*, 2012). In-depth interviews are usually conducted face-to-face and involve one interviewer and one participant. Boyce and Neale (2006:2) state that In-depth interviewing is a qualitative research technique that involves conducting intensive individual interviews with a small number of respondents to explore their perspectives on a particular idea, program, or situation.

3.3.1 Pilot study

A pilot, or feasibility study, is a small experiment designed to test logistics and gather information prior to a larger study, in order to improve the latter's quality and efficiency (NC3Rs, 2006:1). It is a miniature study or a small-scale version of the full study that will be performed later (Wheeler, 2010:1). A pilot study can reveal deficiencies in the design of a proposed experiment or procedure and these can then be addressed before time and resources

are expended on large scale studies (NC3Rs, 2006:1). A pilot study is a small study which helps design a further confirmatory study and may have various purposes such as testing study procedures, validity of tools, estimation of the recruitment rate, and estimation of parameters such as the variance of the outcome variable to calculate sample size (Arain, Campbell, Cooper & Lancaster, 2010:1). It is necessary that a pilot study is done before a full research project so that the researcher knows whether or not the study is valid and that the study's design will be able to capture the data being sought.

A pilot study was conducted at a secondary school in Makeketela Village of Mankweng area in Limpopo Province where the researcher interviewed two educators, one male and one female educator, each on a separate day of the week. The researcher presented a letter of permission to conduct interviews in schools around Mankweng area from the Departmental representative (the Circuit Manager), to the school Principal to ask for a permission to conduct interviews with the two educators who are under his supervision. The researcher then gave each participant an informed consent form for them to read individually and ask questions where necessary for clarification and sign, especially if they are entirely satisfied and understand the contents of the informed consent form. The researcher interviewed them individually, tape-recorded the interviews, transcribed the recordings and did thematic analysis of the data.

3.3.1.1 Reliability

In order to ensure reliability in qualitative research, examination of trustworthiness is crucial. Seale (1999) cited in Golafshani (2003:601) states that while establishing good quality studies through reliability and validity in qualitative research, "trustworthiness of a research report lies at the heart of issues conventionally discussed as validity and reliability". If the validity or trustworthiness can be maximized or tested then more "credible and defensible result" may lead to generalizability which is one of the concepts suggested by Stenbacka (2001) cited in Golafshani (2003:603) as the structure for both doing and documenting high quality qualitative research.

3.4 PROCEDURE

The unstructured one-to-one in-depth interviews were conducted through visiting the respective schools and making personal contact with the selected participants, preferably in a quiet place such as an office in order to avoid disturbances. Interviews were carried out after working hours of the school and the researcher secured appointments with the participants for each session of interviews.

In order to ensure completeness and reliability of information, interview sessions were tape-recorded and transcribed.

3.5 DATA ANALYSIS

Data was analysed thematically, that is, thematic data analysis was conducted as follows:

Each transcript was carefully read and notes taken of any interesting or significant theme. The researcher noted any potential theme that arose.

A list of the identified themes (or a list of patterns of responses) was made in order to look for a connection between them (that is, the identified patterns were expanded). For example, all of the talk that fitted under the specific pattern was identified and placed with the corresponding pattern. This came from direct quotes or paraphrasing common ideas that automatically allowed themes to expand, contrast, or change as the researcher analysed the interview transcripts. The main aim was to end up with key themes that describe the essence of study.

The next step was to combine and catalogue related patterns into sub-themes. Themes that emerged from the informants' perceptions about teenage pregnancy were pieced together to form a comprehensive picture of their collective experience. This meant that the researcher have to find out how different ideas or components fit together in a meaningful way when linked together.

Last, a valid argument for choosing the themes was built by reading the related literature in order to gain information that would allow the researcher to make inferences from the interview sessions. This would then allow him/her (researcher) to interweave literature and the findings to come up with a developed story line (Buetow, 2010:123-125).

3.6 ETHICAL ISSUES

There are ethical issues that are to be addressed in this study since this kind of study is more direct to the participants and sensitive. Agreed-upon standards for research ethics help ensure that the researcher explicitly considers the needs and concerns of the people they study, that appropriate oversight for the conduct of research takes place, and that a basis for trust is established between the researcher and study participants (*Qualitative Research Methods: A Data Collector's Field Guide*, 2012:8). The following research ethics have been considered in this study: permission, informed consent, confidentiality, and anonymity.

3.6.1 Permission

In this study the researcher found it necessary to obtain formal permission from community leaders under the Department of Education or gatekeepers before the research could begin. Permission to conduct the research project in secondary schools around Mankweng area was requested and granted at Circuit Level, by the Circuit Manager.

3.6.2 Informed consent

The researcher provided documents such as informed consent forms to be completed and signed by the informants before the commencement of the interview sessions. Informed consent is one of the most important tools for ensuring respect for persons during research and *Written consent* means that a person receives a written form that describes the research and then signs that form to document his or her consent to participate (*Qualitative Research Methods: A Data Collector's Field Guide*, 2012:9).

Participants were told about the purpose of research, how confidentiality would be protected, that they have the right to withdraw from the study at any time without negative repercussions and that participation is done voluntarily or willingly.

3.6.3 Confidentiality

Participants were given an assurance of confidentiality and a description of the intended use of the data. The researcher promised to protect the individuals' confidences from other persons in the setting and from the general reading public (McMillan & Schumacher, 2006:334).

3.6.4 Anonymity

Anonymity entails making use of pseudonyms instead of the participants' real names, ensuring that the participants are not identifiable in print (Leedy & Omrod, 2010:101). In this study the researcher numbers to refer to various participants, for example, "Participant 8".

3.7 CONCLUSION

This chapter has covered the research design, sample, instrumentation, procedure, data analysis, and ethical issues. The next chapter discusses data presentation and analysis.

CHAPTER 4

DATA PRESENTATION, ANALYSIS AND DISCUSSION

4.1 INTRODUCTION

The aim of the study was to establish educators' perceptions of the effects of teenage pregnancy on the behaviour of learners in secondary schools around Mankweng area in Limpopo province. This chapter presents the data and also discusses the findings of the study.

4.2 PRESENTATION AND ANALYSIS OF DATA

Data is presented under the objectives of the study which include finding out from educators whether teenage pregnancy has an effect on school attendance, discovering the educators' perceptions about the emotional behaviour of pregnant teenagers, and examining the effects of teenage pregnancy on the performance of teenagers who fall pregnant while attending secondary school.

4.2.1 TEENAGE PREGNANCY AND SCHOOL ATTENDANCE

The following general themes or pre-determined descriptive categories have primarily emerged from the interview schedule and are substantiated by direct quotes from interview transcripts to verify their validity or authenticity. The sub-themes are derived from the data after thorough reading of the interview transcripts.

4.2.1.1 School attendance after giving birth

Some educators were of the opinion that teenage mothers are not likely to return to school after giving birth due to lack of parental support. The following verbal quotes reflect the above idea:

Because sometimes there is no one to take care of their babies when they go to school. They are not likely to come back to school (participant 8).

Teenage mothers are not likely to return to school because they do have some problems with regard to who will look after their kids, that's the reason why they are not likely to return to school (Participant 1).

Then in the case the teenager does not have a mother to take care of the baby, then the teenager will have to remain at home to take care of that baby (Participant 6).

Yes, because she ought to nurse or breastfeed the baby or take full responsibility for caring until when ready to start attending school (Participant 9).

I don't think they must come to school after giving birth because sometimes she must take care of the child (Participant 10).

On the contrary, other educators believe that some learners have come to a point of realising that their future is at stake due to teenage pregnancy and they do take their education seriously and as such they are most likely to return to school immediately after giving birth. The following verbal quotes reflect the educators' perceptions:

Yes, they do come after giving birth. Actually they don't even stay at home, they just give birth and continue with their lessons after a few days (Participant 2).

They do return to school, though after different times. Some give birth, come back to school immediately, some stay a little bit longer, and come, but they're mostly likely to come back to school (Participant 14).

4.2.1.2 Irregular school attendance

Educators revealed that pregnant teenagers have a tendency of absencing themselves from school on regular basis, that is, they maintain a high rate of absenteeism. They stated that it is only on rare occasions that they do come to school like normal. The reasons behind the irregular school attendance are revealed as ante-natal clinic consultations, neo-natal clinic

consultations, pregnancy-related sicknesses, and unsafe feeling of pregnant teenagers at school. The following verbal quotes reflect above issues:

Yes, it's on and off. Sometimes they come, sometimes they don't come and they cannot take maybe two coming every day in succession, so that they use to break (Participant 6).

The attendance is not satisfactory due to the fact that they have to go for check-ups, sometimes they feel sick, and their attendance is not so good (Participant 8).

Because sometimes she wants to take the child to the clinic several times and then it counts a lot towards the studies of the mother (Participant 9).

The class situation is not conducive for them. They can be injured, so usually an expectant person, we'll need to give them a space. They must not be pushed or be squeezed somewhere (Participant 11).

4.2.1.3 School dropout

Some teenagers are said to be negatively affected by their pregnancies so much that they either leave school temporarily or permanently. Educators are of the opinion that school dropout is in most cases caused by a child heading the family, coupled with double responsibilities of being a learner at school and a mother at home, and a low self-esteem. This situation is perceived by educators as leading to a pregnant or mothering learner developing a low self-esteem and ultimately dropping out of school. The following verbal quotes reflect the above ideas:

Eh..., they drop out of school because some of them they are orphans; they need to take care of those children, and ... that is why they feel that they must drop out (Participant 10).

When she is without any helper, or don't have enough money to take the child to the crèche or if they don't have support from the relatives (Participant 11).

They drop out because they cannot cope, when they caring for the baby and attending at the same time. They still want to have some fun because they are still kids (Participant 9).

And then some they have peer pressure my peers will laugh at me that is the problem, that is why they feel that they must drop out (Participant 10).

4.2.1.4 Grade Repetition

Educators revealed that teenage pregnancy contributes so much to grade repetition due to anxiety, lack of concentration in the classroom, not ready for motherhood, no time for school work, and absenteeism. The following verbal quotes reflect the educators' perceptions:

The reason for Grade repetition, it will be maybe because they don't do school work properly, and then they don't have energy to study at home, sometimes they worry much about their pace or their pregnancy (Participant 8).

The first cause is they lack concentration because of pregnancy or the mothering process and therefore they cannot finish their studies within the record time (Participant 12).

Repetition is because they don't cope with their motherhood and because it is not yet time for them to be mothers or to give birth to babies (Participant 9).

They'll never have time to read their books because at home they need to take care of those kids (Participant 10).

4.2.2 TEENAGE PREGNANCY AND EMOTIONAL BEHAVIOUR

4.2.2.1 Relationships with peers

The educators revealed that the relationship between pregnant teenagers and their peers is generally poor. The reasons are that learners who are not pregnant classify themselves as being fortunate not to fall in the trap and as a result they undermine those who are pregnant. According to educators, pregnant learners usually suffer from inferiority complex, lack of confidence as in thinking that others are laughing or gossiping about them, and they also have a problem of low self-esteem. Others are observed by educators as showing a reserved behaviour or are not willing to associate with their peers any more. Some few educators though have a different view point stating that the relationship between pregnant learners and their peers can sometimes be good. It is just a problem of hormonal activities that can make a

pregnant teenager become moody or emotional, especially to her peers. The following verbal quotes support the above findings:

No, they don't relate well (Participant 8).

Eh..., they do not, eh..., relate well with their other learners and teachers (Participant 1).

Eh..., it depends on how the child was raised up, but in most cases the relationship is that you know, maybe is not that good (Participant 4).

Sub-themes related to the poor relationships between pregnant teenagers and their peers are also identified from the data that was collected during the interviews. For example, mood swings aggressive behaviour, pre-mature motherhood, withdrawn behaviour, and lack of confidence in pregnant teenagers. The following verbal quotes support the above findings:

Some have eh..., pregnancy moods, some they have some swings, so they don't behave well in the classes (Participant 9).

They do quarrel, they do fight, maybe because they're stressed somehow (Participant 11).

During the early stage or the unknown period known by her only, eh..., we usually observe that they are aggressive and sometimes they feel inferior (Participant 12).

I've observed that they don't behave well because they've jumped their teenage-hood to be parents (Participant 9).

Eh..., up to so far what I've observed, some become lonely because they start to isolate themselves from other, from the other peers (Participant 10).

If a learner feels inferior, she will not integrate herself with other learners (Participant 12).

4.2.2.2 Relationships with educators

The educators' perception of the relationship between pregnant learners at secondary school and themselves is that it is not good. They reported that pregnant teenagers have a tendency of not reporting their cases to educators, trying to hide their condition until they are discovered at a later stage. Some of these pregnant teenagers think the educators have no

empathy for them and when educators try to ask some questions related to the learners' pregnancies, the response they receive from these pregnant learners is always negative. Educators indicated that the general attitude of pregnant teenagers towards the school authorities is perceived as being two-sided since these learners differ, depending on their personality traits and their level of obedience. They reported that some learners in their pregnancy state have a bad or negative attitude towards the school authorities and that they absent themselves from school regularly with the reasons of consulting at the clinics (ante-natal and post-natal clinic consultations). Pregnant learners are reported to have a tendency to hide their pregnancy status from school authorities. They also have problems participating in PET activities (Physical education and training) of Life Orientation, regularly break contact time with educators for teaching and learning purposes, play truancy, and challenge the disciplinary code of the school. Educators reported that sometimes when these pregnant learners have arrived late at school and are mixed with other learners who are not pregnant, they face a challenge of applying disciplinary measure or punishment to them due to their delicate state of affairs. The following verbal quotes reflect the above ideas:

They do not relate well with their teachers....., most of them they do not report to the educators that they are pregnant (Participant 1).

And then educationally with educators we always have a problem with them because sometimes they do not complete the work that is supposed to be done (Participant 10).

One problem with them is, they are expected be treated differently. They expect you to have, not to realise her situation and treat her as such..., they expect you to give her special attention (Participant 14).

My observation has showed me that they are more or less emotional and when you ask them questions they think maybe you are attacking them (Participant 7).

There is a lot of absenteeism, bunking of classes, dodging from school, and so on (Participant 8).

There is a lot of late coming among pregnant teenagers or mothers, young mother teenagers (Participant 12).

A few educators maintained that the relationship between pregnant teenagers and their educators can sometimes be good, depending on how their hormones are driving them.

Educators mentioned that some pregnant learners do cooperate and show a submissive kind of behaviour by not threatening the school authorities because these pregnant learners are able to realise the importance of being educated and they obey the instructions or rules and regulations of the school, even in their pregnancy status. The following verbal quotes support the above findings:

Actually, eh., it depends mostly the.... I can say, with their hormones because are the ones that drive their emotions and the like, but normally for these young generations are not that much problematic (Participant 2).

There are those who really can become good, especially to authorities, let alone the educators because we interact with them on daily basis and they're just used to it (Participant 14).

4.2.2.3 Reaction to the stigma of falling pregnant at secondary school level

The educators reported that pregnant teenagers show a negative reaction to the stigma of falling pregnant whilst at secondary school. The following behavioural patterns have been observed by educators about pregnant learners:

- Separating themselves from others or showing a withdrawal behaviour;
- Unbecoming behaviour which is different from that of a normal school child;
- Developing some defence mechanisms when asked questions about their status;
- Aggressive behaviour towards other learners;
- Not feeling free or shy. They put on big clothes such as lumber jackets that can cover their pregnancy.

Educators state that these behavioural patterns are due to pregnant learners not accepting their motherhood state, fuelled by their varying personality traits. The following verbal quotes support the above findings:

Eh., the problem is maybe if the child is pregnant and then maybe time and again the child must think that maybe the friends are maybe laughing at her, or rather gossiping about her (Participant 4).

Mm., they don't..., some feel happy because they'll receive child grant (Participant 9).

Eh., really most of them they feel very sorry for that occurrence because most of them the pregnancy is not planned and so they feel very sorry and will separate themselves from other learners (Participant 3).

Maybe learners it seems that they don't see any problem, especially these learners of nowadays, or maybe it's something to have a child because they get the grant (Participant 11).

Eh..., some develop a defence mechanism, some become shy, while others may put on clothes that will try to hide their pregnancy because the stigma may be too much for them (Participant 5).

4.2.2.4 Post-natal depression and anxiety

The educators aired their views on post-natal depression by indicating that learners who have just given birth have a general feeling that they are unworthy to be considered school learners like before as a result they become shy or reserved, lonely and feel excluded, are unable to concentrate in class, absent-minded or passive, and have feelings of insecurity. The following verbal quotes reflect the above ideas:

They look stressful, depressed, impatient, aggressive, less cared for, and they don't feel their teenage-hood (Participant 12).

Ok, the poor performance of the learner, and then the passiveness of the learner in the class will show that this learner needs support (Participant 8).

You can see them even in class. The best learner is no more performing well in class, the participation and she's trying to draw back from everything (Participant 11)

Mm., most of them eh., they reveal the stage of depression, they become aggressive. You can see that these learners are depressed (Participant 9).

Eh., really most of them they feel very sorry for that occurrence because the pregnancy is not planned and so they feel very sorry and will separate themselves from other learners (Participant 3).

4.2.2.5 Remorseful feelings

Information derived from educators reveals that a pregnant teenager would show behavioural patterns of being remorseful towards what she had done. They reported that a pregnant learner would suddenly become quiet at school whereas she is known to be talkative; especially after realising that she had fallen pregnant. She no longer pays attention in class, is passive and in most cases dissociates herself from her peers during breaks and where there are outdoor school activities. Some teenagers are reported to be opting for abortion or denial of their newly born babies, for example, by throwing them in to rubbish bins or pit-toilets after giving birth because pregnancy came to them unexpectedly and at first attempt to engage in sexual intercourse and they are not yet ready to be mothers, or they are still very young to carry the responsibilities of being mothers. The following verbal quotes support the above issues that emerged from the educators' responses :

Ok, sometimes that kind of learner will always be quiet in class (Participant 8).

A person is no more active, the person doesn't participate that much in the class. You can mostly see that this person needs support (Participant 1).

Eh..., they deny that they have babies because they don't want to lose the peers. You find that even if she goes to tertiary, she'll never ever tell anybody that she's having a baby at home (Participant 10).

Eh..., what I think will make some teenagers to deny their newly born babies after giving birth is that they are scared or afraid of responsibility of the child... they deny their downfall (Participant 12).

Motherhood phobia and denial of their new-born babies are reported by the educators as being the result of lack of parental support and the denial of responsibility by the boyfriend or partner who should be giving some kind of support to the pregnant or mothering teenager. The following verbal quotes support the above findings:

If you're pregnant you feel that you have fallen down, and even the refusal of their boyfriends' responsibility for the pregnancy (Participant 12).

Mm., they show withdrawal syndrome, and anger and they hide their babies because they are in denial of their babies (Participant 9).

4.2.3 TEENAGE PREGNANCY AND SCHOOL PERFORMANCE

4.2.3.1 Performance in the classroom

Educators reported that the performance of some pregnant teenagers deteriorates after falling pregnant. Reasons given by the educators include absenteeism due to pregnancy-related issues and the feeling of tiredness especially when the girl is about to give birth. Some educators maintain that it will depend on the learner's intellectual ability whether the academic performance of a pregnant teenager drops or not. One educator gave a scenario where a very brilliant learner fell pregnant and this negatively affected her performance resulting in failure at the end of the year. The following verbal quotes support the above issues that emerged from the educators' responses:

Yes, they perform very poorly. The reason is because pregnancy is a hell lot of job on itself (Participant 13).

Eh., I had an experience where a learner, before she fell pregnant all the years she was excellent in class (Participant 7).

Educators revealed that the general performance of the school in the district would be poor because of high rate of teenage pregnancy, especially in the GET (General education and training) phase of the school. They gave reasons such as a high rate of absenteeism; pregnant girls generally become tired during their last trimester of their pregnancy; lack of attention to school work and low cooperation between pregnant teenagers and their educators. The general performance of secondary schools with higher pregnancy rate, especially in the GET phase is reported by educators to be poor. Poor performance in the academic work of pregnant learners is reported by educators as emanating from carrying a burden of being a mother at a young age, time of the year at which a teenager falls pregnant, and poor health conditions of a pregnant teenager. The following verbal quotes support the above issues that emerged from the educators' responses:

They do not perform well; their performance deteriorates due to the responsibility they have other than school work (Participant 8).

It's going to be poor because they get to motherhood at an early age (Participant 12).

I think they perform badly, and most of them are underachievers because they have to solve two things at the same time (Participant 9).

It will depend on the period during the course of the year - if it took place during the third quarter, some won't be able to write exams (Participant 2).

The educators think that teenage pregnancy causes many complications and health problems on the bodies of the affected teenagers. These include STIs (sexually transmitted infections) since pregnancy is a good sign of unprotected sex. Should the school have a greater number of pregnant teenagers; the general performance will be negatively affected because according to the educators, a healthy mind stays in a healthy body. The educators suggested that pregnant learners should have some time to rest immediately after giving birth for their bodies to heal, rather than rushing to come back to school because that is not good for their bodies and it will have a negative impact on their academic performance. The following verbal quotes reflect the above ideas:

Their health is not going to be well, especially if they're not having balanced diet (Participant 11).

I think this affects the health of a teenager, you'll find that sometimes they'll suffer that depression (Participant 13).

Ok, some they have the moods, or it might affect their womb because they're still young to..., to give birth (Participant 9).

Educators suggest that some pregnant and mothering teenagers can perform well depending on their giftedness and determination or hard work. Others say it all depend on the parental support that the learner may have for her to perform well. The following verbal quotes support the above findings:

But some of them do usually perform well. It depends on the ability and the knowledge that the person is having (Participant 4).

Eh., learners are gifted differently. There are those who struggle, so it differs from one child to the other (Participant 14).

If the learner was brilliant enough and she has got enough support at home, they talked about it and they realised that this is a mistake then, the performance can even improve. (Participant 3).

4.2.3.2 Future academic performance of the children of teenage mothers

Educators generally felt that teenage pregnancy has a very negative effect on the future performance of children of teenage mothers. Some stated that it is very rare for the children of teenage mothers to perform better at school because in most cases, children tend to follow in the footsteps of their mothers. Educators are of the opinion that the teenager's family background play a major role towards the academic performance of the child and that it all depends on the parental support or proper parenting knowledge that a teenager would have on her child. The negative effect of teenage pregnancy on the future performance of the children of the affected teenagers is according to the educators, caused by in-experienced mother teenager and uneducated mother teenagers. The following verbal quotes support the issues that emerged from the educators' responses:

I think it also brings the negative effect. If you cut a tree, the tree will fall together with the leaves (Participant 13).

The mother does not have enough time to bring up her child well, because the mother is still young, inexperienced (Participant 12).

The teenage mothers are illiterate because they've dropped out of school before time (Participant 8).

It will depend on the mothering part. If the learner who fell pregnant comes from a good home, moral family, then obviously their children would be moulded enough so it won't be a problem (Participant 3).

4.2.3.3 Comparative performance of pregnant teenagers and their peers

Pregnant teenagers are perceived by educators as generally performing poor or lower than their peers in the classroom due to the fact that they are in most cases emotionally disturbed,

suffer from physical weakness especially after giving birth, and are faced with huge responsibilities of being mothers. Conversely, some educators argued that it is possible that a pregnant teenager performs better than her peers because it all depends on her IQ (intelligent quotient) level and whether the pregnant learner is receiving support, both at home and at school by the educators. The following verbal quotes support the above findings:

According to me it is not possible for pregnant learner to perform better than her peers in the classroom (Participant 8).

It is not possible for her to perform better than her peers because in most cases these pregnant people are much more traumatised and they're the ones who do not participate in the class (Participant 1).

Sometimes it's possible, eh..., she may study hard because she knows what she has done, and will work extra mile to cover the gap (Participant 12).

4.2.3.4 Catching up with time lost during child birth

Catching up with the time lost when the learner had gone to give birth is perceived by some educators as being hectic for the mothering learner. Some educators indicated that the mothering learner can catch up with contact time lost, depending on the support she gets from educators or if she had an opportunity of being counselled or motivated to work as hard as she can. Other educators maintain that it will depend on the work load to be done, her willingness to work and the pace at which she works to accomplish the missed tasks. The following verbal quotes support the above findings:

No, it is not possible because you'll find that the learner did not write some tasks, and it will be difficult for her to write all the tasks she missed (Participant 8).

It's not possible. I don't think so, because you find that you will even never have time to share with them because the child is waiting at home for her, it's a problem (Participant 10).

Due to the disturbance of the little child at home, they cannot cope (Participant 11).

Some do catch up, if they got support from home and support from school where she may be given special attention or given the ISP (Individual Support Plan) (Participant 9)

4.2.4 STRATEGIES TO PREVENT OR OVERCOME TEENAGE PREGNANCY

4.2.4.1 Introducing sex education in rural secondary schools

With regard to preventing teenage pregnancy, educators maintain that it can be reduced rather than prevented. It is only a few who said that teenage pregnancy can be prevented, basing their reasons on the importance of making teenagers aware of the importance of education and their future. Many educators suggested the strategies that can be used to reduce teenage pregnancy, such as, introducing sex and health education in secondary and primary schools from early ages of children – as early as Grade 7; HIV and AIDS awareness campaigns; networking or inviting other community stakeholders like social workers, nurses or well-trained health workers, and educational psychologists and religious leaders to come and address learners about pregnancy and its effects. The following verbal quotes support the issues that emerged from the educators' responses:

Yes, it can be prevented or reduced by introducing maybe sex education as early as in Grade 8 (Participant 8).

I think so, through education, we educate them every time and then through, the media also play an important role (Participant 12).

I think if they attend the Church; they might get help or be guided to according to the church's ceremonies or through counselling and guidance (Participant 9).

4.2.4.2 Networking with various community stakeholders

About half of the educators who were interviewed are of the opinion that schools must invite various community stakeholders like trained health workers and social workers to come and address learners on the issue of teenage pregnancy, suspend pregnant learners from schooling for a while and also suggesting that the government should stop offering child-support grant. The following verbal quotes reflect the above ideas:

Ok, health workers should be invited to school, maybe once per month to advice and give more teachings about pregnancy (Participant 8).

By bringing like, you know, social workers, health advisors, and all the clinics from health advisors from the clinics and such people we're working with to discuss advices which shall be used and also from the people from the hospitals and the psychologists (Participant 4).

When a child is pregnant, let her go and stay at home, maybe that thing, it'll make her to be matured so that she must mean business when she goes to school (Participant 11).

I think the other thing is that the child-support grant should be stopped especially for teen mothers (Participant 8).

4.2.4.3 Using contraceptives and abstinence from sex

Contraceptive usage is highly recommended by educators. These include taking prevention pills and using condoms for learners who have reached the stage of engaging in sexual relationships, referring to learners in the FET phase of secondary school (Grade 10 to 12). Educators are of the opinion that those learners who have not yet started with sexual relationships, for example, those learners in the GET phase of secondary school (Grade 8 and 9) be encouraged by various professionals who would be invited to school concerning teenage pregnancy to delay engaging in sexual intercourse or possibly abstain from sex until they get married. The following verbal quotes support the issues that emerged from the educators' responses:

Yes, I think we can prevent teenage pregnancy. At school the learners must be educated to know that prevention is better than cure (Participant 13).

I think is to..., to tell those learners to abstain, but for those who already does it, then they can use condoms, maybe some tablets to prevent that (Participant 6).

I will encourage teenagers to be involved in Youth Conferences so that they can learn morals and good behaviour that sex before marriage is a sin (Participant 9).

You can call the nurses to address, you tell them that the age of those learners is from this to this, and then FET band from this to this, and then they'll have their way of dealing with this, looking at different cognitive levels (Participant 10).

4.3 DISCUSSION OF FINDINGS

4.3.1 Sub-research question 1: To what extent do educators perceive teenage pregnancy as affecting school attendance?

The study revealed that educators viewed teenage mothers as unlikely to return to school after giving birth. The educators believed that most of the teenagers who fell pregnant would take some time at home after giving birth due to lack of parental support, the responsibilities to be carried by the mothering teenagers and post-partum ailments. The findings on the delayed return to school after giving birth concur with Mpaza (2006:4) who argued that when a teenage girl becomes pregnant, her physical, social and academic development are significantly altered. Related findings were established by Chigona and Chetty (2008) who established that teenagers who go back to school after the birth of their babies face a number of challenges as learners and that makes it hard for them to succeed with schooling. It also emerged from this study that teenagers can return to school immediately after giving birth, provided they have parental support. The immediate return to school confirms a study conducted by Kaufman *et al.* (2000:29) who established that returning to school is a goal for most girls and many return to school shortly after giving birth. In the same breath, Grant and Hallman (2006), cited in Hunt (2008:27) revealed that young women who live with an adult female are most likely to return to school. This kind of support given to the teenager by the parent is objected to by Klerman (2004:2) who established that a young girl, whose child is taken care of by the adult parent at home, is more likely to fall pregnant again because she would not have experienced the pain of being a teenage mother.

It emerged from this study that teenage pregnancy and parenting play a major role in school absenteeism. This centred on ante-natal clinic consultations, pregnancy-related sicknesses, and in some instances, reasons behind neo-natal clinic consultations. Research on education in South African rural communities found that teenage pregnancy, absenteeism, poverty and unemployment are causally inter-related (Weideman *et al.* 2007:25). Swann *et al.* (2003:4) argued that it is good for pregnant and mothering teenagers to consult at the clinics because this would improve their health. The findings of this study about pregnant teenagers' school absenteeism caused by clinic consultations confirm a study conducted by Irvine *et al.* (1997) who brought forth the ideas that appropriate obstetric care should be provided for teenagers who are at a high risk of developing complications in pregnancy and childbirth. In the same

breath, Slowiski (2001:26) maintains that early and regular ante-natal care and nutrition can be significant in improving the outcomes and reducing risks to babies.

The present study also revealed that while teenage pregnancy contributes to absenteeism in the short-term, it has in the long-term resulted in the affected learners dropping out of school. These centred on child-headed families, dual responsibilities of pregnant and mothering learners, and low self-esteem. Mpaza (2006:4) maintains that teenage mothers are at risk of dropping out of school. Research conducted by Mokgalabone (1990), cited in Chigona and Chetty (2008:261) revealed that pregnancy is among the most serious causes of school disruption, particularly at secondary school level. Studies indicate that pregnancy is a significant cause of dropout of teenage girls from school (Cardoso & Verner, 2007; Fentiman et al., 1999; Grant & Hallman, 2006; Hunter & May, 2003; Njau & Wamahiu; Dunne & Leach, 2005 Brock & Cammish, 1997; Kane, 2004 & Boyle et al., 2002) cited in Hunt (2008:26).

The findings of this study on the effects of teenage pregnancy concur with literature (Gentry & Campbell, 2002:32), which advocates that dropping out of school can be one of the most detrimental actions youth can take, with potentially disastrous effects on their economic futures. The findings on school dropout confirm the opinion of Littlejohn (1966), cited in Slowiski (2001:27) who postulated that the majority of young mothers leave school earlier or find it difficult to return to school due to problems with child care. Studies conducted by Kauffman et al. (2000:28) reveal that in both urban and rural settings, girls are primarily responsible for childcare; and families are not always willing to accommodate the schedule of a young mother attending school. The findings of this study concur with Duncan (2011:1) who reveals that teenage parents drop out of school because of the pressure they experience, including stigmatisation from peers, lack of needed support from family, friends, school, social service agencies, and other organisations.

4.3.2 Sub-research question 2: How do educators perceive the emotional behaviour of pregnant teenagers?

The study established that the emotional relationship between pregnant teenagers, their peers and educators, is generally poor. These centred on mood swings, aggressive behaviour, lack of confidence and low self-esteem, post-natal depression, attention-seeking behaviour, and

introverted behaviour. Researchers found that girls often feel confused about their condition and the options open to them, betrayed by their partners, and unsupported by family members (Kaufman et al., 2000:7). These findings are confirmed by Swann et al. (2003:14) who maintain that forty per cent of teenage mothers have an episode of depression within one year of childbirth and that post-natal depression may be up to three times as common in teenage mothers as their older counterparts.

It emerged from this study that pregnant learners usually suffer from inferiority complex, lack of confidence as in thinking that others are laughing or gossiping about them. Chigona and Chetty (2008:271) noted that when a teen mother quarrels with other learners, they usually picked on the teen mother's situation as a mother. Teen mothers feel discomfort when they are in the school environment and this affects their learning and collaboration with fellow learners. Pillow (20004), cited in Chigona and Chetty (2008:263) describes the "discourse of contamination" that develops from the perception that the immorality of the teen mother would set a bad example to the student body at school, hence contaminating fellow innocent girls. The study reveals an unhealthy relationship between teenage mothers and their educators which include mocking them on the basis that they fell pregnant deliberately. These findings concur with literature (Davidow, 1998:12) cited in Mpaza (2006:5) which advocates that pregnant teenagers are mocked and ill-treated by educators to the extent that they would leave school without the knowledge of the headmaster. It emerged from this study that educators are not willing to support pregnant teenagers, especially in helping them catch up with time they have lost during child birth. The findings focusing on lack of support for pregnant teenagers by educators concur with Chigona and Chetty (2008:268) who argued that pregnant and mothering teenagers lack support from their teachers; lack counselling from teachers to combat stigma attached to teenage pregnancy; suffer misunderstanding and pressure from teachers and fellow learners, and teachers are in most cases not willing to go through the lessons the girls had missed due to motherhood. Swann et al. (2003:4) argue that support for young parents to continue education will improve educational and employment outcomes for parents, mother/child interactions, and social outcomes for children.

4.3.3 Sub-research question 3: What are educators' perceptions regarding the school performance of teenage girls who fall pregnant at secondary school level?

The study revealed that pregnant and mothering teenagers at secondary school level generally perform poorly as compared to learners who never fell pregnant. This centred on

lack of experience in motherhood, dual responsibilities, poor health status, and lack of parental support. The present study concurs with (Botting et al. 1998; SEU, 1999) cited in Swann et al. (2003:1) who advocated that teenage pregnancy and early motherhood can be associated with poor educational achievement, poor physical and mental health, social isolation, poverty and related factors. Slowiski (2001:2) confirms the findings of the present study by advocating that most teenagers find parenting much harder than anticipated and experience of motherhood at odds with their expectations and hopes. In a similar vein, Duncan (2011:1) maintains that teenage parents experience reduction in their education attainment compared to teenagers who are not parents. The reasons behind poor academic performance of pregnant and mothering teenagers as revealed by the findings of this study are among others, dual responsibilities the affected learners are faced with. This is confirmed in the study conducted by Arlington Public School (2004) when they posited that managing to care for an infant and devoting adequate time to school work is a great challenge for the teen parents. Lack of parental support as revealed by this study also leads to poor academic performance. Kunio and Sono (1996) cited in Chigona and Chetty (2008:262) advocate that denying teen mothers the support they need to pursue education condemns them and their babies to a vicious circle of poverty and ignorance.

It emerged from this study that teenage pregnancy has a negative effect on the future academic performance and the behaviour of the children born to teenagers. The study conducted by Wirkus (2012:4) concurs with this notion by stating that children of teenage parents are at a high risk of encountering problems ranging from lower intellectual and academic achievement to behavioural problems. In the same vein, the study conducted by Steinhouser (1998), cited by Slowiski (2001:29) revealed that having an adolescent mother has been linked to lower IQ, more physical health problems in later childhood, lower motor and mental development. Hariram, Layug, Johnson & Rahman (2012:1) also confirm that children of teenagers are more likely to fail in school and to become teen mothers. O'Donnel and Wyneken (2007:4) confirm the findings of this study about the negative effects of teenage pregnancy on the behaviour of children born to teenagers by stating that the daughters of teen mothers are at high risk of becoming teen mothers themselves while the sons of teen mothers have a significant probability of incarceration as adults.

4.3.4 Strategies to prevent teenage pregnancy

The study established that rate of teenage pregnancy in secondary schools can be reduced and prevented through a number of strategies. This centred on introducing sex education, approaching learners differently considering their age differences, and net-working with other community stakeholders, for example, social workers, nurses, educational Psychologists, and religious leaders. Various strategies to prevent teenage pregnancy were suggested in this study, for example, making condoms readily available to secondary schools, contraceptive usage, and abstinence.

Literature (Irvine, Bradley, Cupples & Booham, 1997; Slowiski, 2001; O'Donnel & Wyneken, 2007) confirms the introduction of sexuality education. Slowiski (2001:3) advocates that sex education programs are most effective if they provide accurate information, and include decision-making, assertiveness and negotiation skills, as well as life skills. The issue of condoms being made available to schools as revealed by this study concur with the findings by O'Donnel and Wyneken (2007:5) when they postulate that condoms and other forms of contraception are to be made available to teens through condom availability programs in high schools, teen health centres, and clinics – productive health services and sex education.

It also emerged in this study that teenage pregnancy can be prevented and reduced through inviting other professionals in the community or net-working with people of their calibre. The findings of the present study concur with the study conducted by American College of Obstetricians and Gynecologists (2007), cited in O'Donnel and Wyneken (2007:5) which revealed that throughout the United States, public schools, youth organisations, religious groups, and health care professionals have developed and implemented sexuality and family-life education programs that are designed to inform teenagers about sexual behaviour, human relationships, reproduction and contraception. The study established that when various professional have been invited to school to address learners on the issue of sexuality and teenage pregnancy, they must consider the age difference and cognitive levels between learners in the GET phase of secondary school (Grade 8 and 9) and those in the FET phases of secondary school (Grade 10 to 12). The findings of the present study concur with Swann et al. (2003:3) who established that interventions are to be age-appropriate.

The study also revealed that secondary schools must teach teenagers about abstinence, especially those that have not yet started with sexual relationships. This notion centred on calling religious leaders to schools to preach to the learners about religious principles which

include sex before marriage as sinful. Kohli and Nyberg (1995:8) argue that religious beliefs and practices can inhibit sexual activity, and at the same time inhibit the use of contraception. Slowiski (2001:32) concurs with Kohli and Nyberg (1995) by advocating that a review of programs from around the world indicated that programs that only teach abstinence are less effective as compared to those promoting delay of sexual activity as well as improving contraception knowledge amongst those that are sexually active.

4.4 CONCLUSION

This chapter has covered presentation of data, data analysis and discussion of findings. The next chapter outlines the summary, recommendations and conclusion.

CHAPTER 5

SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1 INTRODUCTION

The aim of this study was to establish the educators' perceptions of the effects of teenage pregnancy on the behaviour of learners in secondary schools around Mankweng area in Limpopo province. This chapter summarises the findings and discussions made, gives conclusions about the effects of teenage pregnancy and the recommendations on how to deal with or to prevent future occurrences of teenage pregnancy in rural secondary schools.

5.2 SUMMARY

The findings of this study revealed various effects of teenage pregnancy on learners in secondary schools as affecting their school attendance, emotional behaviour and school performance. The following effects of teenage pregnancy emerged from educators' perceptions:

5.2.1 Delayed school attendance after giving birth: The educators revealed that resuming school immediately after giving birth by teenagers who fell pregnant was generally delayed by reasons behind lack of parental support and immature motherhood on the side of teenagers.

5.2.2 Irregular school attendance: It emerged from this study that there is a high rate of school absenteeism among pregnant teenagers at high school level due to antenatal and neonatal clinic consultation, pregnancy related sicknesses and the responsibilities that coincide with pregnancy and mothering which are coupled with lack of support from family members or relatives. This effect of teenage pregnancy is reported to have a greater contribution towards school dropout of pregnant teenagers and those who have already given birth.

5.2.3 Grade repetition: It emerged from this study that teenage pregnancy was one of the contributory factors towards grade repetition. The reasons behind this effect of teenage pregnancy were revealed as among others, pregnant teenagers having a problem of mental

depression and anxiety which lead to lack of concentration or passiveness in the classroom situation. Pregnant teenagers were reported by educators as having a lot of challenges related to motherhood which made them repeat grades since the challenges affect their school performance, and the general performance of the schools with a higher rate of teenage pregnancy.

5.2.4 Negative effect on the children born to teenagers: Educators revealed that the future academic performance of children born to teenagers will generally be negatively affected as these children emulate the behaviour of their parents and that they would most likely become teenage mothers in future because of the manner in which they would have been raised by inexperienced mothers. However, some educators were of the opinion that it depends on the support that the affected teenager receives at home and her determination to continue with her studies regardless of the challenges of motherhood she is faced with.

5.2.5 Poor relationships: The study also revealed that teenage pregnancy resulted in poor relationships between pregnant teenagers, their peers and educators. The poor relationships were reported to be caused by pregnant teenagers' attention-seeking behaviour, aggression as they respond to the stigma of falling pregnant at secondary school level, mood swings and low self-esteem, introverted behaviour and lack of cooperation with the school authorities.

Strategies to prevent or reduce teenage pregnancy:-

Educators who participated in this study suggested introduction of sexuality education in secondary schools, liaising with other professionals in the community and emphasising the usage of preventive methods to learners who are already sexually active as some of the strategies to overcome the challenge of teenage pregnancy. Teaching learners in lower levels of secondary school called the GET phase, abstinence and delayed sexual relationships were also suggested as some of the strategies which can be used to reduce teenage pregnancy.

5.3 CONCLUSIONS

The following conclusions are drawn from the findings of this study:

5.3.1 Teenage pregnancy and school attendance: Teenage pregnancy has a detrimental effect on the education and future plans of teenagers in secondary schools. This is because the teenage mothers attend school irregularly and sometimes drop out of school. They come to school late and play truancy.

5.3.2 Teenage pregnancy and school performance: The educators in this study believed that the teenage pregnancy and mothering resulted in poor school performance. The general performance of secondary schools with higher rates of teenage pregnancy in the Mankweng district was also reported by educators to be negatively affected.

5.3.3 Teenage pregnancy and emotional behaviour: Teenage pregnancy negatively affects the emotional behaviour of the pregnant and mothering teenagers. They experienced stigmatisation, hormonal imbalances and mood swings which included a withdrawal syndrome. The pregnant teenagers had a general negative attitude towards school and school authorities. The pregnant teenagers were reported to be generally aggressive and to suffer inferiority complex or a low self-esteem.

5.3.4 Strategies to reduce or prevent teenage pregnancy: There are various ways of reducing or preventing teenage pregnancy as suggested by the educators. These include, among others, dramatizing teenage pregnancy and its effects, usage of audio-visual aids such as DVDs that portray the effects of teenage pregnancy, making use of the ABC rule where A stands for ‘abstinence’, B for ‘being faithful to oneself’, and C meaning ‘character formation’, and among others, the importance of introducing sex education in schools and net-working with other departments, for example, the Department of Health and social development (Social workers) and the Department of Health (Nurses) to come to school and help educate learners on sexuality and teenage pregnancy.

5.4 RECOMMENDATIONS

The following recommendations are made on the basis of the findings that emerged from this study:

- Educators should instil a positive attitude in pregnant learners towards attending school on daily basis by pointing out to them the short and long-term disadvantages of irregular school attendance, and how this can permanently ruin their future. Parents’

meetings should be held at least once per quarter for educators to address with the parents, issues related to teenage pregnancy and to educate the parents on how to support their teenage girls who have fallen pregnant so that these girls should be able to continue with their schooling.

- The government should establish health centres or school clinics in secondary schools to alleviate the problem of absenteeism, truancy and ultimately grade repetition, based on reasons behind antenatal clinic consultations. Mobile clinics can also be provided to rural secondary schools in collaboration with the Department of Health at least once per week for professional nurses to attend to pregnant teenagers' issues, and to supply teenagers with the necessary preventative measures.
- The educators should consider giving emotional support to pregnant teenagers by showing them love and empathy. Negative remarks about pregnant learners in the classroom situation should be avoided at all costs. Advices or corrections pertaining to the state of affairs of pregnant teenagers should be done in camera or privately by the teacher, not in the presence of other learners who are not pregnant. This will promote good relationships between educators and pregnant teenagers.
- Learners who are not pregnant in secondary schools should avoid discriminating against those that are pregnant. Educators should teach learners who are not pregnant never to tease and arouse the temper of those that are pregnant so that both learners should maintain harmonious relationships between themselves. This will alleviate the problem of low self-esteem and inferiority complex on pregnant teenagers in the classroom situation and the school premises.
- Pregnant learners should be encouraged to study hard in order to improve their academic performance in the classroom. Educators should teach them study skills, provide individual support programme (ISP) in case the pregnant learner had challenges related to pregnancy ailments and is unable to complete certain tasks. Educators should enrol for Special Needs education qualifications so that they acquire knowledge on how to support and include learners that are physically, mentally and

emotionally challenged, including pregnant learners in their classroom situations of ordinary schools, to help these affected learners perform better academically like other learners who have not fallen pregnant.

- The Department of Education should introduce a learning area or offer ACE qualifications for educators to enrol with institutions of higher learning, specifically on *Sex education and the effects of teenage pregnancy*, to equip educators with the knowledge on how to address issues related to sexuality and teenage pregnancy to learners from as early as the Intermediate phase of primary school (Grade 4 to 6) up to the FET phase of secondary school (Grade 10 to 12).
- The usage of preventative measures such as pills, injections and condoms is also recommended by educators. Condoms should be made available in all secondary schools by the Department of Education in collaboration with the Department of Health, in order to reduce or prevent teenage pregnancy and for protection against STIs.
- The government should offer or provide child support grant only to the orphanage who are still under the age of 18 and stop giving it to mother-teenagers in secondary schools. This will help reduce teenage pregnancy among secondary school girls, especially those that deliberately fall pregnant with the aim of getting a child support grant from the government.
- Learners who have not yet started with sexual relationships should be encouraged to delay engaging in sexual intercourse until the right time when they are matured or married.
- Further research on the effects of teenage pregnancy should be conducted to determine the effects of teenage pregnancy on the behaviour of secondary school learners as perceived by the teenage mothers themselves and their classmates. The present study was only limited to seven secondary schools and fourteen educators in the Mankweng area of Limpopo province. There may be need to carry out this kind of research in Limpopo province and South Africa as a whole.

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APPENDIX 1

INTERVIEW SCHEDULE

The following interview questions were asked during the in-depth interviews:

1.1 Teenage pregnancy and school attendance

- 1.1.1 Do you think teenage mothers are most likely to return to school after giving birth? Please explain your answer.
- 1.1.2 How is the daily school attendance of pregnant teenagers in your school?
- 1.1.3 Why would pregnant and mothering teenagers most likely drop out of school than those who never fell pregnant?
- 1.1.4 Is it proper for the school authorities to exclude or let pregnant teenagers stay at home and come back to school after they have given birth?
- 1.1.3 Which reasons or circumstances can force a pregnant or mothering teenager to leave school permanently.
- 1.1.4 Is it conducive for pregnant teenagers to attend lessons in the same classroom with learners who are not pregnant?
- 1.1.5 If pregnant or mothering teenagers repeat grades more than those who never fell pregnant, what do you think would be the reasons behind their grade repetition?
- 1.1.6 If you were part of Education Policy-makers, would you suggest that pregnant learners in secondary schools be excluded from or included in mainstream (ordinary) schools? What is the reason for your answer?

1.2 Teenage pregnancy and emotional behaviour

- 1.2.1 Do pregnant teenagers relate well with their peers and educators? What have you observed?
- 1.2.2 How do pregnant teenagers react from the stigma of falling pregnant and being in a stage of mothering whilst at secondary school?
- 1.2.3 Which psychological implications do the affected teenagers show after they have given birth to their babies?
- 1.2.4 How is the general attitude of pregnant teenagers towards the school authorities? Is it a challenging one or a submissive kind of attitude? (for example, arriving late at school, playing truancy, etc.) Give reasons for your answer.

- 1.2.5 How would you detect that a pregnant or mothering teenager is depressed or anxious and in need of support?
- 1.2.6 How would you detect that a pregnant teenager in your school is traumatised (shocked) after being in a state of pregnancy?
- 1.2.7 What do you think would make some teenagers be in denial of their newly born babies after giving birth?

1.3 Teenage pregnancy and school performance

- 1.3.1 How do pregnant or mothering girls perform in the academic work you give to all learners in your classroom?
- 1.3.2 What effects would a higher percentage of pregnant teenagers in the GET phase of your school have on the general performance of the school in your district?
- 1.3.3 Will teenage pregnancy have a positive or negative effect on the future performance of the children of the affected teenagers? Please give reasons to support your answer?
- 1.3.4 Why would teenage pregnancy lead to poor academic performance of pregnant learners at high school level?
- 1.3.5 Do you think it can be possible for a pregnant teenager to perform better than her peers in the classroom? Please explain your answer.
- 1.3.6 In what ways can teenage pregnancy affect the health of pregnant teenagers, and what effect would this have on their school performance?
- 1.3.7 Is it possible for a teenage girl to catch up with her peers in her academic performance, after she had lost contact time with the teachers when she went to give birth? Please elaborate a bit on this issue.

1.4 How to overcome or prevent teenage pregnancy

- 1.4.1 Do you think teenage pregnancy can be prevented or reduced in secondary schools?
- 1.4.2 What suggestions can you give which you believe will help overcome the problem of teenage pregnancy in secondary schools?
- 1.4.3 How should the educators' approach be when addressing the problem of teenage pregnancy to learners in both the GET and FET phases of secondary school?

APPENDIX 2

LETTER TO ASK FOR PERMISSION

Enq. Malahlela M.k

Cell: 082 735 3524

e-mail : malahlelamk@webmail.co.za

Student no. 0837-170-9

PO Box 4420

Sovenga

0727

09 September 2011

The Circuit Manager

Mankweng Circuit

Private Bag X1108

Sovenga

0727

Dear Sir

REQUEST FOR PERMISSION TO CONDUCT A RESEARCH TASK IN MANKWENG CLUSTER SECONDARY SCHOOLS

I have enrolled with the University of South Africa (UNISA) for the academic year 2011 and presently engaged with a research assignment for a Dissertation of a limited scope, under the field of study "MEd. Inclusive Education". The topic of my research stands as follows:

**THE EFFECTS OF TEENAGE PREGNANCY ON THE BEHAVIOUR OF LEARNERS
AT SECONDARY SCHOOLS IN THE MANKWENG AREA, LIMPOPO.**

Should I be given an opportunity to conduct research in your area, all information collected from educators will be treated confidentially.

I promise to forward a copy of the outcomes of my research task to you as the Circuit Manager after completion of the study.

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

Yours faithfully

Malahlela M.K (Mrs)

APPENDIX 3



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

PRIVATE BAG X1108
SOVENGA
0727
TEL: 015 267 5641
FAX: 015 267 5248

**DEPARTMENT OF EDUCATION
CAPRICORN DISTRICT
MANKWENG CIRCUIT**

Enq: MJ KEKANA
Tel No: 015 2675641

2011.09.30

MALAHLELA M.K
PO Box 4420
SOVENGA
0272

**REQUEST OF PERMISSION TO CONDUCT RESEARCH IN MANKWENG
CIRCUIT HIGH SCHOOL**

1. The above matter refers.
2. We acknowledged the receipt of your letter 30/09/2011 requesting to conduct Research Project Titled: "The effects of teenage pregnancy on the behavior of mainstream secondary schools learners".
3. Permission is hereby granted for the above mentioned request.
4. Wishing you for the success.


.....
MAGAGANE M.D.
(CIRCUIT MANAGER)

30/09/2011
.....
DATE

APPENDIX 4

ONE OF THE LETTERS OF REQUEST TO THE PRINCIPAL

Enq. Malahlela M.k

Cell: 082 735 3524

e-mail: malahlelamk@webmail.co.za

Student no. 0837-170-9

PO Box 4420

Sovenga

0727

09 September 2011

The Principal

Ramashobhle High School

PO Box 4093

Sovenga

0727

Dear Sir

REQUEST FOR PERMISSION TO CONDUCT RESEARCH TASK IN YOUR SCHOOL

You are hereby kindly requested to allow me, **Malahlela M.K, Student no. 0837-170-9 (UNISA)** to complete a practical assignment (research task) in your school.

I am presently registered for the MEd Inclusive Education degree and as part of my studies have to complete a practical assignment for the research, which is entitled: **THE EFFECTS OF TEENAGE PREGNANCY ON THE BEHAVIOUR OF LEARNERS AT SECONDARY SCHOOLS IN MANKWENG AREA, LIMPOPO**

The execution of the research task may under no circumstances disrupt the normal teaching programme of the learners, except if you and the class teachers give permission to do so.

Participation by teachers in this research task is absolutely voluntary. I am hereby taking the responsibility to explain the research task to the teachers who will volunteer to participate and to ensure their confidentiality in the interviews. I am intending to use a **Form for Informed**

Consent to be completed by each teacher who volunteers to participate, before the commencement of the research task. On completion of this research task, a copy of my research report will be delivered to your office.

I thank you in anticipation for a positive response.

Yours truly

.....

Malahlela Moyagabo Kate (Student)

RAMASHOBOHLE HIGH SCHOOL

REF NO. 23/3693
EMIS NO.: 923241238
ENQ: MAMABOLO J.M
CELL: 083 278 3086



P.O. BOX 4093
SOVENGA
0727
MAKEKETELA

14/09/2011

TO WHOM IT MAY CONCERN

Kindly be informed that Mrs Malahlela M.K is expected to respond to a research topic in connection with her field of study, Inclusive Education. The topic of her research stands as:

THE EFFECTS OF TEENAGE PREGNANCY ON THE BEHAVIOUR OF LEARNERS AT SECONDARY SCHOOLS IN THE MANKWENG AREA, LIMPOPO.

She has requested for permission to interview the following stakeholders within our school community:

- Educators

Permission has been granted in this regard.

You are requested in very humble terms to give her the necessary cooperation should she identify you as one of the suitable interviewees.

She is wished the best of luck in her endeavour to do justice to the topic in question.

PRINCIPAL

APPENDIX 6

INFORMED CONSENT FOR TEACHERS / EDUCATORS:

Part 1

As part of my studies for the MED INCLUSIVE EDUCATION degree at the University of South Africa, I have to conduct in-depth interviews as a practical part of my assignment for which I need your assistance. The assignment consists of the following:

The goal of this study is to find out from educators if teenage pregnancy has an effect on school attendance, emotional behaviour and school performance of teenagers at secondary schools. The results of this study will to a larger extent be useful to the practitioners in the Department of Education and the Department of Health and Social welfare.

(Give a brief description of the goal and value of the assignment).

All I am asking of you is:

For you to participate in the interviews and give your perception about teenage pregnancy and its effects on secondary school learners.

(Explain what you need from the teachers or participants).

Part 2

It is important that you read and understand the following general principles:

1. Participation in the assignment is completely voluntary and no pressure, however subtle, may be placed on you to take place.
2. It is possible that you may not derive any benefit personally from your participation in the assignment, although the knowledge that may be gained by means of the assignment may benefit other persons or communities.
3. You are free to withdraw from the assignment at any time, without stating reasons, and you will in no way be harmed by so doing. You may also request that your data no longer be used in the assignment.
4. You will be given access to your own data upon request.
5. You are encouraged to ask me any question you may have regarding the assignment and the related procedures at any stage. I will gladly answer your queries.

6. The assignment objectives are always secondary to your well-being and actions taken will always place your interests above those of the assignment.
7. Title of the Assignment:

THE EFFECTS OF TEENAGE PREGNANCY ON THE BEHAVIOUR OF LEARNERS
AT SECONDARY SCHOOLS IN THE MANKWENG AREA, LIMPOPO

I, the undersigned

.....
..... (full names & Surname) have read the preceding premises in connection with the assignment, as explained in Part 1 and Part 2 of this informed consent form, and I declare that I understand it. I was given the opportunity to discuss relevant aspects of the assignment with the assignment leader and I hereby declare that I am taking part in the assignment voluntarily.

Signature: Date:

(Leedy and Omrod, 2010:101-103).