

**TEENAGE PREGNANCY: YOUNG MOTHERS IN GRADE TWELVE**

**SHH... THERE ARE MOTHERS AMONGST US**

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**Master of Education**

**(SOCIAL JUSTICE)**

**2005**

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Research Report submitted in partial fulfilment of the requirements for the  
Master of Education Degree

(SOCIAL JUSTICE)

FACULTY OF EDUCATION

UNIVERSITY OF KWAZULU NATAL  
(WESTVILLE CAMPUS)

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2005

## ACKNOWLEDGEMENTS

I would like to place on record my sincere gratitude to the following people:

All the obliging young women who participated in, and made this study possible. I wish you all the happiness and joy in the world. May your babies bring you spiritual happiness.

All the principals who took time of from their busy schedules to complete the questionnaire. May you continue to be the light that would direct the youth of today in the right direction.

My supervisor, Doctor P. Ramrathan for his insightful supervision and continuous support and guidance. Thank you, sir.

To Leo and Pinkie Nasaree for their friendship and moral support. Words cannot express my gratitude. May the love of God, family and friends be your constant companions through your journey in life.

A special thank you goes out to my brother-in-law, Mahendra Singh, who was always ready to assist me whenever I encountered difficulties in my studies. Also, a gargantuan thank you for the use of your dictaphone and computer. I wish you peace and prosperity.

To my mum and dad for their unwavering faith and continued emotional support when I needed it the most. May God bless you.

## DECLARATION

I, Roma Singh, declare that this dissertation is my own work, and has not been submitted previously for any degree at any university.



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## **ABSTRACT**

My interest in teenage pregnancy began when I discovered pregnant girls in my class. Upon discussion with other educators in my school, I discovered that there were many pregnant girls in school. Thus began a journey in which I spent much time researching the topic. What I learnt along the way is that this is not a third world problem that affects certain race groups. It is a universal problem and if it is left to grow it will become the greatest social problem faced by the world. I believe that as educators we need to help curb the problem of teenage pregnancy.

More importantly Secondary School educators need to become more aware of the debates surrounding teenage pregnancy for three reasons: (1) many of us may have pregnant or mothering teenagers in our classes and we need to understand where they are coming from and where they are heading towards, (2) we have the potential to help prevent teenage pregnancy by removing the cloak of ignorance that covers the issues surrounding sex and (3) teenage sexuality may be closely linked to the Aids pandemic that is moving like a veld fire across our country.

We know that teenage pregnancy is not a new social problem. It has been around for centuries, but of late the severity of the problem has increased. It was this increase in teenage pregnancy that spurred me on to research why the youth of today, who have so much of sexual information made easily available to them, are still falling pregnant while at school.

This study attempts to answer two critical questions. Firstly: "How do learners engage with factors that contribute to teenage pregnancy?" My study revealed that learners lack the knowledge or skills to avoid sex, they were ignorant of the different types of contraceptives, they were in denial that they could fall pregnant and they lacked the motivation to avoid early childbearing. Secondly, the critical question, "Why, in context of all the information present today on sex, do teenagers still fall pregnant?" Through the process of research it was found that teenagers engage in premarital sex because of the following reasons: peer pressure, they get caught up in the moment of passion and because

they are bored and have nothing better to do.

It is hoped that the analysis, findings and recommendations of this study will help curb the problem of teenage pregnancy.

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## **CHAPTER ONE**

### **1.1 INTRODUCTION AND BACKGROUND**

One of the most critical problems related to teenage sexuality is teenage pregnancy. Before we move onto teenage pregnancy we need to understand what is 'Sexuality'. According to Greathead, Devenish and Funnell (1998), sexuality encompasses the total expression of who we are as human beings. They further point out that it encompasses our Ethical (ideas, religious beliefs, moral opinions and actions, values), Cultural (family, neighbours, peers, schooling, dating, marriage, law, customs, media and advertising), Biological (reproduction, psychological cycles and changes, physical appearance) and Psychological (emotion, experiences, self concept, motivation, learned attitudes and learned behaviour) aspects. According to Leigh (1996) as cited by Greathead et al (1998), sexuality is the total sum of who you are, what you believe, what you feel and how you respond. Clearly then, if one is to understand the factors that contribute to teenage pregnancy, one has to understand teenage sexuality.

In examining the statistics on teenage pregnancy, one has to look at teenage sexuality. As much as the statistics (16 %) as presented by the Department of Health in 2003 on teenage pregnancy is alarming, we must not forget that the statistics on teenage pregnancy reflects only a small percentage of the total number of teenage pregnancies. It does not account for those teenagers who fall pregnant and commit suicide, those who resort to abortion and those who suffer miscarriages.

McWhirter and Hawley (1993) states that closely linked to teenage pregnancy is the increasing incidence of AIDS and other sexually transmitted diseases. Teenage pregnancy is dangerous and it has numerous consequences for it affects: health, academic performance, psychosocial problems, personal development, social development and career plans of the teenager. This often leads to the nation been plagued by social problems e.g.: High drop out rate at schools, increase in unemployment, increase in crime and greater dependency on social welfare.

Simms and Smith (1982) as cited by Kaham (1989) point out that teenage mothers today are more likely to keep their babies than put them up for adoption. Studies by Greathead et al (1998) have also found that teenagers who keep their babies are most likely to suffer consequences in the form of: substandard housing, poor nutrition and health, unemployment or underemployment, an end to her schooling, inadequate career training and financial dependency. Thus, one can see a link between teenage pregnancy and poverty. It has also been found that educational problems faced by teenage parents are frequently carried over into the next generation. Hence we can conclude that if teenage pregnancy continues to spiral, the education department will be confronted with a burgeoning group of children at risk. This spiraling outbreak of teenage pregnancy makes “sex education” absolutely necessary at schools.

Recently, research (“Umthente Uhlaba Usamila: The First South African National Youth Behaviour Survey: 2003) carried out by the Department of Health in conjunction with the Department of Education amongst 10699 learners (from grades 8 to 11) in government schools from the various provinces found that in regard to sexual behaviour, 41% of learners had had sex, and the age of initiation of sexual activity was under 14 years for 14% of them. Among the learners that had had sex, 10% were forced to have sex, 8% forced others to have sex, 54% had had more than one sexual partner, 70% had had sex in the past three months, 14% had had sex after consuming alcohol or drugs, only 29% practiced consistent condom usage, 16% had been pregnant, 8% had had an abortion or a partner who had had an abortion, 7% had had a sexually transmitted disease, 12% thought that they may get HIV and overall 72% had received education regarding HIV and AIDS. Despite the scale of the problem, schools are not doing much to address ‘teenage sexual behaviour’. I believe that educators need to be capacitated to disseminate facts about sexual behaviour and the myths that surround them.

## **1.2 THE PURPOSE OF THE STUDY**

It is against the backdrop of escalating teenage pregnancy that the study aims to understand why in context of knowledge about sex and sexuality, learners engage in unsafe sexual activities that manifest itself in teenage pregnancy. Thus, this qualitative, feminist investigation focuses mainly on the teenage experiences and their attitudes towards sex and

sexuality. An attempt is made to illustrate how family influence, media influence, change in social norms and sexual ignorance has all impacted on teenage pregnancy.

This study points to the need to examine family dynamics and how they influence teenage sexuality. It is important to note that the family can play a vital role in guiding the youngsters away from pre-marital sex, although there are no guarantees they will succeed. This qualitative study also attempts to link teen sex to the media.

In order to protect teenagers from teenage pregnancy and society from the consequences of teenage pregnancy, the issue of teenage sexuality needs to be tackled immediately. We cannot deny the fact that sexual social stimuli, peer pressure and mass media tend to make sexual activity attractive and exciting to teenagers. Hence, there is a need to equip the younger generation with accurate information so as to enhance their understanding and responsibility towards their own sexual behaviour. This can be done via sex education classes in schools, where sex education must be given positively so that teenagers will have an understanding and a basis on which to make decisions about their sexuality. Sexual education should provide teenagers with factual information that would guide them towards healthy attitudes that develop concern for and respect for others.

### **1.3 – CRITICAL QUESTIONS**

Critical questions asked in this study are:

- How do learners engage with factors that contribute to teenage pregnancy?
- Why, in context of all the information present today on sex, do teenagers still fall pregnant?

### **1.4 THE RATIONALE OF THE STUDY**

Over the years the number of pregnant girls at the school I teach has steadily increased. Last year the school recorded twelve girls being pregnant. The actual number of pregnant girls may very well be more than twelve. A number of girls are able to hide their pregnancy so well that the educators know nothing of them. Sometimes their pregnancy is revealed when a friend tells on them or when by a slip of their own tongue they reveal their deeply guarded secret. Many a time the drastic change in their physical appearance makes it quite obvious to the trained eye that they are indeed pregnant.

At the very beginning of 2004 I was shocked to discover that two grade twelve learners in my form class were pregnant. One of the learners chose to leave school whilst the other chose to attend school until her time of confinement. Was my class the only class with pregnant girls? This thought propelled me into an investigation of teenage pregnancy at my school. I was shocked to discover that teenage pregnancy was rife at school. I learnt that many girls, even in the junior classes, were already mothers. One day during a casual conversation with a learner from my class I discovered that out of the nineteen girls in class, four were mothers. Whilst in the process of researching teenage pregnancy I discovered yet another two cases of pregnancy in my class. Alas, one of the girls was already six months pregnant. Sadly, the other girl had a miscarriage. I could only imagine the emotional trauma the girls must have been going through.

It troubled me tremendously that “children were having children”. These young girls were losing out on some of the best years of their lives. Instead of enjoying the freedom of being children they had to shoulder the responsibility of being mothers. I wondered how these girls, with the little education they had, were going to support their babies during these difficult economic times. Furthermore, I found it difficult to understand how educated girls could make the mistake of falling pregnant while still at school. Were they not afraid of being ostracized by the school community and by society at large? While engaging in sex were they not afraid of contracting sexual diseases, especially the killer disease ‘Aids’? How could these girls play Russian Roulette with their lives?

After the initial shock of discovering that I had so many mothers and mothers-to-be in class, I realised that teenage pregnancy is a pressing social problem that needs to be attended to immediately. Teenage pregnancy is not a social problem in a vacuum. It is the root to a large number of social problems e.g. poverty, unemployment and sexually transmitted diseases. For many teenagers who are ashamed of having a child out of wedlock there is not much choice. Some choose suicide whilst others choose to abort the foetus. Although abortion has been legal in South Africa since 1997, many young girls choose to have backstreet abortions, which are dangerous, because they cannot afford the hospital fees. Some are afraid that if they terminate their pregnancy in a hospital the authorities will

inform their parents of their pregnancy. The unsafe abortion statistics is frightening. Cira and Newman (The Mercury, 2004) states that according to the World Health Organisation 30 000 African women die as a result of unsafe abortions. Furthermore, they state that 59% of all unsafe abortions recorded in Africa occurred in young women between the ages of 15 to 24. These figures clearly indicate that an increasing number of children are becoming sexually active.

As educators we cannot ignore the problem. It is our duty to prepare well-adjusted, responsible, well-educated young people to take our country from strength to strength. In order to do this we need to curb teenage pregnancy and we can only curb the growth of teenage pregnancy if we can understand why in these enlightened times, when the youth are technologically advanced, teenage pregnancy is still rife. Thus, I was prompted to undertake a dissertation on teenage pregnancy in secondary schools.

My dissertation “Teenage Pregnancy: Young Mothers in Grade Twelve” examines why in context of learner’s knowledge of sex and sexuality, learners engage in unsafe sexual activities, which manifest in teenage pregnancy. Secondly, I want to understand how their pregnancy and motherhood impacts on their studies and their future goals. Thirdly, I want to research what the school is doing to curb the problem of teenage pregnancy. Lastly, I want to examine what the school does to help these teenagers cope with their pregnancy. This I will ascertain by using three subjects in my case study. I hope that by the end of my dissertation I would be empowered enough to influence learners to abstain from sex until after marriage.

## **1.5 METHODOLOGY**

This study started of by examining literature that was relevant to the research that was been undertaken. It was then decided to employ the Qualitative Feminist Approach since the study examines the life and experiences of grade twelve females. The sample was chosen by using the Snowball Sampling Technique, which is also known as Network Sampling. Fitzgerald and Cox (2002) explain that Snowball Sampling starts of small. This is so because in Snowball sampling the researcher identifies one participant who will then suggest another candidate who fits the profile of the participants required in the research. Since the

study is a Case Study it was decided to use a sample of two. A semi-structured interview was conducted with each of the candidates because it allowed for probing to take place whenever required. At the same time the principal of the school was approached to answer a questionnaire on teenage pregnancy at his school. A questionnaire on teenage pregnancy was also sent to the principals of the neighbouring schools. The collected data was then analysed and presented in narrative form.

## **1.6 SOME LIMITATIONS OF THE STUDY**

Teenage pregnancy is a vast and complex problem facing the world today. This study is limited in that it only examined teenage pregnancy amongst grade twelve learners. The reality is that learners right from the primary school are falling pregnant out of wedlock Secondly, this study is limited in that it did not examine teenage pregnancy from the male learner's perspective. As much as we have acknowledged that we have mothers in our classrooms, we also need to acknowledge that we may have many fathers in our classrooms as well. The problem of teenage pregnancy may only be controlled if we understand the factors that influence young men to engage in risk taking behaviour. Another limitation of the study was that the sample was made up of African learners. It was not possible to do a cross-cultural survey because at the time the study was undertaken there were no known cases of pregnant girls of other races at school. Another limitation of the study was that most principals who filled the questionnaire that was sent to them left out vital information e.g.: many did not give the number of pregnant girls per grade and year. Lastly, it was quite difficult to triangulate the data since much of the data gathered were the perceptions of the pregnant learners.

## **1.7 CONCLUSION**

Chapter one gives the reader background information on the severity of the problem of teenage pregnancy. It also presents the rationale for the study. It examines the critical questions investigated by the study. Lastly, it gives a brief description on how the study was carried out.

Chapter two attempts to document some of the theories on teenage pregnancy, namely: the Underclass Theory, the Social Puberty theory, The Socio-economic Theory, the Biological

Theory, The Social Behavioural Theory, The Environmental Theory and The Moral Development Theory.

Chapter Three which focuses on the Literature Review attempts to document some of the current arguments on teenage pregnancy.

Chapter Four examines the analysis of the data and the main findings pertaining to the factors that influence teenage pregnancy.

Chapter Five attempts to recommend ways and means by which to decrease the current rate of teenage pregnancy.

## **CHAPTER TWO: THEORETICAL FRAMEWORK**

### **2.1 INTRODUCTION**

This chapter deals with the theoretical considerations underlying the whole research. These theories refer to adolescence in general, with specific emphasis concerning the adolescent pregnant girl. The theories indicate that the rise in adolescent sexual activity and the subsequent pregnancies can be traced to several factors: a decline in the number of teenage marriages, increasingly early onset of puberty, a change in the norms of sexual behaviour and a change in youth culture.

### **2.2 THEORIES ON TEENAGE PREGNANCY**

#### **2.2.1 THE UNDERCLASS THEORY**

The “Underclass Theory” states that single teenage parents are exclusive to the underclass element of society. The responsibility for the plight of the underclass tends to be placed primarily on the individuals and their perceived anti social behaviour. Thus the benefit system encourages dependency and penalizes those who work. Also, the geographical concentration may play a part in the mechanisms surrounding social exclusion and the ‘underclass’.

Although poverty plays a part in the emerging ‘underclass theory’, it must not be forgotten that the lack of human rights and discrimination in society towards sections of different communities are also to be blamed for the emerging underclass.

Other more liberal thinking social theorists argue that the idea of an ‘underclass’ diverts attention away from what the real issues are and the disadvantages experienced by certain groups of people in society, especially young people from working class backgrounds.

There are some social theorists who blame poor education, bad housing, unemployment, and family background as main reasons why people become dependent on benefits. Thus, they conclude that the ‘underclass theory’ hides the real causes of teenage pregnancy and social exclusion.

The 'underclass theory' argues that teenage pregnancy is a cause of and consequence of social exclusion. These young people share the values as everyone else; unfortunately they have limited opportunities and are therefore restricted in planning for the future. They are victims of an unjust society that fails to ensure a fairer distribution of opportunities and resources. It goes on to argue that the disadvantaged youth are 3 to 4 times more likely to give birth out of wedlock than the advantaged youth.

Poverty and social exclusion has a direct effect on the choices young women make about abortion and sex education. If all girls had the same opportunities and options open to them when they found themselves pregnant or prior to having sex, then maybe the rate of teenage pregnancy will fall.

### **2.2.2 THE SOCIAL PUBERTY THEORY**

Thornburg's "Social Puberty Theory" (Grinder 1975) explains that a social puberty precedes the physiological puberty known to most adolescents. Thornburg explains that Social Puberty is when heterosexual involvement is thrust on the preadolescent prior to his developmental physiological basis that would make such behaviour more natural. This occurs as a result of the social stimuli that the adolescents confront in their daily lives. They are exposed to different sexual behaviour via the media of television, films, music videos, books, magazines and advertisements. Thornburg goes on to say that the media generally presents sex in enticing, luring, get involved ways. He also points out that when this is combined with the peer pressure to become sexually active, the youth rarely understands the naturalness of sex and its consequences. Marchant and Smith (1977) also state that the important factor to remember regarding sexuality is that the onset of puberty for girls is normally two years earlier for them than for their male peers. Therefore the girls' behaviour and interests are most often out of step with boys of the same age. Thus, it was found that most girls fall pregnant by older boys.

### **2.2.3 THE SOCIO-ECONOMIC THEORY**

Many teenagers get pregnant because of social benefits. However, statistics show that many teenagers only begin to inquire about social grants and housing after getting pregnant. Marchant and Smith (1977) state that most teenage pregnancies are not planned and young

people seem to rarely plan for the future until after they are pregnant. Thus, it is very unlikely that they would become pregnant in order to obtain benefits.

#### **2.2.4 THE BIOLOGICAL THEORY**

Marchant and Smith (1977) stress the importance of biological progression of development. They accept Freud's concept of the unfolding of personality by various stages of development. Freudian theory was that of the ego arbitrating between the conflicting demands of the id and super-ego, the desire for instinctual gratification as opposed to observing norms of behaviour. At adolescence conflict is heightened by sexual impulses dominating the id which upsets the super-ego's previous identification with authority figures such as parents and teachers. Thus there is confusion at adolescence when the super-ego is re-informed within the context of opposing desires for both independence and some continuing dependence. It is this behaviour that would put the teenager at risk of falling pregnant.

#### **2.2.5 THE SOCIAL BEHAVIOURAL THEORY**

Marchant and Smith (1977) see all social learning as developing from socialised anxiety. They state that the individual learns the behaviour that is socially acceptable to her particular culture. Thus, social class differences play an important role in adolescent behaviour. The socially instilled anxieties tend to be greater in the middle class where there is more concern with normality, success, status and morality. In contrast, lower-class adolescents tend not to develop the kind of socialised anxiety that motivates achievement and the postponement of immediate pleasure for long-range goals and so they may differ from their middle class in respect to sexual activity. The 'Object Relations Theory' emphasises relationships with people as the basis for the whole course of personality development. Carl Rogers as cited by Marchant and Smith (1977) suggests that the subjective meaning of experience is important and that behaviour should be understood in these terms – thus the teenage girls' perceptions of her situation is important

#### **2.2.6 THE ENVIRONMENTAL THEORY**

Theorists such as Mead, Musgrove and Coleman as cited by Marchant and Smith (1977) stress the influence of environmental socio-cultural factors on personality and behaviour of

adolescents. They explain adolescent problems in relation to the complexities of the rapidly changing world, where confusion is maximised for adolescents by the variety of alternatives open and the lack of a stable frame of reference. This is of particular relevance to the adolescent girls's confusion over sexual behaviour. Mead as cited by Marchant and Smith (1977) also states that it is more difficult for teenagers to establish a meaningful identity in an ever-changing world. Environmental Theorists see teenagers as the creation of modern social attitudes and institutions. Furthermore they state that the cultural environment manipulates the teenager into a pattern of mass conformity.

### **2.2.7 THE MORAL DEVELOPMENT THEORY**

Piaget and Kohlberg as cited by Biehler and Snowman (1990) state that one's interpretation of rules and values changes with age. Toddlers viewed rules as an interesting example of socially acceptable behaviour. To them rules were absolute and they were prepared to conform to them. By the age of eleven they lose interest in adult imposed regulations and begin to formulate their own variation of rules to suit their situation. Moral Development Theorists state that one's morality also changes with the changing world. Premarital sexual intercourse, which was considered a sin in the past, is now socially acceptable within many communities today.

### **2.2.8 THE EARLY ONSET OF PUBERTY THEORY**

Hofferth and Hayes (1987) as cited by McWhirter et al (1993) agree that the early onset of puberty has contributed to an increase in teenage pregnancy. Over the years, the age of first menstruation has steadily fallen, while the mean age of marriage has for women and men continue to rise. Thus, the time gap between physical maturity and marriage continues to widen. It is this gap that is the problem. In the past, teenagers were able to engage in sexual intercourse within the bounds of marriage. Today, with the marriageable age been pushed further back, many teenagers find it difficult to maintain their virginity until marriage. Hence, there is an increase in premarital sex which is one of the main causes of early teenage pregnancy.

### **2.2.9 THE GOALS OF MISBEHAVIOUR THEORY**

Adler and Dreikurs as cited by McWhirter et al (1993) argue that a youngster's misbehaviour may have one or more of four goals:

(a) Attention: it is argued that if the teenager does not achieve attention through socially acceptable means then she may resort to negative behaviour to get attention. She may, for example, choose to fall pregnant out of wedlock in order to get the adult's attention. To such teenagers punishment is better than being ignored. She may also choose to fall pregnant in order to get attention from a specific boy. Sometimes a girl may fall pregnant with the hope that the baby will give her the love and attention that she so craves.

(b) Power: sometimes teenagers demonstrate their power and control by refusing to be commanded. They may do this by breaking the rules laid down by the adults. The teenager may choose to break the rule of 'no premarital sex' to show that she is in control. She may do this regardless of the end result. Her aim to score a victory over the adult each time she defies a request or breaks a rule. Sometimes a girl may choose to fall pregnant so that she can gain power over the boy who impregnated her.

(c) Revenge: sometimes a teenager may choose to fall pregnant to hurt her parents who are too strict. A girl who acts out sexually may intend to get back on a partner who has slighted, rejected or jilted her.

(d) Assumed inadequacy or disability: often many teenagers will express their assumed inadequacy and disability by showing a lack of assertiveness in saying no to sexual activity. Often teenagers have the skill to resist sexual pressure, but they choose not to use these skills because they are suffering from an imagined inferiority complex. They believe that they are not responsible enough to make decisions so they leave all the decision making to their partners.

### **2.3 CONCLUSION**

It is against the backdrop of the above mentioned theories that the study was undertaken. These theories help us understand why teenage pregnancy is escalating at an alarming rate in today's society. They clearly indicate that not only is the adolescent's decision influenced by biological

factors but also by social, economical, environmental and moral factors. Clearly there are various factors that contribute to teenage pregnancy. An understanding of these factors will help us, educators better understand teenagers so that we can help prevent them falling pregnant out of wedlock.

## CHAPTER THREE: LITERATURE REVIEW

### 3.1 INTRODUCTION

*A young girl-woman, without education,  
without resources, stressed and depressed,  
rears her baby alone and  
bends like the poplar.*

*Gentle summer rains nourish the soil . . .but  
where do the poplars and the waters meet?*

J.J McWhirter

“Children Bearing Children”; “Teenage Catastrophe”; “Our Greatest Demographic Disaster”; “The Premier Social Evil Of The Third World” – these are some of the ways in which teenage pregnancy has been described.

Teenage pregnancy is not a new phenomenon. Yet, it is strange that in the era of sexual literacy and contraception, teenage pregnancy is still a major problem throughout the world. So often we read in the media of the spiraling number of teenage pregnancies. Recently, the mass media reported that teenage pregnancy is escalating at a dramatic pace because the girls of today are practicing their “democracy”.

Recently, “Umthente Uhlaba Usamila” - The South African National Youth Risk Behaviour Survey of 2002 revealed shocking statistics. It revealed that 40% of South African secondary school pupils are sexually active. The survey also found that 14% of these pupils had their first sexual encounter before the age of fourteen and some of them had already had more than one partner at that stage. Another shocking disclosure of the survey was that 8.1% had had an abortion or a partner who had had an abortion.

“Umthente Uhlaba Usamila”-The South African National Youth Risk Behaviour Survey of 2002 also found that the initiation into sex is getting younger even though awareness programmes (Love Life) on Aids and Teenage Pregnancy is in place. It is frightening that the youth do not seem to be afraid of falling pregnant or contracting the HIV Aids virus. It

is also horrifying to note that though adolescents are having sex earlier and more often, sometimes with multiple partners, they lack the basic knowledge about contraceptives. Also, limited knowledge of their reproductive systems together with sporadic, inappropriate or nonexistent use of contraceptives has led to younger girls falling pregnant. Thus, we can conclude that the increased sexual activity of the South African youth is largely responsible for the rising incidence of teenage pregnancy.

The rise in teenage sexual activity and the subsequent pregnancies can be traced to several factors: a decline in the number of teenage marriages, increasingly early onset of puberty, a change in the norms of sexual behaviour and a change in the youth culture (McWhirter et al 1993). Furthermore, she states that over the years the menstruation age has dropped, while the mean age of marriage has risen. The time gap between physical maturity and marriage is increasing. Hancock (1982) attributes the rise in teenage pregnancy to the following factors: the sexual revolution of the sixties, a climate of sexual permissiveness, the earlier onset of menarche, earlier fertility, the earlier age for initiating sexual activity, stimulation as a result of the avalanche of sexual material in movies, magazines, pop-videos and television: and the lack of factual information about contraception. Furthermore Hancock points out that the ambivalent attitude of society that premarital sex is acceptable but pregnancy is not, has contributed to the problem. Other contributing factors are: cultural influences, sexual ignorance and poor decision making skills. Thus, it was against this backdrop that literature was reviewed.

## **3.2 FACTORS THAT CONTRIBUTE TO TEEN PREGNANCY**

### **3.2.1 ENLIGHTENED SEXUAL ILLITERATES**

Today a deluge of explicit sex in print, film, music and conversation may fool many parents into thinking that their children know everything about sex. The reality, however, is that both boys and girls may be aware of sex and may be engaging in sex, but they are appallingly ignorant about many aspects of their bodies, body functions and human sexuality. In 1971, Stage as cited by Albrecht (1972) reported in, "VD: THE CLOCK IS TICKING" that when doctors met teenagers in college they were dumbfounded by the questions teenagers asked, such as: "Can I get pregnant if I didn't have an orgasm? Is it true that there are some days I can conceive and other days when I can't?" Hancock (1972)

states that many girls revealed their sexual ignorance when they revealed that they thought that they could not fall pregnant after their first sexual encounter.

### **3.2.2 ADOLESCENT DEVELOPMENT**

During adolescence, youth are experiencing physical growth and hormone changes that prompt sexual feelings. The sex organs are maturing and by the end of puberty, both males and females have the ability to procreate. One way that adolescents try to negotiate the change from childhood to adulthood is through sexual activity. By the time most teenagers graduate, half of them would have begun having sex. Many teenagers see sexual activity as a way to develop their adult identity, to test their future roles. McWhirter et al (1993) states that many teenagers look to their friends, especially the opposite sex, for validation and approval of the changes that their bodies are undergoing. Hayes and Cryer (1988) as cited by McWhirter et al (1993) states that to many teenagers sexual behaviour provides a means of challenging parents who seem to stand in their way to independence. Sometimes whilst testing their adult roles an unwanted pregnancy may occur. This forces them to mature faster since they have to cope and handle responsibilities they never experienced before. Often they are forced to leave school and fend for themselves and the baby. Also, teenagers who mature physically earlier than their peers typically hang out with an older crowd. Older peers may influence the decision to begin sexual activity earlier.

### **3.2.3 ANTECEDENT CHARACTERISTICS**

McWhirter et al (1993) states that a variety of personal and demographic factors place teenagers at risk of falling pregnant out of wedlock. Thompson and Sherwood(1989) as cited by McWhirter et al (1993) state that teenagers with a poor self-worth and a poor self-esteem, have difficulty planning for the future and frequently engage in risk taking activities such as unprotected sex. Hayes and Cryer (1988) as cited by McWhirter et al (1993) argue that such teenagers are most likely to reject social norms, have limited knowledge of their own physiology and have difficulty processing information about birth control. Studies by Hambright, (1988) as cited by McWhirter et al (1993) also found that girls who had little or no aspiration of completing schooling were most likely to risk falling pregnant. On the other hand girls who had greater career and life options were less likely to engage in sex and when they did, they were most likely to use contraceptives. Also, Thompson and Sherwood

(1989) as cited by McWhirter et al (1993) and Futris and McDowell (2004) found that teenagers who are born of teenage parents, or come from single parent families or come from a family where there is marital strife and instability are more likely to risk teenage pregnancy. Ethnicity, poor socio-economic status, absence of a father, poor academic performance and family difficulties are all associated with teenage pregnancy

### **3.2.4 INTERPERSONAL INFLUENCES**

McWhirter et al (1993) states that when communication between mother and daughter is poor or absent, the girl is placed at greater risk for premature sexual activity and potential conception, in part because she looks to others, especially her male peers for nurturance and intimacy. Families with poor interpersonal relationships may inadvertently encourage teenagers to look elsewhere for nurturing relationships. Teenagers turn to peers for relationships they cannot foster with their families. Soon pressure from peer clusters can lead to risky behaviour such as promiscuity and neglect of contraception. The cluster of peers may also become the primary source of sexual information. Unfortunately, the teenagers who share information about sex may lack the knowledge about their own bodies and about contraception. Without good family support, a sense of personal worth and academic aspirations, teenagers are more susceptible to the influence of their peers. Maybe parents can play a vital role in preventing teenage pregnancy by having genuine communication with their teenagers. If this communication exists, teenagers will have the freedom to verbalize their thoughts and feelings about everything – sex included. Open discussion about sex may prevent teenage pregnancy and the host of problems that comes with it.

### **3.2.5 FAMILY INFLUENCES**

Futris and McDowell (2004) state that teenage pregnancy has been linked to low parent education. Furthermore they state that girls who get pregnant often have mothers who gave birth in their teens. Parents of teenage mothers and teenage fathers are often considered by their teenagers to have ‘permissive attitudes’ regarding premarital sex and pregnancy. Futris and McDowell (2004) go on to say that teenagers who live in single parent homes are more likely to be sexually active than those who come from two parent households. Parental divorce during the early teen years has also been associated with the early onset and

increased frequency of sexual activity in females. These effects are often due to less monitoring and supervision that typically occurs in single parent households. Futris and McDowell (2004) also found that teenagers who have older siblings (more especially a sister) who is sexually active or who has had a baby are more likely to begin having sex at a younger age.

### **3.2.6 PERSISTENCE OF TABOOS**

Albrecht (1972) states that in spite of the increasing openness about the human body and the explicit images of sex by the media, sex or the topic of sex still remains a taboo in many cultures. As a result of this many parents feel uncomfortable and anxious to teach their children sex education. Secondly, Hancock (1982) states that sex education is still absent in schools. He also points out that another problem is that in homes where sex education has taken place, the teenagers chose to ignore or block out or forget the information for various reasons. Albrecht (1972) in her book "PARENTS AND TEENAGERS: GETTING THROUGH TO EACH OTHER" states that the preadolescent child is quite conflicted about sex and will therefore receive sexual information with mixed feelings of eagerness and apprehension. She goes on to say that when a school shows a film about reproduction, the child will often be unable to assimilate the information and will promptly forget it. This is a contributing factor to teenage pregnancy.

### **3.2.7 THE SEXUAL REVOLUTION AND MORALITY**

From time immemorial the one thing that has been constant in the world is 'change'. Every culture has rules and as that culture changes so does its rules. Many teenagers today disagree with their parents' sexual standards and attitudes. There are, however, parents who have altered the rules regarding sex for their sons and daughters. Albrecht (1972) states that to a large proportion of society the virtue of virginity, the idea of sexual abstinence and purity until marriage, and the concepts of carnal sin and dirty sex are still a part of proclaimed ethic. Today, however, the attitude of teenagers toward sex varies from conservative to what some may call promiscuous. Albrecht (1972) points out that those who have conservative attitudes believe in the sacredness of sex and approve of premarital sexual relations only if marriage is the goal. This indicates a trend to a new and different

sexual morality. Previously sexual morality was equal to abstaining totally from intercourse outside marriage.

### **3.2.8 THE NEW YOUTH CULTURE**

One of the most prominent aspects of the so called new youth culture is the development of a 'new sexual morality' which is based on openness, honesty and a greater concern for others in human relationships and less on conformity to institutionalized social norms. Conger (1975) states that there is a growing tendency among young people to view decisions about individual sexual behaviour as a more private and less public concern. Pacard as cited by Conger (1975) states that to the majority of teenagers, the acceptability of premarital sexual intercourse is highly dependent on the nature of the relationship between the individuals involved.

### **3.2.9 SEXUAL ACTING OUT**

Promiscuous behaviour is usually a substitute for other feelings. It may derive from anger or from the plea for reassurance that one is loved. Albrecht (1972) points out that "in many teenagers sexual acting out is a means of relieving their depressive feelings. Such people seek contact with others by means of sexual intercourse because it is the only method of relating they know. It may be the only way they know of relieving their loneliness, feelings of inadequacy, tensions and anxieties". Furthermore Albrecht (1972) points out that girls, who fear that they are unattractive or less desirable than their friends, may give themselves sexually with little coaxing to a large number of boys in an effort to achieve popularity. The primary motive of girls who engage in 'sexual acting out' is not sexual release but the desire to feel loved and needed.

### **3.2.10 VIEWS ON MARRIAGE**

Society is changing and so are the views towards marriage. Previously, sexual intercourse took place within the context of a legal marriage contract. To engage in sexual intercourse outside the marriage was morally wrong. However, the advent of contraception and legal abortions has created a new set of norms governing sexual behaviour. Dreyer as cited by Grinder (1975) states that the advent of effective birth control measures, adoption, less constraining abortion laws and the growth of equalitarian attitudes between men and

women have led during the past decade to increased sexual behaviour outside the traditional family unit. It allows unmarried people to engage in adult sexual behaviour outside of marriage. Premarital sexual intercourse appears to be acceptable today within the framework of an emotionally involved relationship. One reason for the changing attitudes of teenagers towards pre-marital sex, birth control and abortion may be the less likelihood of them employing marriage as the answer to a need for sexual release or an unwanted pregnancy. Albrecht (1972) states that with the onset of women's liberation, marriage is not a sure bet for security. Furthermore, she states that the youth of today value their freedom more than the ties of marriage. Many teenagers today do not see pregnancies out of wedlock as a sin. Then there are those teenagers who shy away from marriage because they fear the inevitable – divorce. Hence, Albrecht (1972) says, we find that many young people choose to live together and have a sexual relationship outside a marriage contract.

### **3.2.11 THE ABSENCE OF SEX EDUCATION**

Conger (1973) states that most adults feel that sex education, even in secondary school is dangerous and premature for impressionable adolescents and is likely to lead to indiscriminate promiscuity". Furthermore he found that most adults believe that parents should teach sex education in the privacy of their homes. Surprisingly he found that the adolescents are in disagreement with the adults. The adolescents felt that sex education should be taught in school as a course on its own. They did not want sex education to be slipped into other courses such as health and biology. Furthermore, Conger (1973) found that approximately 80% of the adolescents believed that sex education should not only focus on the human reproductive system but should rather include aspects such as: venereal diseases, premarital ethics, male sexual drives, abortion, loss of virginity, contraception and masturbation. The absence of sex education results in ignorance, which often leads adolescents into situations they did not expect or intend getting into. As a result they have to cope with the consequences of irresponsible or casual sexual behaviour that may have profound effects on their lives.

### **3.2.12 VIEWS ON CONTRACEPTION**

Premarital sex is on the increase and thousands of teenagers are giving birth out of wedlock. Hence, there is a need for parents and educators to provide the teenagers with information about contraceptives. Many adults hesitate to provide contraceptive information because they believe it may foster promiscuity. The reality, however, is that many teenagers are already sexually active and without this vital information they may very well end up pregnant. Many parents hesitate in giving their children contraceptives because they are afraid their children may believe that they are giving them permission to engage in sex. Sapire (1998) as cited by Greathead et al (1998) states that knowledge is not permission, but it may protect, where as ignorance cannot. No one can make a responsible, let alone wise decision from ignorance. In many cases where sexual information and contraceptives are not available, the young unmarried woman ends up paying a high price of either having the baby or aborting it. McWhirter et al (1993) found that most teenagers seek information about birth control only after they have been sexually active for about 9 to 12 months. Hence, we may still ask the question, "Will thorough and accurate information about contraception, plus free access to contraceptives prevent unwanted pregnancies?" Green (1994) states that contraception is no secret. In her book "Real Choices" (1994) she questions what further contraception development and promotion is necessary before we see a drop in teenage pregnancy.

### **3.2.13 FAILURE TO USE CONTRACEPTION**

McWhirter et al (1993) states that even though over the counter contraceptives are available to both sexes, most teenagers seek contraceptive services months after they have become sexually active. The big question is why do teenagers not use contraceptives to avoid unwanted pregnancies? Sanberg and Jacobs (1972) as cited by Hancock (1982) came up with the following factors that influence the use of contraceptives: the use of denial, roles of love and hostility, anxiety accompanying the assumption of responsibility, guilt and shame; and the unwillingness to postpone pleasure. Sanberg and Jacobs (1972) elaborate:

- DENIAL is used in many ways: denial of responsibility of pregnancy, denial that contraceptives actually work and denial of personal responsibility for using contraceptives. Herbert (1998) states that teenagers may evade and deny the facts and

reality of life by refusing to see them. Many teenagers are in denial that they are about to be sexually active. When a teenager plans to use a contraceptive he/she has to come to terms with himself/herself being sexually active.

- LOVE sometimes is a factor in the failure to use contraceptives. If you love the person you will take the risk of having sex without using a contraceptive. They further point out that risk taking may add to the excitement of the relationship.
- HOSTILITY towards parents may lead a teenager to ‘get back’ at parents by falling pregnant. Sometimes a teenager may fall pregnant by somebody else to hurt her boyfriend. Some may choose not to use contraceptives out of spite because they believe the other group is urging contraception through the desire to eliminate or diminish his race, ethnic group or religious sect. It is also believed that in masochistic individuals pregnancy may be used as self-degradation. Many teenagers may be pressured to have sex when they do not have contraceptives on them. Sometimes the use of contraceptives may be against their cultural and religious beliefs.
- ANXIETY is another factor that underlines the non use of contraceptives. Anxiety may arise, as the teenager becomes aware of the power of control that the use of contraceptives represents. They may also not be prepared for the responsibility that goes with that control. Also, the use of contraceptives to an immature, dependent youngster represents a giant step towards independence, which she is not ready to take.
- GUILT may also interfere with acquiring contraceptives. Many teenagers believe that the acquisition of contraceptives makes sexual intercourse a planned act. The fear of being found out by parents and other family members and the resultant shame and embarrassment are also prohibiting factors.
- UNWILLINGNESS TO POSTPONE PLEASURE is the greatest reason underlying the nonuse of contraceptives. Teenagers in the moment of passion act impulsively without much thought about the consequences of their actions.

- MYTHS surrounding sex may also lead to the nonuse of contraceptives. Many young girls believe that they are too young to fall pregnant. Others believe that you cannot fall pregnant during your first sexual encounter. Some believe that withdrawal is a safe method. Others believe that if there is no penetration there is no risk. Believe it or not there are some that believe that jumping up and down after sex will prevent the sperm from reaching the fallopian tubes.
- ROMANCE AND SPONTANEITY will be destroyed if they plan and talk about having sex.
- THE MEDIA seldom shows people using contraception during sexual scenes.

### **3.2.14 PLANNED PREGNANCY**

For some girls, the decision to fall pregnant out of wedlock is based on the desire to escape from a very poor home situation. Hancock (1982) states that the girl thinks that she may use the pregnancy to trap the boy into marrying her so that she can escape the incestuous demands, physical abuse or dangerously psychotic parents she faces everyday. Often the girl fails to get the boy to marry her and she is thus saddled with the additional problem of looking after the child alone. Hancock (1982) further points out that there are also those girls who fall pregnant out of wedlock because of the desire to have someone to love who will love them back.

### **3.2.15 SEXUAL DECISION MAKING**

Juhazz as cited by Grinder (1975) states that adults are obligated to help the youth in dealing effectively with life and decision making because sex related decisions are being made at a younger age. Decisions, which were previously made at the young adult stage, are now being made in the adolescent stage. According to Greathead et al (1998), making decisions about sex is linked to knowing 'who you are' and 'what you believe in'. This influences 'how you behave'. Furthermore Greathead et al (1998) state that teenagers can only engage in sexual decision making if they fully understand their own sexuality. They go on to say that the process of decision making (to have sex or not to have sex) is difficult owing to factors like the imbalance of hormones, lack of decision making skills, traditional

risk taking behaviour, bombardment of sexual images by the media and the belief that adulthood only starts once sexual activity is experienced.

Greathead et al (1998) states that ones sexual decisions may be influenced when:

- One is suffering from boredom and wants to be fashionable.
- One is ignorant of the consequences of sex.
- One is carried away by passion.
- One is coerced by ones partner and wants to prove ones love.
- One is under peer pressure and cannot say no.
- One believes that one is obligated because of the cost of the date.
- One is under the influence of drugs and alcohol.
- One is part of a group that values sexual activity.

According to Sapire (1986) as cited by Greathead et al (1998) teenagers may decide to become sexually active for the following reasons:

- Rebellion against parental or religious restraints.
- Seeking physical pleasures as an escape from loneliness.
- To boost poor body image, feelings of inadequacy or poor self-esteem.
- Desire to make the partner responsible for her or fear of losing him.
- Virginity perceived to be a 'burden' because of peer pressure.
- Desire for pregnancy by an emotionally deprived girl who needs to be mother and wants to be a mother.

### **3.2.16 THE INFLUENCE OF THE MEDIA**

Today we are constantly confronted with unrealistic perceptions of love and sex through: television, films, videos, magazines, advertisements and novels. The media tends to portray the glamorous side of sex. They ignore the consequences of sex such as unplanned pregnancy and sexually transmitted diseases. Furthermore, sex is portrayed by the media as a natural extension of a relationship. Wildavsky (1996) states that the media portrays sex as something exciting without risks. Research carried out by The Westside Pregnancy Resource Centre (2004) in America found that a false portrayal of sex by the media leads to

a natural desire within many teenagers to experiment without considering the potential negative consequences.

Furthermore, the Westside Pregnancy Resource Centre (2004) points out that family ownership of television is universal with many even owning video cassette recorders. As much as this is so they found that most parents do not impose rules or restrictions on content or when their teenagers watch television. Their research findings point out that on average a teenager spends about six hours a day watching television. She is bombarded with large quantities of sexual material. They also found that often the programmes show:

- Unmarried heterosexual couples engaging in sex more often than married couples.
- The characters seldom fall pregnant or get sexually transmitted diseases.
- Sexual behaviour is often associated with violence.
- Sexual power is rarely depicted in the context of a committed marriage.

Results from an American study in 1987 as cited by The Westside Pregnancy Resource Centre (2004) showed:

- Afternoon soap operas contained thirty-five instances of sexual content per hour.
- High school girls who saw commercials that emphasized sex were more likely to say that beauty characteristics were more important for them to feel good about themselves and to be popular with men.
- Pregnant unmarried girls were twice as likely as never-pregnant girls to say that the boy-girl relationship on television were similar to real-life relationships.
- High school learners who were addicted to daytime soap operas were far more likely than light viewers or non-viewers to overestimate the number of social occurrences of illegitimate pregnancies or the occurrence of rape.
- Students who watched a greater amount of 'sexy' television were more likely than light viewers to become sexually active.
- Teenagers reported that television is equally or more encouraging about sex than their best friend.
- Students who were heavy viewers of sexually suggestive music on MTV had more permissive attitudes about sex than light viewers.

- Teenagers who were shown a set of ten music videos were more likely to find premarital sex acceptable than a companion who did not see the videos.

### **3.2.17 CULTURAL INFLUENCES**

Sexual attitudes and behaviour may vary from culture to culture. Some cultures may be restrictive with regard to sexual activity throughout childhood and adolescence, and to a certain extent even adulthood. Conger (1973) states that among the Cuna in South America, children remain ignorant of sexual matters until the last stage of the marriage ceremony. In other cultures, however, sexual experience is carefully nurtured from early childhood. Conger (1973) gives an example of the Lepcha of India who believe that girls “will not mature without the benefit of sexual intercourse”. Conger (1973) goes on to state that by the time the girls reach the age of 12, most of them have already engaged in full sexual intercourse. In most societies, however, sexual behaviour has been viewed as appropriate only among marriage partners. Also, most societies discourage sexual behaviour between children. Today, however, cultural attitudes are changing and becoming more liberal towards sexual behaviour. Hence there is an increase of sexual activity outside marriage. Glassberg (1965) as cited by Grinder (1975) states that “premarital intercourse has become a perfunctory aspect of the adolescent dating system”. Conger (1973) further points out that today, individual sexual behaviour is seen more as a private concern than a public concern.

### **3.2.18 CONCLUSION**

An analysis of the writings of those who have established a framework for teenage pregnancy reveals that teenage pregnancy is a universal problem that affects all communities. However, the occurrence of teenage pregnancy is greatest in the disadvantaged communities where the teenagers seem to be plagued with numerous social, economical and emotional problems.

## **CHAPTER FOUR: RESEARCH METHODOLOGY**

### **4.1 THE QUALITATIVE, FEMINIST RESEARCH METHODOLOGY**

The research method used in this study is based on the qualitative, feminist approach since the study examines the life and life experiences of women. The researcher needs to go into the woman's own consciousness in order to examine and understand her lived experiences. Furthermore the researcher needs to examine and understand the social, cultural and economic factors that influence the lived experiences of women.

For feminists, what counts as knowledge must be grounded in experience. Grant (1956) states that human experience differs according to the kinds of activities and social relations in which people engage. Feminists argue that claims about knowing can no longer be taken to be universally true. This is so because there are different types of knowing. Furthermore they argue that women's biology, women's intuition, women's experiences and what women say provide grounds for knowledge. The feminists theorists argue that what women say and what women experience do provide important clues for research design and research results. They go onto say that women's experiences may not provide answers to research questions, but beginning from women's lives can help furnish better research questions. Harding as cited by Grant (1956) states that this will help researchers escape the subjectivity of experience and preserve some notion of objectivity. Thus we would be able to look at the objective reality of women's lives and design research questions from there.

This focus on everyday experiences of the research subject can also be traced to the phenomenological and interactionist approaches. Both these approaches focus on the subjective nature of knowledge and the role of the researcher in the process of research. The qualitative feminist approach can also be described as ethnographic in nature because it involves participation, observation, description and inductive analysis. Unlike the quantitative research method, the qualitative feminist research method does not reject emotion and feelings as unscientific and biased. Singh (1995) states that the qualitative, feminist researcher believes that research can never be value free.

## 4.2 THE USE OF THE QUALITATIVE RESEARCH PARADIGM

Barton (1994) states that the Quantitative Scientific Approach is limited in the view that what cannot be measured cannot be important. This conceptual vacuum created by the retreat of quantitative methods into an intellectual cul-de-sac has been filled by a growing interest in qualitative methods.

According to Barton (1984) the Qualitative Research Approach has grown in recent years because of the inability of the Quantitative Scientific Approach to:

- reasonably address many of the most pressing issues in the educational field,
- respect the fluidity and change in social environments and
- to address the question of programme processes instead of programme outcomes.

Rist as cited by Barton (1984) states that the Qualitative Research Approach is the most powerful way to understanding human beings and their social environments because the Qualitative Research Approach allows us to watch, talk, listen and participate with them in their environment. Hence, Qualitative Research is appropriate to the articulation of the multiple ways in which people understand their world and react to it. Furthermore, it focuses on a different way of knowing; one based on experience, empathy and involvement. Qualitative Research is concerned with the meaning that people give to their world rather than statistical analysis.

Qualitative Research is multi-method in focus, involving an interpretative, naturalistic approach to its subject matter (Lincoln and Guba, 1985) This means that Qualitative Research studies things and makes sense of, or interprets phenomena in terms of the meaning people bring to them. Qualitative Researchers believe that they can get a closer look at the subject through detailed interviewing and observation.

The Qualitative Research Method, via a semi-structured interview, would allow the researcher to gather first hand knowledge of the subject. Unlike the Quantitative Research Method, the Qualitative Research Method allows the researcher to get close to the subjects so that the subjects themselves can produce certain levels of explanation and meaning

instead of the researcher imposing his own set of meaning on what he has observed. It gives the researcher the opportunity to engage in dialogue with the subject without any preconceived idea of what the cause of early teenage pregnancy may be. Instead, the Qualitative Research Methodology allows the pregnant teenagers to give meaning to their lived experiences.

Also, the Qualitative Research Method allows the study not to change policy but to serve an 'enlightenment function'. It aims to raise questions on teenage pregnancy and to create an increased awareness of the problem so that positive developments will take place in reducing teenage pregnancy among school going girls.

#### **4.3 DESIGN OF THE STUDY**

The study focused on a feminist qualitative research approach, which is also known as ethnography, ethnographic, fieldwork studies and case study. Case studies are more concerned with how things happened and why. Lin (1981) as cited by Anderson (undated) defines case study research as "an inquiry that investigates a contemporary phenomenon within its real life context when the boundaries between the phenomenon and context are not clearly evident and in which multiple sources of evidence are used". Anderson states that the choice of a case study implies a knowledge of some interesting issue that sets the general parameters for the important 'why' question.

This study focused on two case studies of mothers and mothers to be in grade twelve. A selective sample was used because of the delicate nature of the study. Teenagers who were already mothers and teenagers who were pregnant in grade twelve were approached to participate in the study. The learners were assured of the confidential nature of the study. Once the learners had agreed to participate in the study, consent had to be obtained from their parents for their participation. A letter outlining the nature of the study and requesting permission to interview the learners was sent to the parents. The parents had to fill and sign a return form either granting or not granting permission to interview the learners. This was done to fulfil the ethical requirements of the study.

Grade twelve learners were chosen above learners from other grades because of two reasons. Firstly, the study aims to understand why mature learners who would have learnt of contraception fell pregnant. It was believed that the younger learners might have fallen pregnant because they were ignorant of the consequences of having sex. Secondly, it was believed that the younger subjects might be stressed by interviews. Thus, a selective sample of two was employed so as to include a mother who had a baby a year ago and a teenager who was pregnant at the beginning of the year.

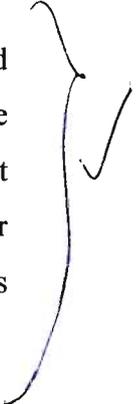
The fieldwork was conducted by carrying out semi-structured interviews with the two subjects. The semi-structured interview was chosen above the structured interview because this study is an exploratory study. This type of interview allows for elaboration on issues, so charting the learner's perceptions and responses. The open-ended questions will elicit the information required. Individual interviews were conducted with each one of the subjects to gather sufficient data to draw up personal profiles on each subject and to understand the factors that influenced them to have sex and the factors that led to them falling pregnant. The data collected was recorded through the use of a dictaphone. The data was then transcribed and analysed using the qualitative research method.

Secondly, a questionnaire was sent out to the principals of neighbouring secondary schools to ascertain the rate of teenage pregnancy at the schools. The questionnaire was designed to gather information that would explain why teenage pregnancy was escalating. Secondly, the information gathered would give possible clues as to how to curb the social problem of teenage pregnancy.

The Pattern Matching Technique was used to validate the data collected. Drawing a comparison between the two interviews carried out will do this. Secondly, the information gathered from the interviews was compared to the information gathered through the questionnaire to see whether a pattern of relationships observed in one instance is predicted in the other. When the two patterns of interaction match, then validity is added to the conclusion. The report will be presented in the form of a third person narrative with themes that follow the following the steps: description, analysis and finally interpretation of collected data.

#### 4.4 CONCLUSION

The Qualitative Research Methodology allows the researcher to use a semi-structured interview and a questionnaire to gather data. This data helps one to understand how people give meaning to their lives. Furthermore, it allows one to understand the factors that influence teenage pregnancy. The Qualitative Research Methodology allows the researcher to explore the issues surrounding teenage pregnancy. Its aim is to raise questions surrounding teenage pregnancy so that further research may be pursued.



## **CHAPTER FIVE: ANALYSIS AND FINDINGS**

### **5.1 INTRODUCTION**

This chapter deals with information that was gathered through a questionnaire that was sent to the principals of the surrounding schools in the district. Also, information was gathered via a semi-structured interview with the pregnant learners. Information was also gathered via observation of the two learners during lesson time and during the breaks. The interview and the observation were undertaken via the feminist qualitative framework. This allowed the information gathered to be interpreted through a particular set of lens. For the sake of confidentiality the names of the schools have been withheld and the learners' names have been changed.

### **5.2 QUESTIONNAIRES SENT TO PRINCIPALS**

Questionnaires on teenage pregnancy was sent out to the principals of the surrounding secondary schools to investigate how rife the problem of teenage pregnancy was in the area and how schools were dealing with the problem. The following were gleaned.

#### **5.2.1 NUMBER OF PREGNANT GIRLS IN SCHOOL**

From the seven schools that filled in and returned the questionnaires, it was discovered that the severity of the problem of teenage pregnancy varies from school to school. The following statistics give us a brief idea of the number of pregnant girls in the schools that participated in the research. The average female population at each school was approximately 700.

<b>SCHOOL</b>	<b>NUMBER OF PREGNANT GIRLS</b>	<b>NO OF TEENAGE MOTHERS</b>
1	1	2
2	11	11
3	18	18
4	20	±30
5	12	39
6	37	190
7	18	±300

It must be kept in mind that the above statistics may not be a true reflection of the problem of teenage pregnancy in these schools. This is so because certain schools chose only to reflect the number of reported cases of pregnancy at their schools. Yet, from my

experience as an educator I know that all pregnancies are not reported to the principals. Many learners are able to hide their pregnancy very well. Sometimes the school may never learn that the pupil was ever pregnant. Today, however, more and more learners speak about their babies they had out of wedlock. As a result of this, some of the schools were able to reflect not only the reported cases of pregnancy but also those cases that were not reported but became known. Clearly the statistics is alarming. Plus minus 30 teenage mothers in a school is shocking. However, having 190 to 300 mothers in a school is catastrophic. This clearly indicates that Love Life and its promotion of safe sex is not too successful. Definitely schools and society at large needs to attend to the problem of teenage pregnancy urgently. It must be kept in mind that teenage pregnancy is not a problem on its own. It is a problem that stems from another problem, example child abuse, and leads to yet other problems, example: poverty, street children, prostitution, HIV Aids and the list goes on. Thus, we can conclude that the problem of teenage pregnancy is a greater social problem that warrants the state's immediate attention.

### **5.2.2 THE SCHOOL'S HANDLING OF TEENAGE PREGNANCY**

Ironically, even though the rate of teenage pregnancy has increased throughout the world, society at large is not doing enough to curb the problem. "Umthenthe Uhlaba Usamila" - The South African National Youth Risk Behaviour Survey of 2002 reveals that 19.1% of our youth between the ages of 13 and 19 had fallen pregnant. Surely this calls for drastic steps to be taken by the schools. Information gathered via the questionnaire reveals that the schools are not doing much to curb the problem of teenage pregnancy. Here are some of the comments by principals of schools taken from the questionnaires returned:

*PRINCIPAL 1: "Learner informed of problem – guidance."*

*PRINCIPAL 2: "Advising learners of problems / dangers of teenage pregnancy."*

*PRINCIPAL 3: "Lifeskills programmes and talks by SGB, educators and social workers."*

*PRINCIPAL 4: "Regular talks and workshops held by qualified personnel."*

*PRINCIPAL 5: "Invitation to social workers and nurses to give talks."*

*PRINCIPAL 6: "Provision of condoms and counseling."*

*PRINCIPAL 7: "Address learners during meetings, during Life Orientation lessons and guidance periods."*

The above statements made by principals reflect the usual response of referrals and superficial assistance rather than critical intervention. The above responses made by principals indicate that we are running on the same spot and need to take new measures to reduce teenage pregnancy. All seven schools focused on giving learners talks about teenage pregnancy. We need to ask the question, "Are learners listening to what is been said?". We need to stop fooling ourselves. All the talk in the world about sex and pregnancy is not going to help us reduce teenage pregnancy. Neither is the issuing of condoms. Ironically, the school that handed out condoms to its learners had 190 mothers on its campus. Programmes that will make learners realise what it really feels like to be a pregnant should be introduced in schools. Right from grade eight learners could, for example, be asked to use body bags that would give them the idea of how their body would change and how heavy and uncomfortable they would feel if they should fall pregnant. Religious study that will inculcate a sense of morality in children may also help to curb the problem of teenage pregnancy.

### **5.2.3 PERCEPTION OF EXPULSION AS A SOLUTION**

The Department of Education and Culture does not allow for expulsion on the grounds of pregnancy. This has surely contributed to the increase in teenage pregnancy. Today many learners do not fear falling pregnant because they know that they can still attend school whilst they are pregnant because they are protected by "The Bill of Rights" and "The South African School's Act" which states that no learner can be expelled on the grounds of being pregnant. The following responses were received from principals to the question: "Do you think expulsion will solve the problem of teenage pregnancy?" indicates that expulsion is not the solution.

*PRINCIPAL 1: "No, learners need to be educated."*

*PRINCIPAL 2: "No, however it will make learners more cautious."*

*PRINCIPAL 3: "No, they need support."*

*PRINCIPAL 4: "No, learners will become an economic burden."*

*PRINCIPAL 5: "No. The School's Act and The South African Bill of rights prohibits this."*

*PRINCIPAL 6: "No, it will still continue."*

*PRINCIPAL 7: "No. Parents need to educate their girls and they must not provide assistance to take care of these infants whilst the mother completes schooling."*

Every single one of the principals who participated in this research study believes that expulsion will not solve the problem of teenage pregnancy. The information gathered reflects the belief of many people that if the learner is expelled she would not have an education and she would become an economic burden to society. All expulsion will do is ensure that the mother is uneducated so that she will not be able to provide the best for her offspring. It was interesting to note that one principal believed that if the learners were not given support to look after their children they would not fall pregnant again. From the interview with the two learners who are now mothers, it was discovered that so often teenagers give birth and expect their mothers to look after the babies. Then they fall pregnant again.

#### **5.2.4 THE PERCEPTION OF SEX EDUCATION AS A SOLUTION**

The perception that sex education is the solution to teenage pregnancy was not shared amongst all the principals. The following responses in regard to this issue were obtained via the questionnaire:

*PRINCIPAL 1: "Yes."*

*PRINCIPAL 2: "Yes. It will address the uninformed or misinformed."*

*PRINCIPAL 3: "Yes. They need education about pregnancy."*

*PRINCIPAL 4: "Yes – teenagers should have knowledge."*

*PRINCIPAL 5: "No. Government payment of child grants. Cultural norms of fertility before marriage."*

*PRINCIPAL 6: "Yes, many are experimenting and are rebellious."*

*PRINCIPAL 7: "No. The available child care support from the government as well as from parents and grandparents are influencing early teenage pregnancy."*

Though the majority of the principals who participated in this research study believed that sex education would help to curb teenage pregnancy, some were opposed to this viewpoint. Many believed that if the learners had knowledge of sex and its consequences they would be able to make informed decisions and this would help to decrease teenage pregnancy. On the other hand, principals who did not share this viewpoint believed that many teenagers were falling pregnant due to certain cultural pressures or because of the incentive of the Government Child Grant. This viewpoint came to light during the interview with the two teenage mothers. I was informed that many girls in their community fall pregnant in order to get the 'Government Child Support Grant'. I was surprised that some even fell pregnant the second time for the sake of the money. The belief that many teenagers fall pregnant because they do not have to take responsibility for their babies also came through in the interviews. I was informed that, most of the time; their grandparents care for children born of teenager mothers. It is the belief of some principals that as long as this continues, as long as teenagers are not forced to shoulder the responsibility of their sexual exploits; teenage pregnancy will not decline.

### **5.2.5 ASSISTANCE GIVEN BY THE SCHOOL TO TEENAGERS TO COPE WITH THEIR PREGNANCY**

From the information gathered via the questionnaire it was quite evident the most schools did not do much to help the learners cope with their pregnancy. The following responses were obtained from the principals in regard to what the school does to help the learners cope with their pregnancy.

*PRINCIPAL 1: "Learners treated sympathetically and allowed to write examinations. Educators are informed and told not to discriminate."*

*PRINCIPAL 2: "Advice is given to learners and parents. Referral to clinic / hospital / religious leaders."*

*PRINCIPAL 3: "Lifeskill programmes and talks by the SGB, educators and social workers. We don't spend too much time and effort on this as we are not running a 'pregnancy school'."*

*PRINCIPAL 4: "Parents are informed. Ensure that teenager is receiving medical attention. Teenager is advised to remain at home until she gives birth. Ensure that necessary learning material is sent to the learner – allowed to return after birth."*

*PRINCIPAL 5: "Parents are informed. Parents sign undertaking that indemnifies the school from any serious injuries that may occur. The learner is counseled and continues to study."*

*PRINCIPAL 6: "Pastoral care by senior female teachers. One to one guidance."*

*PRINCIPAL 7: "The school does not provide any support."*

It is clearly evident from the above information that as much as some schools don't discriminate against pregnant learners, others do. Asking pregnant learners to stay at home

until they have given birth is definitely discriminatory. This is no form of assistance to the pregnant learner. Once again, on the basis of the information gathered via the interview, it is quite evident that the only form of help schools seem to be offering these pregnant girls is counseling. We need to ask the question, “How much of counseling is offered and how often?” Considering the fact that teenage pregnancy is rife in schools, the state should do more than simply assist by providing child grants. The state needs to introduce programmes in schools that would help the pregnant teenagers cope with their pregnancy.

#### **5.2.6 ACADEMIC ASSISTANCE GIVEN TO PREGNANT TEENAGERS**

The response of most principals indicates clearly that there are no academic programmes set up to assist pregnant learners. The help that is offered by some does not amount to much because how much ‘catch up’ can one do during a twenty minute break? It must be remembered that a learner would most probably have to catch up work in six subjects.

*PRINCIPAL 1: “Yes. Worksheets given. Catch up programmes.”*

*PRINCIPAL 2: “No. Learners are expected to catch up on work missed out.”*

*PRINCIPAL 3: “No. They must take responsibility for their actions and catch up on lost work on their own by liaising with their peers and educators..”*

*PRINCIPAL 4: “Yes. Ensure the learner has the necessary study material. Extra lessons during the breaks. Peer teaching.”*

*PRINCIPAL 5: “Specific teachers (mainly females) are delegated to take charge of the learner. Allowance for unusual absence. Learner writes examination after examination.”*

*PRINCIPAL 6: “No.”*

*PRINCIPAL 7: “No.”*

It is not surprising that four out of the seven schools offer no assistance to the pregnant learners. This may be so because there is absolutely no time in a school day to do 'catch up'. If the school were to provide academic assistance to these learners, it would have to be done after school. Considering the fact that teachers do not get paid over-time, very few would be prepared to give free academic assistance after school. The "NO" response by most schools could also be interpreted as a form of punishment. It reveals the belief of many that teenagers must face the consequences of their sexual exploits.

### **5.2.7 PERCEPTIONS AS TO WHY TEENAGERS FALL PREGNANT**

The following common responses as to why teenagers fall pregnant were obtained:

*PRINCIPAL 1: "Permissive society. Learners are becoming sexually active at an early age."*

*PRINCIPAL 2: "The availability of information is not a deterrent if the family / society / world is not endorsing certain healthy values and lifestyles. There is immense pressure to join the crowd and do as the world does. The age of permissiveness, casual sex and unprotected sex is upon us! Teenagers want to experience things rather than listen to sound advice. They have become worshippers of the NIKE slogan "JUST DO IT."*

*PRINCIPAL 3: "They do not have parents / guardians / role models. They fall pregnant to access the State's Child Support Grant. They also find 'Sugar Daddies' who support them financially in return for sexual favours."*

*PRINCIPAL 4: "Need to imitate adults and feel grown up. Peer pressure. Lack of parental guidance. Parent apathy. To earn the Child Support Grant."*

*PRINCIPAL 5: "Peer pressure. Experimenting without being responsible. Cultural norms of fertility before marriage."*

*PRINCIPAL 6: "Provision of Government Child Care Support – pupils fall pregnant for the money. Experimenting with sex"*

*PRINCIPAL 7: "They are taking advantage of the social grants that are available to young mothers for their children. Parents and grandparents take care of their children so there is no hardship experienced by these mothers."*

The shared belief amongst many principals is that society has become too permissive. Parents especially have become too lenient and indulgent of their children's behaviour. This is so because parents have no time to be role models and to guide and direct their children on the righteous path of life. Also, many of today's children show no respect for their adults and are not prepared to listen to their advice. It is quite clear that teenagers want to make their own decisions and mistakes. Greathead et al (1998) states that peer pressure plays quiet an influential role. According to Principal Two, the youth are under "immense pressure" to do as the world does. Many teenagers begin to engage in sex early because their friends are doing so. They are too afraid that if they deviate from the norm their peers would not accept them. Another common belief is than many of today's youth are quiet materialistic. Many engage in sexual intercourse so that they can get money and material gifts from their 'Sugar daddies'. Others fall pregnant so that they can get financial help from the government. This clearly indicates that for many teenagers their decisions are dominantly financially driven.

### **5.3 INTERVIEW WITH THE TWO LEARNERS**

#### **5.3.1 FAMILY BACKGROUND**

##### ***CHRISTI***

*Christi comes from a family of six; dad, mom and four daughters. Dad who supports the family owns a taxi business whilst mom is a home executive. The eldest daughter is 21 years old and she had a child out of wedlock who is now two years old. Christi who is now eighteen years old is the third daughter of the family. Unfortunately, Christi finds it difficult to communicate with her mother because she believes that her mother is too old-fashioned and does not understand her. She finds it easier to talk to her father than to her mother. Christi communicates best with her eldest sister. At the time this research report was been typed her baby had turned six months old.*

## **ANDY**

*Andy who is eighteen years old comes from a single parent home. Her mother who is a nurse at a government hospital supports her and her elder brother, who is currently studying graphic design at a technical college. She believes that she is lucky to also have the support of her boyfriend and his family. His father financially supports her baby.*

One's family background has an influence on one's behaviour and outlook of life. Studies by Futris and McDowell (2004) have shown that most pregnant girls come from disadvantage homes. In the case of Christi this is not so. She comes from a home where there is parental support. However, during the interview with her it was clearly evident that there is great tension between her and her mother. She believes that her mother is too old fashioned and does not understand her. Clearly the mother and daughter seem to have different value systems. Christi may have engaged in premarital sex in rebellion to her mother's belief of 'no sex before marriage'. Futris and McDowell (2004) in their studies also found that if one daughter in the home has had premarital sex, the possibility of the others following suit is great. Christi who admires her eldest sister who had a child out of wedlock may have been unconsciously influenced by her to have had sex outside the bounds of marriage. Andy on the other hand comes from a single parent home. As much as her mother, a nurse, spoke to her about sex and premarital sex long before Andy became sexually active; her long unusual hours as a nurse meant that she was not always at home to supervise and monitor her behaviour. As a result Andy had much freedom to do as she pleased.

### **5.3.2 SOCIAL LIFE**

#### **CHRISTI**

*Christi does not have much of a social life. The area that she lives in does not provide much in the way of recreation. There is a netball court and a soccer ground but most of the time they lie unused. Christi believes that this is so because, like her, most of the youth of the area are not interested in those sports since they find them boring. Hence, Christi spends most of her afternoons, weekends and holidays at home either watching television or listening to the radio. She enjoys watching 'Soap Operas' and 'Romance movies'. Her favourite programme is the South African soap opera called "Generations". Christi does*

*not enjoy reading novels but she does read the magazine called “True Love” which she believes to be informative in the field of love and relationships. Cooking and chatting are two of her other pass times. Christ would love to visit her friends more often but she is unable to do so because her mother does not approve of it. The old cliché is, “when the cat’s away the mice will play”. This is exactly what Christi does when her mother is away from home. When her mother goes on an errand or a visit, Christi visits her friends – all boys might I add.*

### **ANDY**

*Andy had an active social life prior to falling pregnant. Almost every Saturday she and her friends had a party at one of their homes from six in the afternoon to ten-o clock at night. Sometimes they had beach parties. Adults supervised all parties she attended. Some of her time was spent visiting her grandmother. Much of her spare time was spent shopping, talking to friends and listening to music. Andy does not watch movies much but she loves to watch the comedies and soap operas on television. Reading is one of her least favourite pass-times. Occasionally she does read the “Drum Magazine”. She enjoys the “Drum Magazine” because it deals with people and relationships. Now as a mother she does not have much time for a social life since a great deal of her time is spent with the baby. The area that she lives in does not provide much for teenagers in the form of recreation. Apart from a park there is nothing else. Many of the teenagers who are about eighteen years old in that area frequent the tavern where they smoke and drink.*

The old cliché ‘An idle mind is the Devil’s workshop’ never rang more true. Both girls, Christi and Andy, come from areas that do not provide much for teenagers in the form of recreation. Secondly, both girls are not into sport or reading. In fact they seem to have had a lot of free time on their hands and nothing to do. What they did enjoy a great deal was watching soap operas and reading love magazines that were filled with sexual innuendoes. The rampant recreation of sex on television and in magazines affects teenage sexuality. As long as the visual media is sexually explicit and teenagers have nothing better than to watch it, they will be influenced by it and will continue to experiment with sex. We can conclude that, like Andy and Christi, many of the youth who have nothing better to do than

watch television; are being influenced by the sexual innuendo on television to engage in premarital sex.

### **5.3.3 DATING**

#### ***CHRISTI***

*Dating began at school at the age of fourteen. She dated a boy from her neighbourhood who was in her school. Fortunately or unfortunately, they were unable to go on dates outside school. The closest they got to dating was meeting in school. All they could do was talk. At the age of sixteen she met her second boyfriend at a mall. She fell in love with his looks and the manner in which he used to talk. Later, when her mother was not at home she would visit her boyfriend at his house.*

#### ***ANDY***

*Andy started dating at the age of fifteen. On the first date she and her partner went to the cinema and watched the movie "Richie Rich". At that stage the relationship she had with the boy was not physical. At the age of sixteen she met the father of her child at the recreational ground. She and her friends had gone to the ground to meet some boys who use to smoke and drink. On that day she did not pay much attention to him because he was quiet. Over time she began to take a liking to him because he was different from the other boys; he did not smoke and drink. She is presently still dating him.*

In the past dating was different; the boy would usually approach the girl's father and ask him permission to date his daughter. Once permission was granted, the traditional expectation of the parent was that after a period of dating the boy would marry his daughter. Also, during the period of courtship the couple was chaperoned normally by a family member of the girl. As a result the couple did not have much private time to engage in sexual activities. Their behaviour was closely monitored, supervised and controlled. Today, however, the dating scene has changed. Most teenagers do not believe that they need their parents' permission to date. Many of them do not even inform their parents that they are dating. Andy and Christi are classic examples of teenagers who have the freedom to do as they please. Christi's mother was too naïve to believe that every time she left the house, Christi would remain at home. Andy's mother was ignorant of the fact that while

she was working her daughter was socialising with boys. Parents need to remove the cloak of ignorance in regard to dating. They need to acknowledge the possibility that their very own teenagers may be dating without their permission and should advise them accordingly. Parents must remove the cloak of naivete. They must acknowledge the possibility that their teenagers might be dating without their permission. Once they have done this, the next step is to talk to their teenagers about sex. Parents also need to be aware that the teenagers of today start dating at an early age. Another change in the dating arena is that girls are no longer afraid to initiate a relationship. Also, it was found that today's teenagers might have more than one intimate relationship. This was borne out by the information given that the father of the child was not the first boyfriend.

#### **5.3.4 VIEWS ON SEX AND MARRIAGE**

##### ***CHRISTI***

*Christi believes that one is mature enough to start having sex at the age of eighteen. The topic "Sex and Contraceptives" was never discussed amongst her friends until after she fell pregnant. She believes that the "new generation" is strongly influenced by the soap operas they watch. When she first started to engage in sexual activities she was ignorant of its consequences i.e. falling pregnant or contracting sexually transmitted diseases. Now that she is fully aware of its consequences, she wants to be left alone. During the interview she revealed that she did not enjoy sex. Prior to engaging in sex she did not seek advice from family, friends or the medical clinic. Around the time that she fell pregnant, so did four out of her ten friends. It was only then that they began to discuss the issue of sex. Even though Christi had a child out of wedlock, as a Christian, she believes that premarital sex is a sin. She points out that she did not plan to engage in premarital sex, it just happened. Even though she and her boyfriend are still a couple, marriage has never entered her mind. She believes that marriage is too stressful because one has to cook and clean house. She values her freedom too much to get married. She wants to earn her own money and buy herself a car and do whatever she wants to. She also claimed that even though her boyfriend supports the baby by buying clothes and by giving money, she would never want to marry him because he has become very boring. However, she stated that if she ever gets married it would be for companionship and not for sex. In regard to the issue of contraceptives she is aware of the different contraceptives e.g.: the pill, the*

*condom and the injection. However, she is against taking any contraceptive. She believes the best solution to unwanted pregnancies and sexually transmitted diseases is abstinence. Even though she is against contraceptives, she was for a short while on the pill. This was so because when she gave birth, the nurses asked her to go on the pill. She is no longer using any contraceptive. Christi claims that if she had a daughter she would not give her contraceptives. She would tell her not to listen to the boys and to abstain totally from sex. If her daughter did not listen to her she would kick her out of the house.*

### **ANDY**

*Andy believes that teenagers are too young to have sex and babies. When they fall pregnant their teenage life is destroyed. Andy is a Christian who believes that premarital sex is a sin. She is quick to point out that she made a mistake in engaging in premarital sex without using contraceptives. She also believes that if you engage in premarital sex you must be ready to face the consequences and take responsibility for your action. Even though she is now a mother and her boyfriend's family wants them to get married she is not too happy with the idea. Andy feels that she is too young to take on the responsibility of wife and daughter-in-law. Also, she wants to qualify as a nurse before she gets married. She and her friends openly discuss sex, what happens during sex and the fears of having sex, since most of them are sexually active. Sadly, she believes that some of them are not using contraceptives. Like her friends, she was fully aware of the consequences of having sex but in the moment of passion she did not think about them. Andy was not ignorant about sex. Her mother, who is a nurse, spoke to her and her brother quite often, long before they became sexually active, about sex and the use of contraceptives. Andy had knowledge about the following contraceptives: the condom, the pill and the injection. Out of Andy's six friends three were already mothers. Andy believes that unlike her, most teenage girls who fall pregnant come from disadvantaged homes. When they fall pregnant they are forced to leave school so that they can stay at home and look after the baby. Some of these girls are even chased away from their homes.*

The traditional view of sex and marriage has encountered drastic resistance as a result of changing sexual mores accompanied by a climate of sexual permissiveness. Teenagers' views on sex and marriage are highly influenced by the media, especially the television.

They spend more time watching television than communicating with their parents. Hence, many teenagers identify with the values portrayed on television. Both girls, Christi and Andy, stated that one of their favourite pass times was watching soap operas. The Westside Pregnancy Resource Centre's (2004) studies state that Soap operas bombard us with sexually explicit scenes. They often show unmarried couples engaging in sexual pleasure, but they seldom show the consequences of the act e.g. an unwanted pregnancy or sexually transmitted diseases. This fools many a teenager into believing that they can engage in sexual intercourse without having to face the consequences. This study also found that even though both the girls believed that premarital sex was a sin they did not believe that marriage would vindicated them of that sin. They chose not to get married because they value their freedom more than the ties of marriage. They also shy away from marriage because they believe that that are too young to cope with the responsibilities of marriage. Strange though that they did not think themselves to be too young to engage in sexual intercourse which is an adult activity. Christi was ignorant of sexually transmitted diseases, contraceptives and the consequences of engaging in sexual intercourse. Her ignorance has cost her dearly – early motherhood. Sadly, Andy who was not sexually ignorant made the same mistake as Christi by falling pregnant whilst still at school. This clearly indicates that knowledge of contraceptives is not enough to prevent teenage pregnancy. If teenagers choose to be sexually active then they need to use contraceptives not only to prevent teenage pregnancy but also to prevent the transmission of sexual diseases. What is more sad is that after falling pregnant both girls chose not to use certain contraceptives. Christi chooses not to use any contraceptive even though she is still dating her boyfriend. She may very well end up pregnant out of wedlock the second time. Andy chooses only to use the contraception called the 'injection' which may help prevent an unwanted pregnancy but it will not prevent the transmission of sexual diseases.

### **5.3.5 SEXUAL EXPERIENCE**

#### **CHRISTI**

*Christi believes that teenage pregnancy will be very difficult to curb because teenagers are influenced by the movies and television programmes they watch to become sexually active. Although she does not watch erotic adult movies, many of her friends do. They hire these movies and watch them at home when their parents are away. Christi dated her second boyfriend for about two years before they became sexually active. They did not plan on becoming sexually active, it just happened in the moment of passion. Christi was eighteen years old when she fell pregnant by her twenty-five year old boyfriend after their second sexual experience. She recalls her first sexual experience with a great deal of shame and guilt. After having sex, which was painful, she felt that everybody knew what she had done. However, even though she felt ashamed and guilty she had sex again and again. After every sexual episode there was a resurgence of shame and guilt. Christi believed that even though she felt miserable after having sex, she had to continue having sex with her boyfriend if she wanted to hold onto him. The only reason she wanted to hold onto him was that she enjoyed the romance in their relationship. One of the reasons she fell pregnant was that they did not use contraceptives. She learnt a little about contraceptives from her eldest sister but did not use any because she thought she would not fall pregnant and she was quite ignorant of sexually transmitted diseases.*

#### **ANDY**

*Like Christi, Andy believes that nothing can be done to prevent teenage pregnancy. Andy did not plan to become sexually active; it just happened. Her boyfriend did not pressurise her nor did he force her to have sex. During their first sexual encounter they did not use contraceptives. After their initial sexual experience they planned to have sex again but they still did not use contraceptives. As a result after numerous sexual encounters Andy fell pregnant. Andy is fully aware of sexually transmitted diseases but still chooses to have sex without a condom because she trusts her boyfriend completely. Once every three months she and her boyfriend go to the hospital for an HIV test. After falling pregnant she has chosen to use a contraceptive – ‘the injection’. Andy chose the ‘injection’ above the others because it is more convenient. Andy is not shy to say that she enjoyed the pleasure of sex and the feeling of security that it gave her.*

One's sexuality is strongly influenced by the mass media especially the visual media such as the television. From the interview with Christi it was quite evident that television influenced her sexual experience and especially that of her friends. From time to time, when their parents were not at home, they would hire and watch pornography. Christi denied having watched any and that may very well be the truth. On the other hand she may be too embarrassed to admit to watching pornography. These movies may very well have encouraged them to become sexually active. Both girls, Christi and Andy, admitted that during the first few months that they had sexual intercourse, they did not use contraceptives. On the first occasion they did not use contraceptives because they did not plan to have sex. Subsequently when they had sex they did not use contraceptives because they were in denial that they could ever fall pregnant. Sadly many teenagers do not use contraceptives in the first few months of becoming sexually active because they do not believe that they could fall pregnant. Christi did not enjoy her sexual experience most probably because of the guilt she felt. However, like many other teenage girls, she continued to have unsafe sex with her boyfriend because she was afraid of losing him. Many girls engage in sexual intercourse not because they gain pleasure but because it is the only way they know to hold onto the relationship. Unlike Christi who felt pressurised to have sex, Andy did not. Andy enjoyed sex. A common thread was that both girls did not plan on becoming sexually active. This may very well explain the increase in teenage pregnancy. Many teenagers do not plan on having sex; so they do not carry contraceptives. Many of them engage in sexual intercourse in the heat of the moment. They find it very difficult to control all those sexual desires that lie within them like a dormant volcano. Many a time this act of passion that is carried out without thinking leads to pregnancy.

### **5.3.6 NEWS OF PREGNANCY**

#### ***CHRISTI***

*Teenage pregnancy is not new to Christi. In the area that she lives in teenage pregnancy has become a 'fashion'. There are approximately fifty teenage mothers who had children out of wedlock. Christi believes that many teenagers are influenced by two factors to fall pregnant: Firstly, the Government Child Support Grant of R130-00 and secondly the knowledge that the grandmothers would look after the child. Both these factors have influenced many teenage mothers to have two to three babies. Even in school teenage*

*pregnancy was rife. In her class there were six mothers. As for Christi, she fell pregnant at the age of eighteen after her second sexual episode with her second boyfriend. In the beginning she did not know that she was pregnant. Only after she began to dislike certain foods and only after she had begun to throw up her food did she suspect that she was pregnant. The first person she informed of her suspicions was her boyfriend. He gave her some money to go to the doctor. She went alone because she did not want him to accompany her since she felt ashamed. The doctor confirmed that she was three months pregnant. She then broke the news to her boyfriend. During her pregnancy she never contemplated suicide because she was afraid of dying. She did contemplate abortion though, but she changed her mind very quickly because she is afraid of dying. However, if she had to have an abortion she would have one in a hospital and never a 'backstreet abortion' because she knows that the chances of dying while having a back-street abortion is greater because they use substances like jik to abort the foetus. Her family did not suspect that she was pregnant. It was only in her seventh month that her mother discovered that she was pregnant. Her mother scolded her and then kept quiet. Her father who does not talk much scolded her and wanted to kick her out of the house. Her mother persuaded her father to allow her to stay at home. Her boyfriend's parents accepted her pregnancy. Christi claims that if her mother had not discovered her pregnancy, she would not have told her parents about her pregnancy until after she had had the baby. She would have had the baby at the hospital and then taken the baby home. At school, Christi was unaware that the educators had discovered that she was pregnant. She only realised it when she was summoned to the office and questioned. As much as she regrets falling pregnant because she thinks she is too young, she loves her baby.*

#### **ANDY**

*At the age of seventeen Andy fell pregnant by her boyfriend who was twenty years old. When she discovered that she was pregnant she got angry with her boyfriend and blamed him for her pregnancy. She was ignorant of the process of pregnancy. She thought that when one fell pregnant one's stomach got big over-night. When her clothes began to get tight and she did not menstruate, she told her boyfriend. He was very frightened. He in turn told his mother. His mother advised them to visit the doctor. They then approached a friend who was a male nurse at the hospital. He advised them that if they were*

*contemplating an abortion they should think long and hard about it. He warned them that the child she was carrying could be their first and last child. They then decided to have the baby but Andy did not tell her mother she was pregnant. She did however confide in a cousin who she now suspects told her mother. Her mother was angry and disappointed and kicked her out of her house. She then found refuge in her boyfriend's house. After her boyfriend's mother spoke to her mom, her mom accepted her back. Abortion was never a choice because her boyfriend did not abandon her. However, she was quite suicidal during her pregnancy. At times she would get angry for no reason and would fight with her boyfriend. At one stage she even attempted suicide by taking an overdose of pills. Fortunately she was saved and the consumption of pills did not effect her baby. At school her educators were quite disappointed that she had fallen pregnant. When she fell pregnant she regretted it and did not want to attend school because she was too embarrassed. She felt that everybody would be looking at her and talking about her. She became a very quiet and withdrawn child.*

The above information indicates that many teenagers do not know much about sex and pregnancy. Teenagers today may be sexually active at an earlier age and they may be engaging in sex more often but they have very limited knowledge about sex and sexuality. Christi was quite ignorant that she was pregnant right until her third month. Even more shocking was Andy who at the age of eighteen was ignorant of the process of pregnancy. How could she ever believe that when one fell pregnant one's stomach grew big overnight! The reaction of both the girls clearly indicate that many girls may mature physically and may be engaging in adult activities but mentally they were not ready to engage in sex. Before one engages in sex one should have full knowledge about sex and its consequences. The girls also displayed their immaturity when they did not tell their mothers about their pregnancy. They were naïve enough to believe that they could hide their pregnancy until they delivered their baby and took him home. It is not surprising that news of their pregnancy frightened them. Andy and Christi, like many other girls in their situation, contemplated abortion and suicide. Both the girls were lucky that when they discovered that they were pregnant, their respective boyfriends did not abandon them to face the problem alone. Normally when this happens the girls resort to back-street abortions, suicide or they run away from home. This however is not always the case. As Christi

states, in her area teenage pregnancy has become a 'fashion'. In such areas the girls would not be too frightened or embarrassed to fall pregnant out of wedlock because it is the norm. This is also the case in schools where there is a high rate of teenage pregnancy. In such schools there is not much to deter them from falling pregnant outside the boundary of marriage. Some girls are not afraid but excited about the news of their pregnancy because they planned to fall pregnant in order to collect a social grant. This clearly indicates that the social grant is one of the factors influencing teenagers to fall pregnant.

### **5.3.7 MOTHERHOOD**

#### ***CHRISTI***

*Christi was not prepared for motherhood. She suddenly found that she had to face the challenges of motherhood because she had brought a child into this world. Today Christi is a mother of a six-month-old baby boy. Life is not easy being a mother and a student. During the day her mom looks after the baby, but when she returns home she has to do the household chores and look after the baby. The baby sleeps with her and there are days when she has very little sleep because the baby cries all night long.*

#### ***ANDY***

*Andy, like Christi, was not prepared for motherhood, but with the help of both families she is coping quite well. They have employed a nanny, an old Indian woman, who looks after the baby during the day while Andy is at school. When she returns home in the afternoon she looks after the baby who is asthmatic. When her mom returns from work she looks after the baby so that Andy can study. She is lucky in that the baby sleeps with her mom so she is rarely troubled when he wakes at night. After matric she hopes to study nursing so they will then employ a full time nanny.*

Motherhood is not easy but both girls were able to cope because they had the support of their families. However, motherhood has changed their lives. They no longer have the freedom and time to do as they please because their babies now govern their lives. They do not have much time to socialise and to focus on their studies.

### 5.3.8 STUDIES

#### **CHRISTI**

*Her becoming a mother has disrupted Christi's studies. At times it is difficult to study when the child troubles. Sometimes she puts the baby to sleep and then studies but when the baby gets up she has to leave her studies and attend to the baby. Whenever the baby got sick she had to absent herself from school. At school she got no help with her academic studies. She was however given advice by the principal and some of the educators on how to handle her pregnancy and she was told that she had to take safety precautions whilst at school. Christi hopes to further her studies at a tertiary institution.*

#### **ANDY**

*Andy's studies suffered greatly when she fell pregnant. She was too stressed out and could not concentrate on her studies. As a result all her subjects which she had been taking on the higher grade fell to the standard grade. Whenever the baby was sick she would absent herself from school. This had a direct impact on her performance in school. The school did not do anything to help her with her academic studies. All they did was advise her to be very careful on the school campus because she was in a delicate situation. Andy hopes to complete matric and one day make her mom proud by becoming a nurse!*

As an educator I have witnessed the impact that pregnancy has had on learner's studies and this was the case with both the girls. Andy and Christi's grades at school dropped. Some of the reasons for the drop in grades were: they were under a great deal of pressure, they could not concentrate while they were pregnant because many a day they felt sick and uncomfortable and after they delivered the baby they spent late nights nursing the baby. Also, they were absent whenever the baby got sick. Furthermore, the school did nothing to help them cope with their studies. They had to catch up with all the lessons they missed. Both girls, however, are quite optimistic that they will pass matric and will be able to attend a tertiary institution.

#### **5.4 CONCLUSION**

Both case studies indicate that there are various factors that influence teenage pregnancy. If we are to curb the problem of teenage pregnancy we need to understand these factors and work on them so that we can influence teenagers not to engage in premarital sex.

## **CHAPTER SIX: CONCLUSION AND RECOMMENDATIONS**

### **6.1 INTRODUCTION**

This study aimed at understanding the factors that contribute to teenage pregnancy with the view of helping to prevent future teenage pregnancies. Early teenage pregnancy is a social problem that will not automatically disappear. Educators and parents can no longer afford to be complacent. We can no longer sit back and wish away the problem of teenage pregnancy. If we want to combat this social problem, we need to become pro-active. The first step to fighting teenage pregnancy is 'understanding' it. Only when we understand the factors that contribute to teenage pregnancy can we deal with the problem of teenage pregnancy and all its inter-related problems.

Thus, my inquiry into teenage pregnancy brought me to the "Underclass Theory" which states that the majority of teenage girls who fall pregnant out of wedlock come from disadvantaged homes and societies. Studies have proven this to be true. In Africa and America the majority of girls who fall pregnant out of wedlock come from the poor socio-economic strata of society. The reasons for their pregnancies are numerous: some fall pregnant out of ignorance whilst others see their pregnancy as a form of escape from the hell that they are living in. Linked closely to the "Underclass Theory" are the following theories: "The Social Puberty Theory" which states that a social stimulus such as television programmes force teenagers to engage in adult activities before they have matured. This was clearly inferred from the interview with the two learners. Both girls loved watching soap operas because they were romantic. We can only deduce that they were to a certain extent influenced by the soap operas to engage in sex. Secondly, the moral development theory states that as society changes so does its morals. From the interview conducted with the two girls it was quite evident that as much as they believed that premarital sex was a sin they had no qualms about committing that sin.

Whatever their reasons for engaging in premarital sex, they need to be guided by adults so that they do not fall pregnant out of wedlock nor do they contract sexually transmitted diseases. It is in this light that the following recommendations are made.

## **6.2 RECOMMENDATIONS**

### **6.2.1 PARENTAL GUIDANCE**

With the onslaught of the AIDS pandemic and the spiraling outbreak of teenage pregnancy, parents can no longer afford to keep quiet about sex. Parents need to face the reality that each year children are becoming sexually active at a younger age. If parents truly want to save their children then they need to get actively involved in their children's lives. There must be genuine communication between parents and their children on all issues, especially sex. The children must be made to feel comfortable so that they can verbalize their thoughts and feelings about sex. Parents need to realize that withholding vital information about sex has not prevented sexual intercourse in the past and is not likely to do so in the future. Studies by Albrecht (1972) have shown that teenagers who have had talks with their parents about sex are less likely to engage in sex until their late teens. This clearly indicates that such open discussions may prevent teenage pregnancy and the numerous problems that come with it.

Secondly, parents together with their places of worship, be it the church, the temple or the mosque, need to teach both their daughters and sons that virginity is a virtue. This value system must then be reinforced by the educational institution. Surprisingly, as much as parents believe that parents and not schools should provide sex education to their children, very few actually do so. Primarily it is the parents' task and duty to steer their teenagers away from premarital sex.

### **6.2.2 EDUCATIONAL PROGRAMMES**

Sex education needs to be introduced into the school syllabus. Considering that children are becoming sexually active from an early age, sex education needs to start at the primary school. The sex educational programmes must cover all aspects of sex. Making children aware of the correct terminology in regard to the human body does not constitute sex education. The facts of life must be discussed. Children need to be taught from an early age how babies are made. They need to be informed about contraceptives and how to obtain and use them. The sad reality is that many children have heard about contraceptives but they do not know how to obtain them and how to use them. Too often educators shy away from showing children real contraceptives. Thus, at the end of the day the child knows the

names of the contraceptives but not the contraceptives. It is the educator's duty to ensure that the learners receive accurate, complete and relevant data so that they can make informed and responsible decisions.

Also, sex education needs to be supported by trained personnel such as doctors, nurses, psychologists, and guidance counselors. They must design programmes that will teach the girls to say 'no' to premarital sex. The programme also needs to teach boys that they need not engage in premarital sexual intercourse to prove their masculinity. Educational programmes need to make children aware that the easiest part of pregnancy is giving birth. They need to be made aware of the reality that life, as a parent, especially a single parent, is not easy. With parenthood comes the loss of one's freedom and social life. The educational programmes need to make teenagers aware that parenthood can be tedious and boring at times. Children need to be made aware of the dangers of early pregnancy e.g.: teenage mothers are likely to die of toxemia, hemorrhage or a miscarriage. Stress and depression often accompany early motherhood. Educational programmes must be so designed that learners realize that most teenagers who fall pregnant whilst still at school drop out of school to face their new responsibilities. These educational programmes must make learners realize that most learners who leave school end up with less prestigious jobs and and earn less money and job satisfaction. Such awareness may deter teenagers from engaging in premarital sex.

McWhirter et al (1993) states that there is indeed a need for sex education in school. Melchert and Burnnett (1990) as cited by McWhirter et al (1993) point out that because of limited knowledge of their own reproductive systems and sporadic, inappropriate, or nonexistent use of contraceptives; increasingly younger girls are becoming pregnant and bearing children. Saphire (1996) as cited by Greathead et al (1998) states that knowledge is not permission to engage in sex, but it may protect, whereas ignorance cannot. No human can make a responsible, let alone wise decision from ignorance.

### **6.2.3 MONOITORING OF MASS MEDIA**

We cannot deny that sexual stimuli in the mass media, especially on television, tend to make sexual activity attractive and exciting to the youth. One needs only to speak to the

youth to learn that their favourite television programmes are the soap operas and the late night erotic adult programmes. Keeping this in mind, it is the duty of the adults in society to ensure that the teenagers are armed with accurate sexual information that will enhance their understanding and responsibility towards their own sexual behaviour. Parents need to monitor what their children watch and read. In the early eighties when we were growing up our parents monitored what we watched and what we read: “Dallas” and “Mills and Boons” were prohibited. As society changes so must the manner in which parents monitor their children. Parents can no longer afford to be ignorant of the trash that comes through the electronic media. It is the absence of stringent monitoring that has lead children as young as seven to experiment with sex. The mass media has a moral responsibility to society. It is their task to ensure that material of an adult sexual nature does not get into the hands of children. As parents we need to demonstrate against the reality that children have easy access to pornographic material. We, as a society, need to call for a bill that will ensure that teenagers under the age of eighteen do not have access to pornography. If we don't then the youth will pay a heavy price in the form of early parenthood.

#### **6.2.4 ALTERNATIVES TO SEXUAL INTERCOURSE**

Often teenagers find it difficult to pinpoint their reason for sexual intercourse. Many engage in sexual intercourse out of boredom of the mundane activities in their lives. If we are to prevent teenage pregnancy, we need to provide alternatives to sexual intercourse that would give the teenagers a sense of pleasure. Communities need to provide teenagers with community centres that would help lessen the stress and tension in their lives. Free entry to a gymnasium will give teenagers the opportunity not only the opportunity to pass away their free time, but it will also give them the opportunity to use up all the excess energy that they have. To many, physical exercise is a good alternative to sexual intercourse. Communities need to provide the teenagers with activities that will keep them occupied. The ‘Boy Scouts’ and the ‘Girl Guides’ which used to inculcate strong moral values in the youth need to be introduced into societies where they do not exist. Secondly, they need to be reintroduced with greater fervor into societies where they do exist. Schools can play a great part in keeping children occupied in the afternoons. It is not news to us that many children return to empty homes after school because both their parents are working.

Without parental supervision we can only imagine the mischief these teenagers must be getting up to. Schools can provide extra-curricular activities after school that will keep these children occupied for the greater part of the afternoon. The school and society has the power to lead our younger generation away from premarital sex.

#### **6.2.5 INCREASED LIFE OPTIONS**

When teenagers feel good about themselves and have a clear vision of a secure and successful future, they will be motivated to avoid pregnancy. It is the task of not only the family but also the educators to build within the teenagers' positive self-esteem. Considering that teenagers spend the larger part of their day with their educators than with their parents, it is only reasonable to argue that educators can develop within teenagers a sense of self worth. When teenagers have a sense of self worth and a goal to move towards, they will avoid engaging in risk taking behaviour.

#### **6.3 CONCLUSION**

Teenage pregnancy is an old universal problem. Sadly though, to date, we have not found a suitable solution to the problem. Society needs to realise that teenage pregnancy cannot be seen as a problem in isolation. It is a social problem that is the root to many other problems. If we are to attack this social ulcer, we need to take stronger measures. I think that it is about time that schools introduced sex education as a compulsory examination subject that needs to be passed in order to progress to the next grade. Failing this, I think the 'chastity belt' needs to make a comeback. Teenage pregnancy has such serious consequences for teenagers, their families and society that it needs the same urgent universal attention that has been awarded to the AIDS pandemic.

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**ANNEXURE A**

**LETTER TO SCHOOL PRINCIPAL REQUESTING PERMISSION TO INTERVIEW PREGNANT LEARNERS**

P.O. Box 119  
Darnall  
4480

The Principal

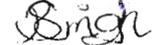
Sir

**REQUESTING PERMISSION TO INTERVIEW PREGNANT LEARNERS**

I am a student at the University of Kwa-Zulu Natal. I am presently completing my Masters Degree at the University. I am in the process of completing my dissertation and request permission to interview pregnant learners at your school. Any information divulged to me by the learners will be treated with the strictest of confidence.

Thanking you in anticipation of your help.

Yours faithfully



R. Singh

Student Reg. No. 8523907

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I, Principal of \_\_\_\_\_ hereby grant permission to Miss R. Singh to interview the pregnant learners.

**ANNEXURE B**

**LETTER TO PRINCIPALS REQUESTING THEM TO ANSWER THE QUESTIONNAIRE ON TEENAGE PREGNANCY AT THEIR SCHOOL**

P.O.Box 119

Darnall  
4480

14 November 2004

To whom it may concern

Sir

**REQUEST INFORMATION REGARDING TEENAGE PREGNANCY AT YOUR SCHOOL**

I am presently studying for my Masters in Education at the University of Kwa-zulu Natal. My dissertation is on Teenage Pregnancy in Secondary Schools. I would appreciate your completing the enclosed questionnaire.

All information will be treated with confidentiality. At no stage would the name of your school be mentioned in the dissertation. The information gathered will be used to give a general overview of teenage pregnancy in the area.

Yours faithfully



-----  
R. Singh  
Educator

**ANNEXURE C**

**QUESTIONNAIRE ON TEENAGE PREGNANCY AT SECONDARY SCHOOL**

THIS QUESTIONNAIRE MUST BE FILLED IN BY THE PRINCIPAL OR A MEMBER OF MANAGEMENT

1. How many teenage mothers do you have on your school campus?

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2. What is the school doing to curb the problem of teenage pregnancy?

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3. Do you think that expulsion will solve the problem? Please elaborate on your answer.

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4. Do you think that sex education will curb the problem of early teenage pregnancy? Please elaborate on your answer.

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5. How does the school help the girls cope with pregnancy and motherhood? Please elaborate.

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6. Does the school offer any extra academic assistance to these learners when they return from their leave of absence? If yes, state specifically what it does

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7. Today's teenagers have far more information about sex and sexuality than the teenagers of the past. Why then do you think they still fall pregnant while at school?

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8. Please fill in the statistics required in the table below

<b>TOTAL NUMBER OF PREGNANT GIRLS IN EACH GRADE</b>	<b>2003</b>	<b>2004</b>
GRADE EIGHT		
GRADE NINE		
GRADE TEN		
GRADE ELEVEN		
GRADE TWELVE		

**ANNEXURE D**

**LETTER TO PARENTS OF PREGNANT LEARNERS REQUESTING  
PERMISSION TO INTERVIEW THE PREGNANT LEARNERS**

P. O. Box 119  
Darnall  
4480

01 September 2004

Dear Mrs. \_\_\_\_\_

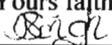
**PERMISSION TO INTERVIEW YOUR CHILD /  
WARD IN REGARD TO TEENAGE  
PREGNANCY.**

I am presently studying towards my Masters in Education at the University of Kwa-Zulu Natal. One of the requirements of the Degree is to write a thesis on a problem in education. At school I have identified "teenage pregnancy" as a major problem. Thus, I have decided to write my dissertation on "Teenage Pregnancy".

In order to complete the dissertation, I need to interview teenage mothers at school. The interview will be recorded and analysed. All the information presented by the learners will remain absolutely confidential. At no stage will any name be mentioned. When the thesis is written the learner will be given the opportunity to read it and make adjustments to what she has said before it is presented to the university.

I hereby request permission to interview your child/ward \_\_\_\_\_.

Thanking you in anticipation of your help.

Yours faithfully  
  
R. Singh (Educator)

Miss R. Singh

I hereby grant/ do not grant permission for my child/ward to be interviewed.

Yours faithfully  
\_\_\_\_\_

P. O. Box 119  
Darnall  
4480

01 September 2004

Mzali \_\_\_\_\_

**IMVUME YOKUXOXISANA NOMNTWANA  
WAKHO NGODABA LOKUKHULELWA  
KWAMANTOMBAZANE ASEMANCANE.**

Njengamanje ngenza iziqu zami ze Masters e-Nyuvesi yakwa-Zulu Natal futhi kunezinto ezidingeka kimi ukuze ngiphase. Enye yezinto ezidingekayo ukuthi ngenze uphenyo olunzulu mayelana nokukhulelwa kwamantombazane asemancane ezikoleni. Esikoleni sethu ngithole ukuthi ukukhulelwa kwamantombazane asemancane kuyinkinga enkulu, ngakho -ke ngibe senginquma ukuba ngenze uphenyo bese ngibhala ngokukhulelwa kwamantombazane asemancane.

Ukuze ngenze uphenyo ngiphinde ngibhale kudingeka ukuba ngixoxisane nalamantombazane akhona esikoleni. Ingxoxo yethu izoqoshwa bese iyacutshungulwa. Lonke ulwazi engizolunikwa ngabafundi luzoba oluyimfihlo kanti uzobizwa azolalela bese eyashintsha uma ebona kunesidingo ngaphambi kokuthi uphenyo ludluliselwe e-Nyuvesi.

Ngicela imvume yokuxoxisana nomtwana wakho mayelana naloludaba.

Ngiyothokoza ukuthola usizo lwakho.

Owakho Ozithobayo

  
R Singh

Miss R. Singh

Ngiyavuma/Ngivumi ukuba uxoxisane nomtwana wami.

Owakho ozithobayo  
\_\_\_\_\_

## **ANNEXURE E**

### **TEENAGE PREGNANCY : SEMI-STRUCTURED INTERVIEW SCHEDULE**

#### **THIS INTERVIEW WAS CONDUCTED WITH PREGNANT LEARNERS**

1. How many members are there in your family?
2. How many brothers and sisters do you have?
3. In the sibling hierarchy, what position do you occupy?
4. Who supports the family?
5. Who is the person you are closest to?
6. What do you do in your spare time?
7. Are there recreational facilities for teenagers in the area that you live?
8. What do you normally do during the weekends and holidays?
9. What type of movies / television programmes do you watch?
10. What type of books do you read?
11. Name some of your favourite magazines.
12. What are your hobbies?
13. How important is education to you?
14. How old are you?
15. At what age did you start dating?
16. Where did you go on your first date?
17. What did you do on your first date?
18. At what age did you fall pregnant?
19. How old was the man who impregnated you?
20. How did you meet the father of your child?
21. What do you like the best about the man who impregnated you?

22. Are you two still a couple?
23. Does he support you and the baby?
24. At what age do you think it is safe to have sex?
25. Do you think premarital sex is a sin?
26. What is your view on marriage?
27. Did you and your friends discuss sex?
28. Were you fully aware of the consequences of having sex?
29. Before you had sex did you seek any advice about having sex?
30. Why did you choose to become sexually active?
31. How did you feel after your first sexual encounter?
32. How can you prevent an unwanted pregnancy?
33. Was it a planned pregnancy or were you caught in the moment of passion?
34. Did you fall pregnant after your first sexual pregnancy or after numerous other experiences?
35. During your sexual encounters were you ever afraid of catching venereal diseases or falling pregnant?
36. Did you ever use contraceptives?
37. Who provided the contraceptives?
38. What are the different types of contraceptives?
39. What did you like best about sex?
40. What did you like least about sex?
41. How did you first feel when you learnt that you were pregnant?
42. Who was the first person you told about your pregnancy?
43. When did you tell your parents about your pregnancy and how did they react?
44. What was the reaction of your educators to your pregnancy?

45. Did you regret falling pregnant?
46. Was abortion or adoption ever a choice?
47. Were you ever suicidal during your pregnancy?
48. Did you know other pregnant teenagers?
49. What happens to pregnant teenagers in your community?
50. Were you aware of the responsibilities of being a mother?
51. Were you ready for motherhood?
52. How has your pregnancy affected your academic studies?
53. What are your future goals?
54. How old is your baby?
55. What do you think can be done to avoid teenage pregnancy?
56. What was the reaction of your boyfriend to your pregnancy?
57. What was the reaction of your friends to your pregnancy?
58. What was the reaction of the community to your pregnancy?
59. What was the school's reaction to your pregnancy?
60. Did the school help in any way with your studies?