

University of the Witwatersrand
School of Human and Community Development
Discipline of Psychology

MASTERS RESEARCH DISSERTATION

Deconstructing Teenage Pregnancy: Teenage mama's talk
about the self

Submitted by: Zarina Cassim Chohan
0303629A

Supervisor: *Mr. Malose Langa*

Dissertation submitted to the School of Human and Community Development, University of the Witwatersrand, Johannesburg, in partial fulfilment of the requirements for the degree of Arts (Community-Based Counselling Psychology)

Johannesburg, 2010

DECLARATION

Submitted in fulfilment of the requirements for the degree of Masters in
Community-Based Counselling Psychology in the Discipline of Psychology,

University of the Witwatersrand

Johannesburg

2010

The author hereby declares that this whole thesis or dissertation, unless
specifically indicated to the contrary in the text, is her own original work.

Zarina Cassim Chohan

Date

Masters in Community-Based Counselling Psychology

ACKNOWLEDGMENTS

I would to thank my research supervisor Malose Langa for his guidance and on-going support. Not only did you encourage me to critically engage in the literature surrounding motherhood and teenage pregnancy but this has also given me a different (somewhat liberating) perspective of life. During this tough year, your patience and positive comments motivated me to persevere. Thank you!

I would also like to thank my parents who made many sacrifices for me to pursue my dreams! I hope that someday I can be your pillar of support as you have been mine.

I would also like to give special thanks to the high school and eight girls for their full and invested participation in the study as well.

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ABSTRACT

The study explored teenage mothers' narratives of their subjective experience as teenage mothers. The research draws on social constructionist theory to theorize and deconstruct teenage pregnancy as a social problem. Eight teenage mothers' between the age of fifteen and nineteen years old were interviewed through semi-structured interviews and analyzed through thematic content analysis. The key themes that emerged in the study were around getting the news about the pregnancy, giving birth and life thereafter, being at school and rising beyond the stigma of being a teenage mother. It was also found that dominant discourses in society played a pivotal role in teenage mothers' construction of the self and their experiences of being marginalised from mainstream society. Despite some of the challenges encountered, the participants were all able to persevere towards their goals and aspirations such as performing well academically and developing a clear sense of self. The report concludes with recommendations and implications for future research.

CHAPTER 1: INTRODUCTION

1.1. Introduction

Teenage pregnancy is predominantly viewed in the media, literature and by government as a social problem. Teenage mothers have become a target of blame in society as either causing or contributing toward negative social, political and financial problems (Rolfe, 2008). This blame is prevalent in dominant discourses that are supposedly driven by ‘moral’ concerns about teenage sexuality, single-motherhood, the breakdown of the nuclear family and dependence on others (Rolfe, 2008). As a result of these discourses teenage mothers are stigmatized and their sense of responsibility, mothering skills and maturity is questioned (Rolfe, 2008). The literature review will provide insight into the way that teenage pregnancy is viewed as an individual problem, rather than looking at the broader context. Furthermore teenage mothers’ are blamed for causing personal and social problems rather than being perceived as a ‘symptom’ of a deeper/broader problem that is not their own (Rolfe, 2008). The review will critically explore these dominant discourses and formulate an argument against the implicit blame that is being placed on the mother.

The researcher in this study explored the way that teenage mothers’ talk about the self with a focus on their motivation to complete school by exploring the participants’ sense of responsibility, maturity and motivation to continue schooling after having a baby (Schultz, 2001). Furthermore, the role of support or lack of support from family, friends, community members and educators was explored from the perspective of the teenage mother.

The use of the word ‘mama’ in the title was inspired by a popular Xhosa lullaby titled – ‘Thula Mama Thula’. The lullaby is soothing and comforting to the baby. The use of the word ‘mama’ is powerful and it elicits feelings of warmth, love, care and a sense of security. Contrary to the existing literature that portrays teenage mothers as bad mothers. The use of the word mama in this research is to argue that teenage mothers can also be good mamas and are able to provide their newly born babies with love and care (Macleod, 2006).

1.2. Research Aims

The purpose of this study was to explore narratives of teenage mothers who continued schooling after giving birth. The aim was to determine teenage mothers perception of the self in terms of their aspirations, coping mechanisms and academic performance. In particular the study focuses on their motivation to continue schooling and their perception of the possible role that culture and support (or lack of support) played in their experience of being teenage mothers.

1.3. Research Questions

- (a) How do teenage mothers talk about the self?
- (b) How do teenage mothers talk about academic performance?
- (c) How do teenage mothers talk about culture and support?

1.4. Rationale

Teenage pregnancy has shifted the predominantly private and interpersonal nature of teenage sexuality into the public domain whereby others judge teenage mothers morality and decide the future of teenage mothers (Durkin, 1995). In the public domain teenage pregnancy is often blamed on the deficiencies of the mother, rather than on social structures of poverty and oppression (Rolfe, 2008). Teenage mothers are viewed as problematic rather than as having problems that may be related to external factors (Rolfe, 2008). Furthermore, teenage mothers' subjectivity is produced through socio-historical discourses (Rolfe, 2008). The approach adopted in this study was to explore the way that knowledge surrounding teenage pregnancy has been socially constructed. It is deemed necessary to explore these negative discourses as they play an important role in the construction of teenage pregnancy as a social problem. Therefore an understanding of these discourses will allow for the development of interventions that can reduce the stigmatization of teenage pregnancy as a social problem.

Recent statistics indicate that the rate of teenage pregnancy is declining in South Africa yet, there remains a widespread belief that the percentage of teenage pregnancy is rising (Chohan

& Gina, 2009). According to a study conducted by the Human Science Research Council (HSRC) teenage fertility in South Africa has declined by at least ten percent between 1996 and 2001, and by a further 10 percent between 2001 and 2007 (Chohan & Gina, 2009). Despite these statistics, teenage pregnancy is still viewed as a major social problem that is escalating in South Africa. Chohan and Gina (2009), argue that this may be due to the fact that pregnant teenage girls are more visible in society (due to the policy introduced at school) as opposed to previously when they were sent away to relatives or were confined to their homes (Chohan & Gina, 2009). Could it be that teenage pregnancy is in fact a financial and moral cost to society (Holgate & Evan, 2006), that signifies a loss of social control?

According to Phoenix and Woolett (1991), the family is a civil unit that the state uses to uphold and pass its ideologies. These ideologies are enforced through medical, educational and welfare institutions to gain and maintain control in society. Through these ideologies the role of the parent to child is: economic support, care and an up-bringing that instils appropriate, acceptable social behaviour so that the child grows up to be a good moral citizen. When changes occur within this system that are in contradiction to state ideologies-such as teenage pregnancy (which represents in-appropriate sexual behaviour)- not only does the state become directly involved by publicizing the 'problem' but also ensures that it is under constant surveillance (Phoenix & Woolett, 1991). This is prevalent in the 'Prevention and Management of Learner Pregnancy' policy that will be discussed in the literature review. Critically analysing this policy is important in this study as it serves as a guideline for school management of teenage pregnancy and it is believed to have an impact and influencing power on multi-levels that moves beyond the individual. For example the management implements this policy by briefing educators who then implement it in classrooms and with pregnant learners. Therefore, the way that management interprets and understands this policy infiltrates through the different levels (educators, learners and even parents). This is important as schools play an important and influential role that serve as a platform towards empowering teenage mothers. Thus a change in perspective (mind-shift) at this level could be a stepping stone towards positive change and supportive structures in schools.

Furthermore, there is limited evidence of studies done on the personal perspective and private experience of teenage mothers who remained at school in South Africa. Therefore, there is a need for research in this area. In light of this, this study focuses on teenage mothers' narratives. This provides the teenage mother an opportunity to tell her story and voice her personal representations and experiences (Bonzaaier & Shefer, 2006). Thus giving a voice to

the 'voiceless'. The aim of this research is to add to the existing body of information and hopefully add something new to the body of research and knowledge.

Our knowledge of teenage pregnancy and motherhood is based on conceptualizations and dominant discourses in society (Macleod, 2001). It is these constructions and powerful structural relations that legitimize some practices and not others (Macleod, 2001). The dominant discourses link teenage pregnancy to: pathology, poverty, inadequate mothering, poor academic performance, social grants and high-drop out rates at school (Schultz, 2001). These discourses play a pivotal role in the stigmatization of teenage pregnancy and the construction of adolescent mothers as deviant and immoral (Bolton, 1980). The main rationale of this study is to de-construct the way that knowledge surrounding teenage pregnancy has been constructed (as a social problem) using social constructionist theory and certain elements of feminist theory. It is hoped that this will challenge the conventional view of teenage pregnancy and possibly provide an alternate perspective that would in turn reduce stigmatization and facilitate supportive environments for teenage mothers.

CHAPTER 2: LITERATURE REVIEW

2.1. Introduction

It was only during the 1970's that the term 'teenage pregnancy' emerged in America and the 1980's in South Africa (Macleod, 2001). It was during this time period that teenage pregnancy became a public problem, and young adolescents who fell pregnant were stigmatized as being promiscuous, rebels and products of dysfunctional homes (Field & Pierce, 2006). Teenage pregnancy became socially constructed as a problem paralleled with economic development and social trends (Field & Pierce, 2006). This construction of teenage pregnancy still continues presently.

The literature review will first define and discuss the social constructionist theory as it forms the basis of understanding the construction of teenage pregnancy as a social problem. In this review, the researcher defines and critically discusses the construction of adolescence as a transitional period in which young adolescents indulge in risk-taking behaviours. Thereafter, discourses of motherhood in relation to teenage mothers will be discussed followed by the dominant discourses of teenage pregnancy in South Africa. The review will critically analyse the 'Prevention and Management of Learner Pregnancy' policy before concluding with a brief discussion on the possible role that culture and support could play in relation to teenage mothers'.

2.2. Theoretical Framework

Before discussing the social constructionist theory, it is deemed necessary to define and briefly discuss the term 'discourse' as it forms a basis for understanding social constructionism: A discourse is a set of statements, meanings, stories or images that construct a particular version of events or objects (Parker, 1992). Discourses are connected to the way that society is organized and therefore certain discourses appear as truth and others as fiction (Burr, 1995). For example discourses of femininity construct women as nurturing, emotional and vulnerable, thus assuming that women are particularly able to care for children rather than working in managerial positions (Burr, 1995). There may be various discourses surrounding teenage pregnancy that would focus on different aspects of the 'problem' and have different implications (Burr, 1995). Therefore, the discourse that teenage mothers are with pathology would have different implications than the discourse that associates teenage

pregnancy with social welfare. Whilst the first discourse implies that teenage mothers who engage in sexual intercourse has psychological problems, the other implies that she deliberately falls pregnant for perverse incentives (social grants).

According to Parker (1992), discourses play a role in structuring identity of self and personal experience and that different cultures will have different stances on discourses. Therefore discourses are important in this study as teenage mothers' narratives of the self may be influenced by cultural practices, beliefs and structure (discourses) in the society that they belong to (Burr, 1995). Discourses are located historically and therefore change, develop and connect with other discourses over time (Parker, 1992). The study draws inspiration from the fact that discourses are replaceable by new discourses (Burr, 1995). This study hopes to contribute (in the long run) towards replacing the negative discourses surrounding teenage pregnancy with positive and supportive discourses. Social constructionists argue that discourses are sustained by social processes and intuitions. This theory will be discussed next.

According to Burr (1995), social constructionism is a multi-disciplinary framework that takes a critical stance towards knowledge that is often taken for granted. The aim of social constructionist theory is to deconstruct discourses that uphold inequitable power relations (Burr, 1995). This is done by focusing and enquiring on the interaction between people and the social practices that they engage in (Burr, 1995). According to Burr (1995, pp. 2-13), the key assumptions underpinning social constructionist theory are:

- “Conventional knowledge is objective”. This means that one has to be suspicious of assumptions of the world that are often taken for granted.
- “Knowledge is constructed in our daily interactions and sustained by social processes”. Thus social constructionists are interested in language as an expression of thought that is constructed and determines the way that experience and consciousness is structured.
- People are constantly involved in constructing and re-constructing the self through the use of language. Language determines the lines along which we divide our experiences and our world into categories.

- Our understanding of the world is socially and historically constructed.

This chosen theoretical framework was deemed appropriate for the critical nature of this study. Whilst discourses will aid the understanding of the construction of teenage pregnancy as a social problem, social constructionist theory will be used to de-construct teenage pregnancy as a problem. This will be done by analysing the way that language is structured with underlying conflicting messages. This critical stance is also driven by the hope for social change which is one of the defining aspects of social constructionism: “where power exists, there is resistance and this is the key to possible social and personal change” (Burr, 1995 p.10).

2.3. Social Construction of Adolescence

The term ‘adolescence’ was recently constructed as a natural stage of development and defined as a distinct age-related period (Holgate & Evan, 2006). Although maturation varies, adolescence is believed to occur from menarche up to the end of the pubertal process—approximately between 13-20 years old (Holgate & Evan, 2006). In Western societies the duration of adolescence is extending for the following reasons: the decrease in average age of menarche, changes in relationship patterns such as marriage not being a norm any longer and the deferral of economic independence (Holgate & Evan, 2006).

The general discourse portrayed by society and media is that adolescents are experiencing major physical, social and mental changes (Durkin, 1995). These changes are understood in light of the view that adolescents are at a transitional period between childhood and adulthood (Durkin, 1995). This means that a teenage mother, who is by definition an adolescent is no longer a child, nor an adult. Alternatively she could be viewed as both child and adult (Macleod, 2001). At this transitional stage, normal development would mean that she is in the process of moving toward a more complex and developed individual, also known as an adult (Burman, 1994). This is confusing for the adolescent who is supposed to be striving toward independence (adult), yet still dependant (child) on others (Macleod 1991; 2003). Essentially the point being made is that adolescence is accepted as a distinguished natural stage of development that is characterized by uncertainty and confusion (Macleod, 1991).

Other characteristics of this developmental stage include: risk-taking behaviour, sexual exploration, movement toward becoming a rational, individualistic, financially independent person who has goals towards a career orientation that will ascertain some financial income (Macleod, 2006). Media, psycho-medical literature and society re-enforce and perpetuate the contradictory nature of this stage, especially with regard to 'acceptable' and 'un-acceptable behaviour' (Holgate & Evan, 2006). The result of this is that adolescents are experiencing confusion and a mis-match between societal expectations, developmental transitional experiences and their own ambitions (Holgate & Evan, 2006). A discussion of these contradictions in relation to teenage pregnancy will follow.

One of the contradictions of teenage pregnancy is the conflicting messages surrounding sexual activity. On the one hand sexual exploration is considered a normal characteristic of this stage of development (sexual exploration is adult-like behaviour), yet on the other hand adolescents are viewed as ignorant regarding matters of sexual activity (child-like) (Macleod, 1991). Therefore talking about sex and sex education is encouraged but then abstinence, morality and the negative consequences of sexual activity is emphasized (Macleod, 1991). An example of this is prevalent in the 'Prevention and Management of Learner Pregnancy Policy' which will be discussed later in the literature review.

Another contradiction that arises from this stage of development is the creation of an 'ideal' adult that is used as an unrealistic measure of comparison. Literature and dominant discourses argue that teenage mothers' lack the adult capacity to take care of a child (*refer to section on inadequate mothering skills*) and are: immature, unable to think rationally, lack knowledge, awareness and goals (Boult & Cunningham, 1992). This implies that adults are knowledgeable, logical, goal-orientated, mature and self aware individuals- thus creating the 'ideal' adult (Macleod, 1991). The teenage mother is compared to the 'ideal' adult yet at the very same time she is not considered an adult. In fact she is considered 'deviant' for engaging in adult-like behaviour (sexual intercourse). Furthermore, there exists an underlying power relation within this discourse, as the absent adult characteristics of teenage mothers' (such as maturity, rationality, knowledge, responsibility etc.) imply that these characteristics are present in the adult whom she depends on (Macleod, 1991). Educators and parents are perceived to be the rational (ideal) adult who are in a more powerful position than the adolescent and therefore are in the position (and expected) to infer knowledge to adolescents regarding morality (Measures for the Prevention and Management of Learner Pregnancy,

2007; Macleod, 1991). Therefore, the developed, rational adult is in a more powerful position to take care for the (powerless) less-developed adolescent.

According to Macleod (2001), the construction of adolescence has gender biases in two aspects. The first is that some of the normal characteristics of adolescent development is not applicable and socially accepted in females, and the second is the implication that the transition to adulthood is different for females and males (Macleod, 2001). In the first instance, characteristics such as risk-taking behaviour and sexual experimentation seem to be applicable to males only (Fine & MacPherson, 1994). If a girl acts out against social norms by displaying natural sexual characteristics (normal according to the characteristics of her developmental stage), she is regarded as displaying in-appropriate, immature, boy-ish behaviour, that is not acceptable for a female (Fine & MacPherson, 1994). The teenage girl who is visibly pregnant and has undoubtedly engaged in 'in-appropriate' sexual behaviour is stereotyped as immature, incontinent with the natural developmental process, gullible and easily influenced by external factors (Macleod, 1991). The message that is conveyed through media, discourses and institutions is that she has over-stepped her boundaries (as a child), due to her adult-like sexual behaviour at a time when she is not yet an adult (Macleod, 1991). This powerful message is persistent even though she is at a stage that considers the transition to a fully developed adult as successful completion of the stage.

To elaborate on the second aspect of gender bias: Within some African cultures, adolescent mothers' are not stigmatized as deviant, and the responsibility of taking care of the children does not automatically rest on the mother (Rolfe, 2008). In fact giving birth may be symbolic of her transition to adulthood. It is also argued that from a biological viewpoint, the adolescent female displays biologically characteristics of an adult (thus able to conceive), yet she is perceived to be emotionally immature to deal with motherhood (Macleod, 2006). However the concern regarding mothering skills disappear when a teenage mother is married. Dominant discourses do not make mention of married adolescent mothers as a social problem (Macleod, 2006). The afore-mentioned implies that the transition to adulthood for females is attained through relations with others –relationship with baby and relation to husband- in comparison to males who make the transition through career building. There are also underlying power implications in the sense that: males play a significant role in women's' transition to adulthood (marriage and conception of child through intercourse), whereas

women are absent in the development of the adolescent male towards adulthood (Boonzaier & Shefer, 2006; Macleod, 1991).

2.4. Discourses of motherhood

From a feminist perspective, gender roles are the product of local norms and social pressures (Durkin, 1995). A person learns gender roles according to their learning experiences in a particular social environment (Durkin, 1995). Educators, parents, peers and media convey messages about sex roles and the role of women in society thus socializing females to be nurturers and caring for the welfare of others from an early age (Durkin, 1995). Once a woman or girl has conceived and given birth, it is then expected that she takes on the responsibility of being the primary care-giver and naturally feel a sense of fulfilment in her role (Phoenix & Woollett, 1991). She is expected to bring-up her child in the 'correct' way, which essentially means that she needs to instil dominant ideologies of society into the child so that he/she becomes a responsible and mature citizen (Phoenix & Woollett, 1991).

Psychology plays a large role in constructing and maintaining mothers in this social position (Phoenix & Woollett, 1991). Psychoanalysts such as Klein, Winnicott, Bowlby and Kohut layed the foundation to the instrumentalist discourse that views motherhood as an ideal whereby she is all-giving and self-sacrificing toward her baby (Kruger, 2006).

These perspectives rarely considered the mother but rather focused on the child's needs (Phoenix & Woollett, 1991). An example of this is Bowlby's work on attachment and maternal deprivation. Essentially Bowlby's work emphasizes the importance of the mother being attentive and available for the child on a consistent basis (Burman, 2008). Feminists question the limitations of his work that were based on children (involved in pretty crimes) who were separated from their parents due to evacuation from cities in 1951. The theory is limited as it was only for these particular children, and perhaps for children who may have a similar experience to this that separation was traumatic (Burman, 2008). He assumed a mothers' position at home, which was addressed when woman's full time availability to motherhood was not in question. The ideal mother that was created is used to measure the adequacy of a mother (Kruger, 2006).

Woolett and Phoenix (1991), argue that although social psychology focused on women's identity and experience it still considered motherhood as a crucial stage in adult development. Constructions of motherhood in psychology dismiss the following factors: individuality, social circumstance, financial position, employment status etc. (Phoenix & Woolett, 1991). For example, a teenage mother who is home in the afternoons may have the time to engage in child-care activities opposed to a mother who works day and night shifts. Although the above-mentioned factors contribute to the mother-child relations, mothers may still interpret their role in comparison to the 'ideal' mother (Phoenix & Woolett, 1991).

Furthermore, teenage mothers seem to be held responsible for socio-political problems and targets for public remedial programmes on mothering (Macleod, 2001). The well-being of society is dependent on women staying at home, and thus maternal presence is an essential component to maintain socio-political order (Burman, 2008). Furthermore, mothers' are positioned to maintain social relations and serve as a relay point in producing democratic citizens. She is accepting socio-political order by thinking that her concurrence is through independent choice, rather than coercion (Durkin, 1995). Adolescent mothers are further stigmatized as being unfit for motherhood. Later the researcher discusses dominant discourses of teenage pregnancy in South Africa.

In South Africa and postmodern society, there has been a mind-shift in terms of educating females, including teenage mothers. The 'Prevention and Management of Learner Pregnancy Policy' supposedly encourages teenage mothers to continue schooling through certain measures that will be critically discussed later. These discourses are conflicting, as on the one end of the spectrum teenage mothers are encouraged to get an education by attending school, and on the other end of the spectrum the primary responsibility of child-care still falls on the mother (this is evident in the policy discussed further). These contrasting discourses may be confusing for school-going teenage mothers in terms of their aspirations, concept of the self and their decision to drop-out or continue with their studies.

2.5. DOMINANT DISCOURSES OF TEENAGE PREGNANCY

2.5.1. Introduction

There are various psychological perspectives from which the concept of ‘the self’ is defined and understood. However, common to most of these perspectives is that selfhood is an internal and external construction. Whilst it is constructed through interpersonal interactions with others it also draws from culture, social influences and institutions (Elliot, 2003). The following sections will be discussed in light of adding to our knowledge of teenage mothers’ construction of ‘the self’. This will be done by discussing and de-constructing dominant discourses of teenage pregnancy.

In this section each dominant discourse will be challenged using social constructionist and feminist theory. This is done in an attempt to de-construct these discourses and providing an alternate view of teenage pregnancy. This is important because an adolescent falling pregnant is not simply an indication of behaviour change among young women, but also has to be viewed in relation to her social context and relation to others (Durkin, 1995).

2.5.2. Teenage mother with pathology

Although a large percentage of adolescent females are sexually active, the teenage girl who falls pregnant is viewed as ‘immoral’ and unable to practice sexual restraint (Durkin, 1995). An overview of studies investigating psychopathology in the lives of teenage mothers revealed that only small differences existed in comparison to teenagers who ‘escaped pregnancy’ (Bolton, 1980). The slight difference between teenage mother and teenage females who ‘escaped’ pregnancy has been magnified in society as a measure of comfort to parents of adolescents who do not fall pregnant, as well as a measure of social control (Bolton, 1980). Furthermore, the parental message that only ‘that type’ of girl has sexual intercourse and falls pregnant is a means of control over the child (Bolton, 1980). In fact the stance that this study takes is that pregnant adolescents may be much more similar to their non-pregnant peers than previously believed. Bolton (1980), argues that teenage pregnancy is more a chance event than one mandated through pathology.

2.5.3. *Inadequate skills to be a mother*

The major dominant discourse of teenage pregnancy is the assumption that adolescent mothers are incompetent to be 'good' mothers (Macleod, 2001). It is argued that she is not yet physically and psychologically equipped to deal with parenthood (Cunningham & Boulton, 1996) for the following reasons: she is relatively immature, less knowledgeable, displays high levels of stress (assuming that she cannot cope), less responsive to her baby and does not stimulate her baby (Durkin, 1995; Macleod, 2001).

Within the above-mentioned text, there exists an underlying assumption of what it means to be a 'good mother' (Macleod, 2001). The assumption is that good mothers are: skilled, mentally mature, more responsive, knowledgeable, physically and psychologically equipped to deal with motherhood. The implication here is that a 'good' mother is an adult mother (Macleod, 2001, p. 495). However results of a research done on teenage mothers indicated that teenage mothers did not view themselves as being too young for motherhood, and that the stigma associated with teenage pregnancy negatively affects them (Phoenix, 1991).

This discourse implies that women need 'skills' to be adequate mothers is contradictory to the dominant discourse of mothering being natural and instinctive (Macleod, 2001). Biologically, the adolescent female has the capacity to conceive and give birth, thus mothering should occur naturally (Macleod, 2001). It seems that for adolescent mothers, being 'skilled discourse' takes preference to the instinctual nature of motherhood. In addition to this, the assumption that adolescent mothers are inadequately skilled then justifies intervention through pedagogization, thus maintaining power structures (Macleod, 2001).

Woollett and Phoenix (1991), discuss motherhood in general as an experience that could evoke the following feelings: anger, depression, hostility, boredom, difficulty with their identity, mis-matching feelings with their child and conflict between the mothers' needs and the child's needs. In addition to this, they struggle to find ways of coping with incongruence between the 'good-enough' mother and the reality of mothering (Phoenix & Woollett, 1991). Literature still highlights the afore-mentioned 'natural' negative feelings of motherhood as problems associated with teenage mothers.

Another public concern regarding teenage pregnancy is that children born to teenage mothers are at a higher risk of abuse and non-accidental injury (Phoenix, 1991). Assuming that we accept the statement that youth is a contributing factor to abuse, why then is age irrelevant

when an adult abuses (Phoenix, 1991). Macleod (1999) critiques these studies for not having comparison groups.

According to Macleod (2001), teenage pregnancy is no longer threatening the idea of a 'conventional' family but rather stroking an underlying fear of degeneration. This means that citizens and state fear that teenage pregnancy is not only increasing the population size, but also that teenage mothers' reliance on grants and social welfare will further entrench poverty and negatively effecting economic growth (Macleod, 1999).

2.5.4. Teenage mothers and perverse incentives

A widespread belief in South Africa is that welfare grants are perpetuating and encouraging teenage pregnancy (Makiwane, Desmond, Richter & Udjo, 2006). According to Makiwane et al., (2006), the dominant discourse is that social grants serve as a perverse incentive for teenage girls to receive social grants which is then spent on purchasing personal items (Macleod, 2006). This implies that teenage girls deliberately fall pregnant to receive the grant available to them to gain financial remuneration and spend the money irresponsibly. Furthermore, should findings reveal that teenage girl's do not have this perverse intention, the suggestion made (which in my opinion is the only perverse aspect of this discourse) is that some form of withdrawal of welfare should be in place to indicate disapproval to the teenage mother (Makiwane et al., 2006). In response to the afore-mentioned, Makiwane et al., (2006) states ".....this line of thinking undermines most negative sentiments towards the Child Support Grant (CSG) in South Africa..." (p. 4). I would imagine that more importantly it directly infers negative sentiments toward teenage mothers.

A survey exploring the relationship between teenage pregnancy and CSG in South Africa was assessed by: analysing data on fertility and CSG access, con-currence between the introduction of CSG and rates of overall fertility as well as teenage fertility (Makiwane et al., 2006). The results indicated that teenage fertility declined significantly from 1980 to 1996, thereafter had risen in 1996 before declining very soon after that (Makiwane et al., 2006). Due to the fact that the CSG was introduced in 1998 when the rate of teenage pregnancy had been steadily declining indicates that there is no relationship between the CSG and teenage pregnancy. Furthermore, statistics indicate that only 20 percent of teenage mothers received the social grant (Makiwane et al., 2006). In fact the majority of beneficiaries were older mothers (Makiwane et al., 2006).

2.5.5. Teenage pregnancy related to poverty

Two assumptions are prevalent in this discourse: a higher rate of teenage pregnancy is prevalent among communities with high unemployment rates, poverty and poor socio-economic status (Trent & Cowder, 1997). The second assumption is that teenage girls who fall pregnant are unlikely to complete school, are dependent on others financially and have difficulty entering the workplace thus further entrenching poverty (Trent & Cowder, 1997). Macleod sums this up best:

“ ...the reproductive teenager is positioned in the South African social scientific discourse as threatening economic security by disrupting the production of the economic self and by fracturing population control and this positioning may be used to ‘regulate’ adolescent lives.” (Macleod, 2002, p.649).

In addition to the afore-mentioned many western societies perceive teenage pregnancy not only as a near sacrilege that causes financial stress and long-term lower socio-economic status for mothers but also disadvantage the future prospects of the infant (Durkin, 1995; Macleod, 2001). These studies fail to consider socio-political factors as restricting adolescent mothers experience (Macleod, 2002), and that parenting in general involves economic cost and is not subjective to teenage mothers’ (Pallas, Natriello & Mc Dill, 1989). Pallas et al., (1989) argues that the countrys socio-economic status needs to be looked at in a broader political, historical and social context.

The poor employment rate of teenage mothers’ is not due to her being a young mother but, rather the result of structural factors in the labour market (Phoenix, 1991). Although views towards single parenthood are changing, the status quo remains the same as opportunities for single mothers and teenage mothers are minimal (Phoenix, 1991). Furthermore, one cannot rule out the possibility that financial constraint may have already existed prior the conception (Phoenix, 1991). Furthermore, young mothers from these disadvantaged communities are often seen as turning to parenthood as a way of making meaning to their lives (Glikman, 2004)

2.5.6. Teenage pregnancy causes poor academic performance

Cunningham and Boulton (1996), argue that teenage mothers are faced with challenges such as: social isolation, abuse, adoption, child abandonment, financial constraint, poverty, stigma, educational challenges and health concerns and therefore meeting the academic and social demands at school further lure these young mothers into stressful and challenging situations. Some have even argued that academic achievement is unattainable (Prater, 1992). Mainstream literature overlooks the possibility that many teenage mothers may have already been in stressful environments, experiencing social problems and performing poorly at school prior their pregnancy (Durkin, 1995). Macleod (2002) argues that the widespread belief that an education will mean a better future, financial stability and success in the work place may be wishful in South Africa where job opportunities are restricted and the unemployment rate is especially high among women. Women are more likely to be employed in the low-paid domestic sphere (Macleod, 2002).

One of the themes that emerged from the results of a research study that explored transitions to motherhood, and new parenting among inner-city teens was that: teenage mothers gained a heightened sense of responsibility regarding their finances, safety, academic performance, health and attitude towards risky behaviour (Lesser, Anderson & Koniak, 1998). From these results one can deduce that teenage pregnancy can improve the life of a teenage mother as a major attitude change could take place (Prater, 1992).

2.5.7. School drop-out rate

According to statistics only a third of teenage mothers returned to school in South Africa (Chohan & Gina, 2009). A study done on pregnant black teenage learners in South Africa found that 50 percent of those teenagers were unlikely to return to school after giving birth (Cunningham & Boulton, 1996). These results imply that the school drop-out rate and teenage pregnancy is directly related.

This discourse (as it is with the others) fails to look at other broader factors that may be influencing the drop-out rate at school. If the social and personal circumstances of each teenage mother were considered, findings may find that teenage mothers who left school may have had poor attendance prior conception (Cunningham & Boulton, 1996). Before linking drop-out rates at school to teenage pregnancy, socio-economic factors need to be considered and investigated in each case. Some of these socio-economic factors include: changes in

teenage mothers' living circumstances, death/retrenchment of a parent/breadwinner, domestic violence and financial constraint (unable to afford transport cost to and from school) etc.

It is also worth mentioning that studies conducted on adolescent mothers and the drop-out rate was conducted prior the release of the 'prevention and management policy of learner pregnancy' in 2007. This policy aimed at decreasing drop-out rates at school by encouraging mothers to continue schooling. A discussion of the policy will follow.

2.6. MEASURES FOR THE PREVENTION AND MANAGEMENT OF LEARNER PREGNANCY POLICY

2.6.1. Introduction

According to Chohan and Gina (2009), the 'measures for the prevention and management of learner pregnancy' policy introduced in 2007, encourages pregnant mothers to return to school after giving birth. This research challenges the notion that the authenticity of this policy as genuinely promoting non-discrimination of teenage learners, preservation of human potential and a supportive school environment for the pregnant learner (Parliamentary Monitoring Group, 2009). The policy will be critically discussed to illustrate the contradictory nature of it and the prevalence of negative discourses (discussed in the literature review) in the language of the policy. The 'management' section of the policy will be discussed followed by the 'prevention' section. For purposes of this research the "Measures for the Prevention and Management of Learner Pregnancy policy will be abbreviated as 'MPMLPP' ".

2.6.2. The Prevention Aspect of the Policy:

2.6.2.1. Principles of the policy

The policy is based on three principles: The first is that the Department of Education 'strongly advocates' abstinence', the second is that pregnant learners 'shall' not be discriminated against (this is in accordance with the constitution and various legislation) and the last principle is that pregnant learners 'may not' be expelled from school (this is to act in accordance to statement issued by the Council of Education Ministries) (MPMLPP, 2007,

p.1). Looking at the usage of text in the above mentioned quotations, the words used in the second and third principle is much more subtle and gentler than the first principle. Furthermore, the second and third principle clearly states that these principles exist due to their responsibility to upholding legislation (this comes up again in the policy as an ‘obligation), in comparison to the first principle that clearly states that the Department of Educations’ own stance- abstinence. Although the learner ‘may not’ be expelled, the policy later states that the teenage mother is not allowed to re-register in the same year that she left school due to pregnancy:

Extract 1

“... the learner may therefore request or be required to take a leave of absence from school....to address initial caring for the child.....”(Measures for the Prevention and Management of Learner Pregnancy ,p.5, 2007)

Extract 2

“it is the view of the Department of Education that learners as parents should exercise full responsibility for parenting, and that a period absence of up to two years may be necessary for this purpose. No learner should be re-admitted in the same year that they left school due to pregnancy.” (Measures for the Prevention and Management of Learner Pregnancy ,p.5, 2007)

In extract one and two the policy states that the Department of Education (DOE) is bound by the constitution and therefore cannot expel pregnant learners as it infringes on their right to education. However, the policy states that the DOE will not allow her to re-enrol into school if she left in the same year due to pregnancy (for an unstated reason) and may request the pregnant learner to takes a ‘necessary’ two years absence (MPMLPP, 2007). The assumed supportive nature of this policy toward pregnant learners is questionable as refusal to re-register her and a requested time period of two-years absence sounds like a ‘more subtle’ expulsion. Extract one and two are also contradictory in the following regard: the first extract mentions absence for ‘initial’ child-care that implies short-term absence whereas the second extract mentions two years implying long-term absence (MPMLPP, 2007). Govender (2009), argues that if this policy truly has the baby’s best interests in mind then the two year period is a ‘quick- fix’ as in the long-run the child will have an un-educated mother.

2.6.2.2. Adolescent discourse

Furthermore, extract one and two clearly indicate the contradictions in the child/adult discourse and power relations discussed earlier in the review (refer to the ‘construction of adolescence’). In extract two the policy emphasises the parental responsibilities of the teenage mother and father (adult-like behaviour) but then in several other extracts the policy refers to the teenage mother as a ‘child’. This is especially visible when addressing the role of educators, parents and guardians in educating the ‘child’. There is also an implication of power relations between adolescent and school authority: the teenage mother (less-powerful) is not ‘entitled’ to sick leave/absence, but rather has to request (from a more-powerful person) for leave days. Alternatively she ‘may be requested’ or rather be told to take absence from the school principal.

2.6.2.3. Stigmatizing pregnant learners

Extract 3

“...above any other measure, a clear and consistent message should be communicated that children should abstain from engaging in sexual intercourse. There are many reasons for this, especially the risk of sexually transmitted diseases, including HIV and AIDS, as well as the negative impact of a pregnancy on the future life chances for girls.” (Measures for the Prevention and Management of Learner Pregnancy ,p.1, 2007)

Extract 4

“ Besides sexuality education, morality and life skills education being provided by educators, parents and guardians should be encouraged to provide their children with healthy morals, sexuality education, and guidance regarding sexual abstinence until marriage, and faithfulness to their partners.” .(Measures for the Prevention and Management of Learner Pregnancy ,p.2, 2007)

Extract 3 and 4 implies that teenage pregnancy is related to negative consequences (see section on dominant discourses), and that as part of a strategy to prevent teenage pregnancy, the policy recommends sex education, as well as morality and life skills training. This implies that pregnant learners or teenage mothers’ lack the knowledge and skills to abstain from sexual intercourse and are immoral. The broader context of these learners’ has been overlooked in the policy. These extracts are one of many examples depicting the way that dominant discourses are subtly (in-directly) stigmatizing teenage pregnancy. Another example of stigmatizing or/and pathologizing teenage pregnancy is evident in the following extracts of the policy:

Extract 5

“...we intend to inform affected learners about their rights to education and support educators in managing the effects of learner pregnancy in schools...” (Measures for the Prevention and Management of Learner Pregnancy, p.1, 2007)

Extract 6

It is not only the use of words such as : ‘affected ’, ‘vulnerable’ and ‘troubled’ that imply that pregnant learners are with some sort of disease or problem but also extract 5 then states that the intention is to help and support educators. One would imagine that the ‘vulnerable and troubled’ learner would be the individual in need of support. Instead the perspective taken here is that the educator needs support as she/he has to deal with this ‘problem ’.

2.6.3. The Management Aspect of the Policy

The second part of the policy addresses ‘management’ of teenage pregnancy. This section consists of the measures that should be taken once the teenage girl has already fallen pregnant. The first point made in this section is that the education system is “obliged to manage.....” (MPMLPP, 2007, p. 4) and act in the best interests of all parties involved. This includes the community, school, educators and other learners. The word obliged indicates an obligation to do something that must be done to comply with the law. When comparing this aspect of the policy to the section on ‘Prevention’, this section is much vaguer in terms of methods, strategies and suggestions of supporting pregnant learners. Furthermore, the language used to enforce measures are much more gentler and some suggestions are generalised (for the benefit of all learners in general). Therefore, the reader of this policy receives a strong clear message about the preventive stance that the DOE takes and that teaching morality is essential, however once a girl falls pregnant the management of her does not come across as supportive but rather an obligation.

The policies or measures for supporting pregnant learners include:

- “Strict Confidentiality...” when the pregnant learner discloses. However, the sentence then states that parents ‘should’ be informed after consultation with the learner (MPMLPP, 2007). The exception in this instance is that ‘confidentiality is not an option when the learner or others are at risk.’ (MPMLPP, 2007, p. 4). This measure seems deceptive, as strict confidentiality cannot be maintained if parents of the learner should be informed. It also appears to be vague in terms of explaining what is

meant by ‘risk’. The use of the word ‘risk’ makes pregnancy sound like a contagious disease.

- The next measure argues that: the mere fact that the DOE takes the inclusive approach to education should be an indicator that provision is made for learners with ‘barriers to learning’ (MPMLPP, 2007, p. 4). Once again this is vague, and although the measures are concerned with learner pregnancy it generalizes the measures to include other groups of learners, thus the implication for teenage mothers and pregnant learners is implicit. It is also implying that teenage mothers’ have ‘barriers’ to learning. This may not be the case for all teenage girls. What about a teenage girl who give birth during a term break and made child-care arrangements, how then is she being supported? Support in this policy is limited to education which than also states ‘within reasonable limits’ (MPMLPP, 2007, p.5). Once again the term ‘within reasonable limits’ could be understood by the reader as merely allowing her to attend school as being reasonable for others could be assisting her to catch up with work etc.
- The next measure in the policy is that after the pregnant learner discloses information she needs to be referred to a health care professional. However this referral is not driven by care or concern in terms of a medical check-up or to get information regarding birth or health of the baby and mother. But rather the referral is to a health care professional who will give her “advice regarding termination of pregnancy options and any other necessary information“ (MPMLPP, 2007, p. 5). Termination is the only clear option mentioned here. Why not mention ‘necessary information’ only or include the other options available to her?

2.6.3.1. Focusing/blaming on the teenage mother

EXTRACT 7

“Learner must be sensitized to the fact that there are no medical staff to handle the delivery of babies at school, and the potential health risks and trauma to the mother, new-born child and rest of the community arising from hidden pregnancy, or if the child is delivered at school (*Measures for the Prevention and Management of Learner Pregnancy*, p.5, 2007)

EXTRACT 8

“A school should avoid any action that may constitute unfair discrimination against a pregnant learner. However the pregnant learner should also understand that some members of the school community might not readily accept and be supportive of their situation because of the value systems to which they subscribe.” (*Measures for the Prevention and Management of Learner Pregnancy*, p.5, 2007)

In the above extracts there is an expectation for teenage mothers to be sensitive towards the assumed trauma or negative effects that her pregnancy could have on other learners at school. This approach focuses on the pregnant learner, rather than expecting the community, educators and learners to be sensitive toward her. She is considered the vulnerable, ‘disadvantaged and special needs learner’ in this policy, yet she is expected to accept and understand the stigma associated, thus dis-empowering her. It is also worth mentioning that the reader of this policy is more likely to be educators and school staff who has a greater influence on learners. Therefore encouraging staff to be sensitive toward the pregnant learner could infiltrate into the classroom and influence the attitudes of other learners towards the pregnant learner.

There are a few good and supportive measures that are mentioned however, most of these suggestions are contradicted in the very same sentence. For example ‘counselling and psychological assistance is encouraged’ (MPMLPP, 2007, p. 5). However, it then specifies that these services would be required with regard to advice-giving and counselling on motherhood and childrearing skills (that may also be implying inadequate skills to mother refer to the section on discourses). Furthermore, it is not emphasized or ‘necessary’ but rather staff members ‘may’ refer and assist pregnant learners and refer them to support groups for grant applications (MPMLPP, 2007, p. 6). The policy does however, encourage support in terms of permitting completion of homework assignment and tasks at home during her absence.

Lastly, the policy requests schools to capture the ‘rates’ of teenage pregnancy. This is done to evaluate the effectiveness of this policy (MPMLPP, 2007, p. 6). The rate (number of teenage pregnancies) in the school would provide statistics (an increase or decrease in the rate of teenage pregnancy) that would indicate the effectiveness of the policy. Therefore, if numbers decrease then this means that the prevention aspect of the policy would be successful? What about evaluating the effectiveness of the ‘management’ aspect of the policy, and ensuring that pregnant learner’s rights (which is a principle of the policy) and are not abused? Questions such as: How many of the pregnant learners have been assisted with grant application, referred to a clinic for a health examination, made aware of her rights with regard to an education etc.

2.7. RACIALISING TEENAGE PREGNANCY

Teenage pregnancy is either understood through structural or cultural explanations. Structural explanations encompass the poor socio-economic status and inadequate access to health and education. Cultural explanations are the expectations of the group that the teenage mother belongs to. In South Africa the way the teenage pregnancy is viewed is culture- specific (Macleod & Durrheim, 2002).

Elliot (2003), acknowledges the influence of culture on the concept of the self but argues that culture is generally viewed as a separate entity from the self and thus culture is often viewed as the cause and influence of certain events (Macleod & Durrheim, 2002). Teenage pregnancy is viewed in light of this, especially in South Africa we adopt the cultural explanation to understanding teenage pregnancy (Macleod & Durrheim, 2002). This is understood in light of ‘new racism’ in South Africa.

What is meant by new racism is that white people are no longer viewed as superior, but rather as people who follow a westernised way of life (the correct standard of living). Whereas black people are no longer viewed as primitive or inferior, but rather as cultural and traditional people (Macleod & Durrheim, 2002). Teenage pregnancy in South Africa is viewed as a cultural problem (a black problem) as is often blamed on the deficiencies of the teenage mothers cultural background (Rolfe, 2008). Furthermore, teenage pregnancy is viewed more negatively among the white population than in black population (Macleod & Durrheim, 2002). The afore-mentioned is based on the fact that discourses are influenced by

the white westernized 'correct' way of life, and is directed towards the cultural (black) communities who are not living correctly (Macleod & Durrheim, 2002). Thus teenage pregnancy is a 'black' problem.

A contradiction exists here: on the one hand cultural beliefs about fertility are criticised for contributing toward teenage pregnancy (as in certain cultures, high value is associated with fertility and motherhood is a symbol of transition to adulthood), and on the other hand, acculturation is blamed for teenage pregnancy as it believed to break down the traditional cultures and values that control sexual behaviour of adolescents (Macleod, 1999). The westernization of society brings with it single-parent household and postponed marriages, leading to a break down in values and deviant behaviour (Macleod, 1999). A discussion on the role of culture and support will follow.

2.8. THE ROLE OF CULTURE AND SUPPORT

According to Cunningham and Boulton (1996), teenagers are socialized in the beliefs of their domestic structure. Some cultures view early motherhood positively, specifically among groups where economic oppression limits other routes to self development (Shanok & Miller, 2007). In other cultures it is a means of gaining status and becoming independent and responsible (Sieger, 2007). Therefore, these cultural beliefs may evoke different responses from parents of teenage mothers belonging to various African cultures.

The stigma associated with adolescent pregnancy could evoke either harsh or supportive responses from others (Bolton, 1980). This could possibly make what is assumed to be a 'bad' situation even worse. According to the Human Science Research Council, strong familial support and availability of adult care-giving is required for a teenage girl to return to school (Chohan & Gina, 2009). Social support is pivotal for the teenage mother in terms of advice, financial aid, child-care, distribution of chores and responsibilities (Sieger, 2007). Findings in a research done on teenage mothers experiences in England found that motherhood could be experienced positively with sufficient support (Alfe, 2008). Therefore, a strong support system could 'protect' the young mother from 'negative' consequences believed to be associated with teenage pregnancy (Sieger, 2007).

Results of two studies done on the grandmothers' of African-American teenagers found that grandmothers' initial reaction to their daughter's pregnancy was anger, guilt and even loss (Paskiewiez, 2001). Although most of the grandmothers were able to successfully adapt to the transition, those who viewed pregnancy in a positive light were able to feel content and fulfilled with their new roles (Paskiewiez, 2001). Furthermore, cultural beliefs may also determine the level of support that teenage mothers' receive from their family and community (Sieger, 2007). This may also indirectly or directly influence teenage mothers' aspirations and perceptions towards academic performance. For example, learners who have a supportive family member to take care of their child are able to attend school (Cunningham & Boulton, 1996).

Furthermore, a good school environment that supports learners could give learners a sense of belonging (Khalil, 2008). Conversely a negative and unsupportive school environment could add additional stressors for the teenage mother (Khalil, 2008). This is assumed to be especially important in South Africa, where child-headed households are common and learners from rural areas often board with extended family to attend an inner-city school. In addition to this, youth often look for non-parental adults for support and thus educators play an important role in terms of: helping, caring, guiding and motivating academic achievement (Khalil, 2008).

Khalil (2008), postulate that school going teenage mothers' are no different from their peers in terms of having future aspirations and goals. In fact, teenage mothers assess their options and chances for success, taking the responsibility of their baby into account (Khalil, 2008). Educators support may further assist young mothers with adjustment difficulties (during her pregnancy and after birth when she returns), and give her a sense of acceptance (Khalil, 2008). Therefore, good interpersonal relationships at school especially with educators serve as a measure of social support that could positively influence teenage mothers' academic performance and future aspirations (Khalil, 2008).

CHAPTER 3: METHODOLOGY

3.1. Research Design

The research design of this study was qualitative in nature as the researcher did an in-depth inquiry into the individual perceptions of each teenage mother (Babbie & Mouton, 2002). This form of design allowed participants to freely express their understanding of their experiences in their own terms (Patton, 1980). It also allowed the researcher to obtain genuine information on teenage mothers' perception of the self and to explore the underlying social representations that emerged (Lewis & Richie, 2002). Qualitative research was considered relevant to the study as it attempts to describe and understand human behaviour, and analyzes social representations rather than just explaining it (Babbie & Mouton, 2002). Furthermore, to meet the requirements of a qualitative study, data was collected through semi-structured interviews and observation in their natural context (Babbie & Mouton, 2002). The following section will review the sampling procedure, method of data collection and instruments that were used. This discussion will be followed by the methods of data analysis and ethical considerations.

3.2. Participants and Procedure

The sample consisted of eight teenage mothers drawn from a government secondary school in Gauteng. Non- probability, purposive and snow balling sampling techniques were used, as it gave the researcher the opportunity to choose participants that meet the criteria. The criteria for participants to participate in the study were as follows: females, un-married and between the age of 14-20 years old, had a baby and returned to school.

The researcher approached the principal of a government high school to inform him about the nature of the research (Appendix A). Once permission was obtained, the researcher advertised the study by putting notices on the boards. The advert about the study included brief information about the study and contact details of the researcher. Teenage mothers' knew other mothers' in social groups, and thus this method of snow-ball sampling allowed possible participants (with whom contact had already been made) to use their social networks to refer the researcher to candidates who could potentially participate in, or contribute to the study (Neuman, 1997). Snowball sampling is often used to find and recruit "hidden

populations,” that is: groups not easily accessible to researchers through other sampling strategies (Neuman, 1997).

The researcher contacted each learner telephonically and invited her to a one-on-one meeting, whereby the study would be thoroughly discussed and explained to her before she decided whether to participate in the study or not (Appendix E). These meetings were held in the school library and the possible participants were given an opportunity to ask questions about the study and their possible participation. If the learner agreed to participate, she was handed a participant information sheet, parent information sheet as well as an assent and consent form for participation in the interview and for audio-recording for both participant and her parent/guardian (Appendix C, D, F, H). Thereafter, an individual interview was scheduled with each participant which took place on the school premises and during school hours. Participants needed to return the assent and consent forms prior the interview which was approximately 45 minutes in length. An interview schedule was used as a guideline (Appendix I) and audio recorded.

3.3. Data Collection Method

Semi-Structured individual interviews were utilized to conduct an interview with potential participants. This is one of the most powerful ways of understanding individuals (Gaskell, 2000). An interview schedule was designed specifically for this research, and aside from the demographic data, the interview schedule contained open-ended questions to obtain specific information that were aimed at understanding participants’ concept of the self. These questions explored three broad areas:

- The concept of the self in terms of coping and balancing their different roles.
- Their viewpoint on academic performance that encompasses their aspirations, challenges and motivating factors for being in school.
- Cultural beliefs of teenage pregnancy, and the role it played (if any) on the teenage mother.
- Support structures at home, school and communities.

Based on the participants’ responses, additional questions were asked to elicit a deeper understanding of her narrative. This allows for flexibility (Neuman, 1997). The interviews were tape recorded which allowed the researcher to detect non- verbal language and

emotional responses. The tape recordings were used for transcribing the data analysis (Newman, 1997).

3.4. Data Analysis

A combined method of thematic content analysis and discursive analysis were utilized in this study. Firstly thematic content analysis was used to identify central themes. Thereafter, some methods of discourse analysis were used to add depth to this study by relating the themes that emerged through content analysis to discursive patterns within society. The section below discusses these methods of data analysis more in-depth.

3.4.1. Thematic Content Analysis

On the completion of data collection, the data was organised into coded data. According to Kruger and Welman (2001), coding is an important step as it converts data into meaningful information. The transcripts were then analysed using thematic content analysis. In this type of analysis themes are identified once data is reduced to contextual form and then elaborated on the basis of systematic scrutiny (Kruger & Welman, 2001). The data was then interpreted with the literature review as a backdrop. Terre Blanche, Durrheim and Painter (2006), postulate that the interpretive method makes the assumption that the subjective experiences of humans are real and should be regarded seriously. Therefore, this method of interpretation was appropriate to this research that was aimed toward gaining subjective experiences and perceptions of participants. Once re-current themes are identified, the researcher scrutinized these themes for coherence, contradictions and recurrence. This is a method of critical discourse analysis (Burr, 1995).

3.4.2. Critical Discourse Analysis

Critical discourse analysis looks at the way that ‘social power abuse, dominance and inequality are enacted, reproduced and resisted by text and talk in social and political context’ (Dijk, 1998., p.1) This talk is referred to as discourses (refer to the literature review for a definition and discussion of a discourse). Critical discourse analysis generally focuses on social and political issues as well as the way that discourses either legitimise, re-confirm or challenge powerful, dominant structures in the community (Burr, 1995). In this study, discourse analysis was used to understand the way that teenage pregnancy is socially

constructed and reproduced as a social problem by taking ideological functions of these constructions into consideration (Dijk, 1998). This type of analysis was used to gain an understanding of the relationship between the data collected and discourses in society (Burr, 1995). This method looks at what has been said by the participants, as well as what was being rejected by means of analysing language in the transcripts (Burr, 1995). This was then interpreted in terms of the way that verbal, and non-verbal body language contributed to participants' agreement or resistance towards dominant discourses of teenage pregnancy (Burr, 1995).

In this study, the participants' use of metaphors, phrases and meaningful words were noted during the interview and coded according to themes that arose throughout the data obtained from the interview. The researcher compiled a list of these metaphors and phrases, looking for coherence and contradiction (Burr, 1995). Thereafter, the reason behind the use of these particular metaphors or statements and the way that they work to achieve or repress certain realities were explored (Blanche, Durrheim & Kelly, 2006).

3.5. Ethical Considerations

Due to working with human subjects, as well as minors the researcher was extremely attentive to all potential ethical issues that might arise. Ethical considerations are an important aspect of research, as it ensures legitimacy and morality of the research (Neuman, 1997). To ensure that the study was ethically sound, permission was requested from the Gauteng Department of Education, and the principal of the school involved.

Participants' were informed of the nature of the study prior to the interview process. Each participant was given two consent forms, one for the interview and another for the use of an audio-tape during the interview process. The tapes were destroyed 5 years after the completion of the research. In addition to this, participants were informed that participation was voluntary and that there were no anticipated risks from participating in the study, nor would benefits be provided.

Participants' received an information sheet explaining the aims of the research and discussing issues of confidentiality. All information is confidential as pseudonyms were used in the report, and the interview information will only be available to the researcher and her supervisor. The information contained information on participants' rights to withdraw at any time during the interview or not answer questions without penalty.

Learners who are ‘minors’ were given a separate assent form requesting parental/guardian permission for their children to participate in the study. This was sent to guardians/parents via the learners. The consent, assent and audio-tape forms were only given to participants once approval was obtained from the University of Witwatersrand - Ethics Committee, the principal of the school involved and the Gauteng Department of Education.

3.6. Research reflexivity and the researcher’s experience

Part of the research process requires reflexivity on the part of the researcher. This includes engaging with the fact that the researcher forms an active presence in the conceptualisation of the research, the data collection and the data analysis.

The underlying motivation of this research rests on the researcher’s interests in the mobilization towards educating females in South Africa. Having prior experience at a high school, the researcher had personal contact with pregnant learners and played a role in the implementation of the policy in the school environment. At that time when reviewing learners’ yearly results and interacting with them, the researcher was intrigued by the academic performance of teenage mothers and pregnant learners. This led to curiosity regarding the motivation of these young mothers’ and influenced the researcher’s interest in teenage pregnancy this year. Once the researcher began reviewing the literature on teenage pregnancy, her supervisor challenged her thinking and encouraged reviewing social constructionist theory. What began as a challenging endeavour, turned into an enlightening process that created a lens from which the researcher was able to view the world from a different perspective. Thereafter, re-reading the policy through this new lens served as somewhat of a confirmation of the literature read around the dominant discourses in society. The researcher conducted this research in the hope of generating knowledge that would in some way represent this marginalised group, and in some way take others through a similar journey of critical thinking as her own. This is all in the hope that a change in the way one thinks about teenage pregnancy would change their perceptions towards teenage mothers and ultimately the way that they interact and treat these young mothers.

In terms of data collection, the researcher was cognisant of the fact that she was working with a vulnerable sample, and therefore structured questions in a way that would build rapport, not to be intrusive or jeopardise participants’ trust in her. In addition to this, the researcher

espoused a relatively informal style of relating to participants' but remained cognisant of the cultural differences, and the patience that would be required for participants' who felt that they would be judged. Nevertheless, the researcher attempted to use their 'lingo' and create a non-judgmental and reaffirming atmosphere that encouraged participants' to talk about themselves. The researcher- being a female- positively contributed to the interview process, as participants' were able to relate on some level.

Once the researcher and participants' began to establish rapport, they seemed genuine and spoke about deep and personal experiences. As the interview progressed, the researcher found herself immersed in the narratives of these young mothers as they took her through their personal journey. It was often a challenge to get through all of the research questions in the interview schedule as participants' used the space to talk about feelings that were bottled up for a long period of time. The researcher remained cognisant of the fact that part of the interview process was to give participants' the opportunity to narrate their stories and therefore tried to engage in the process and weave in questions pertinent to the study. It was important to acknowledge the challenges that participants' may have encountered around participating in the study as participants' felt that their feelings were acknowledged. Participants' were also commended on their courage to disclose personal information of a sensitive nature.

During the interview process, the researcher experienced mixed emotions, vacillating between sadness, anger and hope. When reflecting on this, she found that although literature and research informed her knowledge in this area, the reality of this situation only resonated once she interacted and listened to the narratives of this marginalised group. In fact, one would have to have been inhumane not to have been touched in some way by the experiences and the emotions experienced by these participants'. Meeting these girls and listening to their narratives brought the literature to life, as well as the impact that the stigmatization of teenage pregnancy has on them. One wonders whether society would still discriminate if they took the time out to hear the narratives of these young girls, and if they were aware of the impact that they have on these girls sense of self. The researcher's passion may have also been fuelled by her own struggle to attain an education and claim a space in a male-dominated society.

With the knowledge that these discourses are multi-layered and deeply entrenched in society, the researcher experienced feeling a sense of disempowerment due to her inability to directly

assist the participants'. This also provided some insight into the extent to which these girls felt disempowered in society as they were without the awareness that the discourses are separate from them and are used as a form of social control. However, the researcher felt hopeful and even more determined to represent these young mothers, as in some way (however minimal), this would be a step towards change in society's conceptualization of the 'problem'. Furthermore, the participants addressed the researcher as 'mam', whilst this may be a way of addressing adults in the school environment, it may have also been a respectful way of addressing the researcher whom they experienced as empathetic.

Finally, in terms of the data analysis, the process of discourse analysis required that the researcher distanced herself from the text as much as possible, so that she could identify discourses (Terre Blanche, Durrheim & Painter, 2006). The researcher attempted to remain as objective as possible, and she also reflected on the process of analysis, as well as the difficulties which arose in the attempt to be objective. In sum, it is apparent that researcher reflexivity formed a critical part of the research process and informed its conceptualisation, the data collection and the data analysis.

CHAPTER 4: FINDINGS AND DISCUSSION

4.1. Introduction

This chapter aims to discuss the themes that emerged from interviews with teenage mothers who have returned to school following pregnancy. In order to provide a rich account of the qualitative data collected, the findings and discussion sections have been combined. In such a way, the findings will be presented in conjunction with the existing literature on teenage pregnancy. This literature will act as a means of providing the reader with greater insight into the findings and may even at times be refuted by the research findings. It should be noted that the discussion will be informed by the objectives of the research project, keeping in mind the social representations of stigmatizing teenage pregnancy as well as its construction of teenage pregnancy as a social problem. The data was predominantly analysed using thematic content analysis, however there is evidence of discourse analysis where deemed necessary.

It should be noted that due to the large amount of data collected, the researcher only selected sections of the data that were felt to be most appropriate and that contributed significantly with regard to the objectives of this research. Direct quotes from the transcribed data have been presented in order to substantiate the general findings that emerged from the analysis of the data. At times the findings were consistent with the literature, but at other times, this was not the case.

In order to make sense of the data, this discussion has been divided into four main sections derived from the four dominant and encompassing themes that arose through the process of thematic analysis, namely:

- Getting the news
- Giving Birth and Life Thereafter
- Being at School
- Rising Beyond The Stigma of Being a Teenage mother
- The role of the father: an unexpected finding

It should be noted that within these overarching themes, sub-themes exist and will be organised for each theme in relation to the thematic categories of pre-determined and emergent themes.

4.2. GETTING THE NEWS

It is evident when reading the participants' narratives that common feelings were experienced when participants' initially found out that they were pregnant. The following themes on 'getting the news' will be discussed:

- A secret that cannot be hidden
- Reaction from family
- Considering an abortion
- Judgement and Gossiping
- Pregnancy as contagious
- Thoughts of suicide

4.2.1. *A secret that cannot be hidden*

One of the key themes that emerged in the interviews was postponing disclosure until pregnancy became visible. Seven of the participants' disclosed during or after the fifth month of pregnancy:

Ivy: *I waited 5 months.*

Nandi: *They would have to see for themselves cause I couldn't sit down and say 'mom I'm pregnant.' That's nerve wrecking... around 5 month they found out.*

A dominant theme that was evident was participants' avoidance of disclosure. Participants' either waited for a significant other to confront them or wore tight clothing to evoke a reaction from parental figures:

Palesa: *No I didn't tell her straight, I just wore my small t-shirt.*

Nandi: *Um what happened was like I was wearing my tight top and then my dad was like 'why is your tummy so big?' I'm like 'I don't know probably I ate a lot'. And then they said the following day 'you not going to school, you might as well take you for a pregnancy test'.*

After participants' were confronted, not all of them revealed the truth. Instead four of the participants' were accompanied by their mothers to a clinic or hospital to take a pregnancy test. According to Sadock and Sadock (2007), denial is a defence mechanism that is used to

avoid the awareness of a painful aspect of reality. The assumption can be made that participants' parents were in denial at this point in time (and perhaps prior to this point) as visually seeing their five month pregnant daughter was not sufficient enough to accept the reality of her pregnancy. Rather consultation with a health care profession and hearing 'the news' from a professional served as a final confirmation of the truth. It also seems as if participants' parents were shocked as they questioned their daughters with 'how, when and why' questions. These reactions indicate the extent to which teenage pregnancy is stigmatized as participants' experienced great difficulty disclosing this secret.

In response to the research question: 'Why did you wait so long?' The themes that arose were: fear of judgment, fear of being beaten up, fear of rejection and disownment from parental figures:

Nandi: *I was worried, I was scared....she (her mother) would kick me out*

Palesa: *My stepfather. Yoh he will hit me.....*

Sandy: *Well I was scared, I didn't know how to tell my family*

The afore-mentioned exemplifies this period of time as being highly stressful and anxiety provoking for participants' to keep the secret that could not be hidden. It can be assumed that the participants' experienced high levels of anxiety, fear and guilt which was possibly debilitating. Therefore, their avoidance seemed to be a 'safer' alternative then confronting parenting figures with the news that one is pregnant. Participants' may have postponed disclosure with the hope that their anxiety levels would have eventually decreased, thus enabling them to confide in their parents. However, as time surpassed their stress levels increased:

Ivy: *Ay I was stressed, I remember that I even lost some weight. I didn't know what to do. How was I going to tell my grandmother? How was she going to react?*

Like Ivy in the above quote, Nandi was also stressed, but she said that she enjoyed her pregnancy when she was alone. She also said that she prolonged disclosure to her parents out of fear and also '*if they found out earlier, they would say 'go and have an abortion which is something I didn't want to do'*'. Therefore in direct contrast to the discourse that adolescent females are at an age where body image is important, the results indicate that it was not the actual pregnancy, the change of self image or body mass that was a source of anxiety for the

pregnant adolescent but rather the fear of punitive and negative responses from others which is related to widespread stigmatization of teenage pregnancy (Rolfe, 2008).

Furthermore, when participants' initially found out that they were pregnant, their experience and thought processes were largely influenced by their perception and expectation of what society's responses would be (parents, friends and educators), rather than their own feelings. Only one participant expressed sadness and disappointment when she found out, whereas two felt disbelief. A common expectation was that of being stigmatized by others:

Nancy: *I was hiding a secret from her because you know people they will judge me, reject me, aish. Even my friends from school I didn't tell them.*

This expectation of stereotypical responses from others may have been informed by participants' prior experiences of other teenage mothers or informed by widespread dominant discourses that stigmatize teenage pregnancy (Rolfe, 2008). This is linked to their fear of being judged and rejected by others. These underlying fears are prevalent throughout the study as they become a reality. Inevitably, participants' had to reveal their secrets which evoked similar responses from parental figures. This will be discussed in the subsequent section.

4.2.2. Reaction from family

According to Bolton (1980), the stigma associated with adolescent pregnancy could either evoke harsh or supportive responses from family members. Findings in this study indicate that participants' initially experienced harsh responses from their parents whom eventually accepted the pregnancy and fulfilled a supportive role for these young mothers. Reaction from participants' mothers followed this order: denial, shock, anger, silence and finally acceptance. Denial was discussed above when parents took their daughter to a clinic to get a pregnancy test done.

Nancy and Nandi said that their parents were '*shocked and surprised*' whereas Sue and Sandy said that her mother was, '*really angry for about 3 days*'. Nancy said that her mother's reaction was:

'sad and a little bit confused because I'm really...I'm a girl who sits at home all the time, I don't go out'.

A dominant theme that was evident in the girls' encounters was: feeling that their parents' lost trust in them as they compared them to a sibling or cousin:

Sue: *' You know how people are they want to compare you with your brother or sister. Your sister is quiet but you like to talk so, Ay. My mother says that you two from different fathers that's why you are not like us' .*

Other parents 'grounded' them or enforced stricter rules:

Sandy: *they said 'only go out when you go and see your girlfriends.'*

The afore-mentioned is in accordance with literature that posits that the majority of parents react negatively to the news of the pregnancy and that feeling of anger, confusion, disappointment, shock and disbelief are normal reactions experienced by care-givers (Boult & Cunningham, 1992; Paskiewiez, 2001). Possible explanations may include feeling of embarrassment related to society's assumptions of their 'poor' parental skills or perhaps the additional strain that it places on the family's economic resources. At a later point in the interview, Nandi said that her mother initially avoided social gathering as she felt that community members were implying that she made a bad decision by enrolling her daughter into an urban, city school.

Another theme that emerged was parents' 'silence':

Palesa: *.... For three days she didn't talk to me, she just gave me the cold shoulder. Mmm I felt guilty and it wasn't a good feeling.*

Nandi: *I don't know what like I thought like they needed to say something you know. Like 'Say Something!' but uh not just keep quiet, but I don't know what. But please like say something!*

Participants' reported that their mothers gave them the 'silent treatment' for about two to four days. Although this is a short duration of time, they experienced it as a prolonged period of time that evoked feelings of anxiety and confusion. This is understandable considering that they prolonged disclosure for so many months. For all of the participants', 'acceptance' followed this period of silence which illustrated that none of the families rejected their pregnant daughter (Macleod, 1999a). This initial reaction of shock and disappointment somewhat dissolute within the black community by the observance of certain rituals, such as 'paying damages' and cleansing ceremonies which will be discussed further in the research (Kaufman, De Wet & Stadler, 2001; Preston-Whyte , 1989). Furthermore, this short duration

of time taken for the parents to accept could be explained culturally. Sieger (1997) postulates that some cultural beliefs evoke different responses and that many African cultures view pregnancy and motherhood as a blessing from God. Furthermore, participants' who resided with their grannies at the time had less anxiety about disclosure as they expected their grandmothers to accept their pregnancy more easily. This could possibly be associated to the assumption that their grandmothers- being more traditional- would hence be more accepting, as it is most certainly not a new phenomenon in African culture.

Once families accepted the pregnancy, participants' spoke about feeling a sense of relief and feeling 'fine'. Most of the families had a discussion shortly after their 'acceptance' to make decisions regarding schooling and childcare. This is not an indication of adults undermining their daughter's decision making skills or maturity, but rather a cultural norm whereby family and community members make collective decisions. Participants' were relieved when their parents and caregivers encouraged continuation of schooling and made arrangements for child care during school hours. Family members (generally the mother) volunteered to take care of the baby in the mornings.

These findings also indicate that participants' family members (mothers in particular) moved beyond merely accepting the pregnancy to playing a pivotal role in supporting their daughter. However, the participants' consideration of having an abortion was prior this period of acceptance. This theme is discussed in the subsequent section.

4.2.3. Considering an abortion: "I won't be judged by having an abortion, I rather be judged for having a baby".

In contrast to Lange and Geldenhuys (2001), who argue that a large number of women who choose to terminate pregnancy are adolescents who are faced with a situational crisis of terminating, superimposed on the maturational crisis of adolescents. Findings in this study indicated that although six of the eight participants' considered or attempted an abortion in the beginning stages of their pregnancy, none of them followed through. Participants'

thoughts of having an abortion were weighed up against: admitting to the pregnancy, the consequences of it (health, gossip from others) and whether they would be able to live with this decision or regret it:

Sue: *There are some consequences after abortions. They will tell you: are you sure you want to do an abortion because maybe some time people die, even you can die and it's not healthy.*

Nancy: *Cause when you do an abortion you'll regret it for the rest of your life but having a baby, it's something you understand in being happy.*

According to Parker (1992), discourses are located historically and change over time. Therefore, before discussing this theme further it was deemed necessary to briefly outline South African legislation regarding termination of pregnancy as the history informs current discourses surrounding teenage pregnancy. Prior 1997, the 'Abortion and Sterilization Act of 1975' permitted termination of pregnancy only once permission was obtained from the supreme court judge (Lange & Geldenhuys, 2001). This permission was subject to certain cases only, namely rape, incest or when the mother's life was endangered. This implied that only under these circumstances was abortion justified. Due to the procedure and high costs involved in this process, many black poor women would have illegal abortions. The risk of these back-street abortions led to the revised 'Termination of Pregnancy Act, No 92 of 1996' (Lange & Geldenhuys, 2001). This act legalised the termination of pregnancy since February 1997. One needs to take the history into account to understand the roots of the discourse that abortion is not acceptable without valid reason. Prior the revised legalisation, having an abortion was socially constructed as an immoral act of evil, in fact individuals from some cultures would not mention the word 'abortion' as it was taboo.

Legislation in South Africa has somewhat 'forced' a change in the way that society views termination of pregnancy as it is now legalized. It is a freedom of choice to terminate prior 12 weeks of gestation, from 12 years of age and without parental consent (Lange & Geldenhuys, 2001). The evolving nature of the discourse was evident in the study as participants' voluntarily raised and discussed the topic of having an abortion with the researcher and their families (as previously would not have been mentioned). However, evidence of the original discourses are still evident among South Africans and the participants' in this study:

Sue: *I can't kill my child, it's not right it's sin.*

Ivy: *What if I have an abortion and she finds out? Because my grandmother is a Christian so if I do have an abortion what is she going to think. So I thought let me tell her.*

From the above extracts it seemed that participants' were drawing from religious discourses that associate abortions with immorality. These discourses create a norm in society that is used as a measure of social control (Foucault, 1977). According to Foucault, norms are concepts that are constantly used to evaluate and control society. Therefore, a law abiding citizen who is acting in accordance with these norms is considered a sane, 'obedient' person whereas a person who does not act in accordance with these norms is 'abnormal' and deviant. As indicated in the afore-mentioned examples, participants' were challenged with the following religious discourses: the belief that an unborn child is innocent and that an abortion would mean killing an innocent soul. Furthermore, it is sinful to take a child's life and make him/her suffer for a mistake that is not their own. Norms do not only serve as measure of control, but also exclude those individuals who do not conform to "normal" (Foucault, 1977). Therefore, the teenage mother is now faced with a choice of either being stigmatized as being deviant for falling pregnant, for murdering an innocent child or possibly for both (if people found out).

Therefore, in conservative South Africa where terminating pregnancy is legalized but still stigmatized, one can argue that the mere fact that six of the eight participants' considered an abortion as an option is strong evidence of the extent to which teenage pregnancy is stigmatized (that out of fear, participants' considered an even more 'deviant' act). Participants' thoughts of abortion was a result of fear surrounding disclosure:

Tandi: *I wanted an abortion you see um 'cause I thought yoh I won't have friends you know uh my friends are gonna isolate me, what are the people going to say and things like that!*

The above extract further re-iterates the fear of judgement and stigmatization that these young girls experienced. However, this created a double-bind situation whereby terminating pregnancy would also lead to judgement and stereotyping. Of the six participants' that considered an abortion, all of them decided against it either through weighing up their options, advice from a family member who was opposed to termination, or their experiences at the clinic:

Nancy: *my sister and I go there (clinic) together and then they said 'you next' and I see this little girl crying and I said to myself 'no I am not doing*

this, I' going back home. I don't care, my mother can hit me or kill me it doesn't matter I'm going to tell her

Tandi: *...the doctor, they don't say about counselling. They just say 'come tomorrow at seven with R250 and its fine, everything will be fine, I don't feel right*

Ivy: *Me and my father baby went to the clinic, to the abortion clinic. Then when I got there at the gate I said 'I can't do this!' I won't be judged by having an abortion, I rather be judged for having a baby!*

As indicated in the extracts above, participants' seemed to weigh-up their options: being judged for being a teenage mother against being judged for having an abortion. They all decided that they would rather be stigmatized for being a teenage mother. In the extract above, Tandi was disappointed when medical staff did not inform her of the health risks involved or spend some time discussing this huge decision in her life. It seemed as if she had doubts prior the visit to the clinic and that she was expecting medical staff to confirm her doubts about having an abortion by informing her about the risks and dangers involved. In addition to this, participants' said that their choice against having an abortion was made based on the assumption that they would have come to regret an abortion at a later stage.

Ivy : *In the end I just said, ' being pregnant is better than doing an abortion'. Cause when you do an abortion you'll regret it for the rest of your life, but having a baby is bringing happy(ness).*

In addition to this their view was an undeniable sense of pride regarding their final decision to keep the baby:

Sue: *For myself I feel proud, because maybe they expected me to do an abortion. Everything for myself is fine. I even tell people I feel proud about myself. I feel proud unlike people who just go to a clinic*

Like the other participants', Sue felt proud of her decision for 'rejecting' the dominant discourses that assume that teenage girls are more likely to abort. Furthermore, participants' decision may have also been a way for them to hold true to their religious values when they were at a time in their lives when they felt like they had lost everything else. It gave them something to 'hold' on to and a sense of pride about themselves for not 'taking the easy way out'.

The researcher assumed that participants' would consider an abortion due to fears of giving birth, being a young mother or concerns regarding their future aspirations. Whilst these concerns were raised, they did not recur among the majority of participants'. When reviewing the data it became evident that participants' initial thoughts and consideration of termination seemed much less to do with their own insecurities -then about their fear of being rejected by society. Pertinent to this sub-theme was the implication that these negative discourses had on pregnant girls who considered going against their religious beliefs and values out of fear of being stigmatized in society. However, once participants' realized they were in a double-bind situation and that either way they would be judged, they reconsidered and decided against having an abortion. Therefore, making the 'right' socially acceptable decision that is in accordance with religious beliefs and societal norms. However, their 'right' decision to keep the baby did not correct the 'wrong' decision that she made when having sex before marriage, at least not in society's viewpoint. Irrespective of her choices or decisions, the pregnant teenage girl inevitably became the 'victim' of blame and judgment in society. This will be elaborated in the discussion below.

4.2.4. Judgment and Gossiping: “ people always talk, whether you rich, whether you poor, whether you pregnant, or not. They will talk!”

4.2.4.1. Friends and the community

Literature highlights the importance of support from family, friends and community members (Alfe, 2008; Fagan & Bernd, 2007; Khalil, 2008). All of the participants' in this study were ambivalent towards friends and whether they could trust them with their 'secret' or not. Respondents experienced some of their friends as supportive and others not:

Sandy: *Cause then there are a lot of people I've known in my life that are so judgmental and stuff ja. Cause um people um start judging you and they start talking behind your back and discussing what's like the topic of the day. Some people might say positive thing. Some people might say negative things.*

Ivy: *Well my friends were supportive; most of them were...not all of them*

The above extracts indicate that respondents received support from some of their friends but not all of them. As these young girls' shared their narratives, it became apparent that participants' did not fully confide in their friends: not even those friends whom they considered supportive. They feared that friends would outwardly support them but then gossip and judge them in their absence. Therefore participants' were not completely truthful with their friends from the very beginning:

Palesa: *I didn't even tell my friend, Aysh they talk!*

Sandy: *.. they are so judgmental and stuff... people call themselves friends but they will disappoint you at the end of the day..... they make stupid rumours, just gossip and say negative stuff.*

Ivy: *I do have friends but I don't trust them talking.*

Contrary to Greathead (1988, as cited in Macleod, 1999a) participants' in this study did not express or imply feelings of resentment or jealousy towards their friends. In fact their distrust for friends could be linked to the way that teenage pregnancy is negatively constructed among their peers at school. In fact at a later stage in the interview, respondents implied having a more mature outlook towards life than their peers whom they advised not to have unprotected sex (this will be discussed later in the chapter).

In addition to gossiping, feeling judged featured as a persistent theme:

Nancy: *people will talk and (say)' this girl sies she sits at home with boys and having sex and jumping gates and all rude things..... you not even ashamed of yourself.*

Sue: *they ask me.... see your situation at home is not fine, but you still fetch another...people will gossip, they won't tell you straight.*

Nandi: *How can she be doing this when she is not working..... she is always home she must be jumping gates at night while we sleeping.*

The above extracts exemplify the prevalence of dominant constructs of teenage pregnancy that paint a negative picture of pregnant adolescent girls. Furthermore, these extracts indicate community members and friends assumptions that pregnant girls are: irresponsible for not considering their family situation, immoral for having sexual intercourse and sexually deviant by implying that they not only enjoy sex (promiscuous), but also sneak out at night to have sexual intercourse (Durkin, 1995). This implies that these girls had uncontrollable sexual urges and therefore pregnancy is seen as punishment for their immoral sexual behaviour.

Therefore she 'got what she deserved for not listening to her parents' and people should not sympathize with them. This is also indicative of her sexuality as the visibility of her stomach indicates that she definitely had sex with a male and thus knowledgeable and experienced regarding sex (which is inappropriate for a child), but then also ignorant concerning sex as she did not use protection (Macleod, 1999):

Ivy: *They all have sex but I am stupid to not use protection.*

Furthermore, the use of the words 'sies' and 'ashamed' imply being 'dirty' for being sexually active and also dishonourable for causing shame to herself and her family by going against society's norms. Teachers and learners at the school imply that pregnant teenage girls are deviant and that even though a large percentage of adolescent females are sexually active, the teenage girl who falls pregnant is viewed as 'loose' and unable to practice sexual restraint (Durkin, 1995). Studies indicate that there is a very slight difference between teenage mothers and teenage girls who 'escaped' pregnancy but that society has magnified it as a measure of comfort to parents of adolescents who do not fall pregnant, as well as a measure of social control. It can also be argued that participants' sense of self at this point in time was deeply tainted by these negative discourses that they internalized. This is prevalent later when they speak about their suicidal thoughts.

The word 'gossiping' was also a recurring theme that was described by Ivy as " people talking behind your back". Nandi made sense of her friends gossiping in the following way:

I think it's 'cause of you have a child. Cause like most teenagers now are sexually active so I don't see what's the point of you judging me that I'm sexually active while you know that you are! But then I see the point of you saying that she fell pregnant while I know that you didn't fall pregnant. So you it's like you saying 'uh yes I do have sexual intercourse but then how can you be so careless'

Although Nandi is trying to understand the situation from friend's point of view, she does not seem to be convinced as she reiterated the point that others are also sexually active. Her understanding of why people gossip indicated the extent to which participants' took responsibility and blame for their situation. This also provided the researcher with an idea of the extent to which these girls felt disempowered, as not only did they agree with some of the discourses that marginalised them but also made no mention of the role that their male partner's had in the conception of the baby.

Assuming one agrees with Nandi's statement-that the pregnant girl is careless or (as other participants' said) 'stupid enough for not using protection' -, why then are pregnant girls still stigmatized as promiscuous, being sexually deviant, irresponsible and 'dirty'? If she was being careless or made a mistake then one needs to question why society's construction of her is so negative and harsh considering that being careless and making mistakes is not a characteristic unique to pregnant teenage girls? Are these discourses really justified? The researcher argues that not only are these discourses a measure of social control (Bolton, 1980) but also creates a power dynamic whereby 'childless' adolescents use these discourses to exert their power (that they are better than the girl who fell pregnant), and thus is in a more powerful position than the pregnant girl as her mistakes are not visible and stigmatized in society.

In addition to this, the participants' repeatedly said that they 'did not care' about these rumours and negative perceptions about them. This outward expression of adopting a 'no care attitude' exemplifies an ideal image of strength that actually serves as a defence mechanism against the underlying feeling of hurt and rejection experienced by the participants'. For some of the participants' this 'no care' approach was also used as a 'shield' to safeguard themselves from the realistic possibility of losing friendships that plays an important role at their developmental stage (Hook, 2002). Even those participants' who experienced some support from friends and community members were frustrated as they still felt marginalised:

Ivy: *I just tell them that I don't really care, but when I am home, it does get to me. It's hard to get over it.*

Nancy: *But when I sit alone, it does get to me. I'm sitting and thinking that they said 'this and this' and that it is true.*

These negative judgements and discourses led to feeling of sadness, depression and isolation that not only informed their choices, but also their decision to attend church. This will be discussed in the subsequent theme. It seemed that privately the participants' were hurting to be called names and stigmatised as irresponsible and careless in their behaviour. They now needed some form of social support by attending their regular church. However, one also wonders whether going to church or worrying about God was not an acceptance on their part that they did something immoral by falling pregnant outside marriage. What emerged in the findings is that churches were also not very receptive of teenage mothers. Teenage mothers were seen as dirty to have gone against the word of God that 'no sex before marriage'.

4.2.4.2. Will God accept me?

The findings of the study revealed that only one participant attended church during her pregnancy. The rest of the participants' did not attend church either because they had a bad experience or felt that others were either implicitly or explicitly judging them:

Ivy: *I stopped going to church because people treat me in a different way*

Palesa: *.. I go to Shembe, there is a side for virgin, mamma and men. (laugh). I used to sit at the side for virgin, now I'm scared to sit at the side for mama (laugh). So I stopped going church.*

The afore-mentioned extracts once again has an implicit indication that the pregnant girl has sinned and that other church members are either 'without sin' or their sin is lower in the hierarchy of sins. She has lost her status of being a virgin and therefore is no longer considered innocent and pure. This may be due to the visibility of her pregnancy and/or because it is stigmatized in society as immoral on many different levels. This confuses the teenage mother as to whether she is a child or mother. In addition to this, a mother is given a high status in religion whereas sex before marriage is a major sin. In the extract below Ivy makes reference to the stigmatization of teenage mothers when she attended church:

Ivy: *....sometimes he (her child) was crawling and people didn't want him to touch them as maybe he would dirtify them. Then later I say 'no! Church is for everyone, I have to go church, it's where I feel free. So if people are judging me then it means they don't belong at church. So then I started going back*

The afore-mentioned extract highlights the way that society marginalises these young girls and the way that participants' perceptions changed prior the birth of their baby. Participants' seemed to adopt a more progressive view about attending church and school. Some of the participants' attributed this progressive thinking to the gradual acceptance of community members, whereas others felt that their experiences strengthened them to face these members of society. Although this theme highlights some of the challenges that these participants' encountered from friends, community members and church in terms of being judged. They also encountered challenges around adopted myths that portray them negatively at school. In the subsequent section, the researcher discusses some of the myths about teenage pregnancy.

4.2.5. Pregnancy as contagious

Two interesting themes emerged when participants' discussed reactions from friends, educators and community members. The sub-themes that emerged were:

- Parental disapproval of their child associating with a pregnant girl.
- Educators and learners' perception that pregnant girls make other learners feel sleepy in class.

4.2.5.1. Disapproving parents

Participants' said that a perception widely held by parental figures (including their own prior pregnancy) was that pregnant girls and teenage mothers are a bad influence:

Lisa: *In most cases they think they will be influenced by mothers. Older people believe that when you are friends with someone who has a baby they will give you a mindset that you must also have a baby.*

They therefore disapprove of their children associating and befriending pregnant girls due to this perception. These perceptions were influenced by the negative discourses of teenage pregnancy that is prevalent in media and society (Durkin, 1995). Other participants' indicated that parental concern was also a result of worrying about their daughter's reputation. The concern is if your daughter befriends a pregnant girl then on-lookers will assume that she too must be rebellious, deviant and sexually active:

Sue: *people say 'they (the pregnant girl) is going to tell you to have a baby' because now she is a mother. 'Why do you walk with mothers because some people talk?*

These myths discriminate against the pregnant girl and marginalise her further into yet another area of her life: at school and with peers after school. It is also linked to the discourse that pregnant teenage girls are dirty and deviant and that this will be contagious. This perception (which is informed by dominant discourses) continues to punish pregnant girls by ensuring that she is still excluded from mainstream society. It is no wonder that feelings of isolation recurred throughout their narratives.

Although the afore-mentioned is a dominant construction of pregnant girls in their community, all of the participants' narratives reflected a more progressive view that was in direct contrast to this discourse

Lisa: *Its even the opposite, you will tell them more not to sleep with boys..*

Tandi: *..... you more mature and can give advice to your friends, like 'don't do this', it's a lot of responsibility.*

Participants' said that they often took on the role of an advisor and encouraged friends to abstain from sexual intercourse. They felt that they had learnt through experience and wanted to share their insight with friends. They said that friends often mocked their approach to sex and that their advice often fell onto deaf ears. Furthermore, participants' said that they felt more mature than their friends, therefore experiencing difficulty integrating into social circles especially after pregnancy. This led to further isolation and feeling like a 'misfit'. This feeling that they were more mature and adult-like was also prevalent in their narratives when they referred to their peers as 'kids' of 'children':

Palesa: *you know kids, they think you like sex if you get pregnant*

This role- confusion was also prevalent when participants' interacted with other age groups:

Sandy: *to my mum I am still a child and to lots of people I am still a child but mentally I'm not....I'd say I compare myself to a mother who is 25 years old*

Ivy: *Only when I'm with my friends I have to be a teenager. Than when I'm with my child I have to be a mother, make the rules for him and be his friend.....older people try to put you in the right direction... you have to follow their (her guardian)rules and then everything will get along fine.*

The above extracts exemplifies the confusion experienced by the teenage mother who is in a transitional stage moving towards a more complex and developed individual (Macleod, 2001). She is not a child and not yet an adult but also expected to be both. In this study participants' took on adult-like responsibilities such as taking the child to the doctor, budgeting their finances, cooking, cleaning and making responsible decisions that were in the best interest of the child. These adult-like responsibilities were expected of them and also a way for them to explicitly prove to society that they are 'responsible, good enough' mothers. However 'child-like' behaviour was also expected when participants' were at school and at home in terms of obeying rules and following instructions of their elders. This provides

further challenges for the adolescent mother in terms of finding a sense of identity and agency (Macleod, 2001).

This is not only confusing for the young mother but also forces her to adapt to the different expectations of others in order to feel some sense of acceptance in her 'rejecting world'. It seems as though she needed to create a false self, much like wearing different masks in search for acceptance and a sense of belonging in society. Despite these 'role changes', she is still marginalised! Therefore Clark (1965), was accurate when he said that marginalised people seek love, affection and acceptance perhaps more desperately than others in mainstream society. The subsequent sub-theme will discuss another myth that was widely accepted by teachers and classmates: that pregnant girls' were responsible for making other learners in class sleepy.

4.2.5.2. 'Infecting' others with her sleepiness

Burr (1995) argues that discourses are connected to the way that society is organized and therefore certain discourses appear as truth and others as fiction. A dominant discourse that emerged in the results was educators and learners perception that pregnant learners are generally lazy and tired and that this spreads to other learners in class:

Nancy: *You know after break you come tired because you've had food and you just want to sleep, and they say it's the pregnant girls who are making the whole class sleepy, but now that no one is pregnant when they sleep after break, I am going to ask why is everyone sleeping?*

Tandi: *(educators would say) ay these girls are wearing jackets when it's hot 'cause they've got babies, they making the whole class to sleep*

These extracts allude to the 'bizarre' nature of the discourse that not only implies that pregnant girls are lethargic but also blames her pregnancy for her class mates poor concentration. This discourse is not merely a rumour or possibility but is constructed as truth (Burr, 1995). These extracts also indicate participants' disagreement with this discourse as participants' highlighted the fact that this discourse was not mentioned during the first trimester of their pregnancy but only began once their pregnancy became visible. Nandi's narrative was similar to the others when she said:

Like the time I was pregnant I would sit next to people and they wouldn't say you making me sleep and I know people didn't notice. You know the thing is when you pregnant and your tummy doesn't show, they don't say that you making us sleep but uh if you pregnant and your tummy shows, that's when they start saying you making us sleep, you should be at home and all that.

Building on the growing literature on discourses surrounding teenage pregnancy, we hypothesize that this ideology of 'infecting' others with her lethargy can be explained by a term called 'scape goating'. According to Langa (2007), scape goating is the term used when a person or group is blamed for a multitude of problems for which they are not responsible for. It seems that learners and educators were blaming pregnant learners and teenage mothers for the challenges that they were experiencing at school and in the classroom. Therefore, instead of educators addressing and dealing with issues and areas of difficulty they displace the blame onto the pregnant learner. The pregnant learner is an 'easy target' as according to Langa (2007), this is related to stigmatizing as marginalised groups are often chosen as the focus of blame.

Within the context of the school the researcher became aware that a large number of learners were from poor socio-economic communities and walked long distances to attend school. In addition to this, one needs to take the context of the school (which is located in the inner-city) into account when trying to understand this discourse. Learners' sleepiness could be attributed to various possibilities such as learners' poor diet, exhaustion (as many learners walk to school as they cannot afford transport), the educator's teaching style, lack of motivation etc. Furthermore, learners at this particular school spent their breaks in a quad which is a cemented- un-shaded area and thus it seems logical that learners' would feel tired after spending 30- 45 minutes in the sun. It may be easier for a learner to blame a pregnant girl in class for his/her poor concentration and lethargy as opposed to accepting and disclosing his poor socio-economic needs or his frustration with not having money to buy food during break. These myths are so ingrained into the way that teachers, learners and parents conceptualize and understand teenage pregnancy that this myth appears to be truth (Burr, 1995). Taking all of the afore-mentioned themes into account one must wonder about the psychological implications of these negative discourses on pregnant girls and teenage mothers. Feeling of fear, depression and isolation were briefly highlighted in the preceding sections and will now be discussed in the subsequent section.

4.2.6. Thoughts of Suicide

Meehan (2007) states that the social and biological challenges experienced by girls in early adolescence is greater than for boys and thus girls are considered to be more at risk for depression than boys. One can then infer this to a pregnant adolescent girl who has additional physical and social challenges that are largely influenced by negative discourses. The participants' in this study reported feelings of sadness, depression and isolation when they initially told people the news:

Nancy: *I was very sad and unhappy*

Tandi: *I get home maybe I'd feel so down and moody. I'd be moody and I wouldn't want to talk to anybody*

It was interesting to find that participants' feelings of isolation and depression were always related to way that people negatively constructed teenage pregnancy. According to Parker (1992), discourses play a role in structuring identity of self and therefore based on the stigmatisation that these participants' experienced (as discussed in the prior sections) it is argued that participants' sense of self, their self-worth and their identity at this time was not only painted negatively by others but also internalised by them:

Palesa: *... you start doubting yourself, you think they right*

Ivy: *people are looking at me, they talking about me, 'did you see her, did you see her'. I hold my head up strong but it was killing me inside that they talking about me.*

These extracts highlight the impact that society's negative construction of teenage pregnancy had on these girls, as these dominant discourses informed people's negative perceptions. The response from society toward the pregnant girl was rejecting and unsupportive. This was internalised by participants' who felt that 'nobody cared' about them, that they did not feel 'good enough'. This led to feelings of depression, unworthiness, hopelessness and isolation. This is also linked to an overall sense of disempowerment that was experienced by participants' during their pregnancy, whereby they felt (and still are) feeling marginalised but could not voice themselves. Hopelessness is defined as a desire to escape from what an individual considers to be an unsolvable problem (Meehan, 2007). This feeling of hopelessness was a key factor linking depression to suicidal ideation that emerged as a dominant theme in the study. Six of the participants' admitted to contemplating suicide at the time:

Tandi: *At that time I felt suicidal..... cause I thought I really hurt my mum...*

Palesa: *Sometimes you want to kill yourself...it's best not to listen to them, if you want to go somewhere don't listen to them.*

The impact of others perceptions (informed by negative discourses) is prevalent once again as participants' contemplated suicide not as a result of self-doubt, fear around mothering a child or even the financial implications, but rather in response to the negative discourses that they initially experienced by society, friends and family. The link between these negative discourses and suicide ideation can be understood as: the discourses surrounding teenage pregnancy dis-empowers pregnant girls who are marginalised and became the victims of blame in society. This is in accordance with Fergusson, Horwood, Ridder and Beautrais (2005), who argue that adolescents who feel victimized are at an increased risk for suicide ideation and self-harm. In addition to this, a range of factors such as family, personality and peer relationships influence depressed adolescents' vulnerability to suicide ideation (Ferugason et.al, 2005). Therefore participants' in this study were at an increased risk of suicide ideation, as they reported feeling an absence of support from friends, family and community coupled with an overall sense of rejection.

In a more positive light, with the acceptance and 'warmth' from significant others came a sense of being supported and an evasion of suicide ideation. This corroborates the work of Mehaan (2007) who postulates that a significant number of adolescents who have suicidal thoughts and ideas do not act on these ideas. It seemed that the participants' in this study 'escaped' suicide either through active coping which includes actively seeking some form of support by seeking advice from others or using internal coping (Mehaan, 2007). An extract from Ivy's narrative is used to exemplify seeking support and advice:

I felt like I could kill myself. I think I just listened to my uncle's words you know' don't care about other people, just focus on your family and everything it's fine, it doesn't matter'

Ivy and Nandi used internal coping which is appraising the situation and searching for a compromise (Mehaan, 2007):

Ivy: *...maybe I should kill myself, but I think life is precious. Let me see where I go*

Nandi: *It was hard, I think of not living but I think I have to prove people wrong..... they think I'll never finish matric*

In the above extract Nandi's drew from her negative experiences of being stigmatised and used this as a motivation to continue her schooling and continue living. This is somewhat of a way of coping, as it gears herself up to defeat her opposition. If Nandi gave in to her thoughts of suicide this would mean that she is accepting defeat, essentially proving the very same people- whom she resents for stigmatising her- correct. She would much rather take fight this battle, and earn her victory by proving them wrong.

Pertinent to this theme is the negative impact of these dominant discourses and the effect that it had on these teenage mothers who internalised them and believed it to be true to a certain extent. As a result their feeling of depression, hopelessness and isolation inevitably led to suicide ideation. Therefore, from their perspective (as the marginalised group) participants' made a choice to implicitly 'fight' back by not giving in to these negative expectations of them. Unfortunately the challenges that these young mothers' experienced did not conclude here but continued after giving birth. The next theme will discuss the experiences of these young mothers after giving birth. Both inspiring and disheartening narratives emerge that in combination illicit the private experiences of these young mothers.

4.3. GIVING BIRTH AND LIFE THEREAFTER

After participants' moved passed the first stage of 'getting the news' and as family members gradually moved towards accepting the pregnancy, the teenage mother was then ready to enter the next phase: giving birth. This new phase presented with new challenges for the young mother as well as different ways of coping with these challenges. This will be discussed and illustrated in the following sub themes:

- Choosing a name
- On being a mother
- Child care
- Discourse of Financial Implication and Perverse Incentives

4.3.1. Choosing a Name

The participants' in the study chose names for their baby that had significant meanings for the mother, father and their family. The names chosen included: Koketso meaning 'increase', Amogelang (acceptance), Isamkile (appreciate), Lesedi (light), Thembisile (hope), Zipozonke means gift and Siyabonga (thanks).

The participants did not name their child after their parents or grandparents as is the norm in African cultures but rather chose names that were meaningful and significant to them. For example Amagelang was born into a small family and Zipozonke in a family who spoils her. Furthermore it was interesting to note that these young girls who are consistently faced with negative stigma chose names with positive meanings. Furthermore, it is clear from the chosen names that each name was chosen for a particular purpose and that these names were associated with feelings of gratitude and appreciation for their baby. It is not surprising that these young mothers desired to bring a baby into this world that would not have to endure the challenges that they do, and also hope for them to be part of mainstream society. It was also interesting to note that one of the dominant themes that emerged throughout this study was participants' feeling of being rejected and hence explains one of the participants who named her child Isamkile meaning acceptance. Furthermore, despite the challenges that they endured they still persevere which is reflected in the names chosen meaning 'hope' and 'light'.

4.3.2. On being a mother

Although teenage mothers are dominantly constructed as irresponsible mothers who lack the maturity, knowledge and skills to sufficiently stimulate their child, the girls' narratives reflected a more progressive view of motherhood. This is in accordance with Kruger (2006), who argues that persistent ideologies conceal the different meanings that mothering can have for different women (Kruger, 2006). Within this theme participants' were asked about their personal experiences of motherhood, as well as their perception of the discourse that teenage girls are inadequate mothers. The following sub-themes will provide comprehensive insight into these teenage mothers' perceptions of motherhood:

- Challenges and rewards of motherhood
- Discourse of inadequate mothering
- Where is the evidence?

4.3.2.1. Challenges and rewards of motherhood

The way that young mothers in this study talked about motherhood was: both hardship and reward. In response to questions regarding the challenges of motherhood, the participants' were unanimous in perceiving it as a huge responsibility. They described the challenges of motherhood as self sacrificing, sleepless nights, less time with friends, being efficient with time management skills and often being in a position that demands maturity and tough decision making. Participants' heightened sense of responsibility and perseverance emerged when they spoke about their daily routine (Khalil, 2008). Most participants' began their days at least three hours prior school and began to prepare the baby (bath, cloth and feed) as well as themselves for the day ahead. After school participants' hurried home and sacrificed time with their friends to either collect their baby from day-care or get home early to begin household chores, homework and spend quality time with the baby before preparing him/her for bed. One of the key challenges that emerged was surrounding health concerns of the baby and taking care of the him/her when ill:

- Sue: *...when the baby is sick, yoh!, he don't want anything. He will cry the whole day..... you can't rest!*
- Nandi: *...when she is sick, sometimes she is crying and then I sleep probably three hours*

Linked to the baby's health, the young mothers in this study identified another key challenge: having to make a decision between staying at home to take care of the baby or attending school as usual. Palesa said:

sometimes I had to decide- me not going to school or take him to crèche?

Like Palesa, most of the participants' felt caught up in a double-bind position: Their gut instinct was that they should take absence from school to take care of their baby- which essentially meant that they would be challenging the discourse that 'teenage mothers are irresponsible' and 'not good enough mothers'- but then absence from school would confirm educators and learners perception that she is in fact 'irresponsible' for not attending school (interpreted as being dis-interested). When confronted with this dilemma, participants' considered their baby's best health first:

..sometimes I stay home 3 to 4 days and tell myself 'its fine, I will go to school and work harder after the baby is better' cause crèche won't look after him properly to make him better.

This theme partly corroborates with literature arguing that young motherhood poses numerous challenges that require much compromise (Kaufman, De Wet & Stadler, 2001). However the afore-mentioned challenges are not specific to 'young' mothers or a result of falling pregnant during adolescence, but rather challenges of motherhood in general (Barclay et al., 1997). The challenges that the mothers' in this study experienced: worry about baby's health, making personal sacrifices and having time constraints is characteristics of motherhood in general. Therefore discourses portraying teenage mothers as lacking the capacity to take care of children is proven to be untruthful in this study (Macleod, 2001).

Furthermore, the findings of the study was in accordance with Phoenix (1991) and Rolfe (2008), who postulate that motherhood can be experienced positively and that young motherhood is not always a problem that it is believed to be. Ivy highlighted this point when she said:

People think it's hard, I don't think it's that hard. Sometimes it gets hard but not the way people make it seem! They say everything about having a baby is hard. Not everything! There are good days.

In light of the above extract, Ivy re-iterates that point that people tend to dramatize the challenges that teenage girls experience as young mothers. Although she acknowledges the

challenges she argues that there are also rewards. Participants' were asked about these rewards and their responses included:

- Sue: *I just wait to see him after school, every time. I'm in class I miss him!*
- Sandy: *good thing is we share a special bond*
- Nandi: *You know like just to see her smile you know? You know even though like people talk and you come back home and then she's there, she's smiling, she's innocent, she doesn't know anything, she gives you that thing to say ugh whatever they say doesn't matter. Even like forget about it. You know that fun tickle that when you think of something you get so excited ja.*
- Tandi: *I'm sad or something and I look at my child and you know he just gives me that happiness, I just feel happy.... He gives me comfort.*
- Ivy: *There are good days, seeing the first walk.If I had a video camera that first day he walked I was going to take a film of that first walk*

These extracts exemplify their feelings of excitement, happiness and a sense of fulfilment. They also emphasized having a bond with their child which indicates their exposure (like other mothers) to powerful ideologies of motherhood. These ideologies are used as a measure of comparison of their adequacy as mothers (Kruger, 2006). Furthermore, there was a common sense of achievement and somewhat of a shift from being the 'bad' villain to the heroine who not only 'saved' her child (referring to an abortion) but who is also feeling a sense of fulfilment in her role as mother. Participants' also spoke about their baby with a sense of pride:

- Tandi: *he is very intelligent and a fast learner*
- Sandy: *....she is very playful, very clever. She is only one and started balancing and stuff..*

This sense of pride is indicative of a sense of achievement as her child develops and flourishes into a happy, healthy and intelligent human being. Their happiness at this stage challenges the depiction of teenage mothers as depressed and failing to meet their child's needs. Furthermore, the narratives of these participants' reflect that these young mothers truly experience the challenges as well as the rewards of motherhood. Furthermore, there was a sense that motherhood allowed these young girls to take up respectable and conventional positions in relation to adult femininity by contributing and caring for their child's life. It may also be empowering as it gives the young mother a sense of control and power over the

child-rearing process (Kruger, 2006). In the subsequent section, the participants' reject the dominant perception that argues that teenage mother are not good-enough mothers.

4.3.2.2. Discourse of Inadequate Mothering: No-one is Perfect!

In this sub-theme, participants' were questioned around their thoughts regarding discourses pertaining to teenage mothers. Two dominant themes emerged:

- *acknowledgement of the irresponsible 'other'*
- *teenage mother versus adult mothers*

4.3.2.2.1 Acknowledgment of the Irresponsible 'other'

Common to most participants' responses to the question: *What do you think of people's perception that teenage mothers are irresponsible?* Was a sense of detachment from their perception of irresponsible mothers'. Participants' spoke about the irresponsible teenage mother as a 'matter of fact' that is completed unrelated to her situation:

- Tandi: *They not good because they are leaving the children with their grandmothers and go partying you know all those things... but not all mothers are like this.*
- Sue: *Well they are um mothers who are irresponsible, they tend to kill their children and then they are some who love and appreciate their kids and then they take responsibility of that ja.*
- Sandy: *Well there are some teenage mothers that are like they just make a child and then afterwards they'll abandon the child you see. But then there's other like me like I really love my child and I'd never do such thing whereby you know not like spend time with my child or pay attention to him.*

The above extracts allude to the way that teenage mothers 'othered' the irresponsible teenage mother. These extracts also illustrate the common view that this negative construction of teenage mothers cannot be generalized to all teenage mothers and that not all teenage mothers are irresponsible. It was interesting to note that participants' (like mainstream society) used dominant discourses in their narratives to 'other' the irresponsible teenage mother. The discourses used included child abandonment, irresponsibility and perverse incentives. A possible explanation for of these young girls succumbing to prevailing discourses can be

understood as a sign of the very powerful nature of these discourses which turns the subjects of marginalization against the self. What this essentially means is that the discourses are so deeply entrenched in society that the marginalized (teenage mothers) internalized this so that it becomes truth and part of their identity. Alternatively (or maybe concurrently) by ‘othering’ the irresponsible teenage mother, it positions the speaker on the opposite side of the spectrum of badness and therefore becomes a form of distancing or dissociation.

Palesa took it further by saying that she believes (from her own experience) that teenage girls often learn irresponsible behaviour from their mothers whom they either imitate or learn from. Palesa is essentially challenging the notion that being an adult means being responsible. From her argument one can deduce that she is agreeing to the notion that some adolescents are irresponsible and highlights the fact that this could be learned behaviour from her adult irresponsible mother. This will be discussed in more detail below:

4.3.2.2.2. Teenage Mother versus Adult mother

This theme ‘teenage mother versus adult mother’ emerged in response to the question: *Do you think adult mothers are better mothers than teenage mothers?* As opposed to the previous research question, this more directive question evoked a strong reaction from participants’ who were in complete disagreement to the discourse:

Ivy: *I don’t understand why people say she struggling because she is a teenager, why don’t they say she is struggling because she has a baby, not because she has is a teenager. Everyone who has a baby and who is new at it has to learn. I don’t think when you have 2 or three children you struggle as much as the first baby. Although children are different and you still going to struggle ...not all children are going to be the same.*

Sandy: *So I think these people they want us um teenagers to be fit mothers like them since they adults. They want us to be perfect ja.*

In the above extracts Ivy and Sandy are expressing their frustration regarding discourses that create an ‘ideal’ adult that is used as an unrealistic measure of comparison for the adolescent mother (Boult & Cunningham, 1992). Participants’ rejected this notion and referred to this ideal adult as the ‘perfect’ mother whom they cannot compete with because “no one is perfect”. The implication in this discourse - that older mothers are better equipped with skills to be better mothers- is contradictory to the dominant discourses of mothering being natural

and instinctive (Macleod, 2001). Ivys' view in the above extract challenges this notion, as she argues that the challenge of motherhood is not age-specific but rather child-specific. She also challenges the discourse that adolescent mothers are inadequate, by arguing that having a first baby is challenging for a new mother irrespective of her age. She also argues that an adult mother who has more than one child may have the experience and skills required but may give birth to a 'difficult' child who would inevitable be challenging. In light of Ivy's argument, the researcher further challenges the discourse that older mothers are better mothers due to their increased experience by posing a question: Would an adolescent mother of two or three children still be subject to these discourses considering that she has the experience and skills required to be a good mother and would a 17 year old married girl be subject to this discourses? Another theme that emerged as exemplified with an extract from Nandi's narrative is that teenage mothers in this study did not view themselves as being too young for motherhood:

Nandi: *I don't know why (people say this). I need to talk to someone who thinks being a teenage mother is bad so that I can understand their side*

Participants' did not view themselves as being inadequate mothers due to their age. Furthermore, based on the themes that occurred throughout the results, one can argue that it is in fact the stigma that is associated with teenage pregnancy that affected them rather than being a young mother (Macleod, 2001). In conclusion the results reveal that participants' completely rejected the discourse that adult mothers are better mothers than teenage mothers. They also took it further by providing an alternate perspective. The theme that follows will discuss an alternate view of teenage mothers. This is unique to the study, as it provides the subjective viewpoint of these teenage mothers.

4.3.2.2.4. Teenage mothers are better mothers

According to Parker (1992), discourses are located historically and therefore change, develop and connect with other discourses over time. Participants' went beyond merely disagreeing with the discourse that: '*teenage mothers are not 'good enough' mothers*' but also reversed the discourse and provided an alternate perspective of teenage pregnancy, this is exemplified with an extract from Palesa's transcript :

I want to protect and spoil my child you always wanting the child to look nice, you want people to say nice comments and say that 'oh your child looks cute and all that, your child is dressed up nice!they know I am a good mother because she never gets sick.....So, like you spoil your child more than a mother who's older.

Palesa's use of the word 'protect' indicates that she wants to protect her child from the negative stigma that she experiences and that she has more incentive to spoil her child for two reasons: (a) she is more concerned than an older women about ensuring that her child is in good health as she is constantly surveillance by people who are judging her mothering skills based on her child's appearance, (b) the developmental stage of adolescence is believed to be an age where image matters (Hook, 2002). Therefore Palesa's age would positively contribute, as her concern for her child's image-which is a representation of her as a mother-would be more important. Furthermore, Ivy argues that younger mothers have more time than older mothers:

Ivy: *the older people don't have time for children. I have the time, I make three hours for him. Now with older women and wife and husband, the women and husband comes home late to cook and no time to talk and laugh but I have the time to talk and laugh for 3 hours. He tells me about his day at school and what he ate.*

Ivy argues against the ideology that a conventional family is best for the child. If one equates good mothering by the amount of time one spends with the child (that creates a bond) than Ivy argues that a teenage mother would be better suited than a working mother or a working married mother. In South Africa and postmodern society there is a shift away from the notion that a good mother has to stay at home towards a more progressive view that: working mothers can also be good mothers (Burman, 1995). One then wonders why teenage mothers are still stigmatized when Ivy in fact argues that she has more time to spend with her baby as she has less responsibility in comparison to the ideal postmodern married working mother would? This study draws inspiration from the fact that discourses are replaceable by new discourses and thus hopes that this research will build on the growing literature of teenage pregnancy and gradually replace old discourses with these new ones.

4.3.2.3 Where is the evidence?

Angered participants' felt that people made assumptions without sufficient basis. They held the common belief that discourses were not evidence based and thus informed by ignorance:

Nancy: *So it's what people think and they say it in a way they see it not the way I see it*

Lisa: *some of the teenage mothers become more clever after giving birth (work more diligently), but people always talk, whether you poor, whether you rich, whether you pregnant, not pregnant they talk!*

Sue: *if a person can just comes to you and says (Sue) is this and this and this, how do you handle this and this? how do you feel about this?*

These extracts highlight these young mother's feelings of disempowerment and their desire to be heard. These dominant discourses are larger than them, and therefore they not only marginalising them but also disempowering these young girls who feel as if they have no control over the way that society portrays them. These young mothers are constantly subject to stereotypical assumptions and generalizations (informed socio-political agendas as a macro level) that are taking away a personal sense of control over their own life. Sue highlights the extent to which discourses are misinformed and that despite her efforts to prove that she is worthy of being accepted in mainstream society (by being a responsible mother and student) she is still marginalised:

'If they could take that one minute and come to me and ask me and understand, then they will stop talking!!'

In the above extract Sue makes reference to people's ignorance when she says that if people were aware of her narratives as well as her experiences and knew her as a person (not as a deviant teenage girl) they would realize that she is in fact a good person who is worthy and responsible enough to be a part of mainstream society. Her participation in this study may have- on some unconscious level- been one of her first steps to finding her voice and being heard. In conclusion, these young mothers were marginalized socially and discursively for falling pregnant, thereafter they were further marginalized through dominant discourses of teenage motherhood that position them outside being a good mother and as undermining the traditional norms. The results of this study reflect that the teenage mothers resisted this imposed position of being 'irresponsible teenage mothers' through challenging these discourses that assume irresponsibility and inadequacy and argue that teenage mothers are in fact better mothers. The following sub-theme will discuss the financial implications of

teenage pregnancy with specific reference to the discourses surrounding teenage mothers and perverse incentives.

4.3.3. Discourse of Financial Implication and Perverse Incentives

4.3.3.1 Financial implications

Girls in this study acknowledged the expense involved with having children and said that they had to budget their money more carefully to factor in their child's needs. However, there was no evidence or slight indication of their child causing poverty. This is contrary to dominant discourses that imply that teenage pregnancy causes financial stress and long term low socio-economic status. In direct contrast to this, Nandi said that she lives comfortably and that her daughter 'is too spoilt' and not deprived of anything. Whereas Lisa said her family experienced financial difficulty since her father lost his job 5 years ago. The findings are in accordance with Phoenix (1991), who argued that there is a high possibility that financial constraint may have already existed prior the conception of the baby and that poverty and financial constraint is better accounted for by the broader political, social and historical context of the country (Pallas et al., 1989). The rest of the participants' said that they budget their spending money and do not spend on unnecessary items:

Lisa: *I have to sell to make money to come to school. Like I sell steel wool and scrape pot.I go house to house selling them on weekends...*

Ivy : *I have to plan... I put my pocket money away so I can pay for my child's transport or you know Friday is R2.00 to wear soccer t-shirt at creche.*

The above extracts allude to the sacrifices that these teenage mothers made to ensure that their child's needs are met. This heightened sense of responsibility and perseverance re-surfaces as a prevailing theme in the narratives of these young mothers. This heightened sense of responsibility and perseverance to attend school is also contrary to the discourses that assume that pregnant girls are unlikely to complete school, and therefore likely to be dependent on others financially (Durkin, 1995).

4.3.3.2. Perverse Incentives

The findings in the study is contrary to the widespread belief in South Africa that social grants are perpetuating and encouraging teenage pregnancy and that adolescent girls are deliberately falling pregnant to receive this financial support (Makiwane et al., 2006). The findings also provide evidence against the perverse discourse that girls fall pregnant to receive social grants (Makiwane et al., 2006). Results of the study reveal that five of the participants' did not apply for a grant and of the remaining three who were receiving the grant, only one applied for it immediately after birth. Lisa applied for the grant one year later and Ivy three years later. When participants' were asked about waiting so long their responses were:

Ivy: *I didn't want people to think that I had a baby for the grant money.*

Lisa: *I don't want people to think I depend on the grant*

The findings were contradictory to the discourse that teenage mothers deliberately fall pregnant to receive the grant (Macleod, 1999). In fact this discourse withheld participants' from receiving their grant. The afore-mentioned indicates the extent to which this 'myth' affected these young mothers as they refused or prolonged their entitlement for a social grant in order to prove to others that they did not have ulterior motives. When discussing this discourse Tandi said:

I don't think I would ever do such a thing, just make a child for the grant money, a child is a lot of responsibility you know!

In this extract, Tandi indicates the bizarre nature of the discourse as the responsibility of a child far outweighs the minimal sum of money that is provided by the grant. In fact participants' who received the grant said that the money is minimal and that is '*all you can buy is pampers or maybe just one tin of milk that's all it's not enough.*'

Therefore, the dominant discourses that proclaim that teenage mothers intentionally have a baby to receive a minimal amount of grant money are untruthful (Makiwane et al., 2006). The researcher argues that it is not the teenage mother who is perverse but rather the implications and assumptions of this discourse that is perverse! In addition to this, teenage mothers in this study highlighted the importance of familial support when confronted with these discourses and identified this support as playing a pivotal role in continuing their schooling. The following theme will elaborate on this under the sub-theme 'a place called home'.

4.4. BEING AT SCHOOL

Cunningham and Boulton (1996) argue that teenage mothers are faced with challenges such as: social isolation, abuse, adoption, child abandonment, health concerns, financial constraint, poverty, stigma and educational challenges. He therefore argues that meeting the academic and social demands at school could further lure these young mothers into stressful and challenging situations (Bolton, 1996). Some have even argued that academic achievement is unattainable (Prater, 1992). Mainstream literature however overlooks the possibility that many teenage mothers may have already been in stressful environments, experiencing social problems and performing poorly at school prior to their pregnancy (Durkin, 1995).

The results of this study indicate otherwise as all of the participants' remained at school and were performing well in their academic work. Literature links the return of teenage mothers to school to the introduction of the policy in 1996 (Kaufman, De Wet & Stadler, 2001). However, this academic attainment did not mean that their challenges ended here. This section will take the reader through the personal experiences of young mothers and their perseverance towards a brighter future. This will be discussed under the following sub-themes:

- A place called home
- Educators reaction
- Education-a right or a privilege?

4.4.1. A Place Called Home

Before discussing being at school is deemed important discuss the finding that participants' in this study returned to school after giving birth, participants' mothers played a pivotal role with regards to childcare. This familial support is required for the teenage mother to return to school (Chohan & Gina, 2009). Throughout the interview and in responses to questions regarding support after birth, participants' made reference to the invaluable support that they received from family members. In South Africa many African communities adopt a collectivist approach as opposed to the individualistic Western approach (Mkhize, 1999). Therefore it is not uncommon for extended family members and members of the community to raise children who are not their own. There is an implicit (unspoken) understanding among family and community members that by extending assistance to another, one creates a sense

of community. According to Mkhize (2004), parental responsibilities may also be assumed by anyone through the practice of collective rearing of children. This is informed by an understanding that the child will eventually grow up and contribute in a way that will enhance the life of the community as a whole. These cultural beliefs were evident in the actions of participants' mothers and grandmothers' who took care of the baby when participants' were at school. Lisa said:

my mother left her job so I can go to school!.

From this African perspective one can understand Lisa's mother's decision to leave work as somewhat of an inter-generational norm to take care of grand children, rather than a self-sacrificing favour (which would be a Western understanding of her decision). This norm emerged as a dominant theme as the results indicate that the mothers' of six of the participants' assumed childcare responsibilities and the remaining two participants' sent their children to day-care in the mornings. The way that participants' talk about their mothers taking care of their babies also indicate the 'normality' of this inter-generational norm. Furthermore, the finding of the study provides evidence for this cultural norm as three of the participants' were under the care of their grandmothers when interviewed.

According to Siegar (2007), this high level support could be explained by collectivist cultural beliefs that view this arrangement as natural and the right thing to do (Kruger, 2006). However Kaufman, De Wet & Stadler (2001) argue that parental support for teenage daughters to continue schooling may be motivated by the notion that educated girls bring more brides wealth. Whilst this may be a possibility, one needs to be cognisant of the fluidity of cultural beliefs as well as the movement away from cultural beliefs to a more westernized worldview. Furthermore, teenage girls living in urban areas, like the participants' in this study were opposed to marriage and did not think of marriage in economic terms (Kaufman, De Wet & Stadler, 2001).

In this study there was also evidence of a movement away from this norm toward a more western conceptualization of childcare. Therefore, a movement away from the norm that the primary responsibility of the baby rests on the grandparents (who resided in rural areas whilst the baby's mother would work and provide financially) toward the teenage mother taking more of an active role in childcare:

Sue: I make sure when I am at home I spend quality time with him..to bond

This may be attributed to the fact that participants' (being the next generation) are residing with their parents in urban areas and thus do not have to travel long distances to visit their baby. However, this movement may also be influenced by acculturation which is largely adopted in urban areas and which is blamed for breaking down traditional cultural beliefs (Kruger, Lifschitz & Baloyi, 2007). This is evident in both extracts: Sue emphasizes 'quality time' which is a popular discourse in western society (influenced by psychological theory of adequate mothering) and Lisa takes her mother's (individual) feelings into consideration rather than assuming her mother to be primarily responsible for childcare (Kruger, 2006). Results indicated that all of the young mothers took care of the child after school to relieve their mother of what they in fact believed to be their responsibility and to bond with the baby.

Familial support also served as a buffer against negative discourses in society:

Nandi: *After school, when I cry my mother she says don't worry for nobody. People talk when you do good and people talk when you do bad, I feel better.*

Nancy: *If my family accept it, I don't care about any other people, "... I don't care what everyone says, my family supports me!*

Sue: *As long as my family understand, I don't care for nobody!*

In these extracts participants' spoke about familial support as somewhat of a 'shield' that protected them from the harsh, rejecting world. It also indicates that these teenage mothers felt protected by their families who provided comfort. The repetitive use of the word 'my' implies a sense of belonging which she only experiences with her family at home. As discussed earlier Nancy's 'no care attitude' serves as a defence mechanism for the underlying hurt that she experienced when people rejected her, however in these example they indicating that they have something to hold on to and to 'protect' them from this hurt of others : her family's support.

In corroboration with literature, participants' placed emphasis and high value in familial support (Alfe, 2008; Khalil, 2008; Sieger, 2007) as they described it as 'life saving'.

Ivy: *without her (grandmother), I would give up!*

Lisa: *if like you weak and you've got nobody to support maybe your parents, you've got nobody to talk to about uh how you feeling and all that it can get to you it can yoh!(sigh) it can make you lose yourself let me say. You can have a low self-esteem you know you isolate yourself from people, things like that.*

Participants' further highlighted the importance of familial support that served as a protective factor that buffered teenage mothers' anxiety and stress. This in turn will positively influence her relationship with her baby and make it easier for her to adapt to her new role (Paskiewiz, 2001) as Lisa said that lack of support causes unhappiness which *'will affect the baby too.'* . Therefore results of study build on the growing literature that emphasizes the importance of support and its association to positive outcomes from teenage mothers. It is important to discuss first as it was this familial support that assisted participants' to go back to school.

4.4.2. Educators Reaction: You know educators can be mean!

Educators' unresponsiveness emerged as a dominant theme when participants' were asked: *What was the educators' reaction toward you pre and post birth?* A common perception was that educators were not aware of their pregnancy:

Lisa: *They never say anything. They only notice when you told them.*

Tandi: *Educators' didn't seem to notice or were acting like they didn't notice.....I told the school counsellor to let the educators know..um but then when I came I thought that maybe the educators are going to be asking me 'okay Tandi, you pregnant?' but they acted like they can't see anything..."*

Palesa: *...educators didn't know.... even now they didn't know. Even if they know they don't talk to me.*

From the afore-mentioned participants' experienced their educators as either ignorant or intentionally ignoring them. It is highly unlikely that educators were uninformed as all of the participants' attended school between the seventh and ninth month when their stomachs were visible. In the above extracts participants' held this perception as educators did not acknowledge their pregnancy. Even Tandi- who reported her pregnancy to the school counsellor- doubted whether educators were aware of her pregnancy. A possible explanation for this 'deliberate ignorance' was that educators were in denial about the pregnant girl in their classroom as it was a poor reflection on the school and on them. Educators may have also felt that by acknowledging the pregnant girl, it would imply acceptance which is not the message that they intend to communicate to these young girls and their peers.

According to Bronfenbrenner (1979), belief systems at this higher order level infiltrates into the other systems and influences and interacts with other levels. Therefore, negative discourses that are prevalent in the 'Measures for the Prevention and Management of Learner

Pregnancy' policy (discussed in the literature review) that is implemented at government schools infiltrates into the lower order systems (such as the schools policy) that in turn saturates to the educator and learners. This is evident in this study as educators in this school seem to adopt the same stance that the 'Management and Prevention of Learners Pregnancy Policy' does. The stance that this policy takes as discussed in the literature review is: they are 'obliged' and compelled to uphold the pregnant learner's right to an education, but clearly do not condone and accept them. This approach of 'acceptance' (or rather faking acceptance) but stigmatizing her is essentially communicating rejection to the teenage mother. The effects of this were reflected in respondents' feelings of being unsupported and isolated even further. This message of 'rejection and un acceptance' continues post-birth except that it is not in the form of silence, but rather by 'making an example of her'.

After giving birth participants' experience of educators was much more punitive and insensitive:

Ivy: *When I ask to go toilet, this one educator said 'because you have children at a young age that you can't hold your urine'. I was shocked! In front of everyone! How can she say that? She doesn't have the right to pass a comment like that!*

Sue: *They say they didn't expect this from me, 'you have no future and no dignity!' ...I don't like because they say come back to school but when you come back they talk.....*

In the extracts above, the dominant discourses surrounding teenage pregnancy is evident. Ivy's narrative was also used to represent participants' experience of educators as insensitive, not only for judging them but for humiliating them in front of their peers, hence using them as an example for other learners to learn from. The argument made is that although policy allows them to return to school, teachers seem to have been ill-treating and humiliating them. This policy does not seem to changed teachers' perceptions (due to its own discrepancies) but perhaps angered them for feeling compelled to accept the young mother into class. The afore-mentioned indicates that educators acceptance of teenage mothers' at school is merely an obligation.

Educators may also feel that pregnant learners are feeding into the general media assumption that teenage pregnancy is a 'black' problem and that pregnant girls are contributing to the country's poor socio-economic status, and therefore further entrenching their community into poverty (Trent & Cowder, 1997). This is due to the fact that child development experts who contribute to these discourses are likely to be white middle-class and base their studies on a

similar group, therefore perceiving mothers who are poor, single, young and back as pathological (Kruger, 2006). It is important to take cognisance of the fact that this school consists of only black learners who are predominantly from poor- socio economic communities. In light of this, the experience of poverty is a reality for these educators and learners and therefore these dominant discourses that 'blame' teenage pregnancy for poverty could evoke harsh responses from individuals (such as the educators) who 'buy' into these discourses:

Lisa: *Mr X (educator) always made very bad comments, like when there was a textbook to buy and I don't have it he would ask if I got my grant money to buy the text book. Infront of the class. I don't like those comments!*

Nandi: *Mr Y (educator) he acts like off-ish and he makes example of you in class. When it comes to life orientation we talk about teenage pregnancy and emphasize 'you have children at young age and you bring poverty into your home.' She says things that hurt us. But she is teaching us but when you look at it she is talking to us but not directly.*

The above extracts highlight the prevalence of the discourses that construct teenage pregnancy as a social problem in educator's communication with learners. These discourses have been discussed earlier and are therefore recurring themes that present similar challenges (as prior giving birth). It is unfortunate that for these young mothers who continued to experience judgement and stigma in almost every area of their lives (social interaction with others, community, church, friends, extended family and now even school). These discourses go deeper than merely stigmatizing teenage mothers and marginalising them, but also maintains an exploitive power dynamic between learner and educator. An educator holds a more powerful position for (a) being in a position of authority to infer knowledge to adolescents regarding morality and (b) being perceived as a rational adult who is responsible (Macleod, 1991). This power dynamic is maintained not only by the educators but also by the participants' in the following way:

Ivy: *I want to ask her but think let me leave it....,, she is an elder and she knows right from wrong.*

Sue: *like even when you are going to tell them (confrontation), they say she is disrespecting us and give written warnings.*

Ivy explains her inability to express her feeling to the educator as a conformation to cultural beliefs and norms that inculcate respect for elders. Therefore they viewed educators as parental figures with wisdom and knowledge. It seems that this dynamic was abused by educators who would also then be expected (as parental figures) to treat their learners as their own children and therefore take their best interests into account. Considering that educators are from similar cultural and socio-economic backgrounds and parents themselves one would expect more empathy and understanding from them.

None of the participants' confided in an educator, as the overall theme was that they did not have sufficient trust in them. One needs to acknowledge that not all of the educators were unsupportive and that two of the participants' received some form of support. Ivy said that one educator gave her baby clothing in winter, and Nancy felt supported by teachers who empathized with her when she returned to school after being in a coma prior the birth of her baby. Taking the afore-mentioned into account one can understand the hesitation that participants' experienced when deciding whether to tell educators or not. Educators' reactions coupled with the reactions from friends, community and church members led these teenage mothers to further isolation and negativity towards going to school.

According to Khalil (2008), the school environment and educators support plays a pivotal role in assisting young mothers with adjustment difficulties and gave her a sense of value and acceptance. Unfortunately the young mothers in this study did not feel supported:

Nancy: *I hated school, I hated everybody, I hated myself!.*

Tandi: *'nobody cares for me'.*

Nandi: *they don't respect you anymore*

Participants' reported feelings of hurt, anger, frustration and depression. Sue said that she cried and wrote in her diary when she got home from school, whereas Ivy said that she preferred being left alone. Whilst they all dealt with these feeling of hurt, anger and frustration in their own way, they seemed to choose isolated activities.

It is interesting to note that when these young mothers initially found out that they were pregnant, they were told that their future is ruined. The perception was that teenage pregnancy negatively affects one's academic performance and education. In this study it was not the pregnancy, the baby or the financial constraints that evoked feelings of 'giving up' on

their dreams but rather the stigma associated with teenage pregnancy that marginalised them in society.

4.4.3. Education- a right or a privilege?

Unlike many other developing countries, pregnant school girls in South Africa are allowed to return to school. This is done with the intention of educating more females and therefore creating more opportunities for them (Kaufman, De Wet & Stadler, 2001). Participants were asked about their opinion regarding teenage mothers attending school with pertinence to their rights to an education. A common opinion that participants' held was that an education is important and that teenage mothers must attend school. Lisa said:

It is not the end of the world! They have a right to come to school and have a life ahead!.

Another common theme that emerged was the implication that school kept the mind active. According to Sandy and Sue, an idle mind is 'risky' as 'you could damage yourself'. By this participants' were referring to suicide ideation that was discussed earlier in this chapter. Furthermore, participants' viewed education as a means toward independence, a better future for themselves and for their child. This is exemplified by Nancy who said:

You want to work for your child? you don't want to depend on your parents. School is a good thing. If you sitting at home people won't help you.

Nandi felt strongly about encouraging pregnant girls to attend school, she said:

You can study, you can come to school pregnant, it's not like you can't walk and you can't think. cause a pregnant woman has a more creative mind and so school is fun, you can think out of the box and you can be good to your child..... there are school holidays where you can sit and hold and bond and do all that.

In the above extract, Nandi remains cognisant of the discourse of being a good enough mother but did not buy into the discourse completely. She highlighted the argument that a mother needs to bond with her child but then countered it by implying that there are ways of working around that. Participants' repeatedly said that education is a 'right' in the interviews; however the content of their narratives implied that they in fact felt that it was a privilege. Some of these young mothers had to travel long distances, wake up much earlier and sell items on weekends to attend school. Furthermore, once they fell pregnant they considered education as a privilege in comparison to the previous generations who did not have this

opportunity. Their physical presence at school indicates that they were exercising their right to an education, but their actions and thoughts around this topic is that of a privileged person. Their perception of education as a privilege reflected in their academic performance as well as their attitude towards school. This will be elaborated on in the subsequent theme.

4.5. RISING BEYOND THE STIGMA OF BEING A TEENAGE MOTHER:

“Picking up the pieces and moving on”

Despite all of the afore-mentioned challenges that these young mothers encountered, they still managed to ‘rise beyond’. This theme draws from the content of other themes and participants’ narratives throughout the interview to illustrate that teenage pregnancy is not always and only associated with negative outcomes. This will be elaborated on in the following sub-themes:

- Life after the baby
- Goals and Aspirations
- Academic performance
- Telling my Story

4.5.1. Life after the baby

This theme emerged in response to the research question:

“If you were to compare yourself before the baby and after the baby, has anything changed?”

Participants’ responses highlighted a heightened sense of responsibility, high aspirations and perseverance in terms of attaining their goals. The subsequent sub-themes will discuss these findings in more detail.

4.5.1.1. The positive Impact of teenage pregnancy: How often have you heard this?

Participants’ said that when comparing them pre and post pregnancy, the biggest difference was their heightened sense of responsibility and maturity that influenced the way that they interacted in their social groups. In addition to this, they also had less time to interact with friends as oppose to pre- pregnancy when they spent most of the time with their friends:

- Sandy: *Well before I was never indoors. I was always outdoors... I was with my friends, I was too wild and spent most of time with my boyfriend instead of my family. Now I am always indoors with my family. I am done with the bad things I used to do in the past.*
- Nandi: *I used to like going to parties, friends, peer pressure you know. But now I am more mature.*
- Thandi: *I am wiser now.*

These examples highlight the accelerated maturity and responsibility of these young mothers. These are positive characteristics that seem to be absent in discourses and literature surrounding teenage mothers. Participants' said that they learnt from their experiences and that having a baby gave them a new positive perspective on life. It also made them reflect on their future as well the future that they wanted to give to their children. Young mothers in this study spoke about not being as naive about issues regarding sex as they previously used to be. Therefore, not giving in to peer pressure as easily as they previously would have:

- Tandi: *..now I'm more mature. Like my friends can't easily tell me to do something I don't want to do.*
- Ivy: *..back than I didn't care about AIDS, now I must care!*

It is also worth mentioning that there was a sense of acceptance from participants' regarding their role of being a mother. There was no evidence of malicious feeling of envy or jealousy towards 'child-less' peers as it was alleged in the literature. These teenage mothers did not regret having their baby as they felt a sense of pride and personal growth in this experience. Although they often felt as if they did not 'fit in' with friends, they still resisted peer pressure as they said that they had more insight than their 'child-less' peers whom they experienced as naive and immature. Participants' had the mindset that their current situation was merely temporary and that they needed to get through this rough patch at school in order to attain their goals. The following section will discuss participants' goals and aspirations.

4.5.2. Goals and Aspirations

In society young mothers are often seen as members of an under-class with different moral values from mainstream society and are therefore considered as a threat to the nuclear family (Rolfe, 2007). The accounts of the teenage mothers in this study suggest that this is not always the case. When participants' were questioned around their aspirations, career choices and goals for the future, a common theme that transpired was their perseverance and motivation to reach their goals that they believed distinguished them from their peers.

The findings of the study indicate that the participants' who were in Grade 12 during the time of the interview had already decided on a career choice and contacted the relevant tertiary institution regarding their careers. Whereas the participants' that were in lower grades (grade ten and eleven) were still narrowing their choices down and vacillating between two or three different careers. Their career choices included psychology, travel agency, fashion design, commercial law, media, business management, chef courses and information technology. When participants' spoke about their career choices, it was evident (from the amount of detail and research that they did) that they had given their career choices a considerable amount of thought. Factors such as academic results, subject choices, personality profile, fees and transport arrangements were taken into consideration. One of the teenage mothers had already been accepted at a university and three others were waiting for a response from the tertiary institution. The overall sense was that of confidence, positivity and perseverance. Only one of the participants' was uncertain about meeting the academic requirements for university entrance but the rest exuded with self confidence and surety. These young mothers aspired to become career women so that they could support their children. This confirms their growth and clear sense of future aspirations. This is also linked to their academic performance as participants' felt that schooling was a stepping stone towards attaining their goals. A discussion of their academic results will follow.

4.5.3. Academic performance: *"I have to prove to people that they are wrong about me!"*

In this study participants' academic performance was linked to their heightened sense of responsibility as participants' used their schoolwork to persevere towards these goals and their academic performance to measure their progress:

Ivy: *Education is the key to everything now a days. Without education you can't get anywhere. I want to be educated as much as I can so I can have a brighter future for me and my son.*

Findings of the study revealed that participants' were highly motivated about school completion and achieving their goals. The mere fact that learners continued schooling even though they were stigmatised and marginalised provides some insight into their levels of motivation. Participants' exuded with confidence, perseverance and a sense of pride when talking about their academic performance:

Sue: *I have confidence in myself, I will make it through life.*

Nancy: *So far I did really well at school.*

The young mothers in this study were experienced as considerably different when discussing academics as opposed to the rest of the interview. This was most certainly an area that they felt self assured and confident in. This is illustrated in the extracts above and Lisa's extract below:

Lisa: *...my tests marks this term is so good, the marks are perfect... last year I was a bit playful, but last term I worked really hard!*

Participants' high levels of confidence when discussing this area could be attributed to the fact that this was one area of their life in which they were in control of. This is also an area in which they were doing 'better' in comparison to some of their peers leading to an alleviated sense of confidence and achievement: therefore reclaiming a sense of power. This is also linked to the fact that none of the participants' failed or repeated a year during their pregnancy or after giving birth even though they all took a period of approximately 10 days to 35 days leave. Therefore these finding is contradictory to the dominant discourses that associated teenage pregnancy to poor academic performance (Prater, 1992). Sue was one of the participants' who spoke with pride when she said that although she missed tests during her absence - a period of ten days- she still managed to passed all her subjects and attain higher marks in mathematics than her colleagues:

My maths marks were fine because I passed with fifty percent. Then I was shocked when I see my maths results because some of my classmates they marks were like 19%, 16%.

This de-mystifies the dominant discourse that teenage pregnancy affects young mothers' academic performance. Nandi related a similar experience:

Yoh, I missed school for a month and two weeks and then I came back the same day we writing our first exam. I found out on Sunday that we writing on Monday.... I called friends to get what to focus on and focus on studying the whole night..... I passed

The above extracts indicate the added effort that these young mothers put in to catch up on missed class work that further highlights their sense of responsibility and hard work. Furthermore, Nandi excelled above her classmates- indicating that she did more than what was required of her.

This is significant for the young mother who reclaimed some of their power back from the very same people that took it away from them. This goes beyond a symbol on a report card as it is in fact making a statement to the classmate who performed lower than them, the parent (of her classmate) who said that they are a bad influence, the teacher who implied that other learners are 'better' than them and the community who is adamant that they will not complete school let alone achieve better than her 'child-less' classmates. It is no wonder that these girls exhibited such confidence and rightfully so. Given their added responsibilities at home and added challenges at school (being subject to stereotypical beliefs and assumption), this achievement needs to be given its due credit.

Another prominent theme that emerged in these young mothers' narratives was a sense of perseverance: a sense of continuing, despite difficulties and challenges.

Lisa: *I told myself that everything I do I have to achieve*

Sue: *I know myself, I don't give up!..... I have time for my baby and I have time for myself. I do give my baby some time but when its time to go and study, I go!.*

This quality of perseverance is a character strength that all participants' displayed. They had varying reasons that included: proving people wrong, fulfilling a late parents wishes, providing a better future for their baby and lastly but also importantly proving to themselves that they were better than what society portrays them to be. There was also as an implicit comparison with 'childless' peers as it seems that these young mothers felt that their 'child-less' girlfriends lacked this motivation and perseverance that they had. They attributed this feeling of 'rising beyond' and above the challenges and stigmatisation to their new perspective of life and with the aim of reclaiming their position in society.

Ivy: *I am working harder and aiming higher for my marks.*

Palesa: *I told myself that..... that life not end here. I have to carry on with my studies.. don't give up..... one day own a mansion and a car.*

Each participant had their own unique experience that indicated their high levels of motivation and determination. For example, Lisa's days began at 4am on week days and most of her weekends doing door-to-door sales to make it through the next week. Whereas Sue spoke about experiencing high stress levels in the final trimester of her pregnancy due to health concerns. Sue said that she nonetheless attended school (with measles and ready to give birth anytime) to write her final year examinations. Others spoke about dreading school and facing friends and educators who made them feel as though they did not belong. Yet they persevered and continued schooling. These examples are indicative of the high levels of commitment and perseverance that these girls had in order to achieve their goals. This also links to the high value that they placed in education and motivated by that the notion that an education may be a way to redeem themselves and all that they have lost (respect from others, dignity, youth, their reputation etc) in society.

4.5.3.1. I am proud of myself

Participants' said that they felt proud of themselves and their perseverance to continue schooling. Of the four participants' who were in matric at the time said that it was a 'huge' achievement for them. Three of these four participants' said that they would be the first girl in their family to complete school:

Palesa: *I'm Happy ! yoh im very happy. I know I'm going to finish school*

Sue: *I am very proud because we don't give up in life!*

Lisa: *From where I come from (being in a matric) is a great achievement*

Taking the afore-mentioned sub-themes into account it becomes clear that the teenage mother's in this study also had goals and dreams for the future. She has (like other human beings) made decisions that she regrets but has learnt from them. It is unfortunate that due to the visibility of her 'poor decision making' she is subjected to stigmatisation and more challenges than her similar counter-parts. None- the- less the message that comes across is: *Despite this uncontrollable force that is trying to pull me down, I still hold my head up high!*

4.5.4. *Telling My Story*

According to White (1995) human beings are interpreting beings, who actively interpret their own experiences and derive meanings of their experiences. Participants' were asked to reflect on the interview process. This was in light of the belief that their narratives were important as it shapes their lives (White, 1995). Some of the young mothers in the study said that talking about their experience was somewhat of a new experience for them.

Nandi : *like you know when you feel 'sho I finally said that, cause I have been meaning to say all those things but to who? I don't know... ..cause like when you talk to people they not even listening....*

Palesa: *I was a little nervous..but it felt good to express myself... i fell relieved*

Participants' described their experiences as cathartic as it provided some emotional relief for them. This is in accordance with this form of research design that allows participants' to freely express their understanding of their experiences in their own terms (Patton, 1980). Furthermore, a common feeling that emerged from the findings was that these young mothers experienced people as not genuinely concerned about their experiences, similar to the theme 'where is the evidence?' Lisa said that she liked the 'how do you feel questions' as it made her feel like the researcher was genuinely concerned about her. She also spoke about her feelings being 'bottled up' and that: ' *now it is time to just close it and let go*'.

For Lisa talking about her feelings and reflecting on her experience provided a sense of closure for her. She may have interpreted her experience of the interview as an achievement (White, 1995). The process gave a voice to the voiceless, who experienced the interview to be cathartic and empowering. For these participants', this may have also been a first-step towards an alternate way of thinking about their experiences by externalising their experiences from themselves. This means that participants' were encouraged to speak about the way that dominant discourses effected them rather than making them the problem. Thus moving away for a manner of speaking that contributes to experiences of marginalisation that undermine an appreciation of one's authoritativeness and towards a way of experiencing an identity that is separate from the problem (White, 1995). This is significant to the research as upon reflection it also forces one to critically reflect on one's own contribution to reproducing dominant discourses.

4.6. The ROLE OF THE FATHER: an unexpected positive finding

Findings will first be discussed to provide the reader with an overview in terms of the ratio of teenage fathers who were involved as opposed to those who were not involved in their baby's life. The findings of the study were based only on seven participants' as one of the participants' fell pregnant as a result of being raped and avoided discussing the baby's father. Furthermore, this theme will also include some literature pertinent to the study as this theme was unexpected and overlooked in the literature review.

As indicated in the literature review, psychology had a significant role to play in terms of defining what constitutes a 'good-enough' mother and placing the pressure of raising a psychologically healthy child on the mother. These theories are criticized as childhood and adult pathologies are then blamed on inadequate mothering (Kruger, 2006). Mamabolo, Langa and Kiguwa (2008) argue that the literature falls short in acknowledging the role of the father. The researcher in this study admits to falling prey to this as 'the role of father' was omitted from the literature review. In fact there is no mention of the teenage father in this study until this particular point. When reflecting on this, the researcher realized that she omitted the 'role of the father' as this was based on her unconscious assumption that teenage fathers are absent fathers. This assumption is informed by the dominant discourses in society (Bunting & McAuley, 2004).

The findings of the study indicate that five of the seven participants' reported paternal involvement whereas two of the participants' said that the father was absent. This is in contradiction to the popular perception and discourses that stereotype young fathers as irresponsible (Glikman, 2004). Of the five 'present' fathers, three were supportive from the very beginning:

Sue: *He comes everyday to see the baby and he calls me everyday*

Sandy: *He (father) didn't want me to do an abortion,he comes to see the baby everyday..*

In the above extracts, Sandy and Sue talk about a physically present father who is actively involved as opposed to a father who supports the child financially. Similar findings were reported in a study conducted by Swartz and Bhana (2009) who argued that very few young fathers entertained the idea of terminating pregnancy. This contradicts dominant discourses and challenges the perception that 'never- married' adolescent fathers are even more likely to spend less time with their children (Fegan & Bernd, 2007).

In fact one of the participants' directly challenged this discourse when she argued that teenage fathers are better fathers due to the fact that have more time and less responsibilities than an older, working and married (that media portrays as an ideal father). Barker, Bartlett, Beardshaw, Brown, Burgess, Lamb, Lewis, Russell and Vann (2003) contend that these developments reflect a change in the view of fatherhood from being a provider and protector to more emphasis on the bond and relationship between the father and son. This progressive view may also be influenced by changing discourses in South African society whereby the construction of masculinity places the needs of the child first. For example failure to support one's child is experienced as a loss of manhood (Glikman, 2004). This new meaning of being a father shifts focus away from the traditional male breadwinner role defined by economic provision and towards a newer role defined by emotional care and concern (Swartz & Bhana, 2009).

In accordance with literature, participants' highlighted the importance of paternal support for the teenage mother as well as for the baby (Fegan & Bernd, 2007). An example of this is Ivy who said:

The father is supportive, so everything is fine, he (baby) goes to his father when I do my homework and they talkhe sees his father everyday ... atleast if the father supports than you feel fine

According to Bunting and McAuley (2004), age perceptions of paternal role, ability to provide financial support and the nature of their relationship with their own father are factors that contribute to levels of paternal involvement. The results of previous studies done indicate that older teenage fathers who are able to provide financially for their child are positively related to fathers involvement (Bunting & McAuley, 2004). In this study Sandy was the only participant who made direct reference to financial support when she said:

He (father) took out a policy for our daughter and is going to buy a house.

Based on the fact that participants' were all residing with their parents at the time of the interview, one can assume that father's did not take on complete financial responsibility. According to Swartz and Bhana (2009), a father's acceptance may be related to the knowledge that he made the girl pregnant, fear of the consequences of denying his child and the role of his own father in his life. The finding of this study contradicts dominant discourses as the majority of paternal figures in this study were emotionally supportive irrespective of their financial position.

Two of the participants' who said that their boyfriends took a longer period of time (in comparison to the other participants') to accept their paternal role were still attending school. Both Nandi and Nancy expressed relief when their boyfriends' began to support them after the birth which- according to Glikman (2004), it is not uncommon and often the case. Of the remaining two participants': one of them said that the father was emotionally absent as he resided in Kwa-Zulu Natal and the other 'fitted' the profile of the popular stereotype of teenage fathers being absent. One wonders if teenage fathers are perhaps in a similar situation as teenage mothers whereby society inflates or exaggerates the absent teenage father for ulterior motives.

Findings of the study also highlighted the pressure that participants' experienced from elders to marry the baby's father. This pressure to marry was motivated by discourses or more accurately to escape negative discourses:

But maybe if you had a husband they (people) will say 'at least she is married. But people will say 'if you married maybe it's better' but how? How is it better? But I am not married and the child sees the father every day. Even if you married, sometimes the children don't see the father everyday..... It's not about being in the same house with the father everyday that makes the child grow.

The argument made by the participant in the above extract corroborates with Glikman (2004), who argues that a young father does not have to live with his child in order to bond with him. However marriage is also seen as a means of correcting the 'mistake' as the pregnancy will be more easily accepted in society. There is less concern around the age of the young mother and father and more emphasis on the fact that marriage will eliminate the stigma and safeguard her tainted reputation. This again confirms the socio-political nature of these discourses, as teenage pregnancy is not stigmatized as a problem in society if the girl is married (Macleod, 1999). However, there is a way to make reparation, should the couple refuse to marry:

Tandi: *Like you're forced to get married to the guy who made you pregnant or like they make the guy pay for damages. So it's ok, you made my child pregnant now you have to pay for damages.*

In this extract Tandi speaks of 'paying damages' as a reparative gesture on behalf of the baby's father. There seems to be a link between 'paying damages' and fathers' involvement in this study. The subsequent section will elaborate on 'paying damages' as a cultural norm with particular reference to its meaning and significance for the participants' in the study..

4.6.1. Paying damages

In African culture ‘paying damages’ refers to the claim that the teenage mothers’ parents have to economic resources from the paternal family for support of the child (Kaufman, De Wet & Stadler, 2001). This means that once damages are paid for, “the child benefits from a social and cultural connection with a recognized identity within the community, whether or not marriage ensues” (Kaufman, De Wet & Stadler, 2001, p.152). Paying for damages is also a form of paternal acknowledgment. The term originally meant a reduced sum of brides’ wealth for a woman who wanted to get married but already had a child. Currently many women refer to themselves as ‘damaged’ (Kaufman, De Wet & Stadler, 2001). In this study the teenage mother referred to ‘paying damages’ as an apology to the girls’ parents for impregnating their daughter prior marriage – thus ‘damaging’ her. The following extracts exemplify the way that some teenage mothers spoke about ‘paying damages’ and what it meant for them:

- Nancy: *they did pay for the damage. They have to .I I think it's to say sorry that our child did this to your child.... it's actually they pay to your mother*
- Nandi: *the father has to pay the damage cause I was still in school ja. So we have to pay like a certain amount of money and then without paying that certain amount of money, they don't have access to the child*
- Palesa: *you not allowed to touch the baby or talk to me, until you pay the damages*

A common belief of participants’, evident in the extracts above was that ‘paying for damages’ was compulsory. This is prevalent with by the use of words such as ‘have to’ and ‘must’. In the above extracts Nandi and Palesa indicate that if the father does not pay for damages, then he does not have access or a right to his child. This confirms literature that indicates that paying for damages is symbolic of acceptance of paternity and admission of guilt and fatherhood (Kaufman, De Wet & Stadler, 2001). In terms of this study, four of the participants’ said that the fathers payed for damages. This was significant for these participants’ and their family as it meant that the father is not only apologising, but also taking responsibility for the child. The rest of the participants’ were aware of this cultural belief, but did not place any value in it, partly because they came from a mixed cultural background and the baby’s fathers were unable to pay for the damages. According to a study conducted by Swartz and Bhana (2009), the cultural practise of paying damages could help or hinder paternal involvement. Whilst this payment allows the father access to this child, it may

also be stumbling some teenage fathers who cannot afford to pay damages, symbolically meaning that he refuses paternity. Furthermore, the amount requested by some families are too expensive and unaffordable for these young fathers (Swartz & Bhana, 2009).

Paying damages is also believed to provide financial compensation to the girls' family, as the amount of brides-wealth will decrease because she had a child with another man. However, brides wealth is also dependant on the level of education which the girl has at the time of marriage: the higher her education the higher her brides-wealth (Kaufman, De Wet & Stadler, 2001). This has implications for the participants' in this study who are considered 'damaged', but are also attaining a high level of education (as participants' indicated that completing matric is considered a big achievement in their family). Therefore this cultural belief that associates high value to attaining an education may be one of the driving forces behind these participants' perseverance to complete school, and attain a tertiary education as on a symbolic level she is redeeming herself in society. Perhaps education is symbolically repairing the 'damages' of her past and a way of re-claiming an acceptable position in society.

4.7. Conclusion

The research aimed to explore teenage pregnancy from the subjective experiences of teenage mothers. Eight teenage mothers from an inner-city school participated in this study. It appears from the above results that dominant discourses in society played a major role in the participants' experiences of being teenage mothers. The overall results indicated that the challenges that participants' confronted were evoked and predominantly surrounding society's stereotypical perceptions of them as opposed to the discourses that imply that their challenges are related to being a young mothers, having inadequate skills, poor academic performance and financial difficulty. Their experiences throughout the study were always tainted by negative discourses.

This research indicates that although many young mothers believed that they made poor decisions in the events that led to their pregnancy, and also considered having an abortion. All of them did not regret having their baby and have worked out a way to care for the emotional and financial needs of the child. Although some of the families felt an additional financial strain, these babies were born into conditions of limited resources and not causing the limited resources as argued by dominant discourses.

It is important to note that despite their willingness to be an ‘ideal, good-enough’ mother to their child, being a mother was not always an easy role for these young girls who persevered to continue their education. Furthermore, this study highlights the challenges that these mothers experienced in every sphere of their lives, as they were marginalised in their communities, school and at church. Although the initial reaction from family members was shock, denial and anger, their family members were identified as playing a pivotal role in terms of supporting the young mother and providing a safe, accepting environment for them. Most of the participants’ experienced strain and relational difficulties, especially with friends, teachers and community members. Despite their heightened sense of responsibility and maturity, they were still perceived as sexually deviant, stigmatized by adults and became the scapegoat for problems at school. This heightened sense of responsibility also worked against them, as they experienced difficulty relating to friends of the same age-group. Despite their overall feelings of being rejected from others and feeling like a ‘misfit’, they also felt a sense of pride in comparison to their friends whom they described as still being naive.

In this study, young mothers identified academics as an area of strength as they used their right to an education as a platform to ‘rise above’ others and prove their self worth to themselves and to the rest of society. Their high levels of motivation and aspirations reflected in their academic results as they excelled above their peers at school. This was attributed to these young mothers who gained perspective and wanted to provide a better future for their children. Therefore despite the numerous challenges encountered by these young mothers, they persevered towards their goals. Telling their story was not only cathartic for them but also important to add to the existing body of research that aims to challenge dominant discourses and assist the movement towards critical thinking and reconceptualising these dominant discourses that inform society’s perceptions.

CHAPTER 5: LIMITATIONS AND IMPLICATIONS FOR FUTURE RESEARCH

5.1. *Limitations*

The study was analysed using qualitative methods. One of the strengths of a qualitative research is working with a small sample, as it provides rich and detailed data (Durrheim, 2006), the limitation of this method is that it limits the generalization of the findings. Due to the research only being conducted with eight participants' (all black females who returned to school after having a baby), the findings cannot be taken as a general representation of all black teenage mothers in South Africa.

Another limitation of qualitative research is the subjectivity of the researcher. Although critically reading of the transcripts, and the findings served to limit the influence of subjective views and personal discourse in the analysis stage of the research. The analysis and organization of the results cannot be regarded as objectively definitive. Therefore the discussion is acknowledged as offering only one of many possible sets of interpretations.

Furthermore, it is acknowledged that the girls may not have provided completely honest and accurate accounts pertaining to sensitive and personal issues like sex and reaction's from teachers. Their responses may also have been influenced by the researcher's age as participants' may have provided responses that they thought the researcher would have liked to hear. The researcher (being older) may have elicited more mature responses and also guarded responses as she may have initially been viewed as a 'judging' adult like the other adults they encounter. However, due to being able to elicit responses and information on these topics, it can be argued that the researcher was able to establish sufficient rapport to allow the participants' to feel comfortable to discuss these issues.

Even though the researcher drew on a semi-structured interviews as a guide during the interview process, spontaneous probing and the use of different wording on the part of the researcher may have negatively affected the consistency of the findings across interviews and elicited information in a way that confirmed her preconceived assumptions on the topic. The use of open-ended questions may also have prompted participants' into providing ambiguous or vague answers. In addition to this, the participants' may not have always understood the wording of the questions asked in the same way.

The interview process was lengthy, as the researcher was cognizant of the vulnerable sample and time on establishing rapport. The lengthy nature of the interview may have negatively influenced participants' responses, especially towards the end of the interview. Similarly audio-recording may have influenced their responses. Even though participants' were reminded of the confidentiality clause some participants' were cautious around disclosing information surrounding teachers' responses.

5.2. Recommendations and Implications for future research

According to Fairclough (1989), discourses are not reproduced in a vacuum and divorced from society but rather they are influenced and shaped by their social context and by the speakers who invoke them. Therefore more research is required at the level of media and government policy in terms of raising an awareness of these discourses that stigmatize these young mothers. Furthermore, intervention is required at the level of policy making within the Department of Education. Although this policy has mobilized positive change, the research highlighted the presence of dominant discourses in this policy. Therefore change at this level (policy making) is essential as it will infiltrate into the levels below such as the school's management committee (who implements the policy), the teachers, the learners and the teenage mothers. This policy has influencing power across a broad spectrum of individuals and also huge implications for the future of teenage mothers. Therefore the researcher emphasizes intervention at this level.

Throughout the interview, the participants' highlighted the challenges that they experienced in mainstream society, due to the dominant construction of teenage pregnancy as a social problem. The school appeared to play a role in perpetuating the negative stigma associated with teenage pregnancy, and therefore intervention at this level would serve as a protective factor for these young mothers (Khalil, 2008). At school, a recommended intervention at the level of educators could be in the form of a creative workshop that aims at critical thinking and conscientisation of teenage pregnancy from multiple perspectives. This workshop could include:

- Role plays that give the educators an opportunity to actively role-play scenarios that pregnant girls may experiences (thus creating a sense of empathy).

- Providing fact based evidence such as statistics of the teenage pregnancy in South Africa, evidence of teenage pregnancy not being linked social grants etc.
- Conscientisation- provide educators with an opportunity to critically engage in dominant discourses with the facilitator challenging these perceptions. Reflection of their role in perpetuating the marginalization of teenage mothers

Furthermore, in light of the evidence of this research that linked stigma and lack of support to feeling of depression, isolation and suicide ideation and given the potential difficulties. Support for mothers in the form of social and professional support is likely to be particularly important in the ameliorating negative outcomes and negotiating barriers to maternal contact. Whilst results of this study highlight the importance of support, unfortunately this is not the case for all teenage mothers who may not receive familial support. The researcher recommends the formation of support groups for these young mothers, especially for those who may not have familial support. This support group is not to be a place to discriminate, and further pathologize them but rather a space for them to discuss their challenges and achievements with other teenage mothers alike. This is also in light of the findings of the participants' experience of the interview as cathartic, it can be argued that it is important to develop a space in which teenage mothers' can express themselves. It may also assist in providing a voice for the voice-less and thus mobilizing and empowering young mothers.

Whilst this study achieved its aim of giving voice to the voice-less, it only included girls who continued their education. Untangling the reasons why girls do not return to school is critical to appropriate policy development which in turn could enhance the postpartum social and economic opportunities. The stories of young mothers who did not continue with their education is equally important to hear and thus an area for further research. Furthermore, in light of unexpected results of this study that indicated the presence of paternal involvement, more research is required with teenage fathers. It seems that the focus on teenage mothers perpetuates the discourse of the absent teenage father which is not necessarily the truth, as indicated in this study.

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Appendix A: Information Letter to the Principal



Dear Principal,

My name is Zarina Desai, and I am doing a study as part of my training for a Masters degree in Community-Based Psychology at the University of the Witwatersrand. I would like to invite eight teenage mothers from your high school to participate in this study. The aim of the study is to explore teenage mothers' perceptions of the self in terms of their academic performance and the role of culture and support. This research is important as it will gain insight into the personal perceptions of teenage mothers, and critically challenge the dominant ideologies of teenage pregnancy.

The research is qualitative in nature that will require one-on-one interviews with each participant. These interviews will be scheduled at a suitable time for the school and participants' involved. Participation in the study is voluntary, and you may withdraw your school from the study at any time. Participation of the learners is also voluntary and they have the right to withdraw at any time. Should the school or participants' decide to withdraw from the study there will be no consequences. No person will be advantaged or disadvantaged in any way for choosing to participate or not to participate in the study.

For ethical reasons, parents and learners will have to sign and return the consent/assent form before their children participate in the study. The information obtained from the interviews will be confidential as the research material will only be seen by myself and my supervisor. All audio-recordings will be destroyed on completion of the final report and no identifying information will be divulged in the research report. Direct quotations may be used anonymously in the report.

On completion of the study, the findings will be written up in a final report that will be made available to you, should you request feedback. If you are in agreement and willing to permit participation, please sign the attached consent form.

Should you have any further enquiries, do not hesitate to contact me on 0833108948, or my supervisor Malose Langa on (011) 717 4536.

Your participation in this study would be greatly appreciated.

Kind Regards

Zarina Chohan

Appendix B: Principal Consent Form

Principal Consent Form

I _____ read the information sheet and understand that the research project involves the participation of learners in my school. I understand that the learners who participate in the study will be interviewed on the school premises. I understand that:

- Participation in this research is voluntary.
- Learners will not be advantaged or disadvantaged in any way if they choose to participate or not to participate in this study.
- Learners may withdraw from the study at any time.
- Identifying information will be omitted in the research report, and all responses will remain anonymous. Therefore participants' identity will be protected.
- There are no anticipated risks or benefits by participating in the study.
- Direct quotes may be used anonymously for the final report.
- The tapes will be accessible only to the researcher and her supervisor.
- The tapes will be destroyed on completion of the study.

I also confirm that the research procedure, and the afore-mentioned has been explained to me.

Signature: _____

Principal

Date: _____

Appendix C: Parent Information Sheet



Dear Parent/ Guardian

Hello, my name is Zarina Chohan. I am presently registered at the University of the Witwatersrand as a Masters student in Community-Based Counseling Psychology program. As part of the requirements for my studies, I am conducting a research with teenagers that will be exploring the way that teenage mothers talk about the self. This is an important research project as it will investigate young mothers' views about the self in terms of school performance, social and cultural support. This research is important as it will gain an understanding of teenage pregnancy and young motherhood from the viewpoint of the teenage mothers'.

I wish to invite your child to participate in my research project. Should you agree, your daughter will participate in a one-on-one interview with the researcher. The interview will take place on the school premises, with the principal's permission. The time of the interview will depend on what is available and suitable for your daughter. The interview will be audio-taped and will last for approximately forty-five minutes.

Your child is not forced to take part in this study, therefore it is entirely voluntary. You may withdraw your child from the study at any time and it will not be held against you or your child in any way. Your child's identity will be kept strictly confidential. The interviews will be audio recorded only if you and your child grant permission for me to do so. My supervisor and I are the only people that will

listen to the tapes and these tapes will be locked and stored safely in my supervisor's office during the research process. Furthermore, the tapes will be destroyed after completion of the research report. There are no anticipated risks for participating in the study, nor will benefits be provided. Your child's participation in this study would be appreciated. If you allow your child to take part in the study, please will you fill in your details on the forms attached below and ask your child to return them back to the researcher.

Should you have any questions you may contact the researcher on 0833108948.

Kind Regards

Zarina Chohan

Appendix D: Parent Consent Form

Parent/Guardian Consent Form

I _____ (the parent/guardian) of _____ (learner/child), give consent for my child to participate in an individual interview that will be audio-recorded. I understand that the interview is for the study (teenage mamma's talk about the self) conducted by Zarina Chohan.

I also understand that:

- ☐ Allowing my child to participate in this research is voluntary.
- ☐ My child will not be advantaged or disadvantaged in any way if she chooses to Participate or not to participate in this study.
- ☐ My daughter can withdraw (decide not to participate) from the study at any time.
- ☐ She has the right not to answer any questions that she does not want to.
- ☐ No identifying information will be included in the research report, and all answers will remain confidential, therefore her identity will be protected.
- ☐ The tapes will be heard only by the researcher and supervisor of the study and kept in a safe locked up cupboard in my supervisor's office.
- ☐ The tapes will be destroyed on completion of the study.

- ☐ Direct quotes of the discussion may be used without using identifying information in the final report.
- ☐ There are no risks or benefits involved in the study.
- The research procedure and all of the above have been explained to my child.

Signed: _____

Name: _____ Date: _____

Appendix E: Participant Information Sheet



Hello,

My name is Zarina Chohan, and I am doing a study as part of my training for a Masters degree in Community-Based Psychology at the University of the Witwatersrand. The aim of the study is to explore the way teenage mothers' talk about the self. This will look at her school performance and the role that culture and support plays in the way that she views herself. This research is important as it will help understand teenage pregnancy and young motherhood from your personal perspective.

The research will be one-on-one interviews with you. These interviews will take place on the school premises at a time that is suitable for you. These interviews will be audio-recorded and last for the duration of forty-five minutes. Please note that you are not forced to take part in the study, the decision is completely up to you. You will not be advantaged or disadvantaged in any way for choosing to participate or not to participate in the study. Everything that is said in the interview will be kept confidential, which means that only myself and my supervisor will hear what was said.

The audio recordings will be destroyed after the final report is complete. The tapes will be locked in my supervisors cupboard and kept safely throughout the research process. You can choose not to answer any questions that you do not want to and you are free to pull out at any time. I would also like your permission to use your direct words in my report. I will not include information that will identify you. If something sensitive to you comes up in the interview, free counselling will be made available at the Johannesburg Institute of Social Services (JISS) the contact details are (011) 837-4151.

If you agree and you want to take part in the study please sign the form attached. When the study is completed the results will be written up in a report. A summary of the results and findings of the research will be made available to you and your school on request. If you have any questions or would like to discuss this research, you can phone me on 0833108948. Your participation in this study would be greatly appreciated.

Thank you

Zarina Chohan

Appendix F: Participant Assent Form

ASSENT FORM

I _____ understand that this is an assent form that will allow my answers in the individual interview to be used in a study conducted by Zarina Chohan. This is a study on teenage pregnancy (teenage mothers' talking about the self). All the information gathered in this study will be treated with the strictest confidentiality.

I understand that:

- Participation in this research is voluntary; I am not forced to take part in this study.
- I may withdraw from the study at any time.
- I have the right not to answer questions that I do not want to.
- No information that may identify me will be included in the research report, and my answers will remain confidential.
- Direct quotes from the interview may be used without information that will identify me in the final report.
- My identity will be protected
- There are no risks or benefits involved in the study.
- The tapes will be locked in my supervisors cupboard and kept safely throughout the research process.

- The tapes will be heard only by the researcher and supervisor of the study.
- The tapes will be destroyed after the report is complete.
- There are no anticipated risks or benefits involved in the study.

Signed: _____

Name: _____

Date: _____

Appendix G: Participant Consent Form

CONSENT FORM

I _____ understand that this is a consent form that will allow my answers in the individual interview to be used in a study conducted by Zarina Chohan. This is a study on teenage pregnancy (teenage mothers' talk about the self). All the information gathered in this study will be treated with the strictest confidentiality.

I understand that:

- Participation in this research is voluntary. I am not forced to take part in the study.
- I may withdraw from the study at any time.
- I have the right not to answer questions that I do not want to.
- No information that may identify me will be included in the research report, and my answers will remain confidential.
- Direct quotes from the interview may be used anonymously in the final report.
- My identity will be protected
- There are no risks or benefits involved in the study.
- The tapes will be locked in a cupboard and kept safely throughout the research process.

- The tapes will be heard only by the researcher and supervisor of the study.
- The tapes will be destroyed after the report is complete.
- There are no risks or benefits involved in the study.

Signed: _____

Name: _____

Date: _____

Appendix H: Participant Assent Form for Audio Recording

ASSENT FORM FOR AUDIO RECORDING

I _____ understand that this is a assent form that will allow my responses in an individual interview to be audio recorded in a study conducted by Zarina Chohan on teenage mothers perceptions of the self. All the information gathered in this study will be treated with the strictest confidentiality.

I understand that:

- No identifying information will be included in the research report, and all my responses will remain confidential and my identity will be protected.
- The tapes will be locked in my supervisor's cupboard and kept safe throughout the research process.
- The tapes will be heard only by the researcher and supervisor of the study.
- The tapes will be destroyed on completion of the study.
- Direct quotes of the discussion may be used in the final report that will not include identifying information.

- There are no risks or benefits involved in the study.

I also confirm that the details above have been explained to my child.

Signed: _____

Name: _____

Date: _____

Appendix I: Participant Consent Form for Audio Recording

CONSENT FORM FOR AUDIO RECORDING

I _____ understand that this is a consent form that will allow my answers in an individual interview to be audio recorded in a study conducted by Zarina Chohan on teenage mothers perceptions of the self. All the information gathered in this study will be treated with the strictest confidentiality.

I understand that:

- No identifying information will be included in the research report, and all my answers will remain confidential and my identity will be protected.
- The tapes will be locked in my supervisor's cupboard and kept safe throughout the research process.
- The tapes will be heard only by the researcher and supervisor of the study.
- The tapes will be destroyed on completion of the study.
- Direct quotes of the discussion may be used in the final report that will not have identifying information.

- There are no risks or benefits involved in the study.

I also confirm that the above details, have been explained to my child.

Signed: _____

Name: _____

Date: _____

Appendix J: Parent Consent Form Audio Recording

CONSENT FOR AUDIO RECORDING

I _____ the parent/guardian of _____
give consent for my child's answers in the individual interview to be audio recorded.

I understand that:

- No identifying information will be included in the research report, and all responses will remain confidential.
- The identity of my child will be protected.
- The tapes will be locked in my supervisor's cupboard and kept safe throughout the research process.
- The tapes will be heard only by the researcher and supervisor of the study.
- The tapes will be destroyed on completion of the study.
- Direct quotes of the discussion may be used anonymously in the final report.
- There are no risks or benefits involved in the study.

I also confirm that the details above have been explained to my child.

Signed: _____

Name: _____

Date: _____

Appendix K: Interview Schedule

INTERVIEW SCHEDULE

(A) Biographical Information

- Participants' age: _____
- Grade: _____

(B) How do teenage mothers' talk about the self?

- What does being a 'teenage mother' mean to you?
- How do you balance everything?
- How do you cope?

(C) How do teenage mothers' talk about academic performance at school?

- What are your views about education and schooling?
- How do you feel about teenage mothers attending school?
- What are the challenges for you –as a teenage mother- at school?
- What are your aspirations for the future?

(D) How do teenage mothers talk about culture and support?

- Tell me about your culture and the influence and its stance toward teenage pregnancy.
- Has culture played a role in your experience of teenage pregnancy presently being a teenage mother?
- How did your family respond when they found out about your pregnancy?
- How did school teachers and peers respond to you when they found out about your pregnancy?
- What sort of response did you get from the community?