

APPENDIX A  
UNIVERSITY'S ETHICS CLEARANCE CERTIFICATE

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

Division of the Deputy Registrar (Research)

HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL)

R14/49 Bopape

CLEARANCE CERTIFICATE

PROTOCOL NUMBER M040826

PROJECT

Teenagers' Perception of Unplanned  
Teenage Pregnancy & HIV/AIDS: A  
Narrative Analysis

INVESTIGATORS

Miss MA Bopape

DEPARTMENT

SHCD/Psychology

DATE CONSIDERED

04.08.27

DECISION OF THE COMMITTEE\*

Approved unconditionally

Unless otherwise specified this ethical clearance is valid for 5 years and may be renewed upon application.

DATE 05.08.22

CHAIRPERSON.....



(Professor PE Cleaton-Jones)

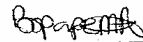
\*Guidelines for written 'informed consent' attached where applicable

cc: Supervisor : Prof N Duncan

DECLARATION OF INVESTIGATOR(S)

To be completed in duplicate and **ONE COPY** returned to the Secretary at Room 10005, 10th Floor, Senate House, University.

I/We fully understand the conditions under which I am/we are authorized to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the Committee. **I agree to a completion of a yearly progress report.**



PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES

APPENDIX B

GAUTENG DEPARTMENT OF HEALTH'S APPROVAL



PROVINCIAL RESEARCH COMMITTEE.

**RESEARCH EVALUATION FORM FOR APPROVAL BY THE  
HEAD OF THE DEPARTMENT.**

**Submission date:** 19-12-2005

**Title:** Teenager's perceptions of unplanned teenage pregnancy and HIV/AIDS: A narrative analysis.

**Principal investigator:** Bopape M.A

**Research Site(s):** Soweto

**Type of research:** Non trial

**Summary:**

This research will use qualitative research methodology to understand the phenomenon of unplanned teenage pregnancy among young women in the light of the increasing HIV infections. It is to understand the meaning that these women attribute to these two phenomena.

The study will be done from November 2005 to January 2006.

**Motivation**

This research is intending to add knowledge to the literature on a so burning topic, taking into account that adolescents are an important stage in human development where people can either build or damage their lives.

The problem of unplanned pregnancies and the high HIV infection rates among teenagers are the issue that are seen by the researcher as being very important in the country.

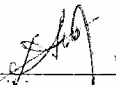
All participants will be referred for counseling at NICRO and FAMSA, Soweto, where they will be assisted by social workers. However, they may choose to go for counseling or not. The researcher will also ensure that no harmful information about the participants will be released.

The ethics clearance certificate is hereby attached.


Permission is being sought to conduct the study in the Province.

We have no objection to recommend that the study be conducted in this province pending the submission by the researcher of specific objectives of this research project.

The Evaluator:

  
\_\_\_\_\_  
Dr ML Likibi  
Specialist research and epidemiology

Approved/not approved

  
\_\_\_\_\_  
Dr L Rispel  
HOD  
Date: 20/1/05

APPENDIX C

UNIVERSITY OF JOHANNESBURG'S PERMISSION



UNIVERSITY  
OF  
JOHANNESBURG

12 January 2006

Miss M.A. Bopape  
P.O. Box 161  
Newtown  
2113

Dear Miss Bopape

Permission to interview students on the University of Johannesburg (Soweto Campus)

You are hereby advised that permission to interview students of the Soweto Campus of the University of Johannesburg has been given as you requested in your undated letter. Please feel free to interview our students.

Yours truly

  
Dr. J. Manyaka  
Acting Campus Principal

## APPENDIX D



### GAUTENG DEPARTMENT OF EDUCATION'S APPROVAL

Department of Education      Departement van Onderwys

Date:	04 June 2004
Name of Researcher:	Bopape M.A.
Address of Researcher:	287 Dichabe Street
	P.O. Box 161
	Newtown, 2113
Telephone Number:	(011) 3560666
Fax Number:	N/A
Research Topic:	Teenagers' Perceptions of Unplanned Teenage Pregnancy and HIV/AIDS: A Narrative Analysis
Number and type of schools:	1 Secondary & 1 FET Schools
District/s/HO	Johannesburg South

### Re: Approval in Respect of Request to Conduct Research

This letter serves to indicate that approval is hereby granted to the above-mentioned researcher to proceed with research in respect of the study indicated above. The onus rests with the researcher to negotiate appropriate and relevant time schedules with the school/s and/or offices involved to conduct the research. A separate copy of this letter must be presented to both the School (both Principal and SGB) and the District/Head Office Senior Manager confirming that permission has been granted for the research to be conducted.

Permission has been granted to proceed with the above study subject to the conditions listed below being met, and may be withdrawn should any of these conditions be flouted:

1. *The District/Head Office Senior Manager/s concerned must be presented with a copy of this letter that would indicate that the said researcher/s has/have been granted permission from the Gauteng Department of Education to conduct the research study.*
2. *The District/Head Office Senior Manager/s must be approached separately, and in writing, for permission to involve District/Head Office Officials in the project.*
3. *A copy of this letter must be forwarded to the school principal and the chairperson of the School Governing Body (SGB) that would indicate that the researcher/s have been granted permission from the Gauteng Department of Education to conduct the research study.*


4. A letter / document that outlines the purpose of the research and the anticipated outcomes of such research must be made available to the principals, SGBs and District/Head Office Senior Managers of the schools and districts/offices concerned, respectively.
5. The Researcher will make every effort obtain the goodwill and co-operation of all the GDE officials, principals, chairpersons of the SGBs, teachers and learners involved. Persons who offer their co-operation will not receive additional remuneration from the Department while those that opt not to participate will not be penalised in any way.
6. Research may only be conducted after school hours so that the normal school programme is not interrupted. The Principal (if at a school) and/or Senior Manager (if at a district/head office) must be consulted about an appropriate time when the researcher/s may carry out their research at the sites that they manage.
7. Research may only commence from the second week of February and must be concluded before the beginning of the last quarter of the academic year.
8. Items 6 and 7 will not apply to any research effort being undertaken on behalf of the GDE. Such research will have been commissioned and be paid for by the Gauteng Department of Education.
9. It is the researcher's responsibility to obtain written parental consent of all learners that are expected to participate in the study.
10. The researcher is responsible for supplying and utilising his/her own research resources, such as stationery, photocopies, transport, faxes and telephones and should not depend on the goodwill of the institutions and/or the offices visited for supplying such resources.
11. The names of the GDE officials, schools, principals, parents, teachers and learners that participate in the study may not appear in the research report without the written consent of each of these individuals and/or organisations.
12. On completion of the study the researcher must supply the Senior Manager: Strategic Policy Development, Management & Research Coordination with one Hard Cover bound and one Ring bound copy of the final, approved research report. The researcher would also provide the said manager with an electronic copy of the research abstract/summary and/or annotation.
13. The researcher may be expected to provide short presentations on the purpose, findings and recommendations of his/her research to both GDE officials and the schools concerned.
14. Should the researcher have been involved with research at a school and/or a district/head office level, the Senior Manager concerned must also be supplied with a brief summary of the purpose, findings and recommendations of the research study.

The Gauteng Department of Education wishes you well in this important undertaking and looks forward to examining the findings of your research study.

Kind regards

pp. Nomvula Ubisi

ALBERT CHANEE  
ACTING DIVISIONAL MANAGER: OFSTED

The contents of this letter has been read and understood by the researcher.	
Signature of Researcher:	
Date:	04/06/2004

I

APPENDIX E

**CONSENT AND ASSENT FORMS**

PARENT CONSENT FORMS

LEARNERS' PARTICIPATION ASSENT FORMS

LEARNERS' TAPE RECORDING ASSENT FORMS

STUDENTS' PARTICIPATION CONSENT FORMS

STUDENTS' TAPE RECORDING CONSENT FORMS

YOUNG PARENTS' PARTICIPATION CONSENT FORMS

YOUNG PARENTS' TAPE RECORDING CONSENT FORMS

## PARENTS' CONSENT FORM

Dear Parent

My name is Angelina Bopape and I am a Masters student in Psychology at Wits University. I am currently doing research on adolescents' perceptions of unplanned teenage pregnancy in light of the increasing HIV infections amongst adolescents. I am mainly interested in getting an understanding of the perceptions and meaning adolescents attribute to these two phenomena. \_\_\_\_\_ has volunteered to participate in this study. This will allow her/him, as the participant, to relate her/his opinions to someone who is willing to listen and understand her/him. Her/ his participation will also assist me to finish my research project in partial fulfillment for the M A degree.

She/ he will be requested to take part in the interviews that will last for approximately one and a half hours. The interviews will take place after school hours. I will ask him/ her his/ her perceptions on unplanned adolescent pregnancy in view of the high HIV/ AIDS infections amongst adolescents. He/ she is selected to be part of this project because I believe that he/ she can share with me information that can be used to better understand adolescents' perceptions of unplanned adolescent pregnancy in light of the high HIV/AIDS infections amongst adolescents. Her/ his participation in this project is voluntary and he/ she may withdraw from the study anytime he/ she wants to. He/ she will also be allowed to choose not to answer questions that he/ she does not want to respond to. Her/ his participation will not affect the treatment he/she gets from the school authorities. It will also not affect his/her status as a learner (either negatively or positively).

The information that she/ he will share with me will be not released to anyone before both he/ she and you grant me the permission to do that.

Should you have any queries, you can contact me at 082 556 8643/ 082 727 9403

Yours Truly

\_\_\_\_\_  
Angelina Bopape

Please indicate your consent for \_\_\_\_\_ to participate in this study by signing a copy of this letter and keeping another copy for yourself.

I \_\_\_\_\_ (name and surname), have read this letter and understand what is requested from me. I hereby consent to \_\_\_\_\_'s participation in this study.

Signature \_\_\_\_\_

Date \_\_\_\_\_



## LEARNERS' ASSENT FORM-PARTICIPATION

Dear \_\_\_\_\_

My name is Angelina Bopape and I am a Masters student in Psychology at Wits University. I am currently doing research on adolescents' perceptions of unplanned adolescent pregnancy in the light of the increasing HIV infections amongst teenagers. I am mainly interested in getting an understanding of the perceptions and meaning teenagers attribute to these two phenomena. Participating in this study will allow you, as the participant, to relate your opinions to someone who is willing to listen and understand you. Your participation will also assist me to finish my research project in partial fulfillment of the requirements for the M A degree.

You will be requested to take part in the interviews that will last for approximately one and a half hours. I will ask you your perceptions on unplanned adolescent pregnancy in view of the high HIV/ AIDS infections amongst adolescents. You are requested to be part of this project because I believe that you can share with me information that can be used to better understand adolescents' perceptions of unplanned adolescent pregnancy and HIV/ AIDS infections amongst teenagers. Your participation in this project is voluntary and you may withdraw from the study anytime you want to do so. You will also be allowed to choose not to answer questions you do not want to respond to. Your participation will not affect the treatment you get from the school authorities. The information you will share with me might cause emotional reactions that you might seek counselling to deal with. I have arranged with FAMSA (Soweto) where you can get counseling in such instances.

The information that you will share with me will be completely confidential and I will not release it to anyone before you grant me the permission to do that.

Should you have any queries, you can contact me at either of these numbers  
082 556 8643/ 082 727 9403

Yours Truly

\_\_\_\_\_  
Angelina Bopape

Please indicate your assent by signing a copy of this letter and keeping another copy for yourself.

I \_\_\_\_\_ (name and surname), have read this letter and understand what is requested from me. I hereby assent to participate in this study.

Signature \_\_\_\_\_

Date \_\_\_\_\_.

## LEARNERS' ASSENT FORM-TAPE RECORDING

Dear \_\_\_\_\_

My name is Angelina Bopape and I am a Masters student in Psychology at Wits University. I am currently doing research on adolescents' perceptions of unplanned adolescent pregnancy in the light of the increasing HIV infections amongst adolescents. I am mainly interested in getting an understanding of the perceptions and meaning adolescents attribute to these two phenomena. Participating in this study will allow you, as the participant, to relate your opinions to someone who is willing to listen and understand you. Your participation will also assist me to finish my research project in partial fulfillment of the requirements for the M A degree.

You will be requested to take part in the interviews that will last for approximately one and a half hours. I will ask you your perceptions on unplanned adolescent pregnancy in view of the high HIV/ AIDS infections amongst adolescents. You are requested to be part of this project because I believe that you can share with me information that can be used to better understand adolescents' perceptions of unplanned adolescent pregnancy and HIV/ AIDS infections amongst adolescents. Your participation in this project is voluntary and you may withdraw from the study anytime you want to do so. You will also be allowed to choose not to answer questions you do not want to respond to. Your participation will not affect the treatment you get from the school authorities. The information you will share with me might cause emotional reactions that you might seek counselling to deal with. I have arranged with FAMSA (Soweto) where you can get counseling in such instances.

The information that you will share with me will be completely confidential and I will not release it to anyone before you grant me the permission to do that.

Should you have any queries, you can contact me at either of these numbers

082 556 8643/ 082 727 9403

Yours Truly

\_\_\_\_\_  
Angelina Bopape

Please indicate your assent by signing a copy of this letter and keeping another copy for yourself.

I \_\_\_\_\_ (name and surname), have read this letter and understand what is requested from me. I hereby assent to the tape recording of my interview with the researcher.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## STUDENTS' CONSENT FORM- PARTICIPATION

Dear \_\_\_\_\_

My name is Angelina Bopape and I am a Masters student in Psychology at Wits University. I am currently doing research on adolescents' perceptions of unplanned adolescent pregnancy in the light of the increasing HIV infections amongst adolescents. I am mainly interested in getting an understanding of the perceptions and meaning adolescents attribute to these two phenomena. Participating in this study will allow you, as the participant, to relate your opinions to someone who is willing to listen and understand you. Your participation will also assist me to finish my research project in partial fulfillment of the requirements for the M A degree.

You will be requested to take part in the interviews that will last for approximately one and a half hours. I will ask you your perceptions on unplanned adolescent pregnancy in view of the high HIV/ AIDS infections amongst adolescents. You are requested to be part of this project because I believe that you can share with me information that can be used to better understand adolescents' perceptions of unplanned adolescent pregnancy and HIV/ AIDS infections amongst adolescents. Your participation in this project is voluntary and you may withdraw from the study anytime you want to do so. You will also be allowed to choose not to answer questions you do not want to respond to. Your participation will not affect the treatment you get from the school authorities. The information you will share with me might cause emotional reactions that you might seek counselling to deal with. I have arranged with FAMSA (Soweto) where you can get counseling in such instances.

The information that you will share with me will be completely confidential and I will not release it to anyone before you grant me the permission to do that.

Should you have any queries, you can contact me at either of these numbers  
082 556 8643/ 082 727 9403

Yours Truly

\_\_\_\_\_  
Angelina Bopape

Please indicate your consent by signing a copy of this letter and keeping another copy for yourself.

I \_\_\_\_\_ (name and surname), have read this letter and understand what is requested from me. I hereby consent to participate in this study.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## STUDENTS' CONSENT FORM- TAPE RECORDING

Dear \_\_\_\_\_

My name is Angelina Bopape and I am a Masters student in Psychology at Wits University. I am currently doing research on adolescents' perceptions of unplanned adolescent pregnancy in the light of the increasing HIV infections amongst adolescents. I am mainly interested in getting an understanding of the perceptions and meaning adolescents attribute to these two phenomena. Participating in this study will allow you, as the participant, to relate your opinions to someone who is willing to listen and understand you. Your participation will also assist me to finish my research project in partial fulfillment of the requirements for the M A degree.

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The information that you will share with me will be completely confidential and I will not release it to anyone before you grant me the permission to do that.

Should you have any queries, you can contact me at either of these numbers  
082 556 8643/ 082 727 9403

Yours Truly

\_\_\_\_\_  
Angelina Bopape

Please indicate your consent by signing a copy of this letter and keeping another copy for yourself.

I \_\_\_\_\_ (name and surname), have read this letter and understand what is requested from me. I hereby consent to the tape recording of my interview with the researcher.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## YOUNG MOTHERS' CONSENT FORM-PARTICIPATION

Dear \_\_\_\_\_

My name is Angelina Bopape and I am a Masters student in Psychology at Wits University. I am currently doing research on adolescents' perceptions of unplanned adolescent pregnancy in the light of the increasing HIV infections amongst adolescents. I am mainly interested in getting an understanding of the perceptions and meaning adolescents attribute to these two phenomena. Participating in this study will allow you, as the participant, to relate your opinions to someone who is willing to listen and understand you. Your participation will also assist me to finish my research project in partial fulfillment of the requirements for the M A degree.

You will be requested to take part in the interviews that will last for approximately one and a half hours. I will ask you your perceptions on unplanned adolescent pregnancy in view of the high HIV/ AIDS infections amongst adolescents. You are requested to be part of this project because I believe that you can share with me information that can be used to better understand adolescents' perceptions of unplanned adolescent pregnancy and HIV/ AIDS infections amongst adolescents. Your participation in this project is voluntary and you may withdraw from the study anytime you want to do so. You will also be allowed to choose not to answer questions you do not want to respond to. Your participation will not affect the treatment you get from the clinic authorities. The information you will share with me might cause emotional reactions that you might seek counselling to deal with. I have arranged with FAMSA (Soweto) where you can get counseling in such instances.

The information that you will share with me will be completely confidential and I will not release it to anyone before you grant me the permission to do that.

Should you have any queries, you can contact me at either of these numbers  
082 556 8643/ 082 727 9403

Yours Truly

\_\_\_\_\_  
Angelina Bopape

Please indicate your consent by signing a copy of this letter and keeping another copy for yourself.

I \_\_\_\_\_ (name and surname), have read this letter and understand what is requested from me. I hereby consent to participate in this study.

Signature \_\_\_\_\_

Date \_\_\_\_\_



## YOUNG MOTHERS' CONSENT FORM-TAPE RECORDING

Dear \_\_\_\_\_

My name is Angelina Bopape and I am a Masters student in Psychology at Wits University. I am currently doing research on adolescents' perceptions of unplanned adolescent pregnancy in the light of the increasing HIV infections amongst adolescents. I am mainly interested in getting an understanding of the perceptions and meaning adolescents attribute to these two phenomena. Participating in this study will allow you, as the participant, to relate your opinions to someone who is willing to listen and understand you. Your participation will also assist me to finish my research project in partial fulfillment of the requirements for the M A degree.

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The information that you will share with me will be completely confidential and I will not release it to anyone before you grant me the permission to do that.

Should you have any queries, you can contact me at either of these numbers  
082 556 8643/ 082 727 9403

Yours Truly

\_\_\_\_\_  
Angelina Bopape

Please indicate your consent by signing a copy of this letter and keeping another copy for yourself.

I \_\_\_\_\_ (name and surname), have read this letter and understand what is requested from me. I hereby consent to the tape recording of my interview with the researcher.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## APPENDIX F

### INTERVIEW SCHEDULES

#### INDIVIDUAL INTERVIEWS

1. What do you know about HIV/AIDS?
2. According to you, what are the causes and consequences of unplanned adolescent pregnancies?
3. Does knowledge of HIV/AIDS have an effect on young people's sexuality and unplanned adolescent pregnancies?

#### FOCUS GROUPS

1. What do you know about HIV/AIDS?
2. Tell me the story of your pregnancy.
3. Did the knowledge you have about HIV/AIDS have any effect on your sexuality and subsequent pregnancy?
4. According to you, what are the consequences of unplanned adolescent pregnancy?

APPENDIX G

ADVERTISEMENT FOR PARTICIPANTS

**RESEARCH PARTICIPANTS**  
**NEEDED**

ARE YOU BETWEEN 14 AND 24 YEARS OLD?  
DO YOU FEEL THAT YOU HAVE SOMETHING  
TO SAY ABOUT UNPLANNED ADOLESCENT  
PREGNANCIES AND HIGH HIV/AIDS  
INFECTIONS AMONGST ADOLESCENTS? IF SO,  
I REQUEST YOU TO TAKE PART IN AN  
INTERVIEW THAT WILL BE COMPLETELY  
CONFIDENTIAL.

IF YOU ARE INTERESTED, PLEASE WRITE  
YOUR NAME AND CONTACT DETAILS AND PUT  
THEM IN THIS BOX. I WILL CONTACT YOU.

THANK YOU