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*"I feel like I'm a bad mother. Almost like I can't give her [the first child] what she wants. She used to be with me alone. I think I confused her because she was used to being with me and she became very jealous because she couldn't understand why the baby gets all the attention."*

Literature, as discussed in Chapter 2, Section 2.4.3, suggests that teenage parenting comes with many challenges. Many teenage mothers grow up in homes that are economically and educationally disadvantaged. These teenagers themselves have low levels of education owing to early school drop-out, and they are faced with financial difficulties which often make them reliant on welfare assistance (Terry-Humen *et al.*, 2005). The consequence of this is that children born to these teenage mothers often start life at a distinct disadvantage. This is attributed to the fact that many young mothers do not have the skills, maturity and life experience required to care for a child (Schuyler Centre for Analysis & Advocacy, 2008). Studies (Terry-Humen *et al.*, 2005) suggest that children born to young mothers often have lower levels of cognitive, communication and social skills than children born to older women. These children also experience increased problems relating to physical and emotional well-being. The aforementioned study concludes by encouraging teenagers to delay childbearing in pursuance of education, employment and marriage before parenthood (Terry-Humen *et al.*, 2005).

The impact of parental responsibilities was felt even more as the extended family withdrew their support to the teenagers after a repeat pregnancy.

#### **4.4.2.2.5 Sub-theme 2.2.5: Teenage mothers reflected on the loss of support from extended families**

The experience of a repeat pregnancy proved to have dire consequences for the teenaged mothers who took part in this study. They were left to fend for themselves when members

from their extended families withdrew their support of them and their children in various ways. The effect of this was felt even more as it evoked emotions from the family which the teenagers had perhaps not anticipated.

***“They are angry because I had a second child. Like my mother.... She doesn’t want nothing (sic) to do with me. She’s drinking, she doesn’t care about me. I only have my grandmother who understands. She’s the only one who helps me...my relationship is not the same with everybody who I’m really tight with. My boyfriend doesn’t want me anymore. My mother doesn’t want me and the family doesn’t care about me anymore. I’m on my own, I feel bad.”***

***“My grandparents when I told them the second time I’m pregnant, there was no response. It was like, you know those faces, like, how could it happen again, didn’t you learn from the first time? I ask myself the same question, ‘Why didn’t you learn from the first time it happened.’ They didn’t say anything, didn’t offer, or they offered to help pay for the wedding that I was supposed to have in December but because of situations we didn’t end up doing that. But there was no one really saying anything like if I need anything I must just ask them. It was just like a big silence. It’s like we didn’t speak. It’s just like I kind of cut them off.”***

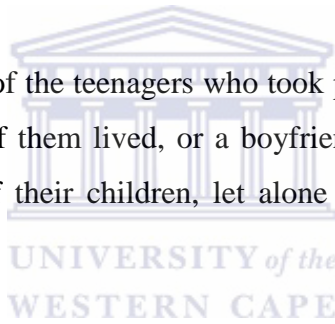
Losing the support of family members appeared to be a common occurrence as families in no uncertain terms demonstrated their displeasure at the participants experiencing a second or third pregnancy. They withdrew their financial, emotional and material support in a show of dissatisfaction. The loss of family support and father-of-the child support left the teenage mothers (including the two who had been working) dependent on selected family members who were also struggling **financially**. Four of the teenagers who took part in this study received financial contributions from reputed fathers and the receipt of the Child Support Grant (CSG) supplemented their income.

The following quotes illustrate the difficulties experienced as financial contributions by family members were withdrawn:

***“They used to pay my school fees. They used to buy clothes for me. They used to bring food at our house. Now they don’t do that.”***

*“With my first child, my grandfather decided to support me. I stayed in my own little flat and he paid everything including private medical aid. The support was good. But **when I told them I was pregnant a second time, it all changed.** I felt a bit disappointed in them because even though I did not expect anything from anybody, they are supposed to help you and love you no matter what. And I just didn’t have that feeling that I could ask them.”*

It is clear from the reflections of the teenagers who took part in this study that the family member(s) with whom most of them lived, or a boyfriend, were also finding it hard to provide for the basic needs of their children, let alone the basic needs of the teenage mothers themselves.



According to literature, the extended family has traditionally been very effective in assisting in situations where there is economic or social crisis. This is because traditional life has always embraced the values of unity, association and being part of a group, rather than functioning in isolation (Foster, 2000). However, in these days, many extended families are already severely stretched and may therefore not be able to fulfil the traditional roles which they previously fulfilled (Jackson, 2002). This is largely due to factors such as the critical state of the economy, increased families, and urbanisation (Foster, 2000).

Although many of the participants received CSGs, they remained financially dependent on family support. Literature suggests that CSGs do not necessarily alleviate poverty, but remains a vital supplement and regular source of income for poorer families (News 24,

2011). Peters (2009) however argues that the low value of the CSG makes it difficult for caregivers to improve the life situation of a child.

As the teenagers reflected on the “what happened then” consequences of the repeat pregnancies, it was evident that they were left with lots of ambivalence about having a second and sometimes third child. The repeat pregnancies appeared to have significantly affected the lives of all the participants, in both positive and negative ways. The following theme will discuss the last phase of the story, and indicates how the consequences of their unintended repeat pregnancies continued.

#### **4.4.3 Phase 3: The (open) end/ to be continued.....**

Teenagers’ final reflections of their repeat unintended pregnancies left the story unfinished, but indicated their honest experiences and feelings.

##### **4.4.3.1 Theme 3.1: The ambivalence of teenage mothers**

The feelings expressed about where the teenage mothers found themselves at the time of the study clearly indicated a **theme of mixed feelings about their situation** – deprived of a young life, their childhood, and an opportunity for independence, but still having some hope, the majority **wanted to care for their children**. Despite having experienced various losses, they had eventually come to accept the situation, although some of the participants still indicated unresolved feelings and emotions about their unintended repeat pregnancies.

In the following section the researcher links different quotations that reflect these final feelings in reaching the conclusion of the study.

*“If I could turn time back, I would not have any children even though I love my children very much and they changed my life a lot but I still feel **that I’ve missed out on my whole young teenage life**. Ja, but having to be a parent before you expect to be one. I feel quite upset about having two children ...”*

*“Somtyd laat dit vir my anderste voel. Dan vra ek vir myself hoekom het ek dan so ‘n lewe deurgemaak. Hoekom het ek dan nie vooruit gedink nie.”*

**Translated:**

*“Sometimes it makes me feel differently. Then I ask myself why I put myself through this life. Why did I not think about the future?”*

The following narrative comes from the participant who was employed at the time of the second birth and expressed her honest **ambivalence and mixed feelings towards herself and her children:**

*“But for me it feels like I can’t do nothing (sic). **It just feels like I’m stuck up with them. Like I can do nothing that I really wanted to do. It’s almost like they holding me back.** But I do want to go study further and I do want to make something of my life. Why the hell are you here. Can’t you just disappear or something. And then the next day I just love them and I just want to be there Sometimes, I love them. I want to be close to them and I just feel happy. And then the next, I just hate being me. I just hate that they’re in my life because how would I have been if they wouldn’t (sic) have been here. So it’s a love/hate relationship. I know it’s really not right to feel like that... **I’ve got something that’s mine that no one can take away** from me. I am their provider, I am their everything and you know that kind of makes me happy because I want to be something for someone and with L [the second child], that just proved again to me that I am worth having children.”*

The last narrative illustrates the open ending, as this participant struggles to reach the point of fully accepting her situation and expresses her inability to continue with a "normal" life:

*“Physically it changed me. The feeling, the drama that goes with it, I don’t want that. Socially, it changed my life. I’ve got two children now I have to look after. I can’t just go where ever I want to. I can’t just find a baby sitter for one child now. I have to find one who is prepared to look after two children.”*

*“There’s so much that I do want to do. I want to be able to walk and go sit just by myself but I just can’t do that. My children are my everything and I have to look after them. **That’s my responsibility. That’s my fault...**”*

Ambivalence is commonly experienced amongst adolescents. In a study conducted in America, adolescents reportedly showed the highest incidence of ambivalence when compared to emerging and young adults. The study was consistent with literature which suggests that ambivalence in this stage of development results from the conflicts which arise between the adolescent striving for independence and the need of parents to maintain closeness (Tighe, 2011).

Teenage girls generally display ambivalence toward pregnancy. Although many do not want to fall pregnant, many also do not prevent pregnancy (Kendig, 2010). Steven-Simons, Kelly & Singer (1999) confirms that teenagers fall pregnant mostly as a result of not using contraception. Literature suggests that ambivalence is often reflected in the way in which teenagers perceive pregnancy. Teenagers who have ambivalent feelings towards pregnancy are more likely to use contraception albeit inconsistently at times (Bruckner, Martin & Bearmen, 2004). Rosengard, Phipps, Adler & Allen (2004) in a study conducted with teenagers, explored the intentions of teenagers to fall pregnant. They found that although many teenage girls did not plan to fall pregnant, they were actually perceived as being at risk and likely to fall pregnant because they did not consider contraceptive use.

Falling pregnant also results in mixed feelings. Furstenburg *et al.* (1989) suggest that teenagers who fall pregnant often exhibit ambivalence regarding the pregnancy. Although

many teenage girls, towards the end of their pregnancy, are highly motivated to become parents, many may not have felt the same in the beginning. The initial ambivalence about the pregnancy is, however, most felt in decisions relating to schooling, their relationships with the father of the child, and their perceptions of family support (Fox as cited in Furstenburg *et al.*, 1989). This initial ambivalence may lead to decisions which provide alternatives to teenage parenting, such as abortion (Donnelly & Voydanoff, 1996) or even adoption (Theron & Dunn, 2006).

As teenage girls reflected on their mixed feelings about their unintended repeat pregnancies, it became evident that many were not prepared for either the pregnancy or the difficulties of parenthood. Despite all the hardships they endured, their emotions told a story of two different worlds, one of which was hard and distressing and the other pleasant and joyful. Being focused so much on their current parenting experiences made them uncertain about their futures.

It became clear from the findings of this study that the “stories” of teenage mothers who underwent unintended repeat pregnancies are still unfinished, and will continue to challenge them in many ways. In phase 1, their reflections on “how it all happened” made the reasons for unintended teenage pregnancies clearer. Young girls are drawn into sexual relationships by their needs for love, care, and money. In phase 2, their reflections of “what happened then” portrayed a picture of consequences which created emotional turmoil and disrupted individual, family and social life for these teenage mothers. Phase 3 described the ambivalence which teenage mothers feel after having experienced an unintended, repeat pregnancy. Their reflections leave phase 3 open-ended as they try to reconcile what they had dreamed of with the current realities of their lives.

#### **4.5 CONCLUSION**

This chapter presented an analysis of the data which was collected from teenage mothers with unintended repeat pregnancies. Data was presented as a narrative which provided some insight into the lives of these teenage mothers. Their narratives reflected the deeper

meaning attached to giving birth to a second or third infant in their adolescent years and the consequences which followed such unintended, repeat pregnancies. Numerous themes and sub-themes emerged in the data analysis process, which were discussed along a story line which consisted of three phases. These themes and sub-themes were then contrasted and compared with current and previous literature.

The final chapter will conclude the study and provide a summary of the previous chapters as well as conclusions which were reached in relation to the research problem, the research question, the goals and objectives, the research methodology and the literature review. A more in-depth summing up of the findings will be done, as well as a summary of conclusions reached in each of the three phases. The chapter will conclude with recommendations for relevant stake-holders and future research.



## CHAPTER 5

### SUMMARY OF FINDINGS AND RECOMMENDATIONS

#### 5.1 INTRODUCTION

Chapter 4 provided a detailed account of the findings of the study. The discussion of the findings was based on the themes and sub-themes which had emerged in the analysis of the data. These findings were presented as a narrative and contrasted and compared with relevant available literature. The goal of the study was to explore and describe the reflections of teenagers who had experienced unintended repeat pregnancies.

This final chapter of the study provides a brief summary of each of the previous chapters. These chapters include the introduction and orientation to the study, the literature review, the research methodology and the research findings as it relates to existing literature. All these chapters will be presented to reflect on how the goal and objectives of the study were achieved. These summaries will also draw conclusions about the various aspects of the research process as experienced by the researcher.

Finally, the three phases depicted in the research findings will be discussed and conclusions that were drawn under each theme in the data analysis process will be summarized. The chapter concludes with recommendations that will be made based on the researcher's experiences with the participants and the stories they related in the data collection process; the review of relevant literature and the findings of the study. These recommendations are useful for all stakeholders of social service professions to gain a better understanding and improve service delivery to teenage mothers and their families.

#### 5.2 SUMMARY OF RESEARCH PROBLEM, RESEARCH QUESTION, RESEARCH GOAL AND OBJECTIVES OF THE STUDY AND CONCLUSIONS

Chapter 1 provided an orientation to the research study that was conducted. An overview of the literature and theoretical framework within which the study was positioned, was

provided. This was followed by the researcher posing the research question; namely, “What are the reflections of teenage mothers who have experienced unintended, repeat pregnancies,” which flowed into the goals and objectives of the study. The goal of the study was to explore and describe the reflections of teenage mothers who had experienced unintended, repeat pregnancies. The goal was to be achieved through the objectives which explored and described the events which led to teenage mothers experiencing repeat pregnancies and the changes which followed these pregnancies.

The research methodology which defined the methods and techniques that were to be employed in the study were outlined with emphasis being placed on the sampling, the data collection, the data analysis and the trustworthiness of the study. The researcher chose to use a qualitative approach with an explorative, descriptive design to gain more detailed and in-depth descriptions of the teenagers’ reflections of their unintended repeat pregnancies. This approach was chosen as a suitable approach as the researcher was able to explore more deeply the perspectives of the participants and gain a thorough understanding of their experiences. The approach and design were also used in order to reveal new information on the teenage mothers’ experiences of their unintended repeat pregnancies.

The researcher further chose to employ a narrative strategy of enquiry which allowed her insight into the lives of the participants by allowing them to tell their stories.

Participants were selected through the purposive sampling technique which enabled the researcher to obtain a sample based on her judgement and best suited to the purpose of the study. Data was collected through face-to-face interviews with participants, which allowed the researcher greater flexibility in employing relevant skills and techniques. The use of the interviewing guide furthermore enhanced the interviewing process by providing a guideline for relevant topics which needed to be addressed during the interview. The data was analysed using the steps proposed by Creswell (2009) and

themes and sub-themes were generated through the coding process. The trustworthiness of the study was discussed using Guba's model (as cited in Krefting, 1991).

The chapter was concluded with a discussion on the ethical considerations which were pertinent to the study, as well as reflections by the researcher on her position in relation to the study. In conclusion, the researcher deduced that the qualitative research approach and the designs and methodology used in the study were adequate in reaching the goals and objectives of the study.

### **5.3 SUMMARY: LITERATURE REVIEW AND CONCLUSIONS**

Chapter 2 was presented as a review of literature relevant to the research topic. The research topic was initially placed in context by exploring the developmental changes in adolescents; whereafter the reasons for choosing the Problem-Behaviour theoretical framework were explored. Major emphasis was placed on the causes and consequences of teenage pregnancy. Here the researcher provided literature relating to the objectives of the study, namely; factors which lead up to teenagers experiencing unintended repeat pregnancies and the changes which follow as a result of the pregnancy. Literature was still further presented on the options teenagers face when choosing not to fulfill the parenting role. Here alternatives such as abortion and adoption were explored. The realities of becoming a teenage parent then revealed some of the challenges associated with teenage pregnancy and the roles played by significant others when unintended pregnancies are experienced.

The chapter was concluded with evidence of intervention programmes which have used globally in an attempt to stem the tide of teenage pregnancy.

It was obvious in reviewing the literature that teenage pregnancy constitutes a major problem throughout the world. Understanding some of the possible causes and concerns provided the basis from which comparisons and contrasts about unintended repeat pregnancies could be made. The researcher concluded that the literature reviewed was

indeed in line with the goals and objectives of the study and served as a reference for the study.

#### **5.4 SUMMARY: RESEARCH METHODOLOGY IMPLEMENTED IN THE STUDY AND CONCLUSIONS**

Chapter 3 outlined in greater detail the implementation of the research methodology. The goals and objectives were presented as starting point to ensure that the research approach, research design and execution of the methodology were suitable for achieving these goals and objectives. The research approach and research design of the study were discussed in depth as were the reasons for choosing them. As discussed in 5.2, the researcher chose to use a qualitative approach with a descriptive, explorative design. This was best suited to the study as it allowed the researcher to gain detailed, descriptive information of the experiences of teenagers and their unintended repeat pregnancies. Furthermore, a narrative strategy of design was employed to allow participants to relate their stories with as much detail as possible.

The population and sampling were discussed and detailed descriptions were provided on how the population and the sample were selected for the study. Purposive sampling was chosen and implemented in the study as this allowed the researcher to select a sample which was based solely on the judgement of the researcher and the purpose of the study. Data collection, as discussed in Chapter 3, was carried out using semi-structured, face-to-face interviews. This allowed for greater flexibility in the interviews and provided the researcher with more in-depth accounts of the teenagers' stories. Data collection was further enhanced by the researcher using a voice recorder and taking notes during the interviews.

Prior to the study, a pilot study was conducted in order to test the data collecting instruments. Deductions made from this study were used to improve on areas which were problematic.

An account is provided on the process which was followed in collecting the data. The researcher after conducting the pilot study, accessed files to select appropriate participants; conducted the interviews; appropriately terminated these interviews and completed the necessary note-taking and transcribed the interviews verbatim in preparation for the data analysis.

Following the data collection and transcribing of the interviews, the strategies and techniques used in the datum analysis process, were described. Data was coded and analysed using the steps described in Creswell (2009), from which themes and sub-themes emerged. Strategies and techniques included the transcribing of interviews, coding, creation of themes and sub-themes, interpretation and reporting.

The final section in the Chapter 3 provided some insight into the limitations of the study. Limitations ranged from intellectual and language barriers to role confusion. Accessing participants also presented a problem as was the difficulty in achieving representivity across the racial grouping in the Western Cape.

Chapter 3 provided a detailed account of the research methodology and the implementation thereof. The research approach, design and strategy of enquiry were effectively used to provide detailed information which could be utilized in the data analysis process.

## **5.5 SUMMARY: FINDINGS OF THE STUDY AND CONCLUSIONS**

In Chapter 4, the findings of the research study were identified as themes and subthemes. During the analysis of the data, it had become clear that the narratives had indeed become a story which clearly was divided into a beginning, a middle and an end. The findings were therefore presented as three phases in which the participants reflected on the three aspects of the story, namely; “How it all happened”; “What happened then” and “the open ending.” The emphasis of this Chapter was focused on the themes and sub-themes which emerged and which were compared and contrasted with relevant literature. The

conclusions to the findings reached in Chapter 4 will be presented in the following section.

The findings as discussed earlier were divided into three phases. Each of these phases will be discussed separately, touching on the main themes which emerged in each phase.

### **5.5.1 Phase 1: The beginning: “How did it happen?”**

#### **5.5.1.1 Theme 1.1: “I met this man....”**

Findings suggest that teenage girls become sexually involved with men as they have intense needs for love and care. The study revealed that teenage girls easily became involved in relationships shortly after meeting men who showed an interest in them or expressed any feelings of love or care towards them. Sexual relationships developed soon afterwards. The deduction can therefore be made that teenage girls are easily taken in by men’s expressions of ‘love’ and ‘care’, and in an attempt to hold onto these men, reciprocate these feelings with sexual favours. The findings further suggest that teenage girls are extremely vulnerable. Their vulnerability as insecure adolescents is clearly demonstrated in their needs for attachment. Significantly, seven of the nine participants came from single parent families where the father had not played a major role in their lives. The conclusion can therefore be drawn that teenage girls who do not have a fatherly figure in their early developmental stages yearn for someone to fill that role as they grow older. They are therefore likely to become more easily attached to men in their teenage years as they have a greater yearning for love and care from someone who represents the father that had never been part of their lives.

Findings further suggest that teenage girls become involved in relationships as a means of obtaining financial support. For seven out of the eight participants who came from economically disadvantaged backgrounds, having a first child had already placed severe constraints on their financial resources. All of the teenage girls in the study struggled financially and were dependent on their families for support. Findings revealed that many

of the partners of these teenage girls were employed and able to contribute toward the upkeep of the first child and the household. Therefore having a man in their lives who could assist financially, provided the teenage mothers and their families with the support they needed. Based on these findings, the researcher concluded that teenage girls became involved in relationships for the benefits that it brings.

The conclusion was also reached that men were able to manipulate relationships by providing money, love and care to teenage girls who showed an intense need to have these needs fulfilled.

#### **5.5.1.2 Theme 1.2: “It can’t happen to me again!”**

Findings show that teenage girls have sex for pleasure and pay little attention to the possible consequences. As all the teenage girls in the study had already had a first child, one would have thought that they had learnt from the first unintended pregnancy. However, all the participants reflected that they had had sex casually and for pure enjoyment which had resulted in a second unintended pregnancy. Many too, in the interviews, were nonchalant about having sex and reported having sex on the spur of the moment. The findings also suggest that the teenage girls who are still involved with the same partner, viewed sex as a natural part of the relationship.

Teenage girls, who have sex, often do not use contraception or any other form of protection. Findings in this study showed that seven of the eight participants had not used protection. These participants reported that they had not fallen pregnant since the first child and had therefore continued taking chances having unprotected sex. Based on these responses it seemed appropriate to conclude that teenage girls, despite having fallen pregnant previously, still continued having sex without considering the consequences of their actions.

### **5.5.1.3 Theme 1.3: Contextual Issues**

Findings suggest that teenage girls who experience repeat pregnancies, generally have poor relationships with their parents. Most of the participants in sharing their stories revealed that they had either been reared by single mothers, aunts or grandmothers. In three instances, grandmothers had assumed responsibility for participants from an early age, as mothers were not capable of doing so due to social problems like drug or alcohol abuse. For these teenage girls, their mothers were never a constant factor in their lives. The deduction can therefore be made that parents, and especially mothers, play an important role in the early stages of the child's life. The researcher concluded that the poor relationships between teenage girls and their parents (particularly mother) contributed to the experience of a repeat unintended pregnancy.

In two instances, step-parents were involved and this also had serious implications for relationships in the family. Participants reported that step-parents had difficulty accepting them into their lives and had even greater difficulty accepting the second pregnancy. This had further ramifications for the way in which they were treated by their own parents who were torn between their loyalty toward the teenager and the partner. Based on this it was evident that teenage girls experienced difficulties in homes where step-parents (either step-mom or step-dad) were present. The inference can therefore be made that step-parents do not substitute for biological parents as they are less likely to tolerate problem behaviour.

All of the participants in the study were exposed to social problems at some stage in their lives. Findings of the study further suggest that social problems that exist in the family predispose teenage girls to unintended repeat pregnancies. The participants in this study all reported that they had experienced or were experiencing social issues in their families. Issues such as divorce, substance abuse, domestic violence, poor socio-economic circumstances and HIV/AIDS all presented these teenage girls with social challenges. These social challenges had impacted on their lives in different ways and in some way had also contributed to the unintended repeat pregnancy.

The findings also suggest that teenage girls depend on family support to help care for the first child. The participants reported that they were almost fully dependent on their families for the upkeep of the first child. Only two participants took care of their children daily; whilst others relied on their mothers and grandmothers for assistance with care. Five of the eight participants returned to school after the initial pregnancy and mothers and grandmothers assumed the parenting role for the first child. The researcher concluded that shifting the responsibility of care for the first child onto significant others, allowed the teenage girls greater freedom for social interaction which led to a second (or third) unintended repeat pregnancy.

### **5.5.2 Phase 2: The middle phase of the story: “What happened then?” Reflections on the consequences of the repeat pregnancy**

#### **5.5.2.1 Theme 2.1: The teenage mothers’ initial reactions when they learnt that they were pregnant**

In this phase, the findings suggest that teenage girls experience a great deal of emotional turmoil and have difficulty accepting a second pregnancy. The study revealed that participants were traumatized when they discovered that they were pregnant again and verbalised emotions such as denial, anger, guilt and disappointment. For those who had difficulty verbalising their feelings, their actions displayed their inner turmoil. The findings show that teenage girls, in their turmoil, consider other options to parenting a second child. In this research study, four of the participants considered abortion but none of the participants however carried out the procedure. Two participants also went to the emotional extreme of having suicidal thoughts. The researcher thus concluded that participants who experience unintended repeat pregnancies are so overwhelmed by its occurrence that they consider extreme measures to remedy the situation. However, they do accept the situation over time.

Findings further suggest that teenage girls experience the loss of childhood and freedom when falling pregnant a second time. All the participants felt the pressures associated









encourages teenagers to approach them on matters relating to reproductive health. Training programmes should therefore be instituted to mentor and coach these professionals so that teenagers find their services more meaningful and accessible.

2) The implementation of programmes to reduce the incidence of unintended teenage pregnancies could have far-reaching effects on young mothers. Such programmes need to be tailored to suit the needs of teenage parents, particularly after they have had a first child. The following programmes are recommended:

- Reconstruction programmes that provide support to teenage mothers and increase their capacity to cope with children. The focus of such programmes however should be placed more on personal growth for teenage mothers to re-focus and re-establish their lives. Through this teenage mothers should be supported and encouraged to rebuild and reconstruct their lives to improve their life outcomes as well as those of their children.
- Access to grants should be filtered into these reconstruction programmes where teenage mothers are regularly monitored to ensure that they are up-skilled and educated on matters relating to pregnancy prevention and child care. Such monitoring determines accessibility to the Child Support Grant. This system would be similar to the monitoring which is implemented for foster care grants except that these programmes would be presented more on a macro level.
- Teenage mothers who have returned to schools should be monitored through extra-mural activities as part of the school programme. Such monitoring should be facilitated by school social workers and psychologists who already exist in the schools. An increase in school social workers is however recommended.
- Social media remains one of the most popular mediums accessed by teenagers. Programmes on these sites could be used more effectively in not only preventing teenage

pregnancies and repeat teenage pregnancies but also in discussing the consequences of having repeat births in one's teenage years.

### **5.6.2 To parents**

1) Parents of teenage girls, who have experienced the birth of a first child, should be encouraged to only supervise the care of the first child and not to take full responsibility for these children. By releasing the teenage mothers from their responsibilities, they fail to experience all the difficulties associated with childcare and this predisposes them to similar occurrences of teenage pregnancy.

2) All new parents should receive basic education related to caring for children. As a long-term project, government should consider rolling out parenting programmes to all parents at maternity care facilities where infants are born. This will assist parents in acquiring parenting skills and techniques that can be implemented with children from a young age. By teaching these skills, parents will be able to understand and address some of the needs that children have as they progress through their developmental stages. This may alleviate some of the attachment needs identified in the study. Such programmes should also be rolled out in the communities where it could become an essential part of up-skilling parents. Government department like Health, Social Development and the South African Social Services Agency should collaborate in devising such programmes with assistance in implementation coming from non-governmental organisations.

### **5.6.3 To educational institutions**

1) Sex education should be formalized in schools from Grade 1 right through to Grade 12 and even beyond. This should be appropriately done to allow even very young children access to information. As discussed earlier in Chapter 2, Section 2.4.1.2, countries like Sweden have successfully reduced their teenage pregnancy rates by developing more open attitudes toward sex and increasing education on the matter (Jones *et al.*, 1985).

2) Schools should be more flexible in accommodating pregnant learners. Currently the Department of Education has a very progressive policy relating to teenage pregnancy.

Problems however arise as the policy is interpreted and implemented differently by different role-players. These role-players and particularly school principals should be mentored and guided to enforce these policies uniformly to ensure that preference is not given to certain learners. Unfair treatment may result in learners dropping out of school.

3) Educators have an important role to play in helping to improve the education levels of learners and they should therefore be willing to be of assistance to learners who experience pregnancy. Because teenagers spend so much of their time at school, teachers are often taken into their confidence. This opens doors for teachers to encourage dialogue with learners on the matter and engage in discussions which motivate learners to aspire to better prospect in life.

#### **5.6.4 Recommendations for future research**

1) The researcher recommends that future research into unintended repeat teenage pregnancies be focused more on the experiences and consequences of teenagers after a second or third child. From this study it was evident that teenagers were met with many challenges which were far beyond their capabilities and the findings remained inconclusive in the final phase as teenagers were faced with on-going consequences. An interesting sequence to this study could be done to follow up on these same participants in a few years' time, to establish whether their life courses have changed and what the long-term effects of these repeat pregnancies have been on their lives.

2) Future research should also pay more attention to the consequences of these unintended repeat pregnancies on the families of these teenage mothers (including their children) to determine how they have been affected.

#### **5.7 CONCLUSION**

In this chapter, the researcher provided a synopsis of each of the previous chapters. A brief summary and conclusions were drawn on the most pertinent points in each chapter. Chapter 1 had provided an orientation to the study; chapter 2 provided a review of

literature; chapter 3 provided a discussion of the research methodology employed and chapter 4 provided a discussion of the research findings.

Through the study, the researcher explored and described the reflections of teenage girls who had experienced an unintended repeat pregnancy. This goal was attained by focusing on the objectives which sought to explore and describe the events which led up to the unintended repeat pregnancies of teenage girls and the changes that had occurred following these unintended repeat pregnancies. Through the reflections of these teenagers, which were related as a story, the researcher gained insight into; how the pregnancies came about; what the consequences of the pregnancies were; and the ambivalence felt at having experienced an unintended repeat pregnancy. The researcher however concluded that the stories told by these teenage mothers still continue leaving an open ending.

Numerous findings and conclusions were summarized in this final chapter and a number of recommendations were made to relevant stakeholders who could be effective in reducing the high incidence of female teenage pregnancies and ultimately ensuring that unintended repeat pregnancies do not reach similar proportions.

In conclusion, this study showed that teenage girls who had experienced unintended repeat pregnancies were able to reflect on some of the events which may have led up to the pregnancy. These were however heavily outweighed by the consequences of the unintended repeat pregnancies which also left their stories unfinished as they reflected on the on-going effects the unintended repeat pregnancies still had on their lives.

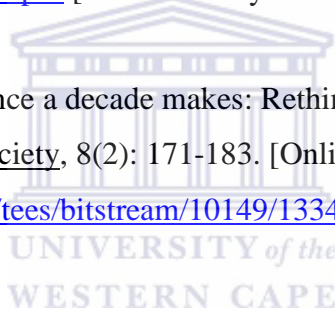
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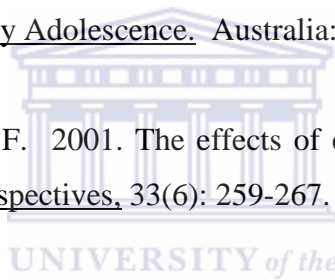
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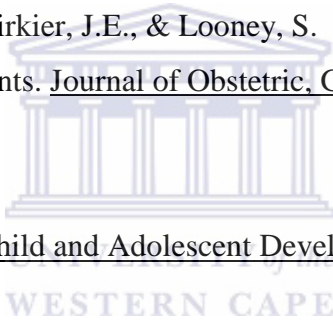
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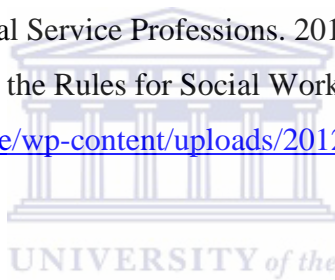
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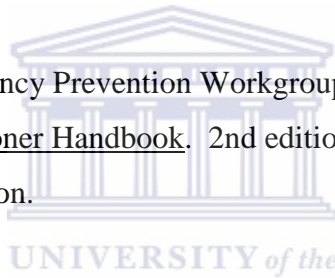
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**LIST OF APPENDICES**

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## Appendix A: Information Sheet



# UNIVERSITY OF THE WESTERN CAPE

Private Bag X 17, Bellville 7535, South Africa

Tel: +27 21-959, Fax: 27 21-959

E-mail:

## INFORMATION SHEET

**Project Title:** Teenagers' reflections of their unintended, repeat pregnancies.

### **What is this study about?**

This is a research project being conducted by Muriel Johnstone, a master's student at the University of the Western Cape. We are inviting you to participate in this research project because you have been identified as a teenager who has experienced a repeat pregnancy. The purpose of this research project is to reflect on your experience of the repeat pregnancy/pregnancies.

### **What will I be asked to do if I agree to participate?**

You will be asked to participate in an individual face-to-face interview which will require you to reflect on your experience of the repeat pregnancy. Reflection is the process whereby you look back at your experience to discover what you have learnt from it and how it influenced the future. Interviews will be conducted in an interview room at Mowbray Maternity Hospital. These interviews are estimated to last about 60 - 90 minutes. A possible follow-up interview may be requested. The interviews will focus on the reflections you may have of your repeat pregnancy. Questions will be related to the repeat pregnancy and how it came about, how it changed your life and that of your children and the extended family and the impact it has had on your current and future life.

### **Would my participation in this study be kept confidential?**

We will do our best to keep your personal information confidential. To help protect your confidentiality, the researcher will ensure that only herself and the study supervisor has access to the data. All data will be stored in a locked cabinet to which the researcher alone has access. Your name will be masked in the recording and you will be assigned a pseudo name when the coding and analysing of the data is done. Therefore, your name will not be included on the data collected; a code will be placed on the data collected, an identification key will allow the researcher to link the data to your identity and only the researcher will have access to this identification key. If we write a report or article about this research project, your identity will be protected to the maximum extent possible. In accordance with legal requirements and/or professional standards, we will disclose to the appropriate individuals and/or

authorities information that comes to our attention concerning child abuse or neglect or potential harm to you or others.

This researcher will request you to audiotape the interview. The tapes will be made to ensure that the researcher is able to record everything that you say. It will also help the researcher to write down the whole interview after it has been conducted by listening to the tapes. The tape will be stored digitally on the researcher's personal computer and it will be protected by a password known only to the researcher. The tapes will be used only for transcribing the interview between the participant and the researcher and will be disposed of once the study has been fully completed.

\_\_\_ I agree to be audio-taped during my participation in this study.

\_\_\_ I do not agree to be audio-taped during my participation in this study.

The researcher will enlist the services of a trained interpreter at the facility to assist you to express yourself in the best way possible. The interpreter will be sworn to confidentiality and will not have access to any of the information obtained in the research process.

#### **What are the risks of this research?**

There may be some risks from participating in this research study. The research is a reflection on your experience of the repeat pregnancy and it may awaken some emotions within you which could cause you to feel embarrassed, uncomfortable, guilty, angry or sad.

#### **What are the benefits of this research?**

This research is not designed to help you personally, but the results may help the investigator learn more about the meanings that teenagers ascribe to their experiences of repeat pregnancy. We hope that, in the future, other people might benefit from this study through improved understanding of how teenagers reflect on the experiences of repeat pregnancy. It is hoped that service providers will become more cognisant of the need to consider the meanings that teenagers ascribe to their experiences as they reflect on what they have been through. By understanding teenagers better, the incidence of teenage pregnancies could be addressed.

#### **Do I have to be in this research and may I stop participating at any time?**

Your participation in this research is completely voluntary. You may choose not to take part at all. If you decide to participate in this research, you may stop participating at any time. If you decide not to participate in this study or if you stop participating at any time, you will not be penalized or lose any benefits to which you otherwise qualify. If during the course of the interview you wish to terminate, you may inform the researcher who will ensure that any negative consequences of the study receives the attention of a counsellor.

**What if I have questions?**

This research is being conducted by *Muriel Johnstone* and the University of the Western Cape. If you have any questions about the research study itself, please contact Muriel Johnstone at Mowbray Maternity Hospital, 12 Hornsey Road, Mowbray, 021 – 659 5580 or [mjohns@pgwc.gov.za](mailto:mjohns@pgwc.gov.za).

Should you have any questions regarding this study and your rights as a research participant or if you wish to report any problems you have experienced related to the study, please contact:

Head of Department: Social Work  
Dean of the Faculty of Community and Health Sciences:  
University of the Western Cape  
Private Bag X17  
Bellville 7535

This research has been approved by the University of the Western Cape's Senate Research Committee and Ethics Committee.



## Appendix B: DOH Approval



### STRATEGY & HEALTH SUPPORT

healthres@pgwc.gov.za  
tel: +27 21 483 9907; fax: +27 21 483 9895  
1st Floor, Norton Rose House, 8 Riebeeck Street, Cape Town, 8001  
[www.capegateway.gov.za](http://www.capegateway.gov.za)

REFERENCE: RP 104/2012  
ENQUIRIES: Dr Sikhumbuzo Mabunda

12 Terblanche Street  
Silveroaks  
Kuils River

For attention: Muriel Johnstone, Dr. M. De Jager

Re: Teenagers' reflections of their unintended, repeat pregnancies

Thank you for submitting your proposal to undertake the above-mentioned study. We are pleased to inform you that the department has granted you approval for your research. Please contact the following people to assist you with any further enquiries.


Mowbray Maternity Hospital      Prof Sue Fawcus      (021) 659 5578

Kindly ensure that the following are adhered to:

1. Arrangements can be made with managers, providing that normal activities at requested facilities are not interrupted.
2. Researchers, in accessing provincial health facilities, are expressing consent to provide the department with an electronic copy of the final report within six months of completion of research. This can be submitted to the provincial Research Co-ordinator ([healthres@pgwc.gov.za](mailto:healthres@pgwc.gov.za)).
3. The reference number above should be quoted in all future correspondence.

We look forward to hearing from you.

Yours sincerely

  
DR NT Naledi  
DIRECTOR: HEALTH IMPACT ASSESSMENT  
DATE: 23/8/2012

## Appendix C: UWC Ethics Approval



### OFFICE OF THE DEAN DEPARTMENT OF RESEARCH DEVELOPMENT

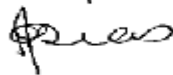
20 June 2012

#### To Whom It May Concern

I hereby certify that the Senate Research Committee of the University of the Western Cape has approved the methodology and ethics of the following research project by:  
Mrs M Johnstone (Social Work)

Research Project: Teenagers' reflections of their unintended, repeat pregnancies.

Registration no: 12/5/14



*Ms Patricia Josias*  
*Research Ethics Committee Officer*  
*University of the Western Cape*

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WESTERN CAPE

**Appendix D: Consent Form for Participants**



# UNIVERSITY OF THE WESTERN CAPE

Private Bag X 17, Bellville 7535, South Africa  
Tel: +27 21-9593674, Fax: 27 21-959 2845  
E-mail: [mdejager@uwc.ac.za](mailto:mdejager@uwc.ac.za)

**Social Work Department**  
Tel: 021 9592277  
9592845

**Fax: 021**

## CONSENT FORM

**Title of Research Project: Teenagers' reflections of their unintended, repeat pregnancies.**

The study has been described to me in language that I understand and I freely and voluntarily agree to participate. My questions about the study have been answered. I understand that my identity will not be disclosed and that I may withdraw from the study without giving a reason at any time and this will not negatively affect me in any way.

**Participant's name**.....

**Participant's signature**.....

**Witness**.....

**Date**.....

Should you have any questions regarding this study or wish to report any problems you have experienced related to the study, please contact the study coordinator:

**Study Coordinator's Name: Dr. Mariana de Jager**

**University of the Western Cape**

**Private Bag X17, Belville 7535**

**Telephone: (021)959-3674**

**Cell: 0833062599**

**Fax: (021)959-2845**

**Email: [mdejager@uwc.ac.za](mailto:mdejager@uwc.ac.za)**

**Appendix E: Parental Permission Form**



**UNIVERSITY OF THE WESTERN CAPE**

Private Bag X 17, Bellville 7535, South Africa  
Tel: +27 21-9593674, Fax: 27 21-959 2845  
E-mail: mdejager@uwc.ac.za

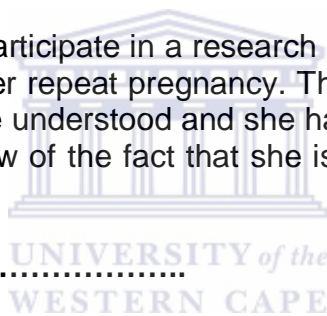
**Social Work Department**  
Tel: 021 9592277  
9592845

**Fax: 021**

**Parental Permission Form**

**Title of Research Project:** Teenagers' reflections of their unintended, repeat pregnancies.

We are inviting your child to participate in a research project which will require her to reflect on her experience of her repeat pregnancy. The study has been described to your child in language that she understood and she has freely and voluntarily agreed to participate. However, in view of the fact that she is under 18, your permission as parent/guardian is required.



**Parent's name**.....

**Parent's signature**.....

**Witness**.....

**Date**.....

Should you have any questions regarding this study or wish to report any problems you have experienced related to the study, please contact the study coordinator:

**Study Coordinator's Name: Dr. Mariana de Jager**  
**University of the Western Cape**  
**Private Bag X17, Belville 7535**  
**Telephone: (021)959-3674**  
**Cell: 0833062599**  
**Fax: (021)959-2845**  
**Email: mdejager@uwc.ac.za**

**Appendix F: Interview Guide**

**Demographical Data:**

15 years	16 years	17 years	18 years	19 years
----------	----------	----------	----------	----------

English	Afrikaans	Xhosa	Other
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Black	White	Coloured	Indian	Other
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**Source of income:**

Parents	Child Support Grant	Father of Child	Other	
---------	---------------------	-----------------	-------	--

Age of 1 <sup>st</sup> pregnancy	Age of 2 <sup>nd</sup> pregnancy	Age of 3 <sup>rd</sup> pregnancy
----------------------------------	----------------------------------	----------------------------------

- Current grade at school.....
- If not at school, at what age did you leave school.....
- Employed/unemployed.....

**Pregnancy Info:**

**Tell me how it came that you fell pregnant for a second and/or third time**

**Tell me about your second/third pregnancy**

**Tell me how your second/third pregnancy changed your life**

**Tell me how your second/third pregnancy changed your children's lives**

**Tell me how your second/third pregnancy changed your extended family's life**

**Appendix G: Editors Verification**

**HELEN ALLEN APed**

Accredited Professional Text Editor, SATI  
Plain Language Practitioner

---

34 Heritage Village  
Tzaneen 0850  
Cell : 072 1966900  
Home : 0877 509638  
Email : helanallen11@gmail.com

14 November 2013

**VERIFICATION**

TO WHOM IT MAY CONCERN:

I am a professional text editor, accredited by the South African Translators' (and Editors) Institute (SATI), and a full member of The Professional Editors' Group (PEG).

On 14 November 2013 , I completed a linguistic edit of an academic thesis

by

**Muriel Johnstone**

titled

*Teenagers' reflections of their unintended repeat pregnancies*



H P Allen (Mrs)

## Appendix H: 'Turnitin' Report

Turnitin - Windows Internet Explorer  
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Welcome to your new class homepage! From the class homepage you can see all your assignments for your class, view additional assignment information, submit your work, and access feedback for your papers.  
Hover on any item in the class homepage for more information.

Class Homepage

This is your class homepage. To submit to an assignment click on the "Submit" button to the right of the assignment name. If the Submit button is grayed out, no submissions can be made to the assignment. If resubmissions are allowed the submit button will read "Resubmit" after you make your first submission to the assignment. To view the paper you have submitted, click the "View" button. Once the assignment's post date has passed, you will also be able to view the feedback left on your paper by clicking the "View" button.

Assignment Inbox: MASTERS STUDENTS		
Info	Dates	Similarity
MASTERS DISSERTATIONS	Start 11-Oct-2013 11:57PM Due 31-Dec-2013 11:59PM Post 13-Jan-2014 12:00AM	4% <span style="color: green;">■</span>

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For security reasons, this page will expire in exactly 30 seconds. If you would like to continue working on this page without timing out, click "extend session" below.

Extend session

Computer | Protected Mode: Off 10:00 15/11/2013