



University of Venda

**THE ROLE OF PARENTS REGARDING TEENAGE PREGNANCY AND
SCHOOL ATTENDANCE IN THE RURAL VILLAGE OF THOMO IN MOPANI
DISTRICT LIMPOPO PROVINCE**

By

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DECLARATION

I **TLANGELANI CALVIA MNISI**, declare that the dissertation entitled “**The role of parents regarding teenage pregnancy and school attendance in the rural village of Thomo in Mopani District Limpopo Province**”, is my own research study which has never been submitted to any university by another student and all the sources I have used have been indicated.

.....
SIGNATURE

(Ms. TC Mnisi)

.....
DATE

DEDICATION

This thesis is dedicated to: my mother **Patrolle Nwa - Mzamani Ngwenya** and my late father **Maninga Mackson Ngwenya**.

A special honor to my late husband **Philemon Thabo Mnisi**, my beloved daughters, **Horisani, Thembeke and Thando Skhanyiso** who, supported me during this study. Thank you so much and may the Lord richly bless you.

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Abstract

The Department of Education has stated that parents and guardians may not be absolved from their responsibilities regarding their pregnant child, and they should take the lead in working with the school to support and monitor their child's health and progress. The purpose of this study was to explore and describe the role of parents regarding teenage pregnancy and school attendance in the rural village of Thomo in Mopani District Limpopo Province.

The study is qualitative, explorative, descriptive and contextual in nature. The population comprised of the selected parents and caregivers residing at Thomo village of Mopani District. Purposive sampling was used to select 10 parents and 5 caregivers. Sampling size was determined by data saturation. Data was collected through in-depth individual interviews, guided by unstructured questions, data analysis was through open coding. Trustworthiness was ensured through credibility, dependability, conformability and transferability and ethical issues were adhered to. One main theme with four sub - themes emerged from the raw data; namely, parents /caregivers skills and personal factors that affect behaviour change; parents / caregivers intention to change the teenagers' behaviour; environmental and cultural factors as facilitators/ barriers to pregnancy prevention and parent-school partnerships. Recommendations were made that included the following: awareness campaigns regarding prevention of teenage pregnancy; establishment of the compulsory education subject; review of existing teenage pregnancy policies; engaging parents on youth programs; using churches to strengthen youth education on the dangers of sex before marriage; as well as capacitating parents on effective communication with their children.

LIST OF ACRONYMS

SABC	South African Broadcasting Corporation
EMIS	Education Management Information systems
SABS	South African Bureau of Standards
Dr	Doctor
MDM IDP	Mopani District Municipality Integrated Development Plan
CBD	Central Business District
UNAIDS	Joint United Nation's Program on HIV & AIDS
GGM	Greater Giyani Municipality
HIV	Human Immune Virus
AIDS	Acquired Immune Deficiency Syndrome
WHO	World Health Organization
CTOP	Choice Termination of Pregnancy
SCT	Social Cognitive Theory
STI's	Sexually Transmitted Infections
SA	South Africa
SAPA	South African Press Association
ARV	Anti - Retro Viral treatment
OVC	Orphans and Vulnerable Children
TV	Television
KZN	Kwa-Zulu Natal
USA	United States of America
UNICEF	United Nations International Children's Fund
FAWE	Forum for African Women Educationalist

CHAPTER 1

OVERVIEW OF THE STUDY

1.1. INTRODUCTION

South Africa has a high rate of teenage pregnancy in schools. The rate is about 61%. Panday, Makiwane and Ranchod (2009) pointed out that provincial trends show a concentration of learner pregnancies in the Eastern Cape, KwaZulu-Natal and Limpopo provinces. Between the years 2004-2008, Limpopo province had 12 848 (60.36%) teenage pregnancies (Panday et al, 2009). On the other hand, according to Department of Health records, over 70 000 terminations of pregnancies were reported in South African public health facilities during the year 2003, representing a 200% increase in terminations since 1997 (Panday et al., 2009). A study indicate that Limpopo Province in South Africa has high rate of teenage pregnancy ranging from young adolescent especially those who are still at school (Mushwana, L., Monareng, L., Richter, S. and Muller, H., 2015.)

About 30% of terminations were among women aged 15 to19 years. The problem of teenage pregnancy among school girls is a major concern in many countries, including South Africa. Panday et al. (2009) indicated that there is a national decline in teenage fertility, which may be accounted for by the increase in the termination of pregnancy, rather than a decline in teenage pregnancy. The aim of the study was to describe and explore the role of parents regarding teenage pregnancy at Thomo Village in Mopani District Limpopo. Globally, teenage mothers who become parents are viewed as a vulnerable group, with limited future educational opportunities, often leading to poverty and economic dependency.

Akella and Jordan (2015) discovered that the United States (US) has the highest level of teenage pregnancy amongst the industrialized nations. This is supported by Nkani & Bhana (2016). Teen pregnancy is thus a health issue that affects the community. However, the United States rates of teen childbearing still remains much higher than in other comparable countries in the world. Moreover, according to the National Campaign to Prevent Teen pregnancy 2013 (Romero, 2016), the teen birth rate for girls in the age group 10-14 years was 0, 4 per 1000 girls in 2012, with no significant change between 2011 and 2012, and an overall decrease of 71% since 1991. These were supported by Mushwana, Monareng, Richter and Muller (2015.), who found that the US has the highest rates of teen pregnancy in the industrialised world, with 40% of young girls becoming pregnant at least once before their 20th birthday. This suggests that 79% of teen births are out of wedlock.

Studies conducted in Australia reveal that pregnancy can be an overwhelming experience at any age. However, in a teenager it can create a developmental crisis, as the young girl alternates between two stages simultaneously: adolescence and parenthood (Rodriquez & Moore, 1996 cited in McMurray 2003; Quinlivan et al., 2004). 'Parenting teenagers have not had time to resolve their own stages of role identity and intimacy'. According to Hanna (2001) their cognitive immaturity makes them more inclined to put their needs ahead of the developmental needs of their child. Choosing between proceeding and terminating a pregnancy is a decision which will have long-lasting repercussions for the teenage mother (McMurray, 2003).

Statistics indicate that pregnant teenagers are more likely to terminate the pregnancy than proceed with the birth (Skinner & Hickey, 2003). However, where childbirth is the outcome, long-term negative implications of teenage pregnancy are considerable. Teenage births carry a higher risk of complicated pregnancies, low birth-weight, premature births and require neonatal intensive care, as cited by (McMurray, 2003; Skinner & Hickey 2003). Additionally, infants born to young adolescent mothers are

more prone to inferior cognitive development and lower educational attainment. Furthermore, they are more likely to demonstrate childhood behavioural problems and adolescent antisocial behaviour; and are at an increased risk of suffering from poor nutrition, abuse, neglect and abandonment (Hillis et al., 2004). Infant mortality within this group is 60% higher than for babies of older women (Swann et al., 2003).

There has been an ongoing debate about whether these psychosocial and health disadvantages and negative consequences come at a considerable cost to both the mother and the child, their families and the wider community. For politicians and governmental agencies, supporting teenage mothers and their children has enormous social and economic impacts (Hanna 2001) and ‘consumes funds [and resources] that could otherwise be deployed elsewhere in the health and social systems’. These are supported by McMurray (2003).

To the young teenage mother, life course outcomes tend to be characterised by negative public attitudes (Hanna 2001); social isolation (Robson 2006); poverty and prolonged welfare dependence; poor participation in education, training or employment; as well as decreased marital opportunities and greater exposure to physical abuse (Hanna 2001). Additionally, Swann, Bowe, Kosmin and McCormick (2003) comment on Botting’s (1998) observation that teenage mothers are up to three times more likely to suffer from postnatal depression than their older counterparts. The practical difficulties and psychological pressures of raising a child in an environment bereft of social support, information, stability and financial assistance may contribute to a young mother’s poor self-esteem, leading to an increased risk of mental health problems (Leishman, 2012).

Adolescent depression is a strong predictor of depression in later adult life (Rowling et al., 2002) and adolescent parenting has long been identified as a risk factor predisposing infants and children to mental health problems in both childhood and adulthood (Townley 2002 & Zeanah et al., 1997). In Africa, the sexual behaviour of urban adolescents in Nigeria and Liberia is now very similar to that of people in the same age category in the USA and Europe (Hayward, 2011).

A survey conducted by a leading International Organisation called 'Save the Children' found that annually 13 million children are born to women under age of 16 and more than 90% of these are in developing countries. It is also said that the highest rate of teenage pregnancy in the world is in Sub-Saharan Africa (Chang'ach, 2012). The research done by Moliko (2010) indicated that teenage pregnancy in high schools is one of the major concerns amongst education stakeholders in Lesotho. Central to this concern is the view that teenagers engage in sexual activities with only a vague understanding of the consequences thereof. One aspect of this is that more often than not teenagers begin their sexual relations without the use of contraception or any form of protection.

Nkani and Bhani, (2016) contend that the African Schools Act (Republic of South Africa, 1996) encourages young mothers to return to school, although there is limited attention given to promoting sexual literacy and gender equality, distributing sexual health information and ensuring access to emergency contraceptives. Further, as research shows, the challenges teenage women face in negotiating condom use is directly related to the persistence of gender inequality, and this requires more attention.

The Department for Education (2007), ensures that learners are taught about sexual education at schools through Life Orientation as a subject. However, despite being taught this subject, teenage pregnancy remains problematic in South Africa, as most of the areas of concern regarding males' traditional and cultural practices, as well as gender stereotypes. These are not dealt with adequately in the Life Orientation

subject. In 2007, the Department of Education released a booklet titled *Measures for the Prevention and Management of Learner Pregnancy*. The release was not without controversy, and the measures continue to advocate for the rights of pregnant girls to remain in school, but suggest up to two years' waiting period before the girls can return to school, in the interest of the rights of the child. However, according to the Bill of Rights, as contained in the Constitution of the Republic of South Africa, Act 108/1996, Section 29, it is indicated that everybody has the right to Basic Education.

Therefore, it may be improper to deny teen mothers an opportunity to continue their schooling when they are ready to do so. In 2000 the Gender Commission on Gender Equity reported to the South African Ministry of Education that they had received a number of complaints from teen mother learners concerning the manner in which their schools had treated them. The teen mothers complained that their schools did not allow them to attend classes because they were mothers (Ministry of Education, 2000). The policy would further recognize the responsibility and influence that the education system prescribe with larger communities to prevent and manage teenage pregnancy.

Study by Bhanaa, Morrellb, Sheferc and Ngabaza (2010) believe that South African law forbids the exclusion of pregnant teenagers from school and permits young parents to continue with their schooling. However, the existence of progressive policy and law does not by itself ensure that pregnant teenagers and young parents remain in school or experience as little disruption to their studies as possible. This was evidenced by the School governing bodies and teachers in Mopani District at one village, which established the internal policy which stated "*mothers of the pregnant teenager should wait (stay) at the school gate as a way of taking care of their pregnant daughters*". The Department of Education (2007) stated that parents and guardians may not be absolved from their responsibilities regarding their pregnant child, and they should take the lead in working with the school to support and monitor their child health and progress.

1.2. Research problem

The current researcher resides at Thomo Village and has observed that since 2010, when teenagers become pregnant, female parents or hired caregivers are supposed to wake up every morning and accompany the pregnant girl child to school and stay at the gate until 14h00. This process starts immediately after the school discovers that the girl is pregnant until she gives birth. What is surprising is that these parents do not enter the gates of the school, but remain outside the gates. They sign the attendance register on a daily basis, which is monitored by the educators within the school. In cases where the parent is working, she is supposed to appoint a relative or hire an assistance to assist and pay a visit on her behalf on a daily basis and in some cases payments are made as per agreements. The situation also affects the mother of the boy who impregnated the girl. If it happens that the girl starts labour pains while in class, it is the responsibility of the mother to call an ambulance or hire a car with her own resources, and educators do not involve themselves in these issues at all. This study therefore seeks to explore the perceived role of parents played when the teenager is pregnant and attending school at Thomo Village in Mopani District, Limpopo.

1.3. PURPOSE OF THE STUDY

The purpose of the study was to determine the role of parents towards teenage pregnancy and school attendance in the rural village Thomo in Mopani District, Limpopo Province.

1.4. THE RESEARCH QUESTIONS

The study was guided by the following questions:

- What are the perceptions of parents regarding teenage pregnancy?
- What is the role of parents when the teenager is pregnant and attending school?

- What are the cultural practices that can influence the role of parents during the teenager's pregnancy?

1.5. RESEARCH OBJECTIVES

The objectives of the study were to:

- Explore and describe the perceptions of parents towards teenage pregnancy.
- Describe the role of parents when the teenager is pregnant and attending school.
- To identify cultural practices, sex education, and support during teenage pregnancy.

1.6. SIGNIFICANCE OF THE STUDY

The findings might be used to contribute towards the promotion and involvement of the parents in the sexual education of both male and female teenagers. The Department of Health may also benefit from recommendations, as termination of pregnancy may be minimised, as both the parents and teenagers may be empowered on how to minimise teenage pregnancy. Sexually - transmitted infections may be minimised because the whole community will be encouraged to practice safe sex and consult if they contract it. The community may benefit from the different sectors through awareness campaigns which can be conducted such as Imbizos where the community shares ideas on how to minimise teenage pregnancies. The recommendations could be used to motivate other researchers to assess teenagers' concern of being guarded by parents at school during their pregnancy. Absenteeism at school may be minimised due to the full participation of teenagers, as they would not attend antenatal care visits hence it is compulsory for pregnant women to attend antenatal care visits. The Department of Education will benefit by producing good results, especially for grade twelve learners.

1.7. CONCEPTUAL FRAMEWORK

The conceptual framework of Bandura's Social Cognitive Theory (Bandura, 2004) as amended was adopted for this study. The study determined the role of parents when their teenagers were pregnant and attending school in the rural village. This framework identified three main sources of influence on people's attitudes, perceptions, and intentions to act, as well as their ability to carry out their intentions, (Dilorio et al., 2001; & O'Leary, (2001).

These sources are, individual determinants, behavior and environmental or social factors, (Bandura, 2004). Figure 1 is a simple representation of the Social Cognitive Theory, adapted from Bandura's contribution to social cognitive theory (SCT) in the context of HIV (Bandura, 1994).

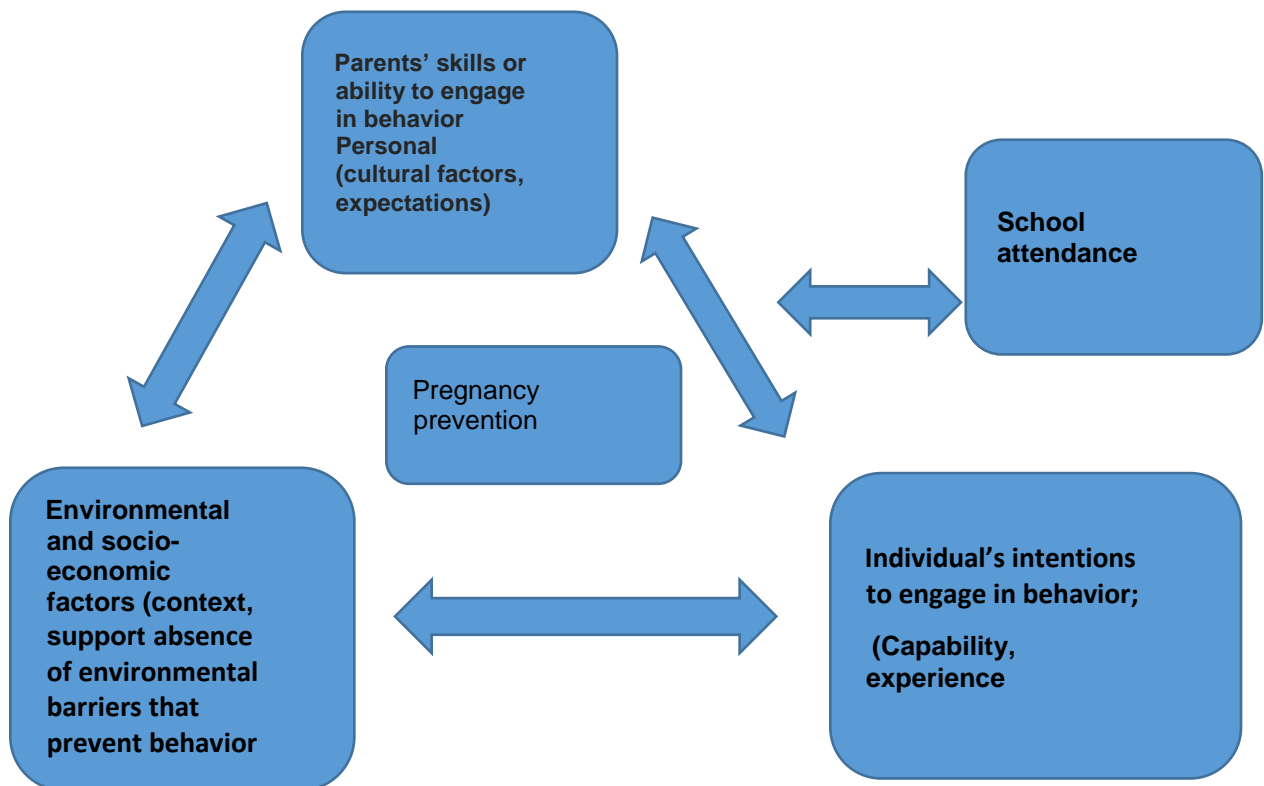


Figure 1: Social cognitive framework

By increasing parents' skills and facilitating opportunities for communication, through take-home activities, the program also aims to benefit the parent–adolescent relationship, further influencing adolescent behavior change (for example, the likelihood that adolescents will delay intercourse or use condoms).

This is because the goal of this study was to provide a practical understanding of parental perceived roles in terms of their personal factors, their intentions in preventing pregnancy and to promote school attendance. The qualitative approach was used in the form of face to face interviews, in order to obtain a contextual understanding of parents' role in teen pregnancy. Further, a discussion of the conceptual framework and the qualitative methodological approach to this study was undertaken in subsequent chapters.

1.8. Definition of key concepts

Role

According to the Cambridge English Dictionary, a role is the position or purpose that someone has in a situation, organization, society or relationship. In the current study, the role of the parents referred to the skills or ability to engage in behaviour, individuals' intentions to engage in behaviour, responsibility and the accountability that the parents take during the pregnant girl - child's school attendance.

Parents

Parents are mothers, fathers; a living thing that has produced others of its kind and source from which others are derived. It includes a guardian and every person who has parental responsibility under the Family Law Act of the Common wealth and any person with whom a child normally or regularly resides. In the current study parents are both the mothers and care givers of the teenagers who were residing at Thomo Village, where the research was conducted.

Sexuality Education

The Cambridge Dictionary describes sexuality education as someone's ability to experience or express sexual feelings. In the current study sexuality education was the information that was provided to the teenagers about sex, advantages and its disadvantages whiles at school

Teenage pregnancy

Teenage pregnancy is formally defined as a pregnancy in a young woman who has not reached her 20th birthday when the pregnancy ends, regardless of whether the woman is married or is legally an adult, (Singh & Darroch, 2012). In the current study teenage pregnancy referred to the pregnancy of a girl aged 14 to 18 years, who was at school.

School attendance

The Victoria State Government School Attendance Guidelines (2014) define it as schooling compulsory for children and young people aged from 6 – 17 years, unless an exemption from attendance or enrolment has been granted. In the current study school attendance meant full - time participation of learners without absenteeism, irrespective of pregnancy.

Rural village

The Stevenson (2010) defines rural as “relating to or involving the country side and also refers to the small area that is mainly characterized by people who are poor and mostly dependent on grants for sustainability and living. Villages are described as a group of houses and other buildings in a country district, smaller than a town. In the current study a rural village referred to Thomo Village, where the study was conducted. It is the environmental and socio-economic factors, context, where the presence of support or absence of environmental barriers prevent behavior.

Organization of chapters

Table 1.4: Chapter organization

Chapter 1	Overview of the study, including the background, problem statement, purpose, objectives, research question, significance of the study, conceptual framework, definition of terms, and organization of chapters
Chapter 2	Literature review is provided and it covered perceptions of parents regarding teenage pregnancy, the role of parents when the teenager is pregnant and attending school, cultural practices that influence the role of parents during teenage pregnancy
Chapter 3	Research methodology involve the qualitative research strand. The research methods, research design, research setting, population, sampling, data collection methods, data analysis of qualitative research were described.
Chapter 4	<p>It presented the findings and discussions of research findings. It focussed on the description of four main themes as follows:</p> <ol style="list-style-type: none"> 1. Parents' / caregivers' skills and personal factors that affect behaviour change. 2. Parent's / caregivers' intention to change the teenage behaviours. 3. Environmental and cultural factors as facilitators/ barriers to pregnancy prevention. 4. Parent-school partnerships.
Chapter 5	Conclusions, brief summary of the study and limitations of the study

1.9 CONCLUSION

This chapter outlines the background of the study, the purpose and objectives. Research questions and definitions of concepts. The following chapter discusses the literature review.

CHAPTER 2

LITERATURE REVIEW

2.1. INTRODUCTION

The previous chapter outlined the background of the study, the purpose and objectives, as well as research questions and definitions of concepts. This chapter discusses the literature review. Various authors have defined literature review as the process of finding, reading, understanding and forming conclusions about published research methodology and theory by authoritative scholars on a particular topic. A literature review identifies and compares earlier studies, and helps to avoid duplication and unnecessary repetition (De Vos, Strydom, Fouche, & Delport, 2011; Burns & Grove, 2003). The researcher reviews literature that identifies the research problem and identifies studies with similar topics and content, to avoid duplication. The review focused on books, journals, the internet, reports, as well as extracts, ranging from 2010 to 2015, pertaining to the perception of parents and their role in teenage pregnancy and school attendance in the rural village of Thomo in Mopani Limpopo Province. The terms “parents” and “guardians” were used with regard to the relatives involved.

The literature is discussed under the following headings:

- The perceptions of parents regarding teenage pregnancy
- The role of parents when the teenager is pregnant and attending school
- Cultural practices that can influence the role of parents during teenage pregnancy

2.2. The factors associated with teenage pregnancy

Burnett and Farkas (2009.) as cited in Shahidul, Karim, & Mustari , 2015), found that single-female - headed households face greater financial and time constraints than two-parent households, in general, which may impact differently on teenage pregnancy as well as their academic achievement. However, studies have also found that teenagers from households headed by married women have higher educational attainment, while children of widows are more likely to work. The current researcher assumes that the difference might be due to the finances received as benefits from the deceased, as their children will have money to use on their daily living social needs.

Therefore, the current study also seeks to report that school distance can influence teenagers to fall in love with taxi drivers, so that they can get free rides when going to school, forgetting that this can lead to pregnancy or sexual transmitted infections. However, the length of time and energy needed to cover the distance for children with empty stomachs was also identified as a contributing factor, hence parental anxiety regarding sexual safeguard of their daughters was a major problem (Shahidul, Karim, & Mustari, 2015).

In addition, Shahidul et al., (2015) have found that in rural areas girls' dropout rates were higher because parents considered girls' schooling as non- beneficial when they leave their own family after getting married. It further revealed that early marriage is the main cause of early school dropout of girls in Afghanistan. However the study by Shahidul, Karim, & Mustari studies have highlighted that, when girls reach puberty, parents regard it as the time for them to be married and tend to arrange a marriage, instead of continuing schooling (Shahidul & Karim, 2015). In the current study, the perceptions of parents regarding teenage pregnancy were explored and described. Furthermore, some studies argue that

the girls' early marriage is associated with dropouts in certain contexts. However, in some societies girls leave their parental households after marriage, girls' dropout might be higher in those societies such as in of India. It was also reported that in those countries education might give girls better preparation for marriage. However, despite this, parents are sometimes reluctant to let their daughters get an education, as higher education raises the cost of marriage for girls. It was also found that in Bangladesh girls with lower socioeconomic backgrounds drop out of secondary school when schooling. Furthermore, higher education inflates the dowry in the marriage market of girls (Shahidul & Karim, 2015).

The authors argue that if girls completed/ acquired have higher education but have lower parental socio-economic background, they face difficulties in getting a husband. This is because of the requirement in which parents need to pay a higher dowry to marry their educated daughters to similarly educated grooms. Therefore, this results in early dropout among girls (Ackers et al., 2001), The PROBE team, 1999 cited in Shahidul et al., 2015).

Chigona and Chetty (2007) maintain that there are some schools that do not allow pregnant girls and young mothers to attend classes in sub-Saharan countries of Africa. According to the Forum for African Women Educationalists (FAWE). The executive director indicates that in Zambia alone, 2,230 girls had been forced to drop out of school in the last few years because they fell pregnant. Most studies (Natalie-Rico, 2011) found that dropping out of high school is one of the negative effects of teenage pregnancy. Teenage pregnancy is commonly associated with school non-attendance and dropout. Pregnancy and its complications often predispose youths to permanently leave school. In addition, sudden, frequent absenteeism may be a signal of pregnancy and accompanying symptoms to educators and others (Natalie-Rico, 2011).

2.3. Effects of teenage pregnancy

According to the findings of the research done by Bishop (2015) children born to teenagers are at increased risk of growing up in poverty, abusing alcohol and drugs. They also become involved in crime and become teenage parents themselves. This is supported by Williams & Davidson (2004). This ongoing intergenerational cycle of social disadvantages, unemployment and poor social functioning suggests that family pathology may contribute to the aetiology of teenage pregnancy (Quinlivan et al., 2004; Hillis (2004); Woodward et al., 2004). A host of community, family, school and individual factors have been identified as placing young teenage women at increased risk of pregnancy. For instance, exposure to family violence, early parental divorce or separation, poor relationships with parents (Quinlivan et al., 2004), physical or sexual abuse, alcohol and substance abuse, lower parental education (Hillis et al., 2004); maternal role models of single parenthood (Woodward et al., 2001); poverty, unemployment and adolescents caught up in the public care system (Knight et al., 2006), are all widely recognised as antecedents to teenage pregnancy.

The South African Human Rights Commission revealed that the actions of the schools are violating the following provisions which seek to protect the learners' ability to enjoy their right of access to education (Chigona & Chetty, 2007). The Free State Provincial Department of Education circular number 18 of 2010 reiterated measures for the prevention and management of learner pregnancy in school. The purpose of this policy was to ensure that learners should not be expelled from school due to pregnancy. Section a (3) of the Constitution prohibits the unfair discrimination of learners or directly, including based race on gender, sex, and pregnancy. The school, being an organ of the state, can therefore not discriminate. Section A (1) of South African School Act, provides that the only way in which a learner can be involuntary excluded from attending class is through misconduct, as stipulated in the code of conduct (Republic of South Africa, 1996).

2.4. The role of parents regarding teenage pregnancy

Mushwana et al., (2015) revealed that teen pregnancy rates are directly impacted by particular social issues which can be grouped as follows: poverty, workforce development, out - of - wedlock birth, positive child development and the role of the father in responsible child - rearing. This is supported by the National Campaign to Prevent Teen pregnancy. Another implication by Mushwana et al., (2015), is that teen pregnancy is an indication of a dysfunctional relationship that frequently occurs between the father and the child. The long-term effects are dramatic because children who live apart from their fathers are five times more likely to be poor than children with both parents at home. Over two decades of research have shown a strong relationship, with both the mother and the father being an important influence on whether young children themselves will become pregnant as teenagers. This is supported by the National Campaign to Prevent Teen Pregnancy (2011)

2.5. The role of parents when the teenager is pregnant and attending school

According to Mushwana et al., (2015) educational opportunities, workforce development programs and school system with strong extracurricular activities can help teenagers offset the social conditions caused by systematic poverty in their community. However, prevention programs should also focus on the wellbeing and positive development of all young children, to reduce the generational cycle of teen pregnancy. The implications of a generational cycle of teen pregnancy can increase the risk of relegating these children to a permanent economic and social underclass. Based on the research done by Mushwana et al., (2015), children of teen mothers perform significantly worse than those born to older parents. Educational development is one area that can have dramatic effects on reducing teen pregnancy rates. In that regard, educators, community-based agencies and parents can develop and implement programs which can effectively assist teenagers in creating a positive environment which can deter teen pregnancy.

A study done by Bhengu, (2016) concurred that South Africa has a relatively progressive legislative response to teenage pregnancy and motherhood. The (Republic of South Africa (1996) “protects the right (of all citizens including children) to make decisions regarding reproduction and the right to access health care services, including reproductive health care” (Hoffman-Wanderrerr,2013). Since 1996, a number of laws, such as the South African Children’s Act, have been passed. More recently the South African Children’s Act (2005), September, R. & Dinbabo, M., 2008, (as amended by the Children’s Amendment Act, No. 41 of 2007) have come into effect, with regulations, on 1 April 2010. It allows those over 12 years to access health care services, including HIV testing, contraceptives and choice termination of pregnancy (CTOP) services, without parental consent.

According to Ilion’s (2012) most of today’s research indicates that communication has some level of importance as a process that can indicate parental-child influences on the issues of sexuality (Feldman, Kirkman & Rosenthal, 2005). However, parents and their children may have a different interpretation of the amount and quality of communication which occurs on the issues of sexuality (Fitzharris & Werner-Wilson, 2004).

Given these discrepancies on how parental communication influences teen sexual behaviour, it is important to look at variables which may impact the type of communication that takes place. Different immediate determinants of communication, that is to say perceptions and attitudes, will undoubtedly alter the content of the communication itself, which will further have an impact on how an adolescent responds. Ilion (2012) indicated that various authors have showed that sex education and teen pregnancy programs which are taught and implemented in high schools require some level of parental involvement.

Wong and Hughes (2006) studied ethnic differences in parental involvement through parent and teacher questionnaires. The authors found that Black parents communicated more frequently with their school staff on these and other issues

than their Latino counterparts. Black parents' involvement with their school tended to stem from a concern or distrust with a particular program or curriculum (Wong & Hughes, 2006).

The authors also found that Latino/a parents tended to give more deference to the authority of the local school staff and did not get directly involved with school activities. However, language also plays a factor at this level of involvement. In the study conducted by Mphale and Mhlauli (2014) it was found that poor attendance in schools is one of the major consequences of teenage pregnancy. Due to immature pregnancy, teenagers encounter problems which prohibit them from attending school regularly. During the prenatal period, they have to attend clinics monthly and sometimes they become sick and have to stay away from school for a long period of time. Apart from that, pregnant teenagers are moody and only go to school when they feel like it.

Another reason is that other children taunt them and they become demotivated to attend school regularly. Pillow (2004) argued that "teens most impacted by teen pregnancy are young women who are already living in impoverished conditions prior to becoming pregnant". Parents are working class households who are too poor to provide for their children's education and the indirect costs of sending them to school (Swainson, Bendera, Gordon & Kadzamira, 1998). The costs of school uniforms and fees and babysitting for grandchildren, for example, have been argued by several studies to deter parents from sending girls back to school.

In the context of the present study, it was assumed that the poor parents are expected to stop going to work and to wait/stay at the school gate, with the aim assisting the girl when she goes into labour while in class. The parents may probably experience a wide range of emotions, from shock and disappointment, to grief and worry about the future (Krishna, 2008). Some mothers feel a sense of

guilt, thinking that if they had done more to protect their child, this would not have happened, and they become embarrassed by their teens' pregnancy and worried about how family, friends and neighbours will react (Ogle, Glasier & Riley, 2008).

Theron and Dunn (2006), in their study on the coping strategies of adolescent mothers who return to school following adoption, they revealed that teenage pregnancy may be associated with a syndrome of failure to remain in school because teenage pregnancy is disruptive when it comes to school attendance. The headmasters quoted by Chigona and Chetty (2007) stated that pregnant teenagers miss some classes due to the lack of motivation. As a result, the pass rate decreases at the grade12 level. Another principal disclosed that if a pregnant teenager came back to school and gave an apology for being a way, he would not tell her what was done as it is none of his business. In that way, poor attendance in school is considered to be a consequence of teenage pregnancy.

The findings by Mphale and Mhlauli, (2014) indicated that pregnant teenagers need special attention in school. This implies that pregnant teenagers should stay at home under the supervision of the parents until child birth. The reason is that in most cases pregnant teenagers are not sure about their time of giving birth and they might find themselves doing so in the presence of other learners, which is totally unacceptable. The findings by Mphale and Mhlauli (2014) indicate that sex education is a plausible solution to deal with teenage pregnancy in schools. The implication of these findings is that the Ministry of Education must implement programs that support teachers in handling teenagers who become pregnant in schools. This implies that the Ministry of Education should provide teachers with workshops on sex education. The government should also supply relevant books materials for the education mainly for the benefit of learners, (Mphale & Mhlauli, 2014).

2.5 Cultural practices that can influence the role of parents in teenage pregnancy

Nagata, Ferguson and Ross (2016) has indicated that according to tradition, when the woman misses her period for the first pregnancy, she must inform her mother, who will give her some advice on pregnancy. This is only done for a married woman who is pregnant for the first time, as follows:

- The pregnant woman should not walk or do anything in the rain; otherwise, it will rain continuously during child birth.
- She should not stand in the evening sun's rays just before sunset; otherwise, the baby will be boarded by the sun and cry all time.
- She should not break a spider web; otherwise, her labour will be difficult.
- She should not eat any food that has a strong or lasting odour because she will have that odour after the birth of the child.
- She should not eat fruit bat because after child birth, the placenta will move back into the uterus.
- The pregnant woman must not walk alone on the road but must have someone to monitor her.

Madlala (2016) emphasised that, traditionally, various race and ethnic groups conform to different cultural values and traditional practice. Some of these practices and beliefs include those that say young males need to be sent to traditional initiation schools to be circumcised and be taught about manhood. This is a respected traditional and cultural practice in which all men in their youth need to undergo in most ethnic groups. For example, young Xhosa males are sent to so-called 'initiation schools', where traditional circumcision takes place and presumably the circumcised boys are taught how to become men while they are recuperating from their circumcision wounds in the so-called 'bush schools, initiation schools or mountain schools'. Despite these practices, some boys do not

acquire adequate information and knowledge regarding their roles in preventing teenage pregnancies.

Various authors have argued that cultural norms and beliefs constrain girls' education, especially in many developing parts of the world. In these societies, traditional values and some religious beliefs constrain girls from making their own decisions and expressing their own opinions. Chege and Sifuna (2006) cited in Shahidul and Zehadul, (2015), emphasized that many cultures favor the education for boys more than for girls. Hence, girls' persistence in school and initiation ceremonies (religious ceremony) have significant effects on girls' dropout rate, when parents have more propensity to pay for the expenses of the ceremony than their daughters' education (Shahidul., et al. 2015).

These authors have observed that in Africa parents were more concerned about the role for girls at home, as in this role, girls do not need education, as they are supposed to take care of children and prepare meals. It was perceived that in Tajikistan many girls attend religious classes only which provide the relevant skills for a future married life as skilled wives hence ideal or seclusion of women was a factor for girls' dropout (Shahidul., et al 2015). This was supported by UNESCO (2010 cited in Shahidul & Zehadul, 2015), who indicated that traditional values can be different from location to location. Furthermore, traditional values are stronger in rural areas in developing countries, compared to urban areas and people often do not allow girls to leave homes even for school (UNESCO, 2010 cited in Shahidul et al., 2015).

Shahidul, Karim, and Mustari (2015) revealed that even though several inter-related social, economic, school and cultural factors affect school dropout outcome, regardless of the gender of the students, some particular factors increase the dropout rate, particularly for girls. However, these particular factors produce lower educational outcomes for girls in general. The financial factors

constrain parents, more especially those who have lower socio economic status, compared to those who have higher status. Furthermore, parents with lower socio-economic status face difficulties to bear the expenses of their daughters' education (Shahidul et al., 2015).

A study by Aubrey, Behm-Morawitz and Kim, (2014), to examine the impact of a popular documentary series about teen pregnancy, revealed that the effect of teenage pregnancy on the adolescents' low perceived risk of getting pregnant found that lack of attention to conception and contraception might create a buffer between the girls and their own feelings of vulnerability regarding pregnancy. Therefore, the results of a content analysis of the first two seasons of teenage pregnancy found that messages about sexual health, including contraception, were remarkably absent in the show (Peters, 2011). In addition, Aubrey et al.(2014) concluded that the effect of "16 and Pregnant" on the perception of teen pregnancy outweighs the risks, and that we must keep in mind that along with the negative consequences of teen pregnancy depicted on the show, there are also undeniable positive consequences.

Levandowski, Kalilani, Kachale, Awah, Kangaude and Mhango (2012) revealed that the impact was unwanted pregnancy on young women and the stigma associated with obtaining an unsafe abortion. However, the study found that cultural barriers to obtaining an abortion were reported as myths about abortion. In addition, parents perceive that if a woman aborts, she will be unable to bear children thereafter, owing to widespread belief that infertility is a common outcome of unsafe abortion. Therefore, the researcher assumed that the parents of teenagers who are pregnant also support their children by going to school or allocating someone on their behalf to prevent abortion or termination of pregnancy.

The study further showed that the cultural context surrounding contraception was critical to established understanding on how to handle pregnancies in Malawi. It was found that lack of knowledge regarding contraception was a barrier to obtaining contraception. However, it was noted that health workers were aware that teenagers tend to learn about contraception from their friends, health workers, and medical staff, and that the information that young people have is somewhat inadequate. They therefore, suggested that teachers and school learners should be trained on life skills that should include family planning, sexual and reproductive health, to improve the knowledge and understanding of teenagers (Levandowski et al., 2012).

In addition, the study also suggested that sexual and reproductive health, including family planning and choices of contraceptive methods, should be taught in schools, to orientate learners. However, the current life skills class generally focuses on HIV/AIDS prevention and is not extensive. The study argued that the dialogue neighbouring contraception will preferably lead to performance change and a reduction in teenage pregnancies. In addition, the study highlighted that the link to teenage pregnancy was the role of initiation ceremonies in introducing sexuality education to young people in rural areas (Levandowski et al., 2012). In the current study, cultural practices that can influence the role of parents during teenage pregnancy are described.

According to Rule (2004), young males are more likely to engage in sexual activities at an early age because of socio-cultural conditions, such as 'misguided' information provided by the traditional elders at the initiation schools. Some of the African cultures are at the transitional stage, as they are changing gradually from a traditional way of life to a more modern westernised culture, such as young males are circumcised at the hospitals and at private hospitals. They are also given professional health education regarding sexually related issues, including teenage pregnancy prevention, unlike at initiation schools.

According to Bezuidenhout (2013) teenagers' experience psychological and physiological changes and might often find it difficult to discuss these changes and experiences with their parents. The results of these changes increase the chances of young males experimenting with sexual encounters to satisfy their curiosity, which may lead to unwanted teenage pregnancies. Study by Martinez et al. (2011) concur this by stating that young males believe that they are physically ready to engage in sexual intercourse due to these changes, but being physically ready does not always mean that they have enough knowledge about sexual activities and the consequences thereof.

It was also established by Hoque and Ghuman (2011) that about 27.2% of young males had multiple sexual partners and that those young males had never used condoms. For them, this risky sexual behaviour has to do with proving manliness, as having many sexual partners wins a young male an elevated status and admiration from his peers. These risky sexual practices put young males at risk of teenage pregnancies and contracting STI's. In addition, the education and involvement of young males in sexual issues at the initiations schools may yield positive interventions, resulting in reduced numbers of teenage pregnancies. The purpose of the study was to describe and explore the role of parents regarding teenage pregnancy at Thomo Village in Mopani District Limpopo.

The findings by Akella and Jordan (2014) show that some of the participants had been exposed to early motherhood through their mothers. The society in which they grew up did not disapprove of teenage motherhood. In spite of the disappointment, shock and disapproval expressed by some of their mothers, the general feeling amongst some participants was, "they were just following the footsteps of their mothers." Some were milder in this opinion while others openly stated this view in the interviews. In conclusion, the findings of the study by Akella and Jordan (2014) are that after the initial disappointment from participants'

parents, they received some support from their family, school system and the government.

Family members, usually mothers, grandmothers and aunts, rallied around to provide childcare support and assistance to the teen mothers whenever they needed it. Moreover, they also contacted the teachers to collect school work, drop it off, to ensure the teen mother was able to continue with her schooling, and complete school work on time and stays on track for graduation. The participants received financial assistance from the government in the form of a grant for medicines, milk and child care facilities. Some were also getting financial support from the child's father.

Furthermore, their friends did not openly criticize their pregnancies at school. This is because some of their peers were in the same position. However, the girls had faced some traumatic and emotional moments. They had to grow up both physically and emotionally. Furthermore, they faced discomfort during their pregnancies, and had to continue with their schooling up to the end of the pregnancy and return immediately after childbirth. The babies' fathers, except for few, had left the teen moms', leading to disillusionment. As such, the teen moms' had to live with the fact that they had disappointed their parents. In addition, they were now responsible for another person. Money, education and job suddenly became important for them. They realized how much effort and motivation would be needed to finish school, enrol into a college and secure a good job for themselves and their baby. Unfortunately, role models who could encourage them in this direction were few.

The influence of gender and socio-cultural issues also contributes to teenage pregnancy. In addition, several important influences affect the teenage girls' behaviour, such as extramarital and pre-marital sex, the pervasive influence of person's culture and the dichotomy of traditional teenage girls' roles. According to Varga (2003), gender dynamics create powerful barriers to prevention. These

barriers include gender norms that make it difficult for young women to negotiate safe sex with their male partner, norms that encourage men to engage in risky behaviour and young women to have relationships with older male partners.

Scales (2016) emphasizes that *“having sex outside of marriage not only has become normative behaviour”*; rather European youth are initiating sex earlier than they were in previous generations. In Africa, the situation is the same, although there has been some transition towards lower fertility in Sub-Saharan Africa. Some of the highest levels of adolescent childbearing in the world are still reported there, (Gupta & Mahy (2003). Furthermore, there are various socio-cultural issues impacting on teenagers and communities. The culture and society in which an individual grows up and lives contributes to how that individual feels about her/his sexuality. Some adolescents want to prove their fertility, as reported in the study by Ziyane and Ehlers (2006). Many teenagers are encouraged to become pregnant by their partners, to prove their love, womanhood and fertility. In some cases, grandmothers encourage the young girls to have a baby. Mothers often indicate that teenage pregnancy is infinitely preferable to the possibility of infertility caused by contraceptives (Jawkes et al, 2001).

Traditional gender roles hinder a girl’s capacity for sexual communication and negotiations with partners. Normative beliefs about gender roles influence sexual initiation, decision making and condom use. They open a way for girls compelled to engage in unprotected sexual intercourse. Many contradictions exist in young people’s belief systems, so that adolescent boys’ and girls’ normative beliefs and attitudes are not necessarily in line with their behaviour. Harrison (2002) found that within youth peer culture, young women are signifying that they are expected to be sexually available, to defer to male decision-making authority and to be conquered.

Socio-cultural expectations, however, dictate that adolescent girls remain virgins, resist boys' sexual advances and avoid pregnancy. Despite younger girls' beliefs that it is ideal to delay intercourse until the age of 21 and favourable attitudes about abstinence, many were sexually active. Fear of parental disapproval of sexual relationships meant that sexual activity was often shrouded in secrecy. In contrast, boys are expected to initiate sex, and often felt pressure from peers and older men, sometimes their own brothers or uncles, to uphold an image of masculinity. Cultural practices do impact, to a certain extent, the degree to which information about sexual health is communicated to teenagers, especially in rural areas. In addition, initiation schools do not give teenagers enough information about sexual health as teenagers often have to recite poems and sing songs as cited by Lebesse et al. (2011). The study was conducted in the United States in 1995 by Rodney Goodyear on the concept map of male partners in teenage pregnancy. He indicated that the perceptions of male partners have remained ill-defined and often based on the stereotype that they are sexual predators.

The study highlighted that most teenage pregnancies are unplanned, as the teenage girl may still be at school and unmarried. Regardless of the socioeconomic background, many have aspirations towards education. An unplanned pregnancy jeopardizes teens' chances of reaching such goals. Kaufman, de Wet and Stadler (2001) reported that 65% of black girls aged 19 years and younger, who had given birth at least once, did not complete their school education. Teenage mothers are unlikely to achieve educationally or develop a significant career. As a result, they live in poverty. They are likely to have children with behavioural problems, academic difficulties and developmental delays, including mild mental retardation (Ehlers et al., 2000). Teenage fathers are also at risk of dropping out of school, which increases the risk of unemployment.

A teenage mother is often compelled to be financially dependent on her family or public assistance. Conversely, the families of these teenagers are burdened with the responsibility of physically and financially supporting the teenager and her infant. In families who are already struggling financially, provision becomes a major challenge or threat (Yako, 2007). It goes to show that the mother or the grandmother of the teenage girl who ends up caring for their granddaughter's offspring experience increased stress in their roles as they are also performing their duties. This correlated with Modungwa, Poggenpoel & Meiner, (2000) who found that they lack financial, material and health care support.

A study by Illions (2012) indicated that parents play an important part but often overlooked role in the prevention of teenage pregnancies. Although early research provided conflicting results in terms of parental impact on teen pregnancy, this was supported by recent research studies done by Bruckner, Martin & Bearman (2004). Troccoli, (2006) made the same findings and indicated that parents have a significant influence over their child's decision to have sex. The findings overwhelmingly indicated that parental communication with their children impacts on the onset of sexual activity and pregnancy (Jaccard et al.2004). In addition, several studies have found the most effective programs and as well as those which include a parental component (Jaccard et al., 2002). The study by Moliko (2010) revealed that culturally, society does not tolerate discussion of sex in the presence of teenagers, teachers and parents. This contributes to the high rate of teenage pregnancy. This is supported by Rafiri (2003) who conducted a study on the factors contributing to teenage pregnancy among adolescents. The study found that parents and family members are reluctant to discuss sexual matters with young people.

This tendency makes teenagers feel reluctant to discuss sex-related issues with peers parents and teachers. Moliko, as cited in Rafiri (2003) argues that young people, and especially young girls, have consistent poor knowledge about sex and reproduction due to culture. Despite what has been discussed, the culture of other countries permits premarital sex. In this case, Dryburg (2002) investigated teenage pregnancy: health indicators. The study found that in Sub-Sahara Africa, early pregnancy is often seen as a blessing because it is a proof of a young women's fertility. Preston, Whyte and Zondi (1989) attest to this by stating that African men will not marry a woman until she has demonstrated her ability to bear a child.

This is the reason why Preston, Whyte and Zondi (1989) stated that a number of girls indicated that their lovers had opened marriage negotiations after a baby was conceived or born. Based on these studies, the researcher concluded that it is hard to control teenage pregnancy in schools due to other cultures that deprive teenagers' information about sex-related issues and those cultures that compel girls to prove their fertility. One can confidently conclude that culture does contribute to teenage pregnancy, directly or indirectly. A study by Kaphagawani (2006) found that culture, mainly through expectations of families and communities, may play a major role in shaping the sexual and reproductive behaviour of adolescents. In Malawi, many societies treat and expect teenagers to behave as adults. In addition, the Yao and Chewa tribes enlist an older man at the end of the first initiation ceremony to be the first sexual partner for the teenager to mark womanhood, cited by Kaphagawani (2006) in Allan Guttmacher Institute. Such type of behaviour is supported and encouraged by the socio-cultural establishment, which may promote early sex. Initiation ceremonies teach girls about responsibilities of adults and mothers, the importance of children in a relationship and sexual intercourse, while abstinence is encouraged until marriage. Furthermore, these ceremonies reinforce the perceived passive roles that a woman must play in their sexual and marital relationships - obedience and satisfying the sexual desire of a partner.

These cultural practices of treating a girl as an adult and expecting them to marry and bear children result in early sexual relations and early marriage, which may lead to unplanned teenage pregnancy. Initiation ceremonies, including Chiputu, which is practiced by the Yao, signify womanhood. This implies that the earlier the age at menarche (reported from 13 - 15 years or as early as 9 years), the earlier teenagers enter into womanhood. In the study area, the Yao and Lomwe tribes conduct initiation ceremonies, which promote, among other things, early sex and marriage. Therefore, it is expected that the teenagers may be at risk of unplanned pregnancy.

2.6. CONCLUSION

This chapter presents the literature review under the following headings: the perceptions of parents regarding teenage pregnancy; the role of parents when the teenager is pregnant and attending school and cultural practices that can influence the role of parents during teenage pregnancy. Chapter three discusses the research methodology.

CHAPTER 3

RESEARCH METHODOLOGY

3.1 INTRODUCTION

The previous chapter presented the literature review under the following headings: the perceptions of parents regarding teenage pregnancy; the role of parents when the teenager is pregnant and attending school and cultural practices that can influence the role of parents during teenage pregnancy. This chapter discusses the research methodology, population and sampling, data collection and analysis, trustworthiness and ethical considerations.

Methodology refers to ways of obtaining, organising and analysing data, (Polit & Beck, (2014). It also refers to the practices and techniques used to collect process and analyse data. The qualitative research approach was be used in the present study. Hansen, (2006) indicated that the qualitative research approach describes and analyses human experiences. Research methods include the sampling methods, sample size, data collection method, the choice of measuring instrument and data analyses techniques (Bowling, 2007). The current study used a qualitative and exploratory approach research.

3.2 Qualitative research design

Qualitative research is the investigation of a phenomenon, typically in- depthand in a holistic fashion, through the collection of rich narratives materials, using a flexible research design (Polit & Beck, 2014). Qualitative research is a scholarly approach for describing experience from the perspective of the person involved. It is the way to give the significance of the subject human experience as well as to gain experience of the guide in nursing practice (Burns & Grove, 2013).

Qualitative enquiry employs different philosophical assumptions, strategies of inquiry, and methods of data collection, analysis and interpretation. The qualitative approach was used because the information required narrative information that can only be obtained by having a conversation with the participants. Participants were interviewed by the researcher and a tape recorder was used to capture the data. In the current study the qualitative research was used to enable the researcher to explore the main issues; namely, parents' perceptions and role regarding teenagers who fall pregnant in the rural village of Thomo. This was achieved through the information provided by the parents and care - givers who were hired by the parents; after the process the researcher had collected data to make follow up and questions make recommendations of the enquiry, collected the data and analysed it.

A research design is also defined as a systematic plan to study a scientific problem (Gorard, 2013). Furthermore, Bless, Higson-Smith and Kagee (2007) have defined a research design as the plan or blueprint according to which data are collected to investigate the research question in the most economical manner. This process includes the approach taken, the method of data collection, ethical considerations, time, place, and source of data and the method of data analyses (Polit & Beck, 2014). Burns and Grove (2013) define a research design as a blueprint for the conduct of a study that maximizes control over factors that could interfere with the desired outcome of the study. It is the way in which the researcher plans and structures the research process. According to Polit and Beck (2014), selecting an appropriate design needs to be guided by an overarching consideration, which determines whether the design does the best possible job of providing trustworthy answers to the research questions. A qualitative, exploratory descriptive and contextual research design was used in the current study. Qualitative research describes and analyses human experience in detail. Qualitative approaches seek to understand the interpretations and motivations of people. The research design for the current study is described.

Research design is defined as addressing a research question, including specifications for enhancing the study integrity (Polit & Beck, 2008). For the current study, a qualitative research design was believed to be the design to achieve the envisaged objectives. This study described and explored the perceptions and role of parents regarding pregnancy among teenagers who were attending school at Thomo Village in Mopani District Limpopo Province.

3.3. Exploratory design

An explorative research design explores the dimensions of a phenomenon, the manner in which it is manifested and factors to which it is related (Gerish & Lacey, 2010). The purpose of an exploratory research design is to enhance the researcher's comprehension of a phenomenon, (Babbie & Mounton, 2009). It begins with a phenomenon of interest, such as simply observing and describing (Polit & Beck, 2014). An exploratory research design is also undertaken when a new area or topic is being investigated and it is designed to shed light on various ways in which a phenomenon is manifested and is in the underlying process (Polit & Beck, 2014). Through exploration, new information is be discovered and this helped to describe the role of parents regarding teenage pregnancy; furthermore, it assisted in making recommendations, to develop different polices policies at schools to address teenage pregnancy. In the current study the researcher gained insight through interviewing the parents.

3.4. Descriptive design

A descriptive design is a design that focuses on providing accurate representation of the characteristics of a person's situations or groups. The purpose of this design is to provide a picture of a situation as it occurs naturally (Polit & Beck 2014). In nursing science the purpose of descriptive research is to depict and discover new information and meaning, for further use in nursing practice (Burns and Grove

2013). Descriptive studies focus on providing accurate representation of the characteristics of persons, situations or groups. Descriptive statistics enable the researcher to summarize and describe qualitative data (Polit & Beck, 2008). The experiences and role of parents regarding teenage pregnancy were described. In the current study data was identified and discovered, and this will assist in minimisation of teenage pregnancies in the province, district and country. Other provinces will come and benchmark the best practices on minimising teenage pregnancy, and new policy can be developed. The current study was chosen because the results are realistic and accurate.

3.5. Setting

The setting of a research is the location or area where the study was conducted (Burns & Grove: 2013). Thomo Village is one of the villages in Mopani District. It is one of the districts situated in the Northern region of Limpopo Province and encompasses a small portion of the Kruger National Park. The Mopani District consists of five local municipalities; namely, Greater Giyani, Greater Letaba, Greater Tzaneen, Ba-Phalaborwa and Maruleng with a population of 1, 2 million people. The research was conducted at Thomo Village under the Greater-Giyani municipality.

Greater Giyani is the municipality where Thomo Village is located and is approximately 15 kilometers from the Giyani CBD, with a population of 39 018 people, as per current statistics of 2010 (MDM IDP 2010 - 2014). The main road to Thomo village from R81 road is D3641. It passes over the Nsami Dam. The village has three Indunas; namely, Tihoncini, Homulani and Pios. It is a rural village with both educated and uneducated people but mainly an illiterate population. The community is Xitsonga speaking. Thomo has one busy clinic, which operates for 24 hours and is situated in the central part of the village. As such, it is easy for everyone to access it. There are two primary schools; namely, Thomo and Nwa- Makasani, and one high school, Hanyani Thomo, where part of

the research was conducted. The youth programme conducted by Love Life is based at the clinic. Unfortunately, participation is poor among the teenagers, who show little interest. The distance to the referring hospital, Khensani Hospital, is approximately 17 km. The village is surrounded by high - risk areas that sell liquor until late at night, where loud, irritating music is played. The village is dominated by churches of different denominations, but mainly the Christian churches. However, despite that, pregnancy remains high. Thomo Village was sampled considering the high rate of teenage pregnancy that lead the parents to be forced to accompany their teens to school during pregnancy until they give birth.

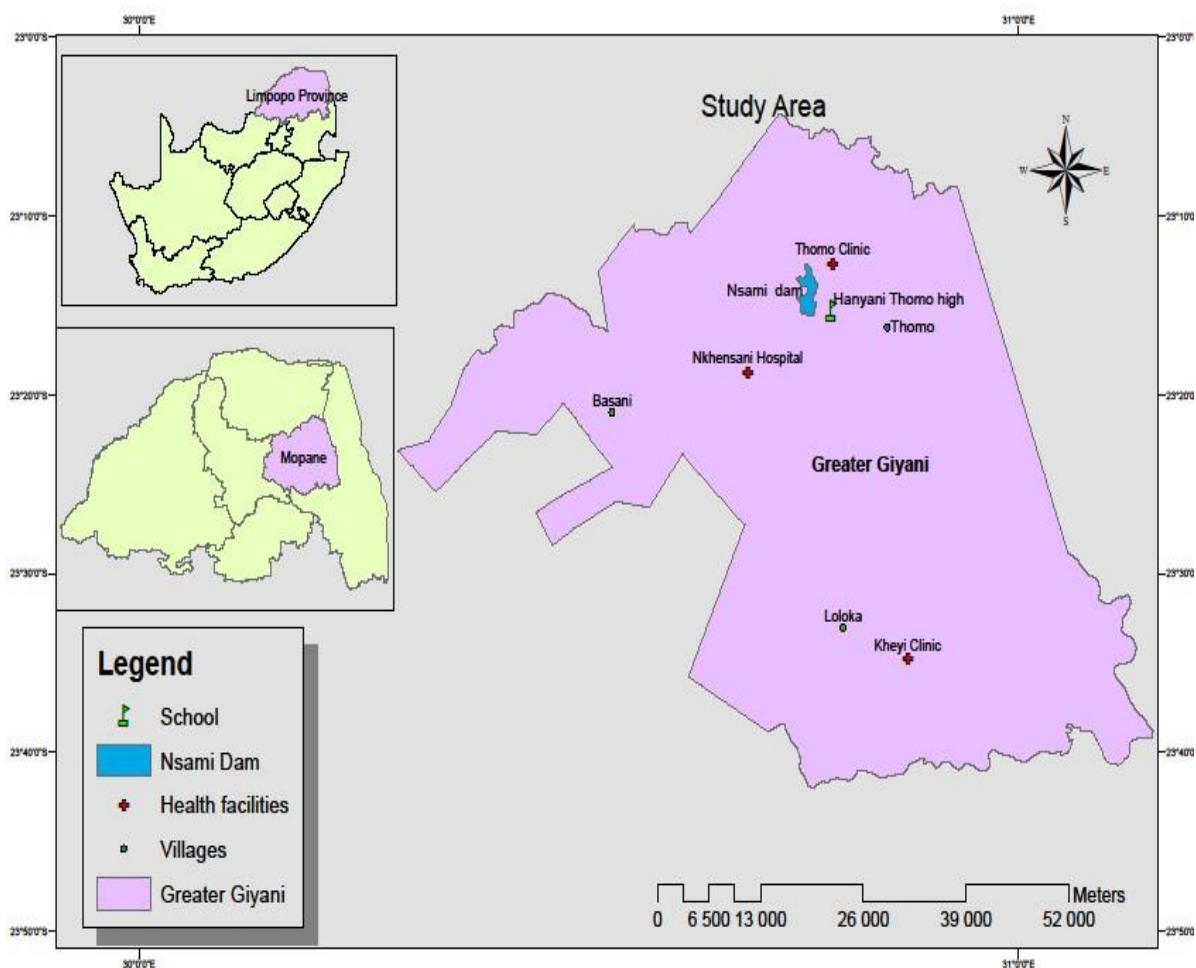


Figure 2. The map above depicts the Greater-Giyani Municipality and the villages next to Thomo

Health services at Thomo village, are rendered clinic which operates 24 hours a day. The services available for teenage girls are family planning clinic, which are only provided after school. It has also been observed that out of the 173 deliveries at Thomo Clinic, 104 are teenagers (2011 - 2013 maternity clinic register). However, the rate of teenagers seeking termination of pregnancy is also escalating. The Reproductive Health Clinic in Mopani terminates ± 38 pregnancies among teenagers a month (TOP Register at Nkhensani Hospital 2010 - 2014). It is therefore expected that parents should educate their children about sex, sexuality and teenage pregnancy and its disadvantages. Their perceptions towards prevention of teenage pregnancy are vital, as their participation in sexual health can help to curb the escalating statistics.

3.6. Population

Polit and Beck (2014) define a population as the entire set of individuals or objects having the same common characteristics. In the current study the accessible target population was composed of female parents and guardians (care - givers) who were residing at Thomo Village in Mopani District and who had previous and current experiences of teenage pregnancy within the family in the village.

3.7. Sampling

Sampling is defined as the method of selecting a minor section of population De Vos, Strydom, Fourche & Delpont (2011). Brink (2006) defines sampling as the process of selecting a sample; or part / fraction from the study population in order to obtain information regarding the phenomenon under study, so that it represents the population. The inclusion criteria were, parents who have and had a pregnant teenager who was attending or attended school in Hanyani Thomo High school.

3.7.1. Sample

Sample size refers to the number of participants selected from the population and from whom data will be collected (Burns & Grove, 2013). The qualitative nature of the study implies that the sample size was determined by the information needs of the study regarding the depth of the information needed to gain an insight into the phenomenon (Burns & Grove, 2013). A total of 15 parents from Thomo Village were sampled. These parents were selected from the register at Hanyani Thomo High school from the responsible educator who monitors the parent's attendance. However, the size depended on data saturation. According to Polit & Beck, (2014), saturation means the collection of qualitative data to the point where a sense of closure is attained because new data only yields redundant information. Saturation point was reached, and the interviews were stopped.

3.8. Data collection

Burns & Grove (2013) define data collection as a precise and systemic gathering of information relevant to a study. Appointments were secured with the selected parents as per the list from the school register. Permission to access the research site and homes of respondents was obtained from the relevant authorities. Data was collected using an unstructured interview, whereby one open-ended question was asked. The researcher probed for clarity while trying to drive the participants back to the topic. An open-ended question was asked to allow participants to elaborate and let them proceed at their own rate of thinking and speaking.

Open-ended questions gave the respondents the opportunity to answer any question in their own words. Data was collected for a period of about forty-five minutes at the parents' homes, as per the appointments. Data was collected using the Xitsonga language only, as the people at Thomo Village are Xitsonga-speaking. A voice recorder and field notes were used to record the interviews. This made it easy for the researcher to go back to the tape and listen to a statement given by the participants and compare it with the foot - notes.

3.9. Data analysis

Data analysis is the systemic organization and synthesis of research data and the testing of research hypothesis using data collected. The purpose of data analysis is to reduce data to an intelligible and interpretable form, so that the relations of research problems can be studied, tested and conclusions drawn (De Vos, 2011). The researcher analysed the data using open coding, as per Tesch's inductive, descriptive coding technique, outlined in Creswell (2009). Detailed data analysis is discussed in chapter four. Coding is the process of transforming information into symbols, usually numbers. Polit & Hungler, (1999) define coding as the process of transforming raw data into standardized form for data processing and analysis. In qualitative research, it is the process of identifying recurring words, themes, or concepts within the data. The researcher develops the codes before the data is collected. A code is assigned to each variable. In the current study the researcher analysed the data according to the data analysis processes, as per Tesch's steps (1990 cited by Creswell, (2005).

3.10. Trustworthiness

Trustworthiness is a method of establishing validity and reliability of qualitative research, and it is achieved when it accurately represents the experience of the study participants. It measures the truth value of a study. It encompasses four criteria; namely, credibility, dependability, conformability and transferability (Polit et al., 2001). Trustworthiness in the current study was ensured through credibility, dependability, conformability and transferability.

3.10.1. Credibility

This is an alternative to internal validity. Its goal is to demonstrate that the inquiry was conducted in such a manner as to ensure that the subject was accurately identified and described, and within the parameters of the setting, population and

the theoretical framework, the research is valid (Lincoln & Cuba, 1985 cited by De Vos 2005). In the current study, during the interview of parents, they indicated whether they sometimes talked to the adolescent teenagers about contraceptives and other traditional contraceptive methods. The researcher assessed and identified the validity of experiences regarding teenage pregnancy.

3.10.2. Transferability

Lincoln & Cuba proposed this as the alternative to external validity or generalizability, in which the burden of demonstrating the applicability of the set of findings to another context rests more with the investigator who will make the transfer than with the original investigator (De Vos, 2005). In the current study, after interviewing all the parents, the researcher analysed the data to check if all the parents interviewed had the same perceptions or role. The findings were transferred and applied as real perceptions regarding teenage pregnancy. According to De Vos, (2005) a qualitative study's transferability or generalibility to other settings may be problematic. To counter these challenges, the researcher referred back to the original theoretical framework to show how data collection and analysis were guided by concepts and models.

3.10.3. Dependability

According to De Vos, (2005), dependability is to the alternative of reliability, in which the researcher attempts to account for changing conditions in the phenomenon chosen for the study as well as the changes in the design created by increasingly refined understanding of the settings. This represents a set of assumptions very different from those shaping the concept of reliability. Positivists' notions of reliability assume an unchanging universe where inquiry could quite logically, be replicated. In the current study the researcher checked the reliability out of the input by the parents.

3.10.4. Conformability

The final construct, conformability, captures the traditional concepts of objectivity. Lincoln and Guba, cited by Koskinen, Salminen et al., (2014) stress the need to ask whether the findings of the study could be confirmed by another researcher. In so doing, they remove evaluation from some inherent characteristics of the researcher and place it squarely on the data themselves. Thus the qualitative criterion is: do the data help confirm the general findings and lead to the implications?

3.11. Ethical considerations

Ethics are a set of moral principles which is suggested by an individual or group. They are widely accepted and offer rules and behavioural expectations about the most correct conduct towards participants, employers, sponsors, other researchers, assistants and students (Polit & Beck, 2014). An ethical consideration is a set of moral principles that are used to guide the planning, implementation and evaluating of any research project suggested by individual or group (Mayer, Van Niekerk & Naude, 2004). Parents did not mention their names during the interview. Foot notes were used as participant A and B. A voice recorder was utilised to record the interviews. In the current study, the ethical considerations were sought and permission to conduct the study was obtained from the following organisations:

- University of Venda Higher Degree Committee.
- University of Venda Research Ethics Committee.
- Department of Health, Mopani.
- The Traditional Leadership of Shiviti Tribal Authority.
- Hanyani - Thomo High School.
- Informed consent was also obtained from each participant before they participated in the study.

Ethics is a system of moral values that is concerned with the degree to which research procedures adhere to professional, legal and social obligations to the study participants. (Polit & Beck, 2006). It is about a set of moral principles regarding behavioural expectations towards participants, employers, other researchers, assistants and students. The following ethical considerations, as described by Brink (2006), were considered during the study.

3.11.1. Rights

The rights of participants, as presented below were adhered to during the study (Brink, 1996), and research participants have several rights, including the right not to be harmed, the right to self-determination, informed voluntary consent, the right to privacy, confidentiality and anonymity, the right to maintain self-respect and dignity and the right to refuse to participate or withdraw from participation without fear of discrimination (Brink 1996). The researcher respected the rights of the participants and every effort made not to harm participants in any physical or emotional manner. Brink (1996) stresses that individuals have the right to withdraw from a study at any time: they can refuse to give information as well as ask for clarification about the purpose of study. The participants had the right to decide voluntarily whether to participate in the study or not, without the risk of penalty or prejudicial treatment.

3.11.2. Confidentiality

Confidentiality, as cited by Polit & Beck, (2008) refers to the protection of study participants, so that the data provided are not publicly divulged. Polit & Beck (2006) define confidentiality as protection of study participants, such that individual identities are not linked to the information provided and are never publicly divulged. The records and information were kept confidential and were

not shared with anybody unless the researcher had given explicit permission to share the information.

3.11.3. Autonomy

Autonomy refers to the act of keeping individuals nameless in relation to their participation in the study (Polit & Beck, 2005). Information pertaining to the fact that they had participated in a study, was not made available to anyone beyond the immediate research team. In addition, the parents' names did not appear on the notes.

3.11.4. Beneficence

Beneficence is a fundamental ethical principle that seeks to maximize benefits of the study for the participants, and prevent harm (Polit & Beck, 2008). Polit & Beck (2006) define beneficence as a fundamental ethical principle that seeks to prevent harm and exploitation of, and minimize benefits for study participants.

3.11.5. Informed consent

Informed consent in a written format means that the study participants have adequate information regarding the research, are capable of comprehending the information and have power of free choice thus enabling them to consent voluntarily to participate in the proposed study or decline if they so wish ,(Polit & Beck, 2014). In the current study, the participants were given information regarding the purpose of the research, procedures to be used in the research and the reasons for conducting the study. The time that the study was required from the participants was also explained in detail. Finally, in the current study, the researcher respected the rights of the participants and every effort was made not to harm the participants both physically and emotionally.

3.12 CONCLUSION

This chapter discusses the research methodology, population and sampling, data collection and analysis, trustworthiness and ethical considerations. Chapter four discusses the data analysis and interpretation of results.

CHAPTER 4

RESEARCH RESULTS AND INTERPRETATION OF FINDINGS

4.1. INTRODUCTION

The previous chapter presented an overview of the research design and methods that guided the scientific activities of the study. An explorative, descriptive qualitative design was utilized as a research approach. The chapter also discussed the population and sampling, data collection and analysis, trustworthiness and ethical considerations. Chapter four focuses on the presentation and interpretation of findings. The presentation, discussions and interpretations of the findings were guided by Bandura's Social Cognitive Theory, as presented in chapter 1.

4.2. Presentation of findings

Unstructured in-depth interviews were conducted with 10 parents of teenagers who were pregnant and attending school and 05 caregivers (parents) who were hired to be at school to guard pregnant teenagers whose parents were at work or unable to guard their children. Unstructured in-depth interviews were conducted at the participants' homes after telephone arrangements. The researcher started data collection at Hanyani Thomo High School, in order to obtain the contacts of the parents of the pregnant girls, and caregivers. Data was collected during a three - month's period, at Thomo Village. The open - ended question directed to the parents was as follows:

- *Can you explain in detail how you felt as the parent after you realized that your child was pregnant, especially that she was still at school*
- *How did you feel when told you're to wait for her at the gate daily until she delivers the baby?*

The open - ended question which was directed to the caregivers was as follows:

- *Briefly explain your role and responsibility when you were hired to take care (wait at the gate) of the pregnant teenager while she was attending classes.*

Data was analysed through Tesch's open - coding method, as described in Chapter 3. Four themes with sub-themes emerged after data analysis.

During the arrangements all the participants were briefed about the interview schedule and their expectations. The purpose of the briefing was to facilitate understanding and to prepare them as well as to follow the direction during the interview. Demographic data was obtained from both the parents and the caregivers, as indicated in Table 3.1.

4.2.1. Demographic data

Table 4.1: Demographic data of parents and caregivers

Characteristics	Number	Percentage
1. Relationship with the pregnant learner		
Parent	10	66.6
Caregivers	05	33.3
2. Age of parents (years)		
20-39	03	20
40-50	03	20
51-60	02	13.3
61 and above	02	13.3
3. Age of caregivers (years)		
20 – 39	02	13.3
40 – 50	03	20
4. Gender		
Female	15	100
Male	00	0
5. Ethnicity		
Tsonga	11	73.3
Venda	03	20

Others	01	6.6
6. Religious affiliation		
Christians	05	33.3
Protestants	04	26.6
Zionist	04	26.6
Others	02	13.3
7. Socio-economic status		
Employed	05	33.3
Unemployed	10	66.6
8. Age of the pregnant learner		
13-15	06	40
16-18	09	60
9. Grade of the pregnant learner		
Grade 7 – 9	02	13.3
Grade 10 -12	13	86.6
10. Duration of pregnancy of the learner		
1 st trimester	01	6.6
2 nd trimester	08	53.3
3 rd trimester	06	40

4.2.2 Discussion of the demographic data of parents and caregivers

Table 4.1 shows the demographic data of the parents and caregivers of the participants. All 15 participants were females: 10 were parents and 5 were caregivers. Their ages varied as follows: out of the 5 care - givers; 2 were 20 - 39 years old, and 3 were 40 - 50 years and all were unemployed. Out of the 10 parents, 3 were aged 20 – 39 years; 3 were 40 – 50 years and 2 were aged 51 – 60 years. All were employed. It is possible that some of these participants were still young and working, as they were unable to stay with their pregnant children and were employed. The researcher believes that some of the parents' age group were equal to some of the care - givers, as there were two parent age ranges of between

20 – 39 years and for both groups. Out of the 5 care givers, 2 ranged between 20 – 39 and 3 ranged between 40 – 50 years. As a result, both parents and the care-givers were almost the same age, which might have an influence within the community. However, it is also possible that the care givers might have had teenagers that fell pregnant, which was why they had an interest in assisting.

The researcher believes that these parents might be of middle age and adults as they were working and had asked other parents to be caregivers on their behalf. The researcher also believes that pregnant women need support as well irrespective of marital status and cultural belief. This is because pregnant girls experience incredible social and moral burden due to their old-fashioned tradition and social environment when they go through pregnancy while still at school and not married (Acharya, Bhattarai, Poobalan, Teijlingen & Chapman, 2014).

4.2.3. Presentation of findings

Table 4.2 presents the themes and sub-themes as perceived roles of parents and caregivers when teenagers are pregnant. The parents and care givers are expected to wait at the gate, to enhance school attendance. Themes that emerged from raw data focussed on their skills and intentions to change the teenagers' behaviours and the environmental, socio-cultural factors that are facilitators or barriers to teenage pregnancy.

Table 4.2: Themes and sub-themes as perceived roles of parents and caregivers when teenagers are pregnant and attending school

Main theme	Themes	Sub-themes
Perceived roles of parents and caregivers when teenagers are pregnant and the parents / care - givers expected to wait at the gate, to enhance school attendance	1. Parents' / caregiver's skills and personal factors that affect behaviour change	1.1. Lack of communication between parents and their children about sexuality and dangers of sex
		1.2. Role of involvement in the provision of contextual sex education
		1.3. Poverty as socio-economic factor affect their skills
	2. Parent's / care - giver's intentions to change the teenagers' behaviours	2.1. Strengthening of pregnancy prevention interventions
		2.2. Support pregnant teenager by ensuring there's a delegated person at the gate
		2.3. Discussion over the internal policy of exclusion from attendance
3. Environmental and cultural factors as facilitators/ barriers to pregnancy prevention	3.1. Traditional practices as facilitators to enhance school attendance	3.1. Traditional practices as facilitators to enhance school attendance
		3.2. Traditional practices as barriers to enhance school attendance
		3.3. Pressures: Peer parents, peer teens, social media influences
		3.4. Children's rights influences
	4. Parent-school partnerships	4.1. Teamwork amongst all education stakeholders

4.3 Main theme: Perceived roles of parents and caregivers when teenagers are pregnant and the parents are expected to wait at the gate, to enhance school attendance

Four themes as presented in Table 4.2 emerged from the main theme. The themes and sub-themes are described below.

4.3.1 Theme 1: Parent's / Caregivers' skills on behaviour change

Table 4.3: Theme 1 and its sub-themes

Theme	Sub-themes
1. Parents' / Caregiver's skills on behaviour change	1.1: Lack of communication between the parents and the children about sexuality and the dangers of sex
	1.2: Role in the provision contextual sex education
	1.3: Poverty as socio-economic factors affect their skills

4.3.1.1 Sub-theme 1.1: Lack of communication between the parents and the children about sexuality and the dangers of sex

Participants' experiences related to the knowledge deficit of parents on reproductive health contributes significantly to the teenage pregnancies revealed that parents do not communicate effectively about sexuality and its dangers. This is because parents regard communication about sex with their children as taboo.

In addition, children do not listen to their parents when they talk to them, indicating that they have their rights.

The statements below reflect the response of the parents.

“Wow, how can I discuss sex with a child that comes from my womb? It is taboo in our tradition”.

The problem with our children is that they do not listen and respect us, claiming that they know better from school and television”

The researcher believes that there is no knowledge from parents to share on sexual information with the children. However, it seems as if the parents are also unwilling to share the little knowledge they might have with their children. Furthermore, the parent - child relationship, especially in the rural areas, is not strong. Heinrich (2014) concurs that the children’s gender, and other features affects the parents’ communications and interactions with their children.

The participants’ views and perceptions regarding communication between the parents and the children regarding sexuality and the dangers of sex is therefore lacking. Traditionally, a child can share the sexual information with the sisters and cousins but not with the parents. This is clear from the statement below:

“I don’t even know where to start and end when it comes to the topic of sexuality with my own child, how I can look in the eye, scary, hey!”

The researcher believes that there is no platform of communication between the parents and the children at all. They cannot even sit together and watch Television when people are kissing on TV. Martyn and Hutchinson (2002),

indicated that early parent-adolescent sexual communication was associated with later age of sexual debut, consistent condom use and, low possibility of sexually-transmitted diseases. Mother-daughter communication about condoms was related with reliable condom use.

Absence of active communication forms may contribute to reduced sexual health communication between African - American parents and their youth. However, research has shown that the quality of a youth's sex communication with parents is as important as the regularity of sharing sexual health information (Feldman & Rosenthal, 2000 cited in Johnson & Williams 2015).

Various authors differ regarding the significance of parental effort in the quest to decrease risk among youths and regarding readiness to be sexuality educators for their children (Dilorio et al., 2006 cited in Johnson & Williams 2015). However, youths may prefer that their source of sex education be their parents (Somers & Surman, 2004 cited in Johnson & Williams 2015). There is increasing evidence that both mothers and fathers need assistance in developing comfort and achievement of the knowledge needed to have open dialogues with their youths about sex-related topics (Dilorio, Maibach, Rivero, & Miller, 1996 cited in Johnson & Williams 2015). The current researcher assumes that parents still practice tradition, hence the following statement supports the matter.

“When we were growing up, our parents were the ones referred us to our aunts to get information regarding menstruation and sexuality, but unfortunately, in today's life those practices are not practiced any - more, our children do not listen to us.”

Therefore Whiteside-Mansell, Weber, Moore, Johnson and Williams (2015) confirm that the solution-focused approaches that social workers can use to help

parents overcome barriers to sexual health knowledge dissemination must be provided at all times. This is many of these parents are not accustomed to formalized training models that can help them obtain the needed knowledge and skills to present effective sexual health communicators. However, S-social workers have an opportunity to help parents develop active sexual health communication skills in casual situations when formal situations are not helpful to skill development. The current researcher believes that if the solution - based strategies can be disseminated to all the parents, the challenge of teenage pregnancy can be minimised.

4.3.1.2. Sub-theme 1.2: Role in the provision contextual sex education

The participants revealed that parents, were aware of their role in the provision contextual sex education. The initiation schools were considered as part of parenting role towards sex education. Their role needed to be explicit cultural practices that occurred in the communities, that included taboos, myths and initiation for the girl child to show maturity when she experienced her first menstrual period. She had to report to the elders, who would also introduce the matter to the traditional authority as a way of reporting that she must undergo traditional initiation.

“Once a girl child presents the matter that she is seeing the moon (menstruating), as parents at home we report the matter to the chief, so that they become aware that when the schools closes, there will be an event where - by the girl will undergo initiation (vukhomba) as our tradition and a sign of being a grown up”.

A study by Halpern and Perry-Jenkins (2016) revealed that contextual sex education may protect teenagers at risk of teenage pregnancy, as parents set limits that include: attention to and tracking of the teenager’s whereabouts, activities, and adaptations. The study found that parental monitoring enabled parents to effectively control their child’s behavior, resulting in less involvement in risk behaviors (Halpern and Perry-Jenkins, 2016). The

researcher believes that influence of culture is significant and also lead some parents forget their role shifting responsibilities to initiation schools. Therefore, Akella & Jordan (2014) revealed that poor parenting role might be subjected to poor physical and mental health, and social isolation are associated with pregnancy on culture practices.

4.3.1.3 Sub-theme 1.3: Poverty as a socio-economic factor affects their skills

Participants revealed that poverty is the contributory factor to teenagers falling pregnant due to lack of financial support at home. The participants indicated that the money that they got was too little such that it cannot cater for the entire family and these lead to other activities of the family. Being unaffordable participants also made the following statements as evidence that indeed they were struggling financially.

“I am working in Giyani in a family where I’m paid R1200, from which I have a deduct bus fare of R400 a month, food and other stuff for the entire family, wow, it is tough and frustrating“.

“I was very angry when I realised that my child was in a relationship with a married man, and when I noticed it she was already pregnant and I blamed myself for not protecting her accordingly”

The researcher believes that indeed poverty plays a vital role in teenage pregnancy leading to kind of behaviours where by girls involved themselves in relationship for the sake of being taken cared for financially. Acharya, Bhattarai & Poobalaan (2014) concurred and that structural and social inequalities, poverty and gender all influence young people awfully vulnerable to teenage pregnancy. Spaul (2015) concurred with studies which showed that the low quality of education presented to the poor ultimately becomes a poverty trick, thus one can say that poor children in South Africa, who make

up the majority, are starting behind and remaining behind. These lead uncertainty on the ability of the South African schooling system to impart the knowledge, skills and values that learners need to become full members of society and promote social flexibility. However, black children in the rural areas are disadvantaged and face serious poverty. The results of most previous study also revealed that more teenagers drops out from schools due to poverty (Spaull (2015)). In addition, Spaull (2015) revealed that despite the twenty years of democratic rule, most of the black children continue to receive a low-quality education, which convicts them to the underclass of South African society where poverty and unemployment are regarded and considered as a custom. Participants further indicated that the following:

“As you can see, even the appearance of the houses is very poor in our home, it is difficult for my children to have bread every day when they go to school, and I think these lead my child to fall in love with that married taxi driver who buys her bread at school”.

The researcher also believes that poverty has a negative impact on in the life of teenagers; hence, Sardar (2014) revealed that poverty is a multidimensional wonder that includes lack of salary and productive resources enough to ensure a continued livelihood, leading to hunger, malnutrition, ill - health, increased chances of death, lack of access to education and basic services, homelessness, poor environment as well as social discernment and rejection. However, it includes the absence of contribution in decision-making in civil, social and cultural life.

However, Ward, Makusha and Bray (2015) concurred that poverty increases the stress that parents experience when trying to provide for and protect their children. This results makes, strict and unreliable parenting being more likely. Parents who are living in poverty are also likely to be poorly educated and unable to support their children’s educational development and failure to provide adequate nutrition and access good educational opportunities. The authors indicated that poverty can expressively undermine parenting,

lessening the life chances of the children. Furthermore, parents can even transmit poverty from one generation to the next generation. It was found that, single parenting raises the risk of poor cooperation and learning outcomes for the young people as they are more likely to be living in poverty and stressed.

Parents / caregivers also experienced the burden of single parenting with more children to be taken care of. This could contribute to teenage pregnancy. Participants also revealed that it is a heavy burden when you are a parent with many children that you must support. Participants indicated that children have many needs such as food, clothes and health care. However, the life - style these days also requires medical aid or cash in case someone becomes sick. The following statement from the participants is an indication that single parenting is a difficult situation to manage because of shortage of funds.

“My concern is that she is not the only child in the family; she has four siblings who are also at school and need my support well as we have divorced a long time with their father.”

“My head is heavy because she is adding another responsibility. Thus is unlike in the previous years, when we used to plough the fields and harvest vegetables and maize meal, now the land is dry with no rain”

The researcher believes that it is really hard for the single parents to raise many children, especially if one is not working. Furthermore, it does not matter how the parent becomes single, but the fact is that the status is single. Nelson (2014) concurred and added that women vary in the routes that brought them to be single parents: their individual attitudes and preferences. However, the absence of the father affects children’s outcomes in the same way and thus the household structure can play a major role key part in whether families live in poverty, and are also able to complete the responsibilities of parenting (Ward et al. 2015). Participants were surviving on the child support grants and this was

found to reduce the burden within the family, as the money could be utilized for some other activities. However, child support grant is only accessible to a parent who has a child and either the father is unavailable or unemployed. Initially, the purpose of the child support grant was to assist the needy ones, but instead, now it is being abused by teenagers'. This is supported by the following statement.

“Indeed, it was a burden for my teenager getting the pregnancy, but on the other hand she will be able to access the child support grant, like peers”.

The researcher believes that parents encourage their teenage girls to give birth so that they can access the child support grant. Heinrich (2014) concurred and stated that parents who are unemployed affect their children's wellbeing. In addition, government policies encourage parents to work and provide additional income that will assist in the support of their children. However, it was found that parents are less effective in ensuring that children whose parents work get admission to suitable and inspiring early care of their children (Heinrich, 2014). The participants' views and perceptions regarding child support grant is that it really assists the family to buy food and clothes where there is no other source of income. This is supported by the statement below.

“At least there is of child support grant here at home, therefore, I can say we never sleep on an empty stomach”.

“We used to borrow mealie meal but since my started getting the child support grant we are no longer borrowing as we afford to buy 80kg that lasts us until the end of the month”.

The researcher assumes that parents earning low income might have contributed to the pregnancy based on the statements above. This correlated with the study by Heinrich

(2014), who found that low-quality jobs for the parents are connected with greater work-related stress for parents, which in turn diminishes the children's security. Hence, the effects of parents' work-related stress on children are particularly strong for single-parent's families (Heinrich, 2014). In addition, parents function and cherish their children. This suggests that, continuing stress at work may cause parents to pull out from relating with their children at home, or to be more vulnerable to stimuli that may cause battles with their children.

4.3.2 Theme 2: Parents' / Caregivers' intention to change the teenagers' behaviour

Table 4.3 presents the sub-themes that emerged these are discussed individually.

Table 4.3 Theme 2 and Sub-themes

Theme	Sub-themes
2. Parents'/Caregivers' intention to change the teenagers' behaviours	2.1. Strengthen pregnancy prevention interventions
	2.2. Support pregnant teenager by ensure there's a delegated at the gate??
	2.3. Discussion over the Internal policy of exclusion from attendance

4.3.2.1 Sub-theme 2.1. Strengthen pregnancy prevention interventions

Participants indicated that they were unable to strengthen prevention interventions of teenage pregnancy hence communication about sex issues between the parents and the children about sexuality and its dangers was problematic. Participants indicated that traditionally, it was difficult to talk about sex issues with biological child. This is revealed in the following statements:

“I used to tell my child not to walk around at night. I also warned her not to sleep with boys to prevent pregnancy. Ishh, it is not easy to talk to my child about sex issues, I don’t even know where to start and end when it comes to the topic of sexuality with my own child, how can I look her in the eye?...scary: wow!”

The researcher believes that there is no platform for communication between the parents and the children at all. The assumption is that the way parents view the matter they cannot even sit together and watch television when there is some kissing involved on the show. A study by Breuner, Mattson and Committee on the Psychosocial Aspects of Child and Family Health, (2016) suggested that all teenagers should receive accurate sex education, including prevention and consequences of teenage pregnancy in order to understand how to practice healthy sexual behavior. Several studies have revealed that sexuality education interventions can prevent or reduce the risk of adolescent pregnancy HIV, and STIs for children and adolescents with and without chronic health conditions, as well as disabilities industrialized countries with the highest rates of adolescent pregnancy. In addition, sexual health information messages are received by children and adolescents multiple times throughout the day from the media, religious organizations, schools, and family peers, parents/caregivers, and partners, although the quality of the information varies (Breuner et al, 2016).

4.3.2.2 Sub-theme 2.2. Support pregnant teenager by ensuring that there’s a delegate at the gate

Participants indicated that immediately after the teenager was identified to be pregnant, measures are taken to ensure there is a delegate at the gate. Participants said that it was easy to delegate, as it was obvious that there were teenagers who were already pregnant.

“It was easy for me to delegate a person to stay at the gate on my behalf. Other teenagers were identified early and caregivers had already been delegated. I even told my neighbour whose child had already dropped out to return to school. We even delegated one who were already at the gate through advice from others. It is possible for one to be delegated for three teenagers. I don’t want my child to drop out of school”.

The researcher believes that participants’ burden of teenage pregnancy was an advantage to caretakers, as they were paid when they stayed at the gate. Various authors argued that when an adolescent becomes pregnant and gives birth, it is expected to affect the entire family and a vast amount of money deals with the care and attention of the new addition. A study suggested that adolescent mothers should be supported until they complete their education and fulfil their own developmental needs. In addition, the study revealed that family support approach relies on an ecological model that recognizes the contexts of the family and neighbourhood as the most important influences on a teen mother’s education (Patton, Olsson, Skirbekk, Saffery, Wlodek, Azzopardi, Stonawski, Rasmussen, Spry, Francis & Bhutta, 2018). It was recommended that parents should interact with teachers, to support pregnant learners, so that they can attain some education and give birth to healthy babies (Matlala, 2015).

4.3.2.3 Sub-theme 2.3. Discussion over the internal policy of exclusion from attendance

Participants indicated that there were internal policies to prevent teenagers from being excluded from attending school. Participants indicated that it was possible for three parents to delegate one caregiver. The following statement from parents

provide evidence that participants were aware of the internal policy of exclusion from attendance.

“We are fortunate in this community because we were told at a meeting on what we should do once our teenagers become pregnant“. I thought it would not be possible for one caregiver to look after more than one teenager during pregnancy. It was clarified at the meeting that it was possible for one caregiver to be responsible for up to three teenagers”.

The following statement from the caregivers provide evidence that participants were aware of the internal policy of exclusion from attendance.

“I am unemployed, I decided to help parents who are employed to wait at the gate on their behalf, so that their pregnant teenagers can continue with their schooling. Haaa, I know that it is possible for a care- giver to be responsible for more than one learner during pregnancy. It is my third year being a care- giver for pregnant learners since we were told at the meeting about this issue”.

The researcher believes that participants are aware of the internal policies to encourage pregnant teenagers to attend school. However, all learners in South Africa, including those who are pregnant, have a constitutional right to education (the Republic of South Africa, 1996) and parents are aware of this right (Vandeyar, Runhare, Dzimiri & Mulaudzi, 2014). This study findings concur with a study conducted by Maputle, Lebeso and Khoza (2015) on perceived challenges faced by mothers of pregnant teenagers who were attending school, which revealed that care givers had to stop working and this negatively affected the socio-economic status of the families. A study showed that drop-out and expulsion of

pregnant learners who did not have parents or care - givers at the school gate were some of the problems experienced (Maputle et al., 2015).

4.3.3 Theme 3: Environmental, and cultural factors as facilitators/ barriers to pregnancy prevention

Table 4.4: Theme 3 and its sub-themes

Theme	Sub-themes
3. Environmental, and cultural factors that as facilitators/ barriers to pregnancy prevention	3.1: Traditional practices and culture as facilitators to school attendance. 3.2: Traditional practices and culture as barriers to school attendance 3.3: Pressures: parents, teens influence by social media 3.4: Children not listening to parents due to children's rights

4.3.3.1 Sub-themes 3.1: Traditional practices and culture as facilitators of school attendance

The participants revealed that there are some traditional and cultural practices that they perform. Culturally, a girl is not supposed to go to school. The girl is supposed to perform household chores in preparation for marriage. The family planning utilized is also traditionally guided by the moon. The statements below support this.

“When we were growing up we were not allowed to go to school and they said we can be pregnant by boys at school, unlike these days, where everyone is going to school”

“In our days we were guided by the moon when we ‘saw the month’ (menstruated) unlike these days “.

The researcher assumes that it was the parents’ wishes to follow those cultural and traditional beliefs. Unfortunately today children will not follow those practices it as they are too advanced. This concurs with Akella & Jordan (2014) who indicated that a child having a baby as a teenager is more likely to be deprived of critical social issues like poverty, education, as well as risky behaviors that lead to unfortunate health issues. The study by Lohoar, Butera & Kennedy (2014) reveals that traditional cultural values ensure that Aboriginal children are provided with the choice to discover the world and to study their responsibilities to care for and defend one other. For many Aboriginal families, instilling a sense of responsibility is seen to empower children with a sense of trust, support and confidence.

The researcher assumes that the reason it works so well in their culture, is that the sense of responsibility empowers their children. However, it comes back to communication and family gatherings. Whatever they talk about it they feel supported, mothers will be able to sit down with them and encourage the teenage girls that they are old enough to understand the reality of life. The teenagers also indicated that it gives them a sense of pride when they sit down and share ideas with the family and they feel free to do so. (Lohoar, Butera & Kennedy 2014). Furthermore, elders are generally respected for the value of their cultural knowledge, leadership capacities and for making decisions on behalf of the community (McIntryre, 2001, cited in Lohoar et al., 2014). Elders are particularly valued for helping children to understand the real aspects of life, society and culture.

4.3.3.2 Sub-themes 3.2: Traditional practices and culture as barriers to school attendance

Influence of culture and tradition

Participants' experiences regarding culture revealed that teenagers who fall pregnant while attending school were influenced by cultural practices in the communities, including taboos, myths and initiation practices. Participants revealed that in order for the girl child to show maturity, when she experienced her first menstrual periods, she is expected to report to the elders, who will also pass the matter to the traditional authority as a matter of reporting that she must undergo traditional initiation. Doing so is another way of reporting to the men to note that she is ready for marriage, which can also lead to child birth. This is the time when a girl child is expected to be trained for hard labour, in preparation for marriage, where it is even more difficult to concentrate on her books due to fatigue and stress. Parents made the following statements to show that culture influences teenage pregnancy.

“Once a girl child presents the matter that she is seeing the moon (menstruating), as parents we report the matter to the chief, so that they know that when the schools closes, there will be an event where a girl will attend an initiation school (vukhomba), as our tradition and a sign of a being grown up”.

“Girls must know how to do all the chores at home, like ploughing the fields, cooking, and sweeping, as our tradition allows her to do that in preparation for marriage, hence we know that “ vukati bya katinga”, as training to be tolerant and strong as a Tsonga woman”

The researcher believes that cultural influence of contributes significantly and leads some parents to book husbands for their girls, which leads the girl no option but to decline, o accept to comply with the request of the parents. However, some of them ended up becoming second wives in the marriage, as old men and women promote these. Akella & Jordan (2014) added that poor physical and mental health as well as, and social isolation, are associated with pregnancy.

Bongardt (2015) revealed that noble rules may play a better role in girls' sexual decision making than in boys. Various authors have revealed that adolescents from communist cultures generally show better feelings to friends and sanction friendship directions more than adolescents from more personal cultures (Bongardt, 2015). Communist cultures tend to hold more traditional sexual norms, whereas personal cultures generally show generous approaches towards sex (Arauz, Mealy, Smith, & DiPlacido 2013).

4.3.3.3. Sub-theme 3.3: Pressures: other parents, other teens, Influence of the social media

Participants' experiences regarding the attitude of the children revealed that these children and some other parents influence others, indicating that they are called mothers and grannies at home by the grandchildren and the children, while they are still young. The following statements are evidence from the participants that peer group influence contributes to early pregnancy.

"It was not that painful for me as some of her peers had children long time ago and the children are even attending school now".

"When I'm selling snacks and sweets at the pre-school, I will also take along my grandchild and him play with others and will spend my money while I'm still alive"

The researcher believes that parents might influence each other culturally at initiation schools. However, teenagers may also influence each other to fall pregnant to access the social grant, hence poverty may be a contributing factor. This correlates with a study by Lohoar, Butera & Kennedy (2014) who stated that parents still practice traditions. The perception of various communities emphasise the attached domains of both family and community life. In addition, some authors have indicated that through the empathy system, people may share a mutual set of values that allows them to integrate them to ensure that their teenagers are safe (Lohoar et al., 2014).

The study by Van de Bongardt, (2014) indicated that Social Learning Theory recommends that engagement in new behaviors is encouraged by seeing the behaviors of valued social peers. It is referred to as demonstrating, observational learning (Bandura, 2004). According to the theory, the larger the number of peers who are involve in a certain behavior, the more useful and precise the behavior will be, and the more likely it is that teenagers will engage in the same behavior, based on the reasoning that if peers are doing it, it is probably a good or clever thing to do. Engagement of youth in the involvement of youth - directed programs is vital to promote participation and ensure agreement and consequential health assistance (Lassi, et al., 2015).

Influence of peer parents

Participants' experiences regarding other parents' influences revealed that reaching the age of 40 years without a grandchild is an insult within the community, as you become ostracised being isolated and regarded as stupid when other parents are addressed as being grannies by the grandchildren. The participants indicated that they feel proud when they go for shopping and bring back some snacks from the shops for the grandchildren. This shows that participants also feel proud to fall among those who are called grandmothers at that point. The practice from the families is that once the girl teenager is pregnant, they send her to the boy's family to stay there as a wife. The following statements

from the participants is evidence that parents are also influenced by other parents during their debates and conversations.

“I was very happy and proud to get the message from the school that my child is pregnant and I must come and see the principal”.

“Those witches are going to be ashamed because they thought my child was a barren and will not get children and I will not be a grandmother, hence I only have one child”.

“My neighbours were laughing at me and mentioned that my money buys polonies and cool drinks for luxury, and now at least they will stop saying that as I will also buy disposable napkins for my grandchild, like them”.

Furthermore, the following statement from the participants (parents) reflects the positive attitudes shown by the parents that they feel proud for the child being pregnant irrespective of that she is still a scholar and that she is now associated with others who have grandchildren.

“At least I know that when I die I have someone who will carry my coffin and bury me like a king as my grandchildren will be available to do so”.

The researcher believes that parents might influence each other in order to be addressed as grannies, as an evidence that they are getting old and the family is growing bigger. This concurs with Lohoar et al. (2014) who found that parents sometimes misinterpret the affirmative parts of old-style family life. However, parents

need to prompt each other of their relationship responsibilities as they continue to face blame for their traditional cultural practices that also affect teenagers (Lohoar et al., 2014). These findings contradict the study by Bearman (2013) which revealed that there were virginity initiates by the adults, whereby they vowed that adolescent must abstain from sex until marriage. These initiative standards were established by most pledges from the churches, schools, and colleges, where they encourage teenagers to abstain from sexual activities until they are married.

This is an indication that those engagements are planned by adults for the sake of the adolescents and was attractive for to many adults. In addition, the study revealed that, critics were uncomfortable with the initiatives because many initiation supporters believed that sex education sends an incorrect message to the adolescents. However, enemies' opponents of the practice do not like the fact that the pledge movement breaks and keep supporting the matter (Williams & Thompson, 2013).

The findings concur with the study done by Arifeen, Hill, Ahsan, and Jamil, Nahar & Kim (2015), which showed that a series of 5-year plans focused on the growth of comprehensive maternal and child health services and access to family planning services. However, in the late 1980s, the government focused on providing fundamental services for maternal and child health for the rural population, through district hospitals and clinics (Arifeen et al. 2015). These were done to promote pre-birth care, and provide family planning to the teenagers.

The study done by Lassi, Salam, Das, Wazny, & Bhutta (2015) on school- based delivery strategies, suggested that participation to promote sexual and reproductive health, physical activity and healthy lifestyle, and minimize exposure to substance abuse can improve health results in young teenagers. However, school-based delivery strategies appear to be extremely evaluated for improving adolescent health; these strategies have been used to deliver interventions, such as sexual health, and drug abuse prevention. They further concurred that adolescent health and behaviors are influenced by numerous means, including individuals, peers, family, school and

community-based activities; therefore, combined efforts at all levels are needed to promote broad approaches to address adolescent health. Therefore, government institutions, community organizations, schools, and families must work in a comprehensive manner, to improve adolescent health (Lassi et al. 2015).

Influence of peer teenagers

The participants' experiences regarding peer teenagers' influences revealed that teenagers are influenced by peers, especially regarding marital status, access to the social grant and bearing a child. It is not a shameful to go and stay with the boy once she realizes that she is pregnant, even if there is no marriage arrangement. After delivery it is common for them to be absent from school and taking the child for immunisation clinic for vaccinations. They also boast to each other's by putting profile pictures of the babies on their phones as screen savers .The following statements from the participants is an evidence that the parents are aware that there is peer group influence amongst the teenagers.

“My child was very close to the friend who already has two children from different fathers, but at least the father of the last child has accepted her and currently they are staying together. My child used to take care of the second child and even accompanied the mother to the clinic for the vaccination of the baby”

“The behaviour of my child has improved since she got the child and the grant is assisting her with taxi fare when she goes to school”.

“I was very disturbed when I came back from work one weekend and my last born child told me that her sister is pregnant and has run away from home to stay in that family of the boy, indicating that she is afraid of me’..

The researcher believes that peer pressure influences teenage girls to have children, so that they can receive the child support grant and get money every month, like peers. However, getting married is regarded as status symbol as they will be staying with in laws and husbands. This concurs with Abeele, Campbell, Eggermont & Roe (2014) who describe perceived peer pressure as the grade to which adolescents perceive burden from their peers. Eventually, it is the parent and the teen mother who experience depression and stress when they face the consequences, (Abeele et al., 2014).

A study by Van de Bongard (2014) revealed that learners have regularly shown that teenagers’ behaviors tend to be very similar to those of their peers. Furthermore, younger adolescents are more delicate and liable to social effects and burdens, than older adolescents. Furthermore, resistance to peer influence often increases with age and associations between sexual peer norms, and sexual behavior may be tougher for young teenagers than older teenagers (Bongardt, 2014). These observations contradict the study by Kearney & Levine (2014) who found that teens who watch more sex content on television are likely to become pregnant.

Lassi, Salam, Das, Wazny, & Bhutta (2015) indicated that adolescence is a period of danger, taking risky behaviors and that do not only affect health, but also established the stage for one’s health across the life path. However dangerous behavior that is established in adolescence include substance abuse which is tobacco, alcohol, and drugs (Lassi et al., 2015). All these lead to sexual risks, such as engaging in unsafe sex, where a teenager can become pregnant and contract some sexual infections. All these are contributory factors of peer teenage influence.

Brown et al. (1986 cited in Bongardt, 2015) revealed that the effects of peer pressure seem to vary across various fields of adolescent behavior. However, several studies found that adolescent experience is more of peer pressure towards school and peer involvement than towards sexual behavior. A study by Bongardt, (2015) revealed that it may be challenging for adolescents to distinguish their experience to external forces when making social decisions and the conceptualization of peer pressure requires the cost of private agency.

Social media influence

Participants' experience regarding media influence also contributes significantly on the behaviour of the teenagers during teenage pregnancy. They indicated that the teenagers spend much time on both the chatting and watching TV during the night, which exposes them to these kinds of behaviour. The manner in which the teenagers are knowledgeable about the social media is frightening, and they even know how to search sexually explicit information. The participants further mentioned that it is an unfortunate abuse of media access as the children access it until very late at night. This is supported by the statements from some of the participants, as follows:

“Today’s life - style is very dangerous because in every family there is access to media and other devices like cellular phones and television, which contribute a lot for our children’s bad behave and debuts of sexual activities at a very young age. They wake up very late during the night when we are sleep and watch these dirty movies”

“As parents we are the ones to blame sometimes because we are the ones who buy these cellular phones for our young children, which leads them to pornography and other dirty information that influence them to misbehave”

Google Search and Twitter Activity

Participants' perceptions regarding Google search and Twitter activity revealed that teenagers have access to the information that is not even suitable for young people. This sub - theme showed that there are no secrets, as long as the phone has sufficient data bundles to enable teenagers to browse. This concurs with the findings by Kearney & Levine (2014) who observed that data is available at very high frequencies, either daily or weekly, providing us with the skill to look for points in exploration terms just after a new incident has occurred and that the relapse is subjective by the female teen population in the media market and standard mistakes are used for gathering at media market. However, participants believe that they do not have any control as the sales of phones and data is all about business and nothing else. These contradict with the study by Lassi, Salam, Das, Wazny, & Bhutta (2015) who asserted that the social media and information technologies, cash transfers, social protection, and micro-finance initiatives are capable tactics to minimize teenage pregnancy; however, given the lack of demanding evaluations, there is a need to conduct more studies about it.

Participants expressed concern about Google search and Twitter activity. This correlates with the findings of Kearney & Levine (2014). The findings of their study showed public worry addresses the possible harmful influences of media exposure, but that it may have helpful influences as well. However, the effect on the attitudes or behaviours of teens and young adults could be positive or negative, subject to the specific media content and situation. It was also found that the media is likely to be a powerful driver of social outcomes.

Access of television, cellular phones and pornography movies

The participants' views regarding accessibility of cellular phones have an influence on the behaviour of the teenagers. The indication is that when cellular phones started, the prices were not easily accessible, but unfortunately, the prices today are low to the extent that even children in primary school can access them

through parents who spoil them. The following statement is also evidence that some parents spoil the children at a young age.

“The children in my neighbourhood carry expensive phones from their parents when they change the contracts. They use these phones to access phonography, which they share with other children”.

The participants’ perceptions regarding access to media, pornography and phones showed that these have a significant influence on teenage pregnancy. This correlates with Kearney & Levine (2014) who revealed that the link to actual behaviour that might lead to teen childbearing is difficult by the extent that those who are more likely to give birth at a young age may be the ones expected to view media with sexual content.

4.3.3.4. Sub-theme 3.4: Children not listening to parents due to children’s rights

The participants’ views and experiences regarding the children’s rights showed that the rights issues are misleading the children. It is not shameful today to see children reporting their parents to the court of law when they are misunderstandings at home. Children are no longer listening to their parents because of these rights. The statements below show this.

“The challenge for us as parents is that we do not have a say in our own children. When you try to caution them and show them the way, they say “I have my rights”..... Our culture is dead”.

The researcher believes that the children are just exaggerating things unnecessarily and they will remain the parents’ responsibilities irrespective of the rights issues. Hart & Hart (2014) revealed that school psychology and children's rights have great

potential, well outside what has been realized, for progressing the best interests of children, their communities, and society at large.

4.3.4 Theme 4. Parent-school partnerships

Table 4.5 presents the sub-themes that emerged and these will be discussed individually.

Table 4.5: Theme 4 and its sub-themes

Theme	Sub-themes
4. Parent-school partnerships	4.1. Teamwork amongst all stakeholders

4.3.4.1 Sub-themes 4.1: Teamwork amongst all stakeholders

The participants' views and experiences revealed that there is co-operation amongst stakeholders to help teenagers during pregnancy. The participants indicated that both the parents and teachers work together immediately the learners are identified to be pregnant. The participants said that teenagers who fall pregnant are encouraged to be positive in decisions undertaken to support them to continue attending school. The following is evidence that all there is co-operation amongst stakeholders.

“My child was no longer interested in school when she was pregnant, she stayed at home for three days. I reported her to the teachers, who talked to her in my presence, emphasising the possibility of passing grade 11. They even told her about some teenagers who had successfully passed their grades in the previous years”.

The researcher believes that when parents and teachers work together when the learner has been identified to be pregnant, it is an indication that they both support teenagers who fall pregnant to continue attending school. However, the primary prevention skills of teenage pregnancy programs are taught at school, aimed at delaying the initiation of sex and reducing unsafe sexual behaviors. A study conducted by Basch (2011) suggested that teamwork amongst stakeholders should consider policies and programs to assist teenagers who become pregnant. Another study found that there was a need for teenagers to succeed academically, to complete high school, and to prevent repeated pregnancy. The programs delivered through school-based health have been reported to successfully helping pregnant teenagers attend school during pregnancy and other educational outcomes (Basch, 2011). A study by Matlala (2015) recommended that school health nurses should be appointed to facilitate social support for pregnant learners, by coordinating the activities of all health and education stakeholders. In addition, the study recommended that a model to facilitate social support to pregnant learners, driven by a school health nurse, should be developed to help address the challenges of pregnant teenage learners in South Africa (Matlala, 2015).

4.4 CONCLUSION

This chapter presented data analysis. The discussions and interpretations of the findings are guided by Bandura's Social Learning Theory, Frishbein and Ajzen's Theory of Reason Action, as well as Triandis's Theory of Subjective culture (Ajzen, 1991, cited in Maia, 2014). Chapter five outlines the conclusions, limitations and recommendations of the study.

CHAPTER 5

CONCLUSION, LIMITATIONS OF THE STUDY AND RECOMENDATIONS

5.1. INTRODUCTION

The previous chapter presented the data analysis. The discussions and interpretations of the findings are guided by Bandura's Social Learning Theory, Frishbein and Ajzen's Theory of Reason Action, as well as Triandis's Theory of Subjective Culture (Ajzen, 1991, cited in Maia, 2014). This chapter outlines the conclusions, limitations and recommendations, based on the findings of the study.

Table 6.1: A summary of the chapters in this dissertation

Chapter	Description
1	<p>Orientation of the study</p> <p>Chapter 1 is an introductory chapter of the study that formed the structural point of reference for the whole research study. The purpose of the study was to determine the role of parents regarding teenage pregnancy and school attendance in the rural village Thomo in Mopani District, Limpopo Province. It discusses the background, rationale, significance of the study, problem statement, purpose of the study, research questions, objectives, conceptual framework, definition of concepts, the outline of the dissertation, a brief description of research design, trustworthiness as well as ethical considerations.</p>
2	Literature review

Chapter	Description		
	<p>Chapter 2 dealt with the literature review and the following headings were discussed:</p> <ul style="list-style-type: none"> • Perceptions of parents regarding teenage pregnancy • The role of parents when the teenager is pregnant and attending school • Cultural practices that can influence parenting role during teenage pregnancy 		
3	<p>Research Methodology</p> <p>Research methodology involved the qualitative research strand. This chapter designates the research methods, research design, research setting, population, sampling, data collection methods, data analysis of qualitative research of this study. Ethical considerations and measures to provide trustworthiness were also deliberated.</p>		
4	<p>Data Analysis, Interpretation and Discussion</p> <p>Chapter 4 dealt with the research results of the interviews from the parents and care givers of the pregnant teenagers who were attending school. The study findings were analysed, interpreted and controlled through the literature. Four themes emerged from the main theme, as follows:</p> <table border="1" data-bbox="423 1409 1461 1780"> <tr> <td data-bbox="423 1409 894 1780"> <p>Parents / care - givers' skills and personal factors that affect behaviour change.</p> <p>Environmental and cultural factors/ barriers to pregnancy prevention.</p> </td> <td data-bbox="894 1409 1461 1780"> <p>Parents / care-givers' skills on behaviour change.</p> <p>Parent – school partnership.</p> </td> </tr> </table>	<p>Parents / care - givers' skills and personal factors that affect behaviour change.</p> <p>Environmental and cultural factors/ barriers to pregnancy prevention.</p>	<p>Parents / care-givers' skills on behaviour change.</p> <p>Parent – school partnership.</p>
<p>Parents / care - givers' skills and personal factors that affect behaviour change.</p> <p>Environmental and cultural factors/ barriers to pregnancy prevention.</p>	<p>Parents / care-givers' skills on behaviour change.</p> <p>Parent – school partnership.</p>		
5	<p>Conclusion, Limitations of the study and Recommendations</p>		

Chapter	Description
	Chapter 5 focuses on the summary, validation, limitations, recommendations and conclusions. The summary of the study was also presented. Recommendations were made for the the Department of Education, Churches and Parents.

5.2. CONCLUSION

The role of parent regarding teenage pregnancy and school attendance were explored in this study. Parents expressed their roles, and challenges when accompanying pregnant teenagers to school. The study revealed that parents encounter some difficulties which affects the family activities. Parents also stated that they do not have any knowledge on sexuality education. Communication with the teenagers should be addressed, to minimize teenage pregnancy.

5.3. LIMITATIONS

The study was limited to Thomo Village in Mopani under the Greater - Giyani Municipality. The researcher had some difficulties in accessing some parents due to the intervention of the affected teenagers who advised them not to participate. However, some agreed, to participate, but later decided not to take telephone calls when called. Some of the parents were working outside the district and were not available to participate. Finally, the participants were very brief in their responses, and the researcher had to probe them until they opened up.

5.4. RECOMMENDATIONS

The following recommendations have been made based on the research findings

- Awareness campaigns regarding the prevention of teenage pregnancy should be staged.
- The Department of Education must strengthen Life Orientation subject and consider it as a major subject that cut across the grades.
- Existing policies on teenage pregnancy for learners must be reviewed.
- Youth programs should be strengthened and youth must be encouraged to attend school.
- Churches must warn the youth on dangers of sex before marriage.
- Parents must be capacitated on effective communication with their children.

5.5 SUMMARY

This chapter outlined the conclusions, limitations and recommendations, based on the findings of the study. The role of parent regarding teenage pregnancy and school attendance were also explored. However the researcher experienced some difficulties during data collection. Recommendations were made based on the research findings.

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ANNEXURE A: REQUEST OF PERMISSION TO CONDUCT A RESEARCH

P. O. Box 4047

GIYANI

0826

18 August 2016

The Ethics Committee

Department of Health - Mopani District

Private Bag x 9626

GIYANI

0826

Dear Sir /Madam

**SUBJECT: REQUEST FOR APPROVAL TO CONDUCT RESEARCH AT
ONE OF YOUR CLINIC AT THOMO VILLAGE**

The above matters refers

I am currently studying Masters of Nursing at the University of Venda under the supervision of Prof R.T Lebese. I hereby apply for permission to conduct research at clinic and school in the above mentioned village.

The research question is: *What are the role of parents regarding teenage pregnancy and school attendance in the rural village of Thomo in Mopani District Limpopo province.* This study is thus aimed in exploring, describing and investigating the role of parents of Thomo village in Mopani District in Limpopo Province regarding teenage pregnancy.

The study will help to decrease teenage pregnancy within the entire Province and the district and will encourage parents to communicate to talk and communicate with their teenage girls about safe sex and teenage pregnancy.

I hope that my application will be considered and approved.

Yours faithfully

Mnisi Tlangelani Calvia

Student Number 1162972

ANNEXURE B: INFORMATION SHEET FOR KEY INFORMANTS

ENGLISH

Introduction and background

Good day

My name is *Mnisi Tlangelani Calvia*; a student of the University of Venda. I am intending to conduct a study as part of my Master's degree in nursing. The main aim of this study is to exploring, describing and investigating the role of parents towards teenage pregnancy. I am inviting your active participation as one of the key informants in this study through an interview. The interview will last for 30 to 45 minutes .If you agree to take part, I will ask you questions about your role towards your teenager's pregnancy, if you are able to give us the inputs on how can we minimize and decrease these pregnancies your inputs and views are very important for the proposed study. My role as a researcher is to neither listen to your views without bias nor pass judgment. Your participation in this study is voluntary and you may withdraw from the study at any time if you wish. In case you decide to continue participating in the proposed study, you will continue to be treated in the usual and customary fashion.

Confidentiality

The information that you give will be kept confidential even pertaining to the fact that you have participated in the study, will not be made available to any one beyond the immediate research team.

All the participants will be given codes which will be used when transcribing the interviews. The codes will only be known by researcher. Everything that you are going to say will be treated as private and confidential. I undertake that all requirements, tapes and voice digital data will be destroyed two years after the publication of the findings of the research.

Contact details

I would be very grateful to answer any questions and clarify any point for you about this study. If you have any questions about your rights or any aspects of the study you may contact me on the following number, 015 811 6300 during working hours or 082 692 2374 after hours.

ANNEXURE B: INFORMATION SHEET FOR KEY INFORMANTS

Introduction and background

Avuxeni

Vito ra mina hi mina *Mnisi Tlangelani Calvia*; xichudeni xa Univhesiti ya Venda. Ni le ku ringeteni ku fambisa na ku lavisisa tani hi xiphemu xa tidyodzo to yisa emahlweni ta le henhla ta vuongori. Xikongomelo nkulu iku lavisisa no kumisisa ntrho wa vatswari ehenhala ka van ava vanhwana lava va tikaka makhwiri va ha ri exikolweni. Na mi rhamba ku nghenelela tani hi vanwana va vatswari va ndhuma eka pfhumba leri hita burisana hi kombisana. Mburisano lowu wu ta va wu lehe ku fikela kwalomu ka makume manharhu ku fika mune wa makume na nthlanu wa timinete. Loko mi pfumelelana na mina ni ta mi vutisa swivutiso hi laha mi nga ta kombisa nitrho wa nwina lowu ami wu endla enkarhini lowu nwana wa nwina a ri muyimani. Mi ta kombisa mavonele ya nwinaleswaku hi nga hunguta njhani ku va van ava vanhwana va tika loko va ha ri exswikolweni. Mavonele ya nwina ma na nkoka ngopfu eka mburisano lowu. Nitrho wa mina tani hi mulavisisi I ku yingisela swinene mavonele ya nwina ni nga teki thlelo no mi kanganyasa kumbe ku mi hlela. Mi fanele mi swi tiva kahle leswaku ku ghenelela ka nwina ka ndzavisiso lowu ahi ku bohiwa kambe i ku rhandza no tsakela ka nwina. Loko mo ka mi nga ha switsakeli ma pfumeleriwa ku tshika mi nga ha edli naswona hambu loko mi nga tshika mi nga ha swi tsakeli ami nge tshikeleriwi hi munhu.

Xihundla

Tivani leswaku vuxoko xoko na mahungu lawa mi nga ta ma nyika ma ta hlayisiwa ya ri xihundla hambu leswi na nwina mi nga ta va mi nghenelerile naswona a ma nga nyikiwi munhu unwana loyi an ga ngenelakgingi ka vulavisisi lebyi.

Tani hi vangheneleri wi ta nyikiwa mfungho lowu nga ta tsariwa eka bulo ra nwina ematshanwini ya mavito ya nwina. Mfungho wu ta tiviwa ntsena hi muntlhotlhi wa nwina kumbe mulandzelerisi. Hinkwaswo leswi mi nga ta swi boxa swi ta va xihundla no tumbetiwa. Na mi tshembisa leswaku endzaku ka malembe mambisi switirhisiwa leswi nga ta tirhisiwa swi ta cukumetiwa loko mbulaburisano wu anldlariwe erivaleni wu humelerisiwile

Riquingho

Ni ta xixima no hlamula swivutiso hinkwaswo no hlamusela hi ku hetiseka leswi nga ta laveka eka ndzavisiso lowu. Loko mi ri na swivutiso mayelano na malunghelo ya nwina na vuxokoxoko bya ndzavisiso ma pfumeleriwa ku ni lava eka tiqingho leti ti landzelaka nkarhi hinkwawo ngopfu ngopfu na nhikani eka 015 811 6300 na 082 692 2374 na madyambu.

ANNEXURE C: INFORMED CONSENT FORM

I-----(Name & Surname)
understand that I am being asked to participate in a research study. This research study will evaluate the role of parents regarding teenage pregnancy and school attendance. If I agree to participate in the study, I will be interviewed for approximately 30 to 45 minutes about how I feel as a mother of a child who fell pregnant while at school. The interview will be recorded using a tape and will be conducted in a private room. No identifying information will be included when the interview is taking place. There are no known risks associated with this study. I am aware that the knowledge gained from this study may help either me or others in the future.

I am also aware that my participation in this study is voluntary, and I may withdraw from the study at any time if I wish so. Even if I can discontinue my participation in study, I will continue to be treated in the usual and customary fashion. I understand all data will be kept confidential and the information may be used for strategies to assist the nation in the future during presentations.

Secondly, I understand that if I can sustain any injury during this study I will not be compensated by the Department. Ms Mnisi Tlangelani Calvia can be contacted at 082 692 2374 at any time for more information.

The study has been explained to me, I have read and understand this consent form, all of my questions have been answered, and I then agree to participate.

SIGNATURE OF THE PARENT / GUARDIAN

SIGNATURE OF THE RESEARCHER

DATE

DATE

MPFUMELELO: XITSONGA

Mina..... (Vito na Xivongo) na twisisa swinene leswaku ni fanele ku nghenelela aka mbulaburisano na mavonele ya nhlokomhaka leyi ni nga hlamuseriwa hi yona. Ndzavisiso lowu wu ta lavisisa no vonisisa ntirho wa mutswari mayelano na loko nwana wa nhwana loyi a hari ku exikolweni a tika. Loko ni pfumela ku nga ri hi ku susumetiwa eka mburiburisano lowu ni faneleni swi tiva leswaku ni ta vulavuriasna na loyi anga ta ni vutisisa ku fikelela kwalomu ka nkarhi lowu wu nga hundzeki makume manharhu ku fika mune wa makume na nthlanu wa timinete, ku kombisa ma titwele ya mina tani hi mutswari wa nwana loyi anga tika a ha ri exikolweni. Mbulamburisano wa kona wu ta kandziyisiwa na swona wu ta endleriwa endlwini exihundleni. A ku nga vi na ku kavanyeteka loko ku karhi ku kandziyisiwa naswona a kunga engeteriwi leswi swo ka swi nga vuriwanga. A ku na makhombo kumbe mintlimbo leyi yi nga landzelaka loko ku karhi ku kandziyisiwa. Na swi tiva leswaku ti nhlamulo leti ti nga ta kumeka eka ndzavisiso lowu ti ta pfuneta eka nkarhi lowu wu taka hambu ku ri eka mina.

Ni swi tiva kahle leswaku ku ghenelela ka mina ka ndzavisiso lowu a hi ku bohiwa kambe l ku rhandza no tsakela ka mina. Loko no ka ni nga ha switsakeli na pfumeleriwa ku tshika ni nga ha edli naswona hambu loko ni nga tshika ani nge tshikeleriwi hi munhu. Ni swi tiva no twisisa leswaku mavonele na tinhlamuselo ku suka eka vatswari swi ta hlayisiwa exihundleni na swona swi ta pfuneta ku humelerisa no hluvukisa tiko eka nkarhi lowu wa ha taka.

Xa vumbirhi ni twisisa leswaku loko no vaviseka ni karhi ni endla ndzavisiso lowu ani nge hakeriwi nchumu tani hi loko ndzi lo switsakela ku nga ri ku susumetiwa. Mhani Mnisi Tlangelani Calvia va nga fikeleriwa eka numbera leyi lanzelaka ya **082 692 2374** nkarhi wunwana na wunwana ku lanzelerisa.

Ndzavisiso wu hlamuseriwile eka mina laha ni wu twisiseke ni twisisa na mpfumelelo lowu. Swivutiso swa mina hinkwaswo swi hlamuriwile leswi swi endlaka leswaku ni pfumela ku nghenelela ni nga ti pfinyngi.

SIGNATURE OF THE PARENT / GUARDIAN

DATE

SIGNATURE OF THE RESEARCHER

DATE

ANNEXURE D: INTERVIEW GUIDE

“Can you explain in detail how you felt initially as the parent after you found out that your child was pregnant, especially because she was still at school, and what was your reaction afterwards to address the situation”?

Xitsonga

“Mi nga hlamusela hi ku hetiseka leswi a mi ti twisa xi swona endzhaku ka loko mi lemukile leswaku nwana wa nwina u bihile emirini a ha ri exikolweni, na swona mi endlile yini ku fikelerisa mhaka leyi emakumu”?

ANNEXURE E: ETHICAL CLEARANCE CERTIFICATE



University of Venda
Directorate of Research and Innovation

Date : 21 August 2017

Research Ethics recommendations on Application for Ms C Tlangolani on
Project title: *Perceptions of parents and their role regarding teenage pregnancy and
school attendance in the rural village of Thomo in Mopani District Limpopo.*

The following comments and recommendations

Science and Methodology:

Be clear and specific about your subjects where they are drawn because some where you indicated from the Thomo Village and somewhere from Hanyani Thomo High School. So which is which? In your sampling there was no mention of a register to draw your participants from. Why mention a register and a school?

Ethical Considerations:

The question of 'Will individual subjects know their records are being consulted'? Your answer was yes. Which records are you going to access?

Informed Consent Form:

Regarding the question 'is consent to be given in writing'? Your answer is 'Yes' there is no motivation please attend to that. And regarding 'Will the subject be informed of the rights to withdraw from the project....' And 'Are provision made to protect subject's rights to privacy and anonymity...' There is also no motivations as your answers is 'Yes'

Recommendations

The application was provisional approved subject to compliance to the above comments to the satisfaction of the reviewers and supervisors/promoters.

Thank you

PROF G.E. EKOSSE

DATE

ANNEXURE F: UNIVERSITY OF VENDA ETHICAL APPROVAL

RESEARCH AND INNOVATION
OFFICE OF THE DIRECTOR

NAME OF RESEARCHER/INVESTIGATOR:

Ms TC Mnisi

Student No:

11629721

PROJECT TITLE: The role of parents regarding teenage pregnancy and school attendance in the rural village of Thomo in Mopani District Limpopo Province.

PROJECT NO: SHS/17/PDC/21/1808

SUPERVISORS/ CO-RESEARCHERS/ CO-INVESTIGATORS

NAME	INSTITUTION & DEPARTMENT	ROLE
Prof RT Lebese	University of Venda	Supervisor
Prof MS Mapelle	University of Venda	Co-Supervisor
Ms TC Mnisi	University of Venda	Investigator - Student

ISSUED BY:

UNIVERSITY OF VENDA, RESEARCH ETHICS COMMITTEE

Date Considered: August 2017

Decision by Ethical Clearance Committee: **Granted**

Signature of Chairperson of the Committee: 

Name of the Chairperson of the Committee: Prof. G. E. Ekosse

UNIVERSITY OF VENDA
DIRECTOR
RESEARCH AND INNOVATION
2017 -08- 11
Private Bag X5050 Thohoyandou 0950



University of Venda

PRIVATE BAG X5050, THOHOYANDOU, 09503, LIMPOPO PROVINCE, SOUTH AFRICA
TELEPHONE (013) 962 8524/8313 FAX (013) 962 8660

"A quality driven financially sustainable, research based Comprehensive University"

ANNEXURE G: PERMISSION FROM LIMPOPO DEPARTMENT OF HEALTH



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA


**DEPARTMENT OF HEALTH
MOPANI DISTRICT**

Ref: 84222
Enq: Mchali IE
Tel: 015 811 6543

To **Ms Mneli T.C**
P O Box 4047
Giyani
0828

Re: PERMISSION TO CONDUCT RESEARCH IN MOPANI HEALTH FACILITIES: YOURSELF

1. The matter cited above bears reference
2. This serves to respond to the request submitted to research on the topic: "What is the role of parents regarding teenage pregnancy and school attendance in the rural village of Thomo in Mopani District of Limpopo Province."
3. It is with pleasure to inform you about the decision to permit you to conduct research in the Greater Giyani health facilities within Mopani District.
4. You will be required to furnish PHC authorities with this letter for purposes of access and assistance.
5. You are further advised to observe ethical standards necessary to keep the integrity of the facilities.
6. The Mopani District wishes you well in your endeavour to generate knowledge.


Director: Corporate Services
Date: 22/7/2020

ANNEXURE H: PERMISSION FROM COMMUNITY TRADITIONAL COUNCIL



REF:CH11/8/4
ENQ:SHIVITI M.R.
CELL:0837677151


SIR/MADAM

RE-PERMISSION TO CONDUCT RESEARCH IN THOMO VILLAGE:YOURSELF

- 1.The cited above bears reference
- 2.This serves to respond to the request submitted to research on the topic:What is the role of parents regarding teenage pregnancy and school attendance in the rural village of Thomo'
- 3.It is with pleasure to inform you about the decision to permit you to conduct research in Thomo village.
- 4.Hosi Thomo and community wishes you well in your endeavour to generate knowledge.

Kind regards

HOSI SHIVITI M.K

 2018/03/26



ANNEXURE I: PERMISSION FROM HIGH SCHOOL

Hanyani Thomo
High School

Tel: (015) 811 1476
Fax: (015) 811 2421
Enquiries: **NDUNGWANE M.M**
Ref No: **0916420188**



TO: **M5 T.C MARI**
P.O. BOX 4047
GIYANI
0826

24 AUGUST 2017

PERMISSION TO RECEIVE STATISTICAL INFORMATION FROM PARENTS WHO PARTICIPATED DURING LEARNERS' PREGNANCY: HANYANI THOMO

1. The above matter refers.
2. This serves to the request submitted to research on the topic: "WHAT IS THE ROLE OF PARENTS REGARDING TEENAGE PREGNANCY AND SCHOOL ATTENDANCE IN THE RURAL VILLAGE OF THOMO IN THE MOPANI DISTRICT OF LIMPOPO"
3. It is with pleasure to inform you about our decision to permit you to collect statistics at Hanyani Thomo High School
4. You are advised to observe ethical standards necessary to keep the integrity of the school.
5. The school wishes you well in your endeavour to generate knowledge.

PRINCIPAL



ANNEXURE J: EDITING CERTIFICATE

SCHOOL OF HUMAN AND SOCIAL SCIENCES

14 February 2019

Department of Health Sciences
University of Venda
Thohoyandou
0950

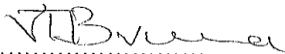
Sir/madam

This serves to certify that I have proof-read Ms T.C. Mnisi's mini-dissertation titled, "The Role of Parents Regarding Teenage Pregnancy and School Attendance in the Rural Village of Thomo in Mopani District, Limpopo Province".

The proof-reading entailed editing some parts from it; for example, to avoid wordiness, redundancy; sub-dividing sentences, and so on, to make the document more understandable. However, I have not tampered with the content of the document, except where this constituted repetition or made the document confusing.

The research is presently ready for examination.

Sincerely



V.T. Bvuma
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