

# **Pregnancy amongst school-going teenagers in South Africa: Experiences of pregnant teenagers, parents and teachers on provision of social support**

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## **INTRODUCTION**

Pregnancy amongst school-going teenagers is a public health concern affecting most communities in South Africa (Chanjar, Chommanard & Lookid, 2009; Panday, Makiwane, Ranchod & Letsoalo, 2009; Richter & Mlambo, 2005). Teenage pregnancies fall in the category of high risk pregnancies, which require appropriate antenatal, labour and postnatal care to ensure a healthy mother and child (Ehlers, 2010; Fraser, Cooper & Nolte, 2010; James, Van Rooyen & Strümpher, 2010; Kanku & Mash, 2010; Maholo, Maja & Wright, 2009; Nolte, 2011; Restrepo-Méndez, Barros, Santos, Menezes, Matijasevich, Barros & Victora, 2011). To meet Millennium Development Goal (MDG) 4 and MDG 5 South Africa has to strengthen the implementation of high impact interventions such as regular antenatal visits and improved referral links between the home and the health facility (Chopra, Daviaud, Pattinson, Fonn & Lawn, 2009).

There are these days an increased visibility of pregnant teenagers at schools in South Africa (James, Van Rooyen & Strümpher, 2011; Maholo et al., 2009; Panday et al., 2009; Runhare & Vandeyar, 2011). In 2010, the highest number of pregnant school-going teenagers was recorded in Limpopo Province, followed by KwaZulu-Natal Province, while in 2009, Limpopo Province recorded the second highest number as compared to other provinces in the country (Department of Basic Education, 2011, 2012). Newspapers (Mclea, 2011; Mngoma, 2010; Moselakgomo, 2010), which Daku, Gibbs and Heyman (2012), De Wet (2014) and Oosthuizen (2012) regard as important sources of knowledge for the public and policy makers as they report on events that happen in the community, also report frequently about pregnant learners in all nine provinces of South Africa. Unlike in the past, when pregnant school-going teenagers were expelled from schools, these days they are encouraged to continue attending school, so that they are not further disadvantaged by not having completed their education. To implement inclusive education and work towards achievement of MDGs (Runhare & Vandeyar, 2011), the Department of

Basic Education encourages pregnant learners not to drop out of schools, and prohibits school governing bodies from expelling these learners (Bhana, Morrell, Shefer & Ngabaza, 2010; Department of Education, 2007).

## **Research Design**

This study followed a qualitative, exploratory, descriptive and contextual design to explore the experiences of pregnant school-going teenagers, parents and teachers in order to understand how they provide social support to pregnant school-going teenagers.

## **Population and Sample**

A set of criteria to select participants as indicated in Box 1 was drawn. A purposive sampling technique was used to select 10 pregnant school-going teenagers, 10 teachers and five parents to participate in the study and the number was limited by saturation of data. All the 25 participants were Africans and 24 of them had Sesotho sa Lebowa as their home language while only one had Afrikaans as home language but they could all understand and speak English, thus all interviews were conducted in English. All the pregnant school-going teenagers were single females of between 13 and 19 years old. Of the five parents who participated in the study, four were females while only one was male. All the five parents were employed. Six of the ten teachers were females while four were males.

## **Ethical Considerations**

The researchers observed the ethical principles of respect for persons, beneficence and justice as prescribed by Polit and Beck (2012). We obtained informed consent from the participants to take part in the study voluntarily. The researchers further obtained ethical clearance from the Department of Health Studies Ethics Committee at the University of South Africa before beginning with data collection, and obtained permission from Limpopo Department of Education to access pregnant school-going teenagers and teachers at secondary schools.

#### CRITERIA FOR INCLUSION OF PREGNANT SCHOOL-GOING TEENAGERS

- Should be between ages of 13 and 19 years old.
- Should be pregnant during period of research study or
- Should have given birth whilst in secondary school.
- Willingness to participate in sharing her experiences of being pregnant in a secondary school.
- Have signed consent form from parent or guardian to participate in the study.

#### CRITERIA FOR INCLUSION OF PARENTS

- Daughter was or is pregnant.
- Willingness to participate in sharing his/her experiences of having had pregnant learner.
- Have signed consent form to participate in the study.
- Able to communicate in English

#### CRITERIA FOR INCLUSION OF TEACHERS

- Willingness to share experiences of having had a pregnant learner in class.
- Has had an experience or experiences of assisting learners during pregnancy
- Have signed consent form to participate in the study.

### **Box 1: Criteria for selection of information-rich participants**

#### **Data Collection**

Data collection was by means of conducting semi-structured interviews and taking of filed notes. We considered semi-structured interview as a suitable strategy that would cause minimal disturbance to the education programme of the schools (unlike the Focus Group Discussion), where teachers and learners were interviewed individually as they became available for the interviews between lessons. The fact that teenage pregnancy is a sensitive topic also influenced the selection of the semi-structured interview method. Parents were interviewed individually at times and places that suited them. The interview questions aimed at establishing how social support to pregnant school-going teenagers was being provided and how that can be strengthened. Interview questions were modified to suit the comprehension level of the various participants as shown in Box 2.

The semi-structured interviews lasted between 30 and 45 minutes each and were audio-taped, with permission of participants then transcribed for data analysis. Each interview continued until all questions, including probing questions, were asked and answered. We also collected field notes, which are a record of the unstructured

observations we made while collecting data, as well as our interpretation of what we observed as suggested by Polit and Beck (2012). The field notes provided us with contextual information about the time and place of interviews, and also served as data for analysis.

**Pregnant school-going teenagers:**

Tell me about your experience of being pregnant while in school.

What can be done to assist pregnant learners in schools to stay healthy?

**Teachers:**

Tell me about your experience of having pregnant learners in your school."

"What can be done to facilitate social support to pregnant learners in schools?"

**Parents:**

Tell me about your experience of having a pregnant daughter in a school."

"What can be done to provide social support to pregnant learners in schools?"

**Box 2: Interview questions for the participants**

**Measures of Trustworthiness**

To ensure trustworthiness we followed four strategies suggested by Polit and Beck (2012), namely: credibility, dependability, transferability and confirmability. Specifically, we used prolonged engagement, peer examination, reflexivity, triangulation, interview technique, member checking and authority of researcher as strategies to reinforce credibility.

**Data Analysis**

We did verbatim transcription of all interview recordings and field notes followed by the use of Tesch's open coding process (Creswell, 2003). Data analysis yielded six themes and eleven categories which are and summarised in Table 1. The findings indicate a need for social support to pregnant school-going teenagers so that they can attain a level of health which will enables them to continue attending school. Teachers and parents also need support to enable them to cope with the challenges of teaching and parenting pregnant school-going teenagers.

THEMES	CATEGORIES
Identification of pregnant learners	<ol style="list-style-type: none"> <li>1. Acknowledgement versus secrecy</li> <li>2. Acceptance versus stigmatisation</li> <li>3. Open communication versus avoidance</li> </ol>
Continuation of pregnant learners' school career	<ol style="list-style-type: none"> <li>1. Continue to attend school</li> <li>2. Drop out of school</li> </ol>
Dilemmas related to school-attending pregnant learners	<ol style="list-style-type: none"> <li>1. Learner-situated dilemmas</li> <li>2. Educator-situated dilemmas</li> </ol>
Support of school-attending pregnant learners	<ol style="list-style-type: none"> <li>1. Access to healthcare services</li> <li>2. Supervision</li> <li>3. Accommodation without unfair discrimination</li> <li>4. Support from educators or parents (emotional or instrumental)</li> </ol>
Communication and cooperation between educators and parents	<ol style="list-style-type: none"> <li>1. Positive communication and cooperation</li> <li>2. Negative communication and cooperation</li> </ol>
Gender in pregnancy caretaking	<ol style="list-style-type: none"> <li>1. Females expected to take care of pregnant learners</li> <li>2. Males exempted from taking care of pregnant learners</li> </ol>

**Table 1: Summary of the themes and categories of experiences of educators, learners and parents regarding facilitation of social support for pregnant learners attending secondary schools**

### **Theme 1: Identification of pregnant school-going teenagers**

Consistent with James, van Rooyen and Strumpher (2011) who report that teenage pregnancy is perceived as morally wrong, a disgrace and a stigma in some communities in South Africa, pregnant school-going teenagers, their parents and teachers in the current study became embarrassed and felt sad when they identified that a learner was pregnant, thus attempted to hide pregnancy from other learners, teachers and parents. A teacher said this about attempts to hide pregnancy: *“there are some who I don’t know whether to say they are strong or they are lucky because they can hide their pregnancy, never become sick and we only discover when the extended tummy is visible. That is where we then realise that this learner is pregnant. And some when their parents become aware that she is pregnant they would advise her on how to hide her pregnancy so that people may not be aware”*.

Ngabaza and Shefer (2013) indicate that some schools are intolerant to pregnant learners thus the reluctance of pregnant learners to disclose. Mpanza and Nzima (2010) also found that pregnant learners do not disclose their pregnancies to their

parents and to teachers and this makes it difficult for the home and the school to provide them with social support.

Several studies support the findings of the current study by indicating that stigmatisation of pregnant learners exists because these pregnancies occur outside of marriage in societies which still regard marriage as the only institution within which sexual intercourse, pregnancy and childbearing should occur (Ekefre, Ekanem & Ekpenyong 2014; Mashishi & Makoelle 2014; Willian 2013; James et al 2011; Malahlela & Chireshe 2013; Yeboah 2012; Kanku & Mash 2010; Mpanza & Nzina 2010; Chigona & Chetty 2008). Mutshaeni, Malovhele, Lebesse and Mashau (2015) agree by indicating that pregnant learners are stigmatised by their parents, teachers, peers and their communities and as a results many drop out of school. Similarly a study conducted in Western Cape and Kwazulu-Natal provinces by Clowes, D'Amant and Nkani (2012) found that some educators were concerned about the stigma attached to pregnant learners overflowing into their schools which could result in the school being labelled as "a maternity ward". Similarly, Vandeyar, Runhare, Dzimiri and Mulaudzi (2014) report that a participant (teacher) indicated that allowing pregnant learners to continue attending school had made schools to look like maternity hospitals rather than centres of learning.

## **Theme 2: Continuation of pregnant teenagers' school career**

This study found that teachers and parents are aware of the constitutional right of pregnant learners to continue attending school so that they are not disadvantaged by pregnancy and this is consistent with the findings of Vandeyar, Runhare, Dzimiri and Mulaudzi (2014). A parent said: *"They cannot be expelled, these days our government says young girls should be educated"*. A teacher agreed by saying: *"...consider the learner's right to education, Section 29 of the Constitution, I think we need to consider it so that we cater for the needs and the interests of this pregnant learner"*. This teacher further said: *"There is nothing we can do, like saying we expel this child from school today. They say she has the right to education.... they realised that some people when they fell pregnant and went home, they never come back to school and ultimately the Black population end up uneducated because there was a mistake that led to pregnancy, so they want to prevent that"*.

Contrary to the findings in this study that pregnant school-going teenagers, their parents and teachers found it necessary for pregnant school-going teenagers to remain in school when they do not have health complications, Ngabaza and Shefer (2013) report that some schools in Limpopo and Western Cape provinces expelled pregnant learners as soon as their pregnancies became visible even when those learners did not experience health problems. Additionally pregnant learners experience stigma from some schools and communities which makes it difficult for them to continue attending. In one school from Western Cape Province, pregnant learners are monitored and advised to leave at six or seven months and return after delivery while in another school in the same province pregnant learners themselves decide when to leave and return after delivery but parents must report pregnancy to teachers in both schools. Morrel, Bhana and Shefer (2012) point out that a school in Mpumalanga province allowed pregnant learners to continue attending but insisted that from the 6<sup>th</sup> month of pregnancy, learners be accompanied to school by midwives as teachers were not prepared to act as midwives.

According to Vandeyar et al (2014) and Bhana et al (2010) some teachers perceive pregnant learners as threats to the way they (teachers) want to manage learners in classrooms and therefore they do not accept them. This is in agreement with the findings of the current study. Ngabaza and Shefer (2013) recommend that parents and teachers should discuss the continuation of schooling of the pregnant learner taking into account the opinion of doctors and professional nurses who are skilled birth attendants. According to Morrel, Bhana and Shefer (2012) schools, as guided by Department of Basic Education policies, can exempt pregnant learners from attending school if it is in the pregnant learners' best interests.

### **Theme 3: Dilemmas related to school-going pregnant teenagers**

If pregnant teenagers continue to attend school they will complete their schooling, but at the same time it holds health risks for them. If on the other hand they stay at home the health risks are less but their learning is fragmented. If teachers attend to the pregnant teenagers' rights to carrying on with schooling, it might end up encouraging or appearing to approve pregnancy among learners, so both options have advantages and disadvantages which make it very difficult to choose what the best thing to do is.

Parents and teachers in this study are both concerned about the impact of pregnancy on the school progress of pregnant teenagers. A study conducted in KwaZulu-Natal and Western Cape provinces amongst secondary schools by Clowes, D’Amand and Nkanu (2012) found that teachers raised concerns about the poor academic performance of pregnant teenagers which would affect the Grade 12 pass rates of their schools. Pregnant teenagers, according to the above study, are reported to be performing poorly because they fell asleep in class, took time off to attend clinics and to deliver their babies while there were no sufficient measures to help them catch-up. Vandeyar et al (2014) concur by revealing that pregnant teenagers “cannot fully concentrate on their academic work because of psycho-social instability that included feeling ashamed, embarrassed, burdened, isolated, self-incapacitated, hopeless; confused, unconcerned and discouraged at school”.

Several studies (Panday et al 2009; Maholo, Maja & Wright 2009; Basch 2011; Macleod & Tracey 2010; James, Van Rooyen & Strumpher 2011; Bhana et al 2010; Mchunu, Peltzer, Tutshana & Seutlwadi 2012) agree by indicating that pregnancy disrupts the schooling of pregnant learners and most of them drop out of school resulting in difficulty getting decent jobs in future. Ngabaza and Shefer (2013) indicate that in one province of South Africa, the Department of Education expects teachers to ensure academic progress of pregnant learners by offering them continuous academic assessment even when they are not at school.

Pregnant teenagers, their parents and teachers in the study are concerned about something bad happening to the health of pregnant teenagers who continue to attend school. Similarly, Shefer, Bhana, Morrel, Manzini and Masuku (2010) found that teachers in selected KwaZulu-Natal and Western Cape schools were concerned about the health and safety of pregnant teenagers who continued to attend school and as such teachers expelled pregnant learners as soon as their pregnancies were visible. Some pregnant teenagers and teachers are concerned about the impact that physical activity of pregnant teenagers when they play, move between classes and during exercises which are part of their lessons, can have on their health and that of their unborn children. To support the findings of this study, Benelam (2011) indicates that physiological changes occur in the body during pregnancy and these changes cause joint laxity and hypermobility. The author advises that contact sport be

avoided and further recommends that exercises in pregnancy be supervised by a health professional.

Some teachers indicated during the interviews that they are not health professionals and as such are not competent to identify physical activities that pose risks to pregnant teenagers thus their fear of something damaging happening as result of physical activities at school. Lewis, Avery, Jennings, Sherwood, Martinson and Crain (2008) indicate that the perception that exercise and physical activities are risky during pregnancy is common amongst people who are not health professionals. This perception, according to these authors, is reinforced by some health professionals who advised them. A Department of Education in one province of South Africa states that parents of pregnant learners must enter into written agreements with schools their daughters are attending that pregnant teenagers attend schools at their own risk. These written agreements further indemnify schools against any pregnancy related injuries or accidents that pregnant teenagers may get while at school (Ngabaza and Shefer 2013).

There is also a dilemma posed by pregnant teenagers' rights to education as opposed to making them responsible for their decisions and actions. A parent who feels that a pregnant school-going teenager should be made responsible for her actions said: *"I am saying when a learner falls pregnant she should be disciplined by saying she must stay home. Otherwise she will know that even if I fall pregnant I will continue with schooling, fall pregnant again and even get social/child support grant. So they should stop them from attending school and make them stay at home... they will come back once they have delivered"*.

Teachers have indicated lack of skills to provide social support to pregnant teenagers and they will benefit from training on provision of social support. The primary role of teachers is to teach and if they receive training on provision of social support to pregnant teenagers, they will have additional responsibilities which may lead to blurring of roles. If they refuse training on provision of social support, as some have indicated, they will continue to face uncertainties as they have pregnant learners at their schools.

Parents are also aware that the presence of pregnant teenagers at school creates a burden to teachers as one said: *"We are burdening the schools with our pregnant*

children. They (teachers) may not have time for that, special time... and then tomorrow we then see them as uncaring people". Another parent said: "they cannot teach the kids and at the same time take care of a pregnant person for things like miscarriage, it is not the teachers' duties to take care of such things, they are taught to be teachers to teach children to read and write and understand what the school is teaching them, not to be pregnant. So that one is not their problem". Vandeyar et al (2014) concur with the current study on the finding that the presence of pregnant teenagers at school creates a burden to educators by quoting a participant who said that pregnant learners created a burden to teachers and should therefore drop out of school.

There are different opinions among pregnant teenagers and teachers on whether teachers should be trained to provide social support for pregnant learners or whether they should not be trained on that. This difference of opinions could be attributed to the difference in the understanding of the parental role of the teacher. Teachers, according to the concept *in loco parentis*, assumes the responsibilities of the parents during the time the learners are at school (Mohammed, Gbenu and Lawal 2014)

#### **Theme 4: Support of school-attending pregnant teenagers**

Some pregnant teenagers receive support from their parents, teachers and other learners so that they can achieve an adequate level of health. Some teachers are willing to support pregnant learners, but are afraid that due to a lack of skill, they might make a mistake, and then be called to account. Some of the teachers made it possible for pregnant learners to access healthcare services outside the school premises while other teachers felt healthcare services should be available at school. A pregnant teenager put it this way: "The school must organise a doctor to come see us here at school because, if we, if we are at school we can't see the doctor on Saturday or Sunday because most of them they don't work on weekends. Not all the time but must come and do check-ups so that we can know our status". Another said: "I said they must organise a doctor and a nurse. So nurses and doctors should be here fulltime. The department must sort it out, the school department because they are looking after the children...they must pay them. According to Mohlabi, Van Aswegen and Mokwena (2010), school health services have collapsed in many provinces of South Africa. Teachers expect parents to accompany their pregnant

daughters to school and some parents support this practice while others are against it.

At times, schools treat pregnant teenagers differently from others but this treatment is in the best interest of the pregnant teenager and her unborn child. This is how a pregnant teenager expressed the treatment she received from her teachers: *“Life Orientation, during my life orientation subject, eh... my teacher got to separate me with the other children, so they had to treat me special because they were so scared that maybe I might have an accident while I was practicing”*. Another said: *“...sometimes we go for PET, physical exercise and when they exercise I don’t do because I can’t jump. They won’t give me marks, maybe if people go for PET they would give me something to do like drawing or reading an essay and I explain it later in class”*.

#### **Theme 5: Communication and cooperation between teachers and parents**

Teachers and parents acknowledge that they should communicate and cooperate with each other as they share responsibilities on providing social support to pregnant teenagers attending school. Both have however shared experiences of lack of communication and cooperation from each other while there are instances where they communicated and cooperated with each other. This is what one teacher said: *“I would say the cooperation of the parents is totally not there, it is only better... few of the parents who respond positively when you inform the child that from this month we are expecting you to come with someone so that should you go into labour, that person would be close by and would be able to assist the educators because our responsibility is just to teach, not to be midwives”*. Another said: *“I have never had a situation where a parent comes to school to report to the educators that my daughter is pregnant. Usually it is us educators who would call a parent to inform him/her that we suspect that your daughter is pregnant. It is then that the parent will disclose and say that I too saw that, but parents never come to inform us unless we call them to school”*.

#### **Theme 6: Gender in pregnancy caretaking**

Pregnant school-going teenagers, parents and male teachers expect female teachers to take care of pregnant teenagers as they (female teachers) are perceived

to understand what pregnant teenagers are going through unlike male teachers. This is what a pregnant teenager said: *“Female teachers because basically they understand it, they understand it more unlike male teachers. Male teachers... they do care but not in the way of, not in that way like female teacher is caring”*. Another said: *“Even though female teachers are not trained I would say that they have experience in some way because they are the mothers, so...if you are a mother...looking up to a child... nothing is impossible”*. Another said: *“I think schools should have like more supportive systems in terms of female teachers, female teachers...they must always be there. I would suggest that when a girl is pregnant, the girl must go and tell the female teachers and the teachers should know if she is in her first trimester or her second trimester”*.

Pregnant teenagers indicated a discomfort when talking to a male teacher about their pregnancy while a teacher indicated that males do not generally get involved in the care of their pregnant daughters even when they are requested by the school to accompany the daughter. This is what a male teacher said: *“...is the female parents and not the father, the father never comes. In fact we just want any parent. Whether father or mother, but usually it is the mother who comes, because she knows very well about the pregnancy. Men don't know anything and if the child is eh, maybe is in a state, in a certain health state, then we do not understand what is happening and what must we do if the learner is in that situation. But the mother knows very well what to do”*.

## **Conclusion and Recommendations**

This paper discussed six themes that emerged from the analysis of data on the experiences of parents, teachers and pregnant school-going teenagers on provision of social support to pregnant teenagers attending schools in South Africa. Findings indicated that there is no formal procedure in schools to inform teachers when learners are pregnant. Teachers and parents discovered independently that learners were pregnant, where some were willing to support them although they lacked skills and were afraid to make mistakes. This poses many dilemmas for all the stakeholders and requires the development of a model to facilitate social support for pregnant teenagers attending secondary schools in South Africa. The findings point

out the difficulty of translating from policy design to implementation, as schools implement the policy to accommodate pregnant learners differently.

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