CHAPTER 4

ANALYSIS AND INTERPRETATION

4.1 INTRODUCTION

In this chapter, an analysis and interpretation of data that was collected by means of drawings, narratives and interviews from ten teen mothers who participated in this study will be presented. Following is an overview of this chapter.

The following diagram indicates how this chapter is going to flow:

![Diagram showing the flow of the chapter]

Figure 7: Layout of Chapter 4
4.2 Biographical data of participants

<table>
<thead>
<tr>
<th>Teenage mother</th>
<th>Age at the time of study</th>
<th>Grade of the participant</th>
<th>Ages of babies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tshedí</td>
<td>15 years</td>
<td>Grade 9</td>
<td>6 months</td>
</tr>
<tr>
<td>Leti</td>
<td>16 years</td>
<td>Grade 9</td>
<td>1 year 2 months</td>
</tr>
<tr>
<td>Sana</td>
<td>15 years</td>
<td>Grade 9</td>
<td>5 months</td>
</tr>
<tr>
<td>Tsatsi</td>
<td>15 years</td>
<td>Grade 9</td>
<td>1 year</td>
</tr>
<tr>
<td>Banana</td>
<td>16 years</td>
<td>Grade 10</td>
<td>8 months</td>
</tr>
<tr>
<td>Kete</td>
<td>16 years</td>
<td>Grade 10</td>
<td>1 year</td>
</tr>
<tr>
<td>Lebu</td>
<td>16 years</td>
<td>Grade 10</td>
<td>2 years</td>
</tr>
<tr>
<td>Jeane</td>
<td>16 years</td>
<td>Grade 10</td>
<td>1 year 2 months</td>
</tr>
<tr>
<td>Brenda</td>
<td>15 years</td>
<td>Grade 9</td>
<td>8 months</td>
</tr>
<tr>
<td>Joy</td>
<td>15 years</td>
<td>Grade 9</td>
<td>3 months</td>
</tr>
</tbody>
</table>

**Table 4.1: Profile of participants**

Table 4.1 above shows that the participants were aged between 15 and 16 and in grades ranging from nine to ten. The participants' babies had been born in the years prior to their participation in this study. They had attended school until their babies were due since policy does not bar them from continuing with their studies even when they are pregnant. The policy on measures for the prevention and management of learner pregnancy indicates that schools should strongly encourage learners to continue with their education prior to and after the delivery of the baby (South Africa, 2007:6). After the babies had been born, they returned to school.
4.3 ANALYSIS AND INTERPRETATION OF DRAWINGS

In this section, the data that was collected through interviews and drawings by the ten participants who took part in this research will be presented. The researcher organised the drawings accompanied by narratives according to the key themes that emerged namely; teenage mothers enjoyed family support; teenage mothers had dreams for the future; teenage mothers were anchored in religion and spirituality, and teenage mothers had the determination to succeed.

Reading the transcripts closely and a process of open and coding culminated into key themes that supported the themes above. An audit trail (Appendix F) is appended as an example of how the researcher coded the data. She then compared these themes to those that emerged from drawings and narratives. In this section, she triangulates these strands of data.

4.3.1 Teenage mothers enjoyed social support

Teenage pregnancy and subsequent motherhood are stressful for teenagers who are psychologically not ready to deal with them. Teenagers need to receive social support from their immediate and extended families in order to cope resiliently with their lives because they are not ready for motherhood. Two participants made drawings that showed that they enjoyed family support from their immediate and extended family members. For example, Participant 1 made a drawing showing two human figures with the label "cousin".
Figure 8: by Tshedé

The two human figures are embracing each other. The drawing by Tshedé is accompanied by the following narrative:

“My cousin always support[s] me with the baby. When sometimes I [am] sick or the baby [is] sick they give me some money so that I can go to the clinic. I remember some other day after giving birth to my baby, my parents-in-law start[ed] telling me that my baby is not their grandson, I keep crying and crying, but my parents w[ere] always there for me, helping me to change nappies, hohlatswa maleiri (washing nappies), even le homojesa (feeding the baby) and I am happy for the support I get from my parents, and they keep saying to me, you have to go to school, we’ll take care of [him], our grandson. I am truly happy.” (Tshedé)

It is evident that Tshedé received social and financial support from her cousin when she or the baby fell ill. The cousin mediated the participant’s access to the clinic for medical help by giving her financial support. Furthermore, Tshedé received valuable emotional support when her baby was denied by the father’s parents. The narrative shows that Tshedé’s parents provided support when she was sad and crying and that her parents
washed nappies and fed the baby. Her parents encouraged her to return to school and undertook to care for the baby. It can be concluded that Tshedu was supported by both her cousin and parents and that she was happy with the support she was receiving.

The interviews showed that all the participants depended on their families for their physiological needs to be met. For example, during the interviews, Tshedu pointed out that her parents helped to meet her physiological needs such as providing food, money and helping with the baby when she was busy with her school work. The following quotation provides proof of the above assertion:

"They [parents] support me with food and money; they also look after my baby when they are home...they also take care of the baby when I am busy with school work".
(Tshedu)

This shows that Tshedu could do her school work, due to the support that her parents provided.

Leti made a drawing of a female human figure that represented her mother.
Figure 9: by Leti

The narrative that she produced shows that her mother enabled her to cope with her life. The mother provided the encouragement that she needed in order to attend school, paid her school fees, bought her clothes, provided financial support and food for the baby and the participant. The following narrative proves the above assertions:

“My mother helps me to cope, she is the one [who] encourages me to go back to school”. ‘She helps me by buying food for me and my baby, she also takes care of my baby when I am at school. She helps me with the money for school fees. She also buys clothes and things that I cannot afford to buy. I cannot afford to support my baby and myself. She loves me even when I have a baby. I cope in everything because of my mother. She tells me that whatever happens she is there for me.” (Leti)

It is evident that Leti experienced unconditional love from her mother. Her mother enabled her to cope with life and assured her that she would be there for Leti. Leti also enjoyed emotional support and financial support from her mother.

Interview responses also revealed that participants were coping with their lives because of the support they received from their social ecologies. For example, Sana indicated that when her child is at preschool, she obtains a chance to do her school work. Her friends, who are also teenage mothers gave her support by giving her tips on how to care for the baby and with her school work.

‘When the child is at crèche, I am able to study while the child is away’. ‘My friends have children older than mine, so in many [cases] they give me tips of taking care of the child and doing school work’ (Sana)

It is apparent that Sana has support from her peers, and literature indicates that peer support is imperative in support-giving and in enabling resilient coping (cf. 3.2). However, literature on teenage motherhood does not note peer support as protective in the context of teenage motherhood.
Although support is imperative in ensuring that teen mothers are not vulnerable, it seems a combination of personal and ecological resources play a role in teenage mothers feeling that they are empowered or supported. For example, having a vision for the future combined with peer support enabled Kete to cope with her life as a teenage mother:

‘I think it is because I focus on what I want. I have a vision. They (friends) encourage me and try to give me strength; I am pushed by this child to cope’. (Kete)

From the quotation above, it is evident that Kete is also encouraged by having her baby, which makes her want to succeed in life. This shows that she is empowered and that she has regained strength and focus on the future. For others, it is the mother who provides the social support. This means that mothers made life easier for them as Jeane pointed out:

‘I can say I cope because my mother plays an important role in making my life easier. The important thing is that I face the challenge....avoiding it will not help’. (Jeane)

From the quotation above, it is clear that Jeane can face her problems and that she is aware that she does not have to avoid them. The participant demonstrates that she has developed a determination to face rather than avoid problems. This shows that Jeane was empowered and not vulnerable.

Some participants relied on the extended families, neighbours and siblings for social support. For example, Tshedl said:

‘My relatives, neighbours, brother and sister also help me to cope with these challenges’. (Tshedl)
The fact that she can cope with challenges is fuelled by the availability of an active support system. An active support system is one that is available if the teenage mother would like to talk. For example, Brenda said:

‘Whenever I come across challenges, I talk to the people that I am staying with. What makes me cope is the desire to [have] a brighter future’. (Brenda)

It is important to note that Brenda can focus on the future again despite what happened. This shows that her social ecology empowered her. What the researcher does not find in literature is that a child can be empowering. Joy indicated that her baby was a source of encouragement:

‘He (baby) is a source of encouragement to me. Whenever I think of him, I get the strength to overcome any challenge’. (Joy)

Although this was mentioned by only one participant (Joy), it is significant because literature suggests that the birth of a baby to an adolescent is traumatic, stressful and deleterious to psychological well-being and future ambitions (cf. 2.3).

Grandparents were also instrumental in enabling coping among most participants as the following excerpt indicates:

“I have my grandmother who does so many things for the child. My grandmother helps me a lot in coping with my life... sometimes they just come and take the child without me saying, take the child’. (Leti)

It is evident that her (Leti) grandmother volunteered to care for the baby, thus giving the participant more opportunities to cope with her life.

Fathers were available to provide support if mothers were not. In this instance, Tshedzi pointed out that she enjoyed the support from her father as the following quotation shows:
'I am able to talk to my mother... my father is always willing to listen but cannot talk to Mother about things like that'. (Tshed)'

It is remarkable that, in some instances, fathers and not mothers played a supportive role, thus, rendering empowerment to teenage mothers. Caring teachers were willing to contribute to teenage mothers’ feelings of competence in coping with their lives. The following quotation bears evidence of the above:

'Some of them (teachers) will try to give me solutions to my problems'. "Yes, I do get that kind of support". (Tsatsi)

The interview responses indicated the inability of some participants to cope with responsibilities. However, it was evident that some of the participants were at risk. The excerpt below demonstrates the above assertion.

'Other things I can cope with, but some of them that include a child I cannot cope with. Sometimes I cannot cope; it becomes so difficult for me. I cannot do some of the things I used to do; maybe half of them, because there is also a baby to look after' (Banana).

The fact that Banana and others were not coping indicates risk and vulnerability. Some participants indicated not having the ability to ask for help, suggesting lack of assertiveness; some of them only ask for help from their relatives such as a mother and an aunt. This is what Kete said:

'No, it is not easy for me. Sometimes I am afraid to ask for help from other people because they get tired of helping me'. (Kete)

It is worrying that some participants indicated not having the ability to approach others for support. They all indicated that it is not easy to approach people, and some indicated fear as the reason. These participants could be lacking social skills, indicating risk that renders them vulnerable.
Participants indicated that their friends had a bad influence on them. This shows that the participants were vulnerable to poor advice as the following quotation indicates.

‘When you are with friends, you only think about two things – good or bad! And in most cases, there are only bad things that we are thinking. Some of these friends have children’. (Lebu)

It is good that some participants are aware of the destructive influence their friends have. This could mean that they were able to differentiate between right and wrong. What rendered some participants vulnerable was the unavailability of significant adults to help and support them. For example, Sana pointed out that her grandmother and father were not there to support her:

‘The grandmother of the baby on the father’s side is sick and cannot help. My father is not staying at home; he stays with another wife, and my mother died when I was ten years old’. (Sana)

It is evident that Sana’s stepmother was not available to provide the support that she needed. This rendered her vulnerable to poor developmental outcomes.

Teen mothers lack emotional support at school. Having emotional support would relieve participants of emotional stress. It is unfortunate that schools where these teen mothers attended could not provide this kind of support; this indicates a risk. It is noteworthy that not all friends and teachers were willing to support the participants. Evidence of this is found in the extract below:

‘Friends do not help in any way. The teachers are not worried whether you are in class or not. When you enter the class, they continue as if there is nothing that has happened’. (Tsatsi)
The friends’ lack of support and the fact that some teachers did not have caring attitudes rendered the participants vulnerable to poor academic performance.

This is not in line with the policy on measures for the prevention and management of learner pregnancy (South Africa, 2007:12) which states that an inclusive approach to education encourages the provision of educational opportunities for learners who experience or have experienced barriers to learning, or who are at risk because of the inability of the education and training system to accommodate their special learning needs. The school, in this case, is not a protective factor for these teenagers.

In summary, social support is a protective factor that can reduce or buffer the impact of risk in a child’s life, interrupt a chain of risk factors that may be present in a young person’s life and prevent or block the onset of a risk factor (Jenson & Fraser, 2005) (cf. 3.4.2). The presence of protective factors can help individuals to overcome adversity. It is noteworthy that other smaller systems such as the school, family and peers in which teenage mothers had proximal interactions with were mentioned by the participants, however, the community was not. Ecological support is implicated in promoting resilience (Killian, 2004; Rutter, 1999; Theron, 2007; Ungar, 2006) among young people.

4.3.2 Teenage mothers had dreams for the future

In this category, there are three symbolic drawings, all of which indicate that the participants are future oriented. The first drawing by Sana shows a burning candle.
Figure 10: by Sana

It is clear from the narrative, that Sana was determined to succeed in her studies and that she was not going to let the baby prevent her from achieving her dreams. The following narrative bears evidence of the above assertion:

"This is a candle to light up my life and my future; it is to show that I will continue with my dream for my future and that the baby will not stop me, and it will show how my future will be, and I want to give my baby a future; I do not want him to be like me". 

(Sana)

It is clear that Sana was determined to carve a bright future for her baby. This showed that Sana was aware of her situation and that her future was tied to that of her baby.

Furthermore, Tsatsi indicated future focus by making a drawing of an aircraft in flight.
Figure 11: by Tsatsi

Tsatsi wrote the following narrative in explaining her drawing:

'If I did not fall pregnant, I would be far away with my future, but I still have hope every time. I see the airplane, I always thought it could help me through to my dreams. Sometimes I wish I could fly away from the world, but I am not gonna lose hope. I still have something to hope for.' (Tsatsi)

From the above narrative, it is evident that the participant was aware that falling pregnant delayed her movement towards achieving her dreams. The narrative, however, shows that the participant still had hope and that she was determined not to lose it.
Banana made a drawing that bears a bright sun and clouds. On the drawing, the participant wrote: 'sun'.

![Sun drawing](image)

**Figure 12: by Banana**

She then produced the following narrative in explaining her drawing:

"The sun guide[s] me that, in life, we have to do important things by not changing story in a one things and not changing everyday like an underwear or panty and when the sun rise you will see where your life is going or your future". *(Banana)*

A close reading of the interviews showed that all the participants were determined to better their future and those of their children. The above narrative indicates that the participant was determined to focus on fundamental aspects in life and be consistent in order to achieve her goals.

A close reading of the interviews shows that all the participants wanted to achieve future goals. It is noteworthy that their babies were the motivation they needed to want to succeed:
“The most important thing is to be somebody in [the] future and provide [a] good life for my child… I am driven by the future of my child…I would like him to be somebody better in the family…” (Joy)

It is also evident that Joy had a vision for her baby too. The two participants (Banana and Joy) were optimistic about the future. The thought of a brighter future for the children seems to make them cope. Literature indicates that a positive future orientation is a personal protective factor that is inherent to a resilient individual (cf. 2.4.2.4).

4.3.3 Teenage mothers were anchored in religion and spirituality

In her drawing, Kete made a bottle on which she wrote ‘olive oil’.

![Figure 13: by Kete](image)

In explaining her drawing, Kete then wrote the following narrative:

‘This bottle has been given to me by the church pastor, he prayed for it. It helps my baby to get life, and it fights for me through all the attacks that we get in life. I really believe in it. Each and every night I drink it and apply it on my skin after praying and it
works for me now. I go to the church because the church helps me in many ways. Now I think many I have changed my mind’. (Kete)

It is clear that the bottle was given to the participant by her pastor and that the participant believes that the olive oil helped her and the baby. It is evident that she drank and used it as a body lotion that she used after praying. Furthermore, the Church helped the participant in many ways that she did not specify. However, it is noteworthy that the Church played a protective role against attacks.

Furthermore, Lebu made a drawing of a Bible in expressing her own reliance on religion in order to cope with her life.

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What helps you to cope with your life as a learner and a mother? In the space provided, please draw what helps you to cope with your life. How well you draw is not important but the drawing you make is.

Figure 14: by Lebu
Lebu then produced the following narrative:

‘In this Holy Bible, I ask God to help me with my baby. Everyday I always read the Bible so that nothing can be hard on me as a mother. When I face the fight with any parents-in-law, my real parents always said to me: ‘as a mother you do not have to forgive them, they do not need forgiveness’, they said. And I told myself that, no! everybody needs a second chance, and if I do not forgive them, it will be hard for my baby then. I open my Bible at Matthew Chapter 5 verse 6, then God answers me now. Now everything is fine.’

(Lebu)

It is evident from the narrative that Lebu asks God for help with her baby. She further reads the Bible in order to know how to deal with difficulties relating to motherhood. The narrative suggests that she copes with the baby’s father’s parents due mainly to her connection to God. She pointed out that she learned to forgive because of her interest in reading the Bible. It is, therefore, evident that having faith plays a protective role in her life and that she is not vulnerable.

Jeane made a drawing that demonstrated spirituality too. Her drawing shows a human figure clad in traditional clothing that in turn points to traditional healers in the African context. In front of the human figure that is kneeling down is an assortment of objects that traditional healers use in order to “diagnose” the presenting ailment. In the hands, the human figure is holding a whisk as traditional healers often do.
Figure 15: by Jeane

In her narrative, Jeane provides details of what the drawing is about:

'I believe in my ancestors because they will help me go through a lot of difficulties. I will take a nature cure to prevent me from falling pregnant. Because I do not wish to fall pregnant; because I still have a bright future ahead of me. So, if I take or go to sangomas, they will help me; they will give me a cure so that I will not fall pregnant even if I have sex. But sex is a bad thing to do! so I would have being raped if I do fall pregnant'. (Jeane)

The narrative indicates that Jeane believes in her ancestors and that they (ancestors) help her go through difficulties in her life. She relies on traditional medicine that she refers to as “nature cure” to prevent another pregnancy so that she can attain her future goals. She believed that she would not fall pregnant if she continued to take the traditional medicine. She believed that she would fall pregnant only if she could be raped.

This refers to superstitious beliefs that rendered her vulnerable to falling pregnant – exposed to sexually transmitted illnesses and HIV infection. It is also clear that she was ignorant and negligent too. Literature does not refer to traditional medication as a
contraceptive measure. There is currently no scientific evidence to suggest that there is any traditional medicine that can prevent pregnancy.

Whitehead (2007) indicated that teenagers do not use any kind of contraception and consequently have unintended pregnancies (cf. 2.4.2). Literature indicates that cultural beliefs play a leading role in teenagers not using contraceptives, a situation which may lead to girls being disempowered as they cannot negotiate safer sex (cf. 2.4.2).

4.3.4 Teenage mothers had the determination to succeed

In this category, two participants made drawings that showed their determination to succeed despite their setbacks. For example, Brenda made a drawing of a sailing boat. The waves suggest movement. There is no one on the boat.

Figure 16: by Brenda
Brenda produced the following narrative while explaining her drawing:

‘Everybody knows how hard it is to be a teenage mom; sometimes I wish I could take all my problems in the boat, but all I know is a ship can help me with all my problems. I will sail through storms and winds of life; I will face my future’. (Brenda)

She seems to be having an internal locus of control in that she believed that she could make it in life. Having an internal locus of control is implicated in promoting coping with adversity (cf. 2.2).

4.3.5 Teen mothers had abilities to learn from mistakes

The second drawing was made by Joy. In it, she made a drawing that shows a syringe. Next to the syringe, are structures that resemble tablets. The syringe itself seems to contain liquid that is dripping from the needle.

Figure 17: by Joy

It is clear, in her narrative, that the participant regretted not having used contraceptives. She showed that she was aware of the dangers of having unprotected sex. She dreaded having another baby as the narrative shows:
'I have to prevent so that I do not get another baby, because I was in hurry to have a baby at a young age and if you have a baby, it is important to have prevention and when you have sex you will have to use condoms because others will say: I am preventing'. (Joy)

The participant also realises that it was very early for her to have a baby while she was still young.

4.4 CONCLUSION

This chapter analysed data obtained by means of interviews and drawings. The analysis indicated that most teenagers are vulnerable, and only three are empowered.

The next chapter presents conclusions and a summary of the findings.