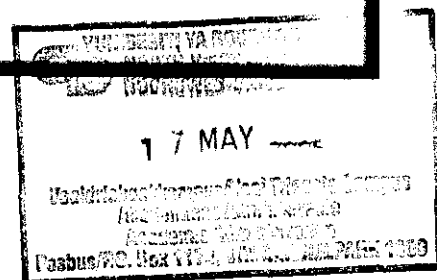


**THE IMPACT OF ADOPTION ON THE
ADOLESCENT BIRTHMOTHER'S SCHOOL
PERFORMANCE**

NADINE DUNN

NADINE DUNN



**THE IMPACT OF ADOPTION ON THE
ADOLESCENT BIRTHMOTHER'S SCHOOL
PERFORMANCE**

by

Nadine Dunn

submitted in accordance with the requirements of the degree of

MASTERS IN EDUCATION

in the subject

EDUCATIONAL PSYCHOLOGY

at the

NORTH - WEST UNIVERSITY

STUDY LEADER: DR. L.C. THERON

NOVEMBER 2004

ACKNOWLEDGEMENTS

My gratitude to

- God, for giving me life;
- my husband, Philip, for his constant support, motivation and patience. I would not have been able to do this without you;
- my parents, sister, friends and colleagues for their support, motivation, patience and believing in me;
- my supervisor, Dr. Linda Theron, for her dedication and guidance;
- the birthmothers who was willing to participate;
- Mr. Jaco Olivier and Ms. Beryl Venter who did the proof-reading with such excellence; and
- the staff from Ferdinand Postma Library of the Vaal Triangle Campus.

THE IMPACT OF ADOPTION ON THE ADOLESCENT BIRTHMOTHER'S SCHOOL PERFORMANCE

By: Nadine Dunn

Degree: Masters in Education – with specialisation in Educational Psychology

Study leader: Dr. L.C. Theron

SUMMARY

This study focuses on the impact that relinquishing a child for adoption has on adolescent birthmothers. The study seeks to understand factors leading up to the adoption, the adoption process and factors impacting negatively on the birthmother following adoption, which influence school performance negatively.

The factors impacting negatively on school performance are delineated by an empirical study founded on relevant literature. Five birthmothers who relinquished their babies for adoption were interviewed. Correlations were drawn between the factors identified within the literature study and new factors emerging from the interviews. The study aims to provide Life Orientation educators with information regarding adoption, the adoption process and the impact adoption has on the birthmothers. Furthermore the study seeks to provide guidelines for the Life Orientation educators to help birthmothers work through factors that impact negatively on their school performance.

The results of the study delineate seven definite factors impacting negatively on the birthmothers and their school performance. The school performance of the birthmothers to whom these factors can be attributed, deteriorated drastically, while birthmothers who felt content with their decision showed almost no deterioration in their school performance. Further study with a greater number of birthmothers is needed to confirm the results obtained within this study.

KEY WORDS

adoption; birthmother; school performance; important others; support; Life Orientation educator;
Meta-approach

TABLE OF CONTENTS

	PAGE
ACKNOWLEDGEMENTS	ii
SUMMARY	iii

CHAPTER ONE	1-10
ORIENTATION OF THE STUDY	

1.1	Awareness of the problem	2
1.2	Rationale for conducting this study	3
1.3	Problem statement	3
1.4	Aims of the study	4
1.5	Method of research	4
1.6	Concept clarification	7
1.7	Delineation of study	9
1.8	Conclusion	10

CHAPTER 2	11-49
FACTORS IMPACTING NEGATIVELY ON SCHOOL PERFROMANCE	

2.1.	Introduction	12
2.2.	The Meta-approach as a conceptual framework for a holistic view of the adolescent	12
2.2.1	Biological context	14
2.2.2	Intra psychic context	16
2.2.3	Ecological context	16
2.2.4	Metaphysical context	17
2.3.	School performance	18
2.3.1	Biological context	18
2.3.1.1	Genetic subsystem	19
2.3.1.2	Constitutional subsystem	20

2.3.1.3	General conditions of health as a system	22
2.3.2	Intra psychic context	26
2.3.2.1	Perceptual subsystem	27
2.3.2.2.	Cognitive subsystem	27
2.3.2.3	Emotive subsystem	30
2.3.2.4	Dispositional subsystem	31
2.3.2.5	Self as subsystem	34
2.3.3	Ecological context	37
2.3.3.1	Interpersonal subsystem	37
2.3.3.2	Group-dynamic subsystem	38
2.3.3.3.	Societal subsystem	42
2.3.3.4	Natural-physical and physical-cultural subsystem	45
2.3.4	Metaphysical context	46
2.3.4.1	Religion	47
2.3.4.2	Culture	47
2.4.	Conclusion	48

CHAPTER THREE

50-75

THE ADOPTION PROCESS AND IMPACT

3.1	Introduction	51
3.2.	Defining adolescence and adoption	51
3.2.1	Adolescence defined	51
3.2.2	Adoption defined	53
3.3.	The adoption process in South Africa	53
3.3.1	Aspects of the law	54
3.3.2	Procedure for adoption	54
3.3.2.1	Jurisdiction	54
3.3.2.2	Adoption proceedings without and with a hearing	54
3.3.2.2.1	Amendment of section 18 of Act 74 of 1983	55
3.3.2.3	Who may be adopted	56
3.3.2.4	Consent to adoption	57
3.3.2.5	Dispensing with parental consent	57

3.3.2.6	The child's consent	58
3.3.2.7	Withdrawal of consent	58
3.3.2.8	Prohibition of payment in respect of adoption	58
3.3.2.9	Access to information	58
3.3.2.10	Inter-country adoptions	58
3.3.3	Adoption agencies and attorneys	59
3.3.4	The open adoption process	59
3.3.5	Confidentiality for the birthmother	60
3.4.	Rates of adolescent pregnancies and adoption	60
3.4.1	Reasons given why adoption rates are so low	61
3.4.2	Reasons why adolescents choose adoption	63
3.5	Benefits of adoption	63
3.5.1	Benefits of adoption for the birthmother	64
3.5.2	Benefits of adoption for the child being adopted	64
3.5.3	Immunity for parental and other forms of coercion	65
3.5.4	Other reasons for adoption	65
3.6.	Mothers who are more likely to choose adoption	66
3.7.	The impact of adoption on the adolescent mother	66
3.7.1	Biological context	66
3.7.1.1	General biological conditions	67
3.7.1.2	Impact of adoption on the birth mother's sexuality	67
3.7.2	Intra-psychic context	68
3.7.2.1	Intrapersonal relationship	68
3.7.2.2	Cognitive functioning	72
3.7.3	Ecological context	73
3.7.3.1	Interpersonal factors	73
3.7.4	Metaphysical context	74
3.7.4.1	Impact on spirituality	74
3.8.	Conclusion	75

CHAPTER FOUR

76-93

RESEARCH DESIGN AND METHOD

4.1	Introduction	77
-----	--------------	----

4.2.	Research aims	77
4.2.1	Sub aims	77
4.3	Research design and method	77
4.3.1	Qualitative research	78
4.3.2	The literature study	79
4.3.3	The empirical study	80
4.3.3.1	Experimental design	81
4.3.3.2	Population and sample	82
4.3.3.3	Data collection	84
4.3.3.4	Statistical techniques	86
4.3.3.5	Ethical aspects	88
4.3.3.6	Validity in qualitative research	88
4.3.3.7	Criteria for assessing the worth of qualitative research	90
4.8	Conclusion	91

CHAPTER FIVE

92-143

REPORT ON THE PHENOMENOLOGICAL STUDY

5.1	Introduction to the study	93
5.2	Background of the birthmothers	93
5.2.1	School performance as indicated with report cards	94
5.2.2	General conclusion	94
5.3	Biological factors	95
5.3.1	Introduction	95
5.3.2	Age of the birthmother	95
5.3.3	Health and physical status	97
5.3.4	Sexually transmitted diseases and contraception	98
5.3.5	General conclusion	100
5.4	Ecological factors	100
5.4.1	Introduction	100
5.4.2	Home environment	100
5.4.3	Relationships with important others	102
5.4.4	Support received from significant others	107
5.4.5	The adoption and school work	110

5.4.6	School attendance	112
5.4.7	Birthmothers' view on the impact the adoption had on their school performance	113
5.4.8	Home economic status	114
5.4.9	General conclusion	116
5.5	Intra psychic factors	116
5.5.1	Introduction	116
5.5.2	Thoughts, feelings and behaviour	117
5.5.3	Birthmothers' view of self	118
5.5.4	The influence currently and in the future	120
5.5.5	The choice to allow adoption	123
5.5.6	The benefits of adoption	124
5.5.7	The disadvantages of adoption	127
5.5.8	Grieving	129
5.5.9	General conclusion	130
5.6	Metaphysical factors	130
5.6.1	Introduction	130
5.6.2	Teenage pregnancy	131
5.6.3	View on adoption and abortion	132
5.6.4	Future pregnancies and sex before marriage	133
5.6.5	View on spirituality and religion	135
5.6.6	What makes life meaningful	136
5.6.7	General conclusion	137
5.7	Reflection on data obtained during the phenomenological interviews	137
5.8	Comparison to Chapter 2	141
5.9	Conclusion	143

CHAPTER SIX

144-178

GUIDELINES FOR LIFE ORIENTATION EDUCATORS

6.1	Introduction	145
6.2	Characteristics of the counsellor	145
6.3	Attitude and skills of the counsellor	146

6.3.1	Listening and attending	146
6.3.2	Probing	147
6.3.3	Summarizing	148
6.3.4	Paraphrasing and clarification	149
6.3.5	Reflecting	149
6.3.6	Empathy and understanding	150
6.4	Guidelines for working through the adoption	153
6.4.1	Working through grief	154
6.4.2	Working through guilt and anger	161
6.4.3	Working through depression	165
6.4.4	Guidelines for developing a positive self-concept	167
6.4.5	Guidelines for building a strong support system	169
6.4.6	Assertiveness	170
6.4.7	Forgiveness	172
6.4.8	Benefits and disadvantages of adoption	174
6.4.9	Planning the future	175
6.5	Helping birthmothers cope at school	176
6.6	Conclusion	178

CHAPTER SEVEN

179-187

CONCLUSIONS

7.1	Introduction	180
7.2	Aims governing this study	180
7.3	Conclusions drawn from the literature	181
7.4	Conclusions for the empirical study	183
7.5	Limitations for the study	185
7.6	Contributions made by the study	185
7.7	Recommendations for further study	186
7.8	Conclusion	186

BIBLIOGRAPHY

188

ADDENDUM

LIST OF TABLES

Table 1.1	Literature overview	6
Table 2.1	Summary of factors impacting negatively on school performance	48
Table 4.1	Validity as used in the research	89
Table 4.2	Criteria for assessing the worth of qualitative research	91
Table 5.1	Summary of Birthmothers' information	93
Table 5.2	Responses of birthmothers about their relationships with important others	103
Table 5.3	Responses of birthmothers about support received from important others	107
Table 5.4	Strong and weak points as the birthmothers see themselves	119
Table 5.5	Birthmothers' view on how adoption influences them currently and in the future	122
Table 5.6	Factors emerging from the phenomenological interviews	141
Table 5.7	Factors impacting negatively on school performance evaluated for birthmothers	142
Table 5.8	New factors emerging from this study impacting negatively on adolescent birthmothers' school performance	142
Table 6.1	Factors impacting negatively on birthmothers	154
Table 7.1	Aims governing the study	180
Table 7.2	Conclusions from the literature	183

LIST OF GRAPHS

Graph 5.1	School performance	94
Graph 5.2	Questions 46 and 47: The ages of the birthmothers	96
Graph 5.3	Questions 48 to 50: Health of birthmothers	97
Graph 5.4	Questions 55 and 56: Use of contraception	99
Graph 5.5	Question 1. Home environment of the birthmothers before they became pregnant	101
Graph 5.6	Question 3. Home environment of the birthmother after the adoption	101

Graph 5.7	Questions 4, 7, 10 and 13. Good relationships with important others prior to becoming pregnant	103
Graph 5.8	Questions 5, 8, 11 and 14. Good relationships with important others during the pregnancy	104
Graph 5.9	Questions 6, 9, 12 and 15. Good relationships with important others after the adoption	106
Graph 5.10	Question 17. Support received from important others while pregnant	107
Graph 5.11	Question 18. Support received from important others once decided on adoption	108
Graph 5.12	Question 19. Support received from important others after the adoption	108
Graph 5.13	Question 35 and 36. School performance reported by the birthmothers	113
Graph 5.14	Question 38. Home economic status	115
Graph 5.15	Questions 80 and 81. Self-concept	118
Graph 5.16	Question 65. Adopting again	123
Graph 5.17	Question 67 to 70. Birthmothers' view of benefits for different people	126

LIST OF FIGURES

Figure 1.1	Overview of Chapter 1	1
Figure 2.1	Overview of Chapter 2	11
Figure 2.2	Systems within the whole social context	13
Figure 2.3	Factors in the biological context sabotaging learning	18
Figure 2.4	The diathesis-stress model	19
Figure 2.5	The Intra psychic context	26
Figure 2.6	Ecological context	37
Figure 2.7	Metaphysical context	46
Figure 2.8	Summary of Chapter 2	49
Figure 3.1	The adoption process and impact on the adolescent birthmother	50
Figure 3.2	The adoption process in South Africa	53
Figure 3.3	The benefits of adoption of the birthmother and adoptee	63

Figure 3.4	Metaphysical context and the impact of adoption on the birthmother	66
Figure 3.5	Factors impacting emotionally on the birthmother	68
Figure 4.1	Overview of Chapter 4	76
Figure 4.2	Overview of the empirical study	80
Figure 4.3	Summary of Chapter 4	91
Figure 5.1	Overview of Chapter 5	92
Figure 6.1	Overview of Chapter 6	144
Figure 7.1	Overview of Chapter 7	179
Figure 7.2	Conclusions from the empirical study	184

CHAPTER 1
ORIENTATION OF THE STUDY

"We are all basically the same human beings, who seek happiness and try to avoid suffering." –

The Dalai Lama (Schiraldi, 2001:36)

OVERVIEW OF CHAPTER 1

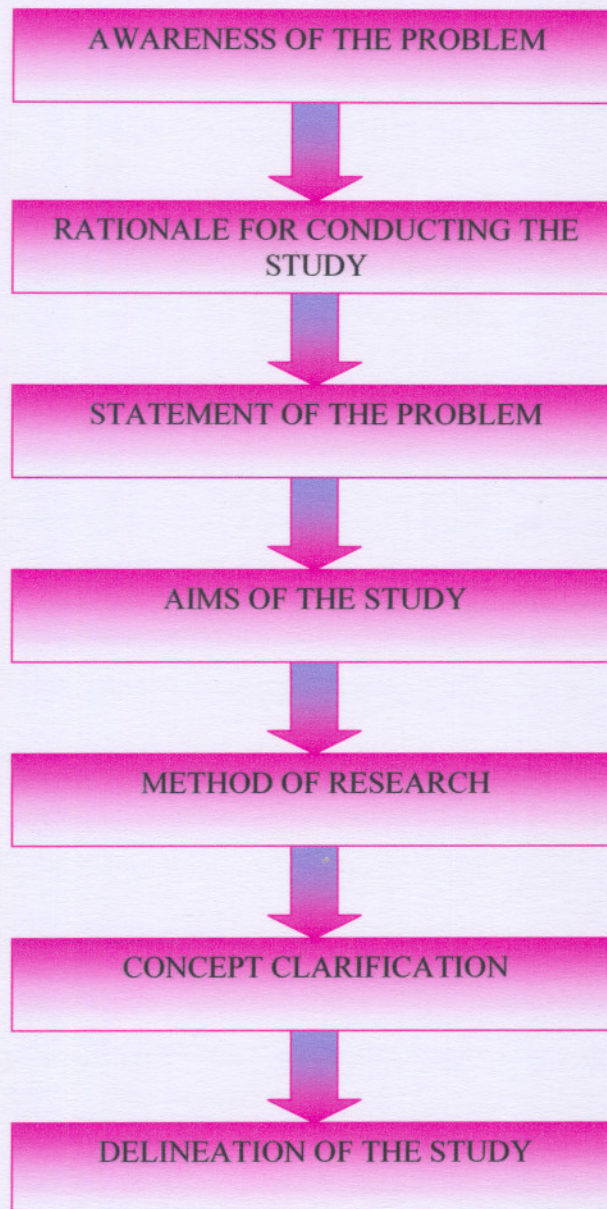


Figure 1.1: Overview of Chapter 1

1.1 Awareness of the problem

In South Africa, like the United States, adolescent pregnancy and child rearing is recognized as a current health and social problem given its continual high rate compared to other developing nations and its association with other social ills such as reduced education, unemployment, substance abuse and suboptimal parenting (Mfono, 1998).

Pregnancies are common among adolescents due to societal attitudes that popularize sexual activity, the failure of sex and family education and the failure to provide birth control. Some learners fulfil their need for love, self-esteem, peer acceptance and independence by sexual promiscuity (Schloss, Smith and Schloss, 2001:66). Other reasons given are rebellion against family norms, lack of family control, sexual abuse and single family caregivers. Studies done in the U.S. indicated that one in ten adolescents become pregnant (Christensen and Rosen, 1996). Thirty-five percent seek abortion, fourteen percent have miscarriages and only less than one percent choose to put their children up for adoption (Child Trends, 1995). Similar statistics for South Africa are hard to find. Information that could be obtained by the researcher was from adoption agencies and they do not have all the figures on adoption. Sixty-six percent of South Africa's adolescents are reported to have had sex before the age of 16, suggesting increased risk of pregnancy (Schloss *et al.*, 2001:66).

Adolescent pregnancies cause adolescents to have a serious socio-economic disadvantage throughout their lives. According to Schloss *et al.* (2001:66) and Novick (2001:1) adolescent birthmothers¹ are less educated, have larger families, and are at risk for health complications. According to Donnelly and Voydanoff (1991:404), adolescent mothers who keep their babies, have less education and are more likely to leave school.

Despite the above facts, few adolescents choose adoption. Mothers believe that relinquishing a baby would cause even greater emotional trauma than abortion (Sachdev, 2001). According to Mathewes-Green (1994) birth mothers give life twice: once when she refuses to have an abortion and then when she releases the child to be raised and loved in another family's home. Adoption is therefore associated with intense pain.

¹ Birthmother is used instead of birth mother. Literature refers to the term "birthmother".

Adolescents choosing adoption often find that they receive little support and understanding from their peers and family (Logan, 1996). These young birthmothers, like other birthmothers who relinquished their children for adoption, struggle to concentrate on daily tasks. Some birthmothers report that they think daily of the child they relinquished. Adoption is therefore not merely a defined act, but one which continues to have ramifications for the life of the birthmother. For the adolescent birthmother, who chooses to return to school, adoption continues to taint her existence, including her school performance.

1.2 Rationale for conducting this study

In her role as guidance educator, the researcher has noticed how learners struggle after they relinquish their babies for adoption. Her interaction with a birthmother who chose adoption and returned to school highlighted her ongoing pain and poorer school performance compared to performance prior to the adoption. The researcher became aware of her own shortcomings in helping this learner as a guidance educator. Little information was available for her to help this learner to adapt to school following the adoption.

There is relatively little research on the factors that influence adolescents to resolve their pregnancies through adoption (Donnelly and Voydanoff, 1991:404). There is also very little information regarding how to help these learners after they return to school. Family and peers do not know how to support birthmothers or understand what they are going through. Educators and guidance counsellors play an important role in helping the learner to reintegrate into the school system, but are stymied by a lack of practical guidelines. Very little guidance on how to do so exists. For this reason this study was undertaken, primarily to understand the impact of adoption on the adolescent birthmother's school performance better so that guidelines could be generated to assist the birthmother to adjust to school following an adoption.

1.3 Problem statement

Little research is available on adolescents who relinquish their babies for adoption. Even less information is available to help these learners adjust to school following the adoption.

The following research questions ensue from this dilemma:

- ✓ how does adoption impact on the birthmother's school performance after she has relinquished the child? and
- ✓ what guidelines can be given to Life Orientation educators to help birthmothers who have chosen adoption and returned to school to cope better at school?

1.4 Aims of the study

The overall aim of the study is to indicate what influence giving a child up for adoption has on the adolescent birthmother's holistic school performance.

The above aim can be operationalised into the following sub aims:

- ✓ to conduct a literature study on the impact of adoption on the adolescent birthmother's school performance by looking at the adoption process and factors impacting school performance;
- ✓ to conduct interviews with adolescent birthmothers who have given their babies up for adoption to gain phenomenological data on the impact of adoption on the adolescent birthmother's school performance; and
- ✓ to write guidelines for Life Orientation educators to help birthmothers who have chosen adoption and returned to school, adjust to school following the adoption.

1.5 Method of research

There are mainly two approaches to research, namely a qualitative approach and a quantitative approach. Qualitative research methodologies are identified as dealing with data that are verbal and quantitative research methodologies deal with data that are numerical (Babbie, Mouton, Voster and Prozensky, 2001). According to Bless and Higson-Smith (2000:156) qualitative research uses a range of methods which use qualifying words and descriptions to record and investigate aspects of social reality while quantitative research measurements record and investigate aspects of social reality using numerical data.

Qualitative researchers attempt to study human action from the perspective of social actors themselves. The primary goal of using this approach for studies is defined as describing and understanding rather than explaining human behaviour (Schurink 2001:241).

The researcher will use the qualitative approach during this study. One of the major distinguishing characteristics of qualitative research is the fact that the researcher attempts to understand people in terms of their own definition of the world. By using this approach the researcher will attempt to understand the influence adoption has on the adolescent birthmother after having a baby relinquished.

The researcher will use the phenomenological interviewing technique as method of data gathering. The interviews will be held with learners who relinquished their babies for adoption and returned to school. The interviews will be audio taped and then transcribed verbatim.

The investigation will be conducted in two phases:


Phase 1:

A literature study will be conducted into:

- ✓ factors that influence school performance;
- ✓ the adoption process in South Africa; and
- ✓ the impact of adoption on the birthmother and adoptee.



An overview of available literature sources is tabulated below:²

Theme	Sources
<p>Factors influencing school performance.</p> 	<p>Amongst others:</p> <ul style="list-style-type: none"> ✓ Barlow and Durand, 1999. ✓ Donald, Lazarus and Lolwana, 2002. ✓ Engelbrecht, 2001. ✓ Jordaan and Jordaan, 1989. ✓ Gouws and Kruger, 1996. ✓ Mizala, Romaguera and Reinaga, 2000. Steyn, Steyn, de Waal and Wolhuter, 2003.

² All pictures used are taken from Print Master 4.0.




The adoption process in South Africa	Amongst others: <ul style="list-style-type: none"> ✓ Betzen, 2004. ✓ Child care act 96 of 1996. ✓ Human, 2000.
Adoption rates 	Amongst others: <ul style="list-style-type: none"> ✓ Custer, 1993. ✓ Daly, 1994. ✓ Freundlich, 1998. ✓ Mathewes-Green, 1994. ✓ Mech, 1984. ✓ Pieterse, 2004.
Benefits of adoption	Amongst others: <ul style="list-style-type: none"> ✓ Fagan, 1996. ✓ Novick, 2001. ✓ Donnelly and Voydanoff, 1991.
Impact of adoption 	Amongst others: <ul style="list-style-type: none"> ✓ Christensen and Rosen, 1996. ✓ Donald, Lazarus and Lolwana, 2002. ✓ Gouws and Kruger, 1996. ✓ Sachdev, 2001. ✓ Shiffler, 1991. ✓ Smith, 1995.
Coping with adoption 	Amongst others: <ul style="list-style-type: none"> ✓ Barlow and Durand, 1999. ✓ Begleiter, 1983. ✓ Condon, 1986. ✓ De Jongh and Arkel, 2003. ✓ Levang, 1996. ✓ Long, 1997. ✓ Meyer, 1998. ✓ Rynearson, 1982. ✓ Smith, 1995.

Table 1.1: Literature overview

Although literature gives a general overview of the impact of adoption, very little information could be found which specifically highlighted the adolescent birthmother's experience. For this reason a phenomenological study was necessary.

Phase 2:

A phenomenological interview, based on the literature study, will be compiled and conducted.

The phenomenological interview consisted of questions that were formalized after the literature study on adoption and factors that influenced school performance. A copy of the questions is included in Addendum A. A purposive convenience sample of 5 adolescent birthmothers was drawn from the Vaal Triangle. The sample was purposive in that it targeted adolescents who had given their babies up for adoption and returned to school. Furthermore it was convenient in that the Vaal Triangle was targeted as the researcher works as a guidance counsellor in the Vaal Triangle. The responses of the participants were content analysed. The entire research design is described in detail in Chapter 4.

1.6 Concept clarification

In order to clarify concepts that will be used throughout the research, the following paragraphs will deal with a description of the relevant terms.

Adolescence

The term adolescence refers to a period of development marked at the beginning by the onset of puberty and at the end by the attainment of physiological and psychological maturity (Reber and Reber, 2001:13). This ranges from approximately 12 to 21 years for girls and 13 to 22 for boys according to Gouws, Louw, Meyer and Plug (1979:5). Forischa-Kovach (1984:25) argues that the exact time period depends on diverse factors such as the surrounding culture and biological development. Olivier, Myburgh and Poggenpoel (2000) describe adolescence as a period of life when major developmental changes take place which challenge the child to make a transition from childhood to full adulthood.

Adoption

Adoption is the legal process through which the birth parents terminate their right to raise a child and give the child legally to other parents to parent. The child is thereafter the legitimate child of the adoptive parents.

Birthmother

Birthmother is the mother who relinquishes her baby for adoption. The biological mother becomes the birthmother when she relinquishes her child for adoption.

Learner

Learner refers to any person receiving education or is obliged to receive education in terms of the South African Schools Act of 1996 (Rossouw and Oosthuizen, 2003:28).

Meta-approach

The meta-approach is based on an adaptation of some of the principles of the general Systems Theory and systematic thinking (Jordaan and Jordaan, 1989:40). The meta-approach can be described within a framework of a contextual hierarchy and is made up of the following contexts of human existence:

- ✓ Biological
- ✓ Intra psychic
- ✓ Ecological
- ✓ Metaphysical

These contexts are divided into hierarchies of sub context, which together form a whole. All of the sub contexts are constantly related to the whole for the disclosure of meaning.

School performance

School performance is the ability of a learner to master academic content, social interaction, life skills and other skills. Some of the skills are measurable by tests while others can be observed. Adequate school performance refers to the learner's capability to move to a next grade because she³ has acquired enough skills from the current grade (Smith and Sheppard, 2001).

³ Within chapters one, two and three, the term "she" also refers to "he".

Teacher/ Educator

Educator as described by the South African Schools Act (Rossouw and Oosthuizen, 2003:28), means any person, excluding a person who is appointed to exclusively perform extracurricular duties, who teaches, educates or trains other persons or who provides professional educational services, including professional therapy and education psychological services at a school. Teacher means any person, who teaches, educates or trains other persons at an educational institution or assists in rendering educational services or education backup or support provided by or in an educational department.

1.7 Delineation of study

A preview of the chapters looks as follows:

Chapter 2

Chapter 2 will focus on literature which deals with factors that influence school performance as a further exploration of the research problem.

Chapter 3

Chapter 3 describes the adoption process in South Africa and the influences adoption has on the birthmother who relinquishes her baby for adoption.

Chapter 4

Chapter 4 contains the research methodology to be used in the phenomenological study, including the problem, the aims and the actual research design to be followed.

Chapter 5

Chapter 5 provides an analysis of the results of the interviews to determine the impact that relinquishing a baby for adoption has on the adolescent birthmother.

Chapter 6

Chapter 6 provides guidelines for the Life Orientation educator to support the birthmother who returns to school after relinquishing her child for adoption.

Chapter 7

Chapter 7 will serve as a conclusion to this study, incorporating findings of the literature study, findings of the phenomenological study, limitations and contributions of this study, as well as recommendations for further studies.

Chapter 7 will be followed by a bibliography and thereafter addenda of the interviews and the report cards of the learners.

1.8 Conclusion

In this chapter an overview of what this study entails was clarified. In the following chapter the factors impacting negatively on school performance will be discussed.

CHAPTER 2

FACTORS IMPACTING NEGATIVELY ON SCHOOL PERFORMANCE

"If you have weaknesses, try to overcome them: If you fail, try again, and if you then fail, keep trying, for God is merciful to his children, a good deal kinder to us than we are to ourselves." - J.

Golden Kimball (Schiraldi, 2001:126)

OVERVIEW OF CHAPTER 2

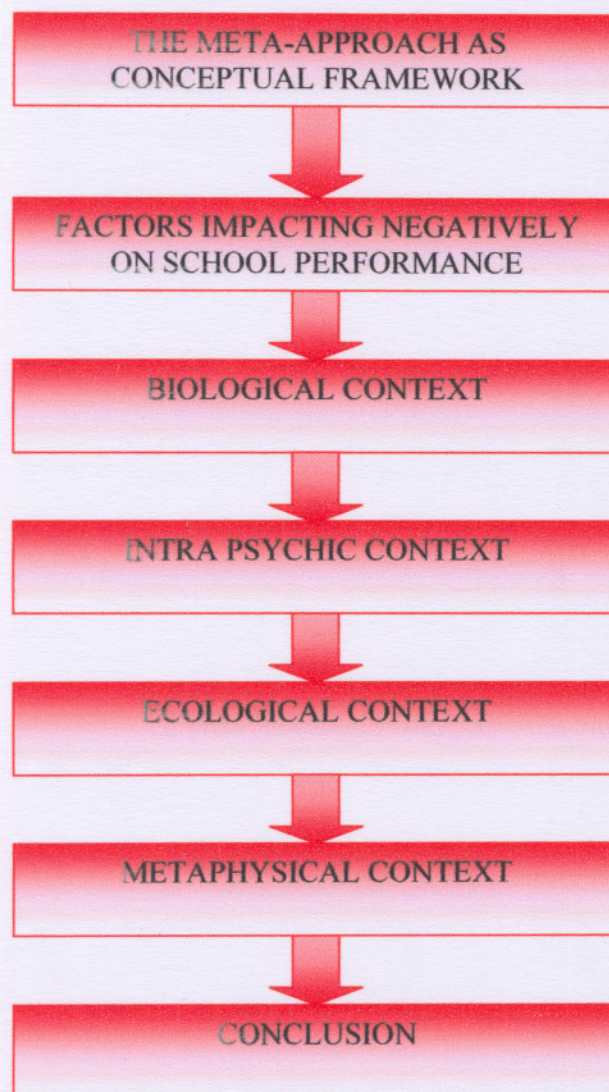


Figure 2.1: Overview of Chapter 2

2.1. Introduction

John H. Roads said: "Do more than exist; live. Do more than touch; feel. Do more than look; take in. Do more than read; observe. Do more than hear; listen. Do more than think; meditate. Do more than talk; say something. And look how much more success you achieve" (Steenkamp, 1996:178). Adolescents are in a phase of life where everything is in flux and where most of them desire success.

Adolescents' state of flux is because adolescence is a time of rapid development, not only physical development but also cognitive, affective, personality, social, conative and normative development. This rapid development influences adolescents in all areas of their lives. Some of these factors influence some adolescents more than others.

The rapid growth in personality, cognition, affect, social, conative, normative and physical development influences school performance. Each of these can be seen as a context in which one context influences another context and vice versa. In other words, to truly understand the impact of adolescence on scholastic performance, the adolescent must be considered holistically.

2.2. The Meta-approach as a conceptual framework for a holistic view of the adolescent

The Meta-approach is based on an adaptation of some of the principles of the general systems theory, ecological theories and systematic thinking. The values, understanding and actions of individual people cannot be properly understood if they are divorced from the context in which they occur (Engelbrecht, 2001:4; Jordaan and Jordaan, 1989:40).

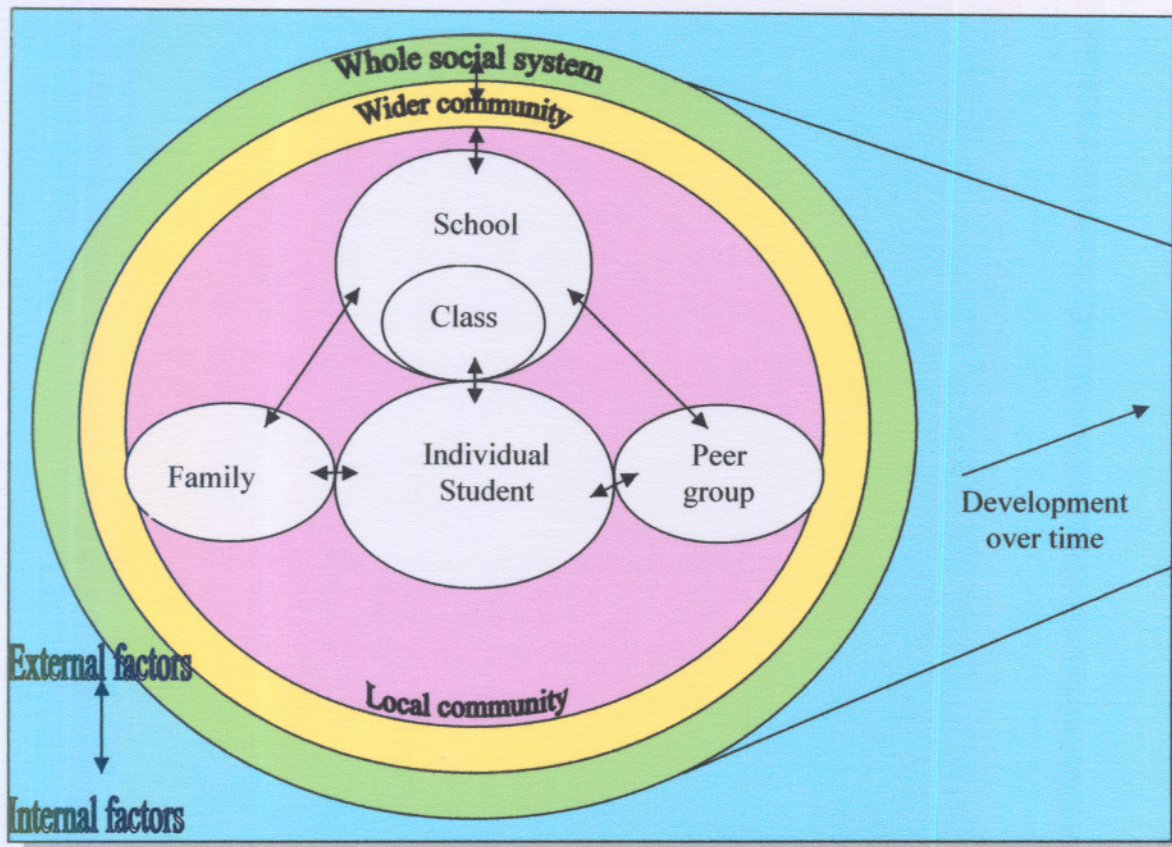
Human behaviour and experience can be studied by means of the contextual analysis and synthesis of part-systems which together form a whole system, where the term system is understood as being an open hierarchical organization which functions interdependently (Jordaan and Jordaan, 1989:41).

Each subject or whole system can be described within the framework of a contextual hierarchy, made up of the following contexts of human existence:

- ✓ biological;

- ✓ intra psychic;
- ✓ ecological; and
- ✓ metaphysical.

From the Meta-approach perspective, the different levels of systems in the whole social context influence one another in a continuous process of dynamic balance, tension and interplay (Engelbrecht, 2001:4) as illustrated in the figure below.



Source: Donald. Lazarus and Lolwana (2002:55).

Figure 2.2: Systems within the whole social context

Systems within the social context impact on all four contexts of human existence. Each level of a system can be seen as functioning in various ways and having its own subsystems. Systems and subsystems interact with other systems and influence the other systems.

The four contexts of the Meta-approach are divided into hierarchies of sub-contexts, which together form a whole. All the sub-contexts are constantly related to the whole for the disclosure

of meaning. Applications of the hermeneutic method shows that disclosing the meaning of something, whether it is a literary text, a human experience or human behaviour, is impossible if the context in which it occurs is not understood (Jordaan and Jordaan, 1989:38). Therefore, each context of adolescent birthmothers will also need to be explained in terms of sub-contexts too.

When studying the context of human existence with the aim of understanding and giving meaning to the experience, behaviour, problems and phenomena, three broad principles need to be kept in mind (Jordaan & Jordaan, 1989:38; Kirsten, 2001:13):

- ✓ all contexts are organized in an open hierarchy which provides a functional classification and not a classification of importance. All contexts, including sub-contexts, are of equal importance;
- ✓ the relationship between contexts is characterized by interdependence and a recurring pattern. This means that what happens in one context not only influences events and situations in other contexts, but is itself influenced by events and situations in these other contexts. The interaction between contexts tends to form a recurring pattern of feed-forward and feedback; and
- ✓ the discovery of interdependence and recurring patterns, as characterized by the relationship between contexts, is promoted by contextual analysis and synthesis. This helps to relate occurring dynamics in terms of the whole.

Adequate school performance or the lack thereof of adolescent birthmothers should be studied through an analysis and synthesis of all the above contexts of human existence for proper understanding.

The meaning of the four contexts of human existence in the Meta-approach will be used as a conceptual framework for a holistic view of the adolescent birthmother's world of experience and will be explained in more detail below. Although the contexts are dichotomized for the purposes of clarification, it must be remembered that they function as a gestalt.

2.2.1 Biological context

The importance of the biological context begins at conception and lasts until death. The physiological development as well as the outward physical development and general function of

the body, lie at the centre of the biological context. Damage and dysfunction caused by diseases, trauma, drugs or other negative factors, undermine the well-being of the adolescent. The biological context can be divided into the genetic subsystem, the constitutional sub-context and the general condition of health as a subsystem.

The biological context is composed of the following part-systems:

- ✓ the neuro psychological system for arousal and emotionality. According to Sutherland (1995:239) this is the state of being for being very alert or undergoing strong emotions like excitement or fear;
- ✓ the neuro psychological system for receiving, processing and storing information. Human beings must be able to selectively receive information about the environment, and be able to differentiate and integrate the various bits of information into meaningful wholes (Stern and Silbersweig, 2001:1). A person must be able to store information for later use, and be able, on the basis of insight gained, to effect the meaningful integration of new information;
- ✓ the neuro psychological system for organizing, regulating and verifying mental activities and behaviour (Jordaan and Jordaan, 1989:301). Human beings do not respond passively to incoming information. They develop and formulate intentions; formulate plans and action programme; direct and regulate their behaviour in accordance with their intentions; plans and action programme; and verify their mental activities by comparing the outcome of their actions with their original intentions, plans and action programme (Darke, Sims, McDonald and Wickes, 2000:687);
- ✓ the endocrine glandular system, blood-circulatory system, respiratory system, gastrointestinal system, metabolic system, excretory system, reproductive system and the immune system are biological part-systems that play an essential role in the general functioning of the human body (Kirsten, 2001:37);
- ✓ prenatal environmental influences the age of the mother, the nutritional intake by the mother, exposure to radiation, the Rh-factor, diseases during pregnancy, the use of medication and drugs as well as the mother's emotions (Jordaan and Jordaan, 1989:301);
- ✓ perinatal environment - anoxia, premature birth and low birth mass, all influence the well-being of the newborn; and

- ✓ postnatal environmental influences - malnourishment, undernourishment, biochemical factors and brain damage are all factors after the birth of the baby, that influence the general functioning of the body (Jordaan and Jordaan, 1989:301).

2.2.2 Intra psychic context

The intra psychic part-system consists of man's ability to be aware of himself as a person, his ability to perceive, to learn, to think, to remember, to have feelings, desires, needs and plans, and to form a self-image. All of these different, but integrated aspects of the intra psychic part-system, make up a person's inner world (Modise, 2003:26).

According to Kirsten (2001:38) the identifiable components of the intra psychic context consist of the following number of interdependent processes:

- ✓ perceptual processes relating to sight, hearing, smell, taste and touch;
- ✓ cognitive processes relating to thought, learning and memory;
- ✓ emotive processes relating to feelings;
- ✓ dispositional processes referring to the tendency to prefer certain behaviours to others; and
- ✓ self-processes referring to the way in which people construct impressions of themselves. These impressions are denoted by the term self-image.

2.2.3 Ecological context

According to Modise (2003:26) the ecological context as part of the environment constitutes the living environment (this includes the plant and animal kingdom, as well as the presence of other people, their actions and reactions) and the non-living environment (this is the natural geographical and climatic conditions as well as the man-made or man-modified environment).

The identifiable components of the ecological subsystem are as follows:

- ✓ interpersonal sub-context: A person's experiences and modes of behaviour are also evoked, maintained and modified in person-to-person relationships (husband-wife, parent-child and educator-learner);

- ✓ group-dynamic sub-context: A person's experiences and modes of behaviour are also evoked, maintained and modified in-group context (family, peer groups and gangs);
- ✓ work sub-context: A person's experiences and modes of behaviour are also evoked, maintained and modified in their job situation and via job circumstances such as professional status, job hierarchical structure within the workplace;
- ✓ social sub-context: A person's experience and behaviour evoked, maintained and modified in social situations that include politics, distinctive culture, ethnic structures and the economy; and
- ✓ natural-physical and physical-cultural sub-context: A person's development as psychobiological entity is a process that does not occur in a vacuum. They are in contact with the geographical environment, climatic conditions and living conditions.

2.2.4 Metaphysical context

Modise (2003:27) states that people's experiences and modes of behaviour are evoked, maintained and modified by attempting to discover what lies beyond all existence, to understand the nature, origin, purpose and overall meaning of life. It has to do with 'things' that are beyond our sensory perception and the fact that the existence or non-existence of such things cannot be proved. These 'things' include spiritual, religious, philosophical and ideological schemas that influence how human beings interpret their ultimate reality. The sub-contexts of the metaphysical context are the following:

- ✓ spiritual and religious sub-context;
- ✓ philosophical and ideological sub-context;
- ✓ aesthetic (art) sub-context;
- ✓ un formalized sub-context (personal explanations and views); and
- ✓ cultural sub-context.

As already stated, the relationship between contexts is characterized by interdependence and a recurring pattern. This means that what happens in one context not only influences events and situations in other contexts, but is influenced by events and situations in these contexts. Factors from each context play a role in school performance.

2.3. School performance

School performance is more than a learner's performance in tests and the resultant test scores. The ability to learn subject specific information is but one factor as life skills, social interaction and other important skills are also learned and not always measured (Smith and Sheppard, 2001).

According to Staub (2000) there appears to be a link between the lifestyles of learners and their cognitive abilities, as reflected in their academic performances. Lifestyle consists of an overabundance of factors as corroborated by the Meta-approach. The impact of lifestyle on scholastic performance will be explored, using the Meta-approach framework. Only those factors which can lead to impoverished school performances will be discussed, as this forms the focus of this chapter.

2.3.1 Biological context

The biological context impacting negatively on the adolescent birthmother can be summarized as follows for the use of this study:

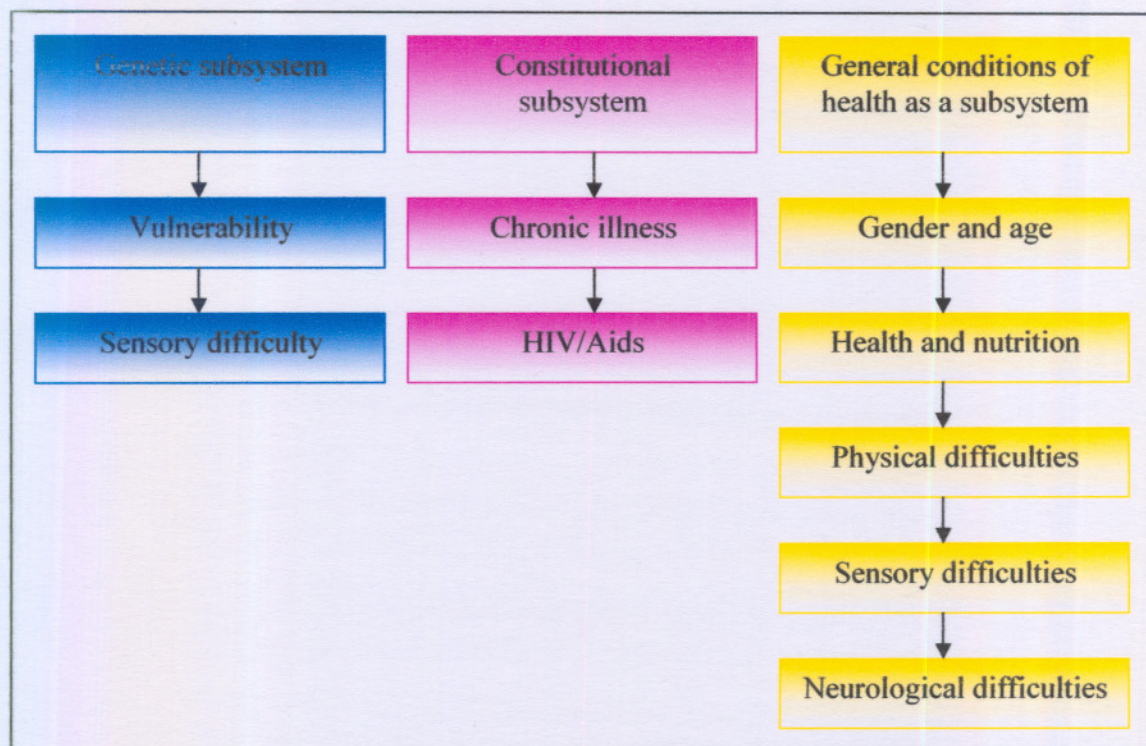


Figure 2.3: Factors in the biological context sabotaging learning

Each of these will be discussed individually.

2.3.1.1 Genetic subsystem

Factors in the genetic subsystem which can hinder school performance include:

✓ Vulnerability

The diathesis-stress model shows how individuals inherit from multiple genes, tendencies to express certain traits or behaviours which may then be activated under conditions of stress. An inherited tendency is a diathesis which is the condition that makes one susceptible to develop a disorder. When the right kind of life event such as a stressor comes along and makes the condition true, the disorder develops. The person thus has a vulnerability to develop a certain kind of disease (Barlow and Durand, 1999:34).

If a learner is prone to being an alcoholic due to inheriting a genetic vulnerability and the learner experiences a lot of stress and starts drinking heavily, the learner has a strong genetic tendency to become an alcoholic, as illustrated in the following diagram.

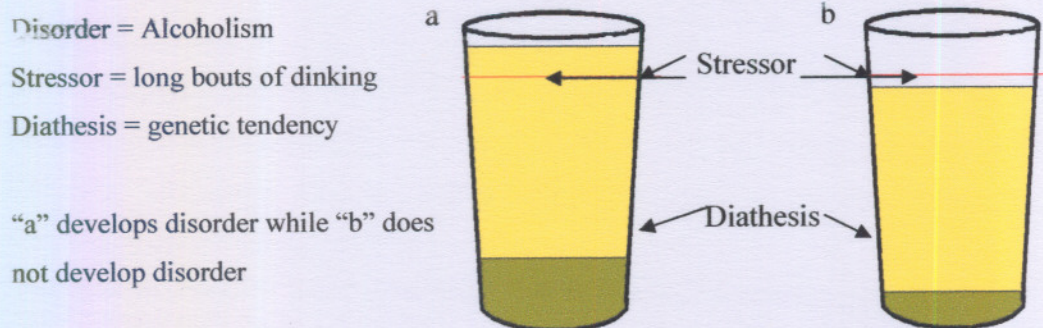


Figure 2.4: The diathesis-stress model

Thus, inherited vulnerability can sabotage school performance.

Another model that is used is the reciprocal gene-environment model. There is some evidence that genetic endowment may increase the probability that an individual will experience stressful life events. Certain tendencies and traits in people make it more likely to behave in a certain way in a situation. Both genes and the environment play an important role in every psychological

disorder. Our genetic endowment does influence our behaviour, emotions and cognitive processes (Barlow and Durand, 1999:35).

This genetic endowment can sabotage learning in that motivation and perseverance are affected. For example, if a learner is short-tempered and impulsive (may be inherited traits) and the educator is not very motivating (environmental), the learner may decide to leave the homework that she is struggling with and rather do something more fun. In the long run, this kind of behaviour will influence her school performance negatively.

✓ Sensory Difficulties

Some sensory difficulties are the result of genetics as the difficulties may be inherited or it developed during mitoses. Sensory difficulties have to do with visual ability and hearing ability. Such difficulties affect the accuracy of or the ability to form meaning of sensory stimuli. The loss of vision causes a very specific set of developmental and educational needs, which are different from conditions where learners still have the use of vision (Kapp as quoted by Donald *et al.* 2002:321). Hearing difficulties are in many ways more complicated in relation to learning. Any degree of hearing loss in a learner can affect the course of language development. This affects most areas of scholastic performance – including the development of reading and spelling skills. It may have quite severe effects on social interaction, emotional development and social skills (Donald *et al.* 2002:321).

2.3.1.2 Constitutional subsystem

The constitutional subsystem refers to the adolescent's physical health. This can be affected by diseases that are chronic and affect the constitution causing ill health resulting in absenteeism and poor school performance.

✓ Chronic illness

Chronic diseases and infections affect learning according to Donald *et al.* (2002:334). According to Celano and Geller (1993:23), chronic illness affects learners' school attendance and development.

Chronic illnesses that are particularly common among school learners in South Africa are:

- ✓ malnutrition and undernutrition refers to unbalanced and insufficient nutrition;
- ✓ HIV/Aids – HIV/Aids is a chronic illness but will be discussed separately given its status as pandemic. Because HIV affects the immune system, sufferers become susceptible to other and often common diseases;
- ✓ Tuberculosis – it is a chronic debilitating disease that affects mainly the lungs but may also involve other organs of the body. Learners suffering from TB suffer from continual coughing, are lacking in energy and are often feverish so that school performance is very broadly affected negatively;
- ✓ chronic respiratory infections – learners with respiratory infections tend to cough a lot and struggle for breath. This affects sleep and causes fatigue and concentration difficulties;
- ✓ chronic otitis media – this is painful and affects hearing. This in turn affects language, social adjustment and school performance;
- ✓ allergies and asthma – different areas of the body may be affected by allergies such as skin irritations, nasal allergies and breathing problems. The learners' concentration, hearing and general school performance is affected over long periods. Asthma can be very frightening and may have serious consequences for the adolescent concerned; and
- ✓ parasite infections – learners who are chronically infected are listless and lacking in energy, which affects both social functioning and scholastic performance (Donald *et al.* 2002:335).

All of the above illnesses affect school performance negatively as learners cannot concentrate and are frequently absent from school.

✓ **HIV/Aids**

In 2003 the following statistics were released pertaining to children and adolescents (AIDS statistics, 2003):

- ✓ 550 000 new HIV infections per year in South Africa (1700 per day);
- ✓ 200 HIV positive babies are born every day in South Africa;
- ✓ 32,8% of KwaZulu-Natal's pregnant women were HIV positive during 1999;

- ✓ only 5% HIV positive people worldwide are aware of their status;
- ✓ almost 1 million orphans under 15 will die of Aids by 2005 in SA;
- ✓ SA has more than 100 000 HIV positive children and it is reported that 1 out of every 7 children will be an HIV/Aids orphan by 2005; and
- ✓ in the KwaZulu-Natal Midlands, 75% of hospital beds are occupied by children with Aids related diseases, while 50% of childhood deaths in that area were Aids related.

HIV has pernicious effects on learning. When adolescents are HIV positive, their health is affected and they are frequently absent. Absenteeism is not conducive to adequate learning.

When adolescents are directly affected by the reality of HIV/Aids, their learning also suffers. Directly affected refers to adolescents who do not have HIV personally, but are in close contact with others (such as friends, family or educators) who do. The impact includes:

- ✓ impoverished emotional functioning. Adolescents who are directly affected experience grief, fear and despair;
- ✓ impoverished scholastic functioning. Directly affected adolescents are frequently absent to care for ill relatives;
- ✓ impoverished learning. Educators who are HIV positive are absent or lack energy to teach adequately. As a result the learning is disrupted; and
- ✓ impoverished educational support. Ill parents or caregivers cannot pay for school or assist learners with scholastic tasks (Theron, 2004).

2.3.1.3 General conditions of health as a system

General conditions that influence health and impact negatively on school performance include:

- ✓ **Gender and Age**

Studies done by Lambeth Education (2001) indicate that girls perform better academically than boys. Males seem to be more vulnerable to factors associated with potential for school failure, such as low socioeconomic status, low parental education and parental separation (Livaditis, Zaphiriadis, Samakouri, Tellidou, Tzavaras, and Xenitidis, 2003).

According to MacBeath and Sammons (1998) girls achieve better than boys in English and are ahead in reading. Gender thus plays a role in school performance since girls perform better at school than boys.

Further research done by MacBeath and Sammon's (1998) ISEP group indicated that learners who are younger than the rest of their class tend to do less well. Age thus plays a role in school performance. If a learner is too young for a grade, this may influence her school performance negatively since she has not yet required the skills necessary to complete certain tasks.

✓ **Health and nutrition**

Good health and adequate nutrition promote both physical growth and learning, while good health and nutrition education at school age can lay the foundation for lifelong good health (Bundy, McGuire, Hall and Dolan, 2004). Food intake or lack thereof influences cognitive development and can thus impact negatively on school performance (Donald *et al.* 2002:206,286).

Most young people in the United States make poor eating choices that put them at risk for health problems. For example, over 84% of young people in the US eat too much fat; 51% eat less than one serving of fruit a day; and 8% of high school girls take laxatives or vomit to lose weight or prevent weight gain. The consequences of unhealthy eating include an increased risk of obesity (the percentage of young people who are overweight in the US has more than doubled in the past 30 years), lower intellectual performance, ill health and premature death in adulthood. On the other hand, the benefits of healthy eating patterns in learners include promotion of optimal health, growth and intellectual development, the prevention of iron deficiency anemia, obesity, eating disorders and dental carries, and the prevention of long-term problems such as coronary heart disease. Establishing healthy eating habits at a young age is therefore critical for adequate school performance (World Health Organization, 1998).

Malnutrition, although probably not a cause of primary learning deficits, does appear to alter processes associated with cognitive function. Passivity, apathy, shortened attention span, reduced short-term memory, failure to acclimate to repetitive stimuli and a lag in the development of sensory-integrative capacity are all associated with mild to moderate malnutrition. These dysfunctions prevent learners from taking maximum advantage of their learning environments. Thus, learners with protein caloric malnutrition tend to function at reduced levels of cognitive

development and academic achievement. One study, for example, showed that current diet was the single most significant predictor of classroom achievement (Levinger, 1986:4).

Hunger seems to cause inattentiveness and distractibility and is thus likely to influence school performance and learning. Hunger must not be confused with malnutrition (Levinger, 1986). Malnutrition can be divided into two words, “mal” and “nutrition”. Reber and Reber (2001:409) define the word “mal” as a faulty, ill or imperfect while “nutrition” refers to the food (Bosman, van der Merwe and Hiemstra, 1984:1465). Thus malnutrition refers to sufficient food with inadequate nutritive value. Hunger refers to insufficient food.

Poor health according to Marx, Wooley and Northrop (1998:40) influences decision making, planning, goal setting, communication and stress management. If learners have poor health, they are also to be more likely to be absent and miss work, essential to the curriculum. This impacts negatively on scholastic progress.

✓ **Physical difficulties**

A wide range of physical difficulties can affect learning. Primarily difficulties affecting mobility and the use of hands impact negatively on school performance. Difficulties affecting mobility usually have to do with varying degrees of loss of body or leg functioning, while difficulties affecting the use of hands affect writing, drawing and other activities necessary for school performance (Donald *et al.* 2002:319).

These learners are usually particularly conscious and sensitive about their physical ‘difference’ but cognitively, socially and emotionally, they are like all other learners (Donald *et al.* 2002:319).

Minor difficulties can be accommodated in most regular classrooms. The difficulty itself is frequently not recognized or understood and this may cause poor learner performance since educators are unaware of the problem.

✓ **Sensory Difficulties**

Sensory difficulties have to do with visual ability and hearing ability. Sensory difficulties can be caused by accidents, infections, prenatal, perinatal or postnatal problems or through the birth

process. It impacts negatively on school performance as these learners have difficulty learning words and speaking if it is a hearing difficulty and they experience difficulty with association, depending on the level of visual difficulty (Donald *et al.* 2002:321).

✓ **Neurological Difficulties**

Neurological difficulties are difficulties that have to do with the functioning of the brain and the nervous system. The most common are cerebral palsy and epilepsy.

Cerebral palsy is a condition that relates to the functioning of the central nervous system and is largely caused by prenatal, perinatal and postnatal brain damage, or other forms of head injuries (Donald *et al.* 2002:324). It affects the control of physical movement and co-ordination. This may affect large body movements such as walking or fine movements such as writing and speech. Difficulties with concentration, perception, memory, language and conceptual development may be associated with this condition, which may cause poor school performance (Donald *et al.* 2002:324). According to Kapp in Donald *et al.* (2002:324) cerebral palsy has many complex variations relating to the specific areas of the central nervous system, as well as to the type of movement or co-ordination involved. Sometimes there are physical and associated learning and social difficulties that cause specific learning needs. Learners with cerebral palsy have a range of needs similar to all learners (Donald *et al.* 2002:324).

Epilepsy is a physical condition. It is the result of an abnormal discharge of the electrical signals that are part of the functioning of all our brains. This discharge is commonly believed to be the result of brain injury (Wedding, Horton and Webster, 1986:71). There are two broad and very different forms of epilepsy.

The first is major epileptic seizures which involve a broad and powerful electrical discharge which spreads throughout the central nervous system. During such a seizure, the adolescent loses consciousness for a matter of minutes. This is accompanied by shaking and jerking of the body, with foam sometimes appearing at the mouth. After a seizure, the adolescent will normally fall into a deep sleep (Donald *et al.* 2002:325).

Minor seizures involve a similar process as major epileptic seizures but the electrical discharge has different effects. There is only a brief lapse of consciousness, usually for a matter of five to

fifteen seconds, where the person just has a blank expression on her face. For a few seconds, they are not aware of what is going on around them (Donald *et al.* 2002:325).

Like learners with cerebral palsy, learners with epilepsy face particular difficulties in terms of learning and social adjustment, but in other ways they have a range of needs similar to all learners (Donald *et al.* 2002:325). People with little knowledge about epilepsy may accuse a learner of not paying attention to the work when in actual fact the learner has had a minor seizure, or may treat the learner with disdain or pity following a major seizure. Learners with epilepsy frequently struggle with low self-esteem. All of the aforementioned can stymie school performance.

2.3.2 Intra psychic context

The intra psychic context refers to the experiential processes of a person. For the use of this study the intra psychic context impacting negatively on an adolescent birthmother's school performance can be summarized as follows:

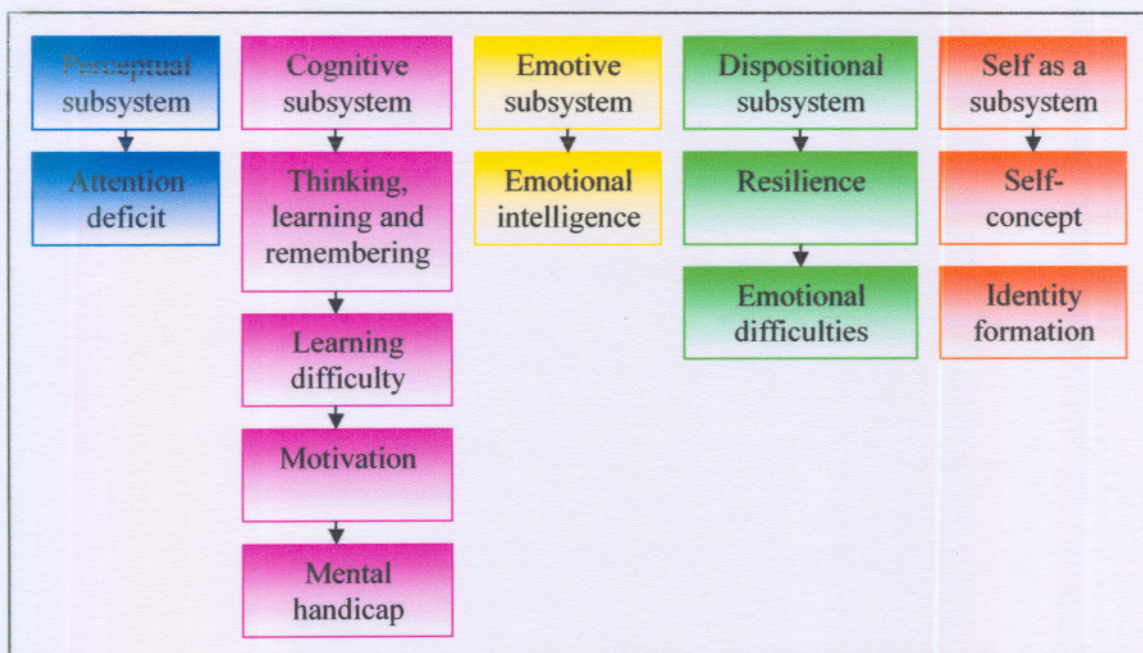


Figure 2.5: The Intra psychic context

Each of these subsystems will be discussed individually.

2.3.2.1 Perceptual subsystem

Perceptual factors that hinder school performance include:

Attention deficit

Attention deficit disorder is recognized in the Diagnostic and Statistical Manual of Mental Disorders (APA, 2002:49). It is commonly and frequently misunderstood as disobedience or deliberate naughtiness. People with attention deficit disorder find it difficult to sustain their attention on a task or activity. Tasks are frequently unfinished and it often seems that they are not listening when someone is speaking to them (Barlow and Durand, 1999:440). Emotional trauma can cause attention deficit as the learners might struggle to concentrate on the work at hand.

At a school level, this leads to negative school performance since important tasks are sometimes not finished and important information is not taken in when spoken to.

2.3.2.2. Cognitive subsystem

Learning, thinking and recalling all form part of the cognitive subsystem where cognitive refers to the functioning of the mental processes in the brain.

✓ Thinking, learning and remembering

According to Piaget, a Swiss psychologist, people are actively engaged in an ongoing process of adaptation, a process of continuous organizing and reorganizing of information and experiences. Three continuously interacting processes namely assimilation, accommodation and equilibration help people to organize, understand and adapt (Donald *et al.* 2002:63).

When learners are not stimulated sufficiently, or are inactive or not exploratory, their cognitive development lags. In such cases, they lack experience in organization and understanding their world and adapting their cognitive schemas to achieve such organizations. This influences their school performance negatively in the long run, when compared to learners who were stimulated enough.

✓ **Learning Difficulties**

Learning difficulties affect learning in a very specific way, rather than in a general way like with a mental handicap. There is often a big difference in both cognitive and scholastic strengths and weaknesses. There may be a minor underlying neurological difficulty. Learning difficulty is not ascribed to environmental disadvantages or physical or sensory handicaps (Donald *et al.* 2002:339).

Learning difficulties cause learners to perform poorly in specific areas of learning such as in speech and language, reading, writing, spelling and mathematics which ultimately affects all the other subjects, as some of these form the basis of other subjects.

✓ **Motivation**

According to Donald *et al.* (2002:122), no learning can be effective unless attention is paid to every learner's motivation or will to take on the challenges of learning.

Motivation is not a concept that can be used as a singular explanation of behaviour. Motivational states result from the multiple interactions of a large number of other variables, among them the need or drive level, the incentive value or goal, an organism's expectations, the availability of appropriate responses, the possible presence of conflicting or contradictory motives, and of course, unconscious factors (Reber and Reber, 2001:447). Motivation is the interaction of a large number of variables such as the adolescent's physical needs, the need for safety, their social needs, the need for appreciation and then ultimately self-actualizing needs (Maslow as quoted by Donald *et al.* 2002:122). When these basic needs are unmet, the motivation to learn is stymied.

Motivation includes:

✓ **Intrinsic Motivation**

Intrinsic motivation refers to the motivation for any behaviour that is dependent on factors that are internal in origin. Intrinsic motivation usually derives from feelings of satisfaction and fulfilment, not from external rewards (Reber and Reber, 2001:448). If a learner is intrinsically motivated, he will be driven to perform well for her own personal needs and/or satisfaction. This

will then influence the learner's school performance (Mandigo and Holt, 1999). A lack of intrinsic motivation will thus sabotage learning.

✓ **Extrinsic motivation**

Extrinsic motivation refers to external factors that influence a person to perform better for example to make money, to pass a test and to impress people (Louw and Edwards, 1998:314). Learners who are motivated by extrinsic motivation tend to perform better at a specific goal or reward. Such motivation tends not to be lasting and the long-term effect is that learners who are motivated by extrinsic motivation experience less satisfaction. They are thus not as motivated to perform well. Extrinsic motivation thus undermines intrinsic motivation and ultimately cannot keep a learner motivated to perform scholastic tasks continuously well (Mandigo and Holt, 1999).

✓ **Expectations of success**

According to the Western Cape Educational Department (2004) an expectation of success is one of the most telling factors in school performance. The most important expectation to be created is the expectation to succeed (Western Cape Education, 2004). Being successful gives a person confidence. Confidence helps a person to perform better and make better decisions, thus helping in school performance (Stone, Buehler and Barber, 2002:60). If a person however lacks self-confidence, she will struggle to make decisions. If no success is anticipated, the learner may not be motivated to perform well.

✓ **Mental Handicap**

Mental handicap (Donald *et al.* 2002:331) makes learning hard, and in some cases makes scholastic learning impossible. Mental handicap is divided into three categories namely: mild, moderate and severe mental handicap. Each one of them will be discussed shortly.

✓ **Mild mental handicap**

Learners with a mild mental handicap have an IQ of approximately 55/60 to 70/75. They are able to learn basic scholastic skills. There is usually a limit to what they can achieve at higher levels of schooling. They can become a self-supporting adult. Learners with a mild mental handicap

may experience feelings of negative self worth, a low frustration tolerance and behavioural problems (Donald *et al.* 2002:128).

✓ **Moderate mental handicap**

Moderate handicap ranges approximately between 35/40 to 55/60 and such learners are more restricted. They tend to function socially, emotionally and cognitively like a much younger child. They can learn basic functions such as social communication, dressing and using public transport. Most of them would find conventional scholastic skills beyond their ability (Donald *et al.* 2002:330).

✓ **Severe mental handicap**

Severe mental handicap is below 35/40. This is a very small group of the whole population. They cannot cope in a regular school. Some learners may learn some social and self-help skills. Most of them do require full-time physical care as they can not feed themselves, go to the toilet or dress themselves. This continues into adulthood (Donald *et al.* 2002:330). Yet people with severe mental handicap can develop a wide range of skills that depend on training and the availability of other support (Barlow and Durand, 1999:458).

2.3.2.3 Emotive subsystem

Emotive factors that hinder school performance include:

✓ **Emotional intelligence**

According to Mayer and Salovey (1997) emotional intelligence involves the ability to perceive accurately, appraise and express emotion; the ability to access and/or generate feelings when they facilitate thought; the ability to understand emotion and emotional knowledge; and the ability to regulate emotions to promote emotional and intellectual growth.

Learners with low emotional intelligence have the following characteristics which influence their school performance:

They:

- ✓ are poor learners;
- ✓ have more behaviour problems;
- ✓ feel bad about themselves;
- ✓ are violent and less empathetic;
- ✓ are poor at resolving conflict;
- ✓ are likely to engage in self-deductive behaviour;
- ✓ have few friends;
- ✓ have poor impulse control;
- ✓ struggle to delay gratification;
- ✓ are generally unhappier;
- ✓ are less healthy; and
- ✓ are less “successful” (Hein, 2004).

2.3.2.4 Dispositional subsystem

Dispositional factors hindering school performance include:

- ✓ **Resilience**

Resilience is the ability to cope and bounce back from difficulties (Donald *et al.* 2002:222). Kaplan, Labrumba, Pelcovitz, Weinar, Salzinger and Mandel (1999:18) define resilience as having no diagnoses for psychological malfunctioning. Resilience thus refers to the ability to maintain adaptive functioning in spite of serious risk hazards.

The presence of resilience is used to explain why some learners can withstand quite severe contextual stresses and risks to their development, while others cannot. According to Donald *et al.* (2002:222) resilience is determined mainly by the balance between stressor and risks learners are exposed to on the one hand and the protective factors which might be operating on the other hand.

The term “risk” refers to probable negative outcomes of factors which undermine resilience. According to Clayton (1992:15) risk factors derive from individual characteristics, situational or

familial conditions or environmental contexts that increase the risk of developing developmental difficulties or disturbances.

Two out of three vulnerable learners according to Kaplan *et al.* (1999:38) develop serious learning or behavioural problems by the age of ten and by the age of eighteen mental health problems, delinquency or teenage pregnancy.

✓ **Individual characteristics**

Temperamental, cognitive and personality characteristics appear to undermine developmental resilience in individual learners. The following individual characteristics heighten vulnerability (Donald *et al.* 2002:223):

- ✓ low intelligence;
- ✓ ineffective communication skills;
- ✓ inadequate problem solving skills;
- ✓ a negative self-concept;
- ✓ low feeling of self-worth;
- ✓ weak interpersonal skills; and
- ✓ external locus of control.

✓ **Family characteristics**

Families that are caring, supportive and stable are key elements to help learners through difficult circumstances. The following family characteristics tend to discourage resilience and heighten vulnerability:

- ✓ an unhealthy relationship with at least one caregiver;
- ✓ a family that discourages competence; and
- ✓ a family that lacks a strong, coherent and consistent set of values (Donald *et al.* 2002:223).

✓ Risk factors

Risk factors may be understood as stressors which are likely to increase an individual's chances of being vulnerable to delayed developmental and/or maladjustment.

The following risk factors are given by MacFarlane (1998:53):

- ✓ prolonged separation from primary caregiver in the first year;
- ✓ serious/chronic childhood illness;
- ✓ severe marital discord or divorce;
- ✓ low social status;
- ✓ overcrowding or large family size;
- ✓ paternal criminality;
- ✓ paternal absence;
- ✓ parental health (e.g. especially maternal psychiatric disorder, alcoholism...);
- ✓ parental illness;
- ✓ admission of child into community care;
- ✓ major family events (e.g. abuse or bereavement);
- ✓ genetic disorders/developmental difficulties; and
- ✓ school related stressors.

✓ Emotional difficulties

Emotional difficulties are complex to define and range from very disturbed behaviour (e.g. childhood schizophrenia) to fairly common behaviour (e.g. attention seeking) (Donald *et al.* 2002:349).

According to Barlow and Durand (1999:2) a psychological dysfunction within an individual is associated with distress or impairment in functioning and a response that is not typical or culturally expected. It refers to a breakdown in cognitive, emotional or behavioural functioning. It influences the individual in such a way that she can not function optimally in society and this also influences school work negatively.

Learners with emotional difficulties struggle in one way or another to relate to people in a socially acceptable way. These learners' socialized behaviour is sometimes out of line with the dominant norms of society. Emotional difficulties can generally be split into stress reactions and problems of socialization.

Stress reactions include (Donald *et al.* 2002:351):

- ✓ frequent crying, sadness and depression;
- ✓ withdrawal or dependent behaviour;
- ✓ disruptive or attention seeking behaviour; and
- ✓ socially unacceptable behaviour (e.g. petty stealing, lying) and avoidant behaviour.

Problems of socialization include (Donald *et al.* 2002:352):

- ✓ unsocialized behaviour; and
- ✓ socialized behaviour which violates social norms (e.g. aggression, defiant or antisocial behaviour).

2.3.2.5 Self as subsystem

Factors relating to the self that hinder school performance include:

- ✓ **Self-concept**

Donald *et al.* (2002:223) defines self-concept as what people believe or think about themselves in different ways: their important attributes (female, tall, intelligent or sociable) as well as the value attached to these attributes (good/bad, desirable/undesirable). The self-concept is patently the central determinant of an individual's relationships in her life world (Gouws and Kruger, 1996:91).

The self-concept comprises of several dimensions which are closely integrated (Gouws and Kruger, 1996:91):

- ✓ the physical self;

- ✓ the personal self;
- ✓ the family self;
- ✓ the social self; and
- ✓ the moral self.

The self-concept is dynamic as it changes over time and from one situation to another. It is also organized (Gouws and Kruger, 1996:92).

The following characteristics can be distinguished for learners who have a negative self-concept (Napoli *et al.* in Gouws and Kruger, 1996:93):

- ✓ irresponsible;
- ✓ dishonest, lack integrity and congruence;
- ✓ negative attitude;
- ✓ lack personal growth;
- ✓ withhold the expression of feelings;
- ✓ do not take risks;
- ✓ do not accept praise; and
- ✓ do not trust themselves or others.

A positive self-concept, feelings of self-worth and strong interpersonal skills empower learners to feel good about themselves which helps them to engage actively and positively with other people. A positive self-concept also contributes to better school performance (Cotton, 1993). The opposite is also true. If a learner does not feel good about herself or think that she can accomplish something, it impacts negatively on her school performance.

✓ Identity formation

Adolescence is a time of personal development. Identity is defined by Gouws and Kruger (1996:86) as the meaning attached by a person to herself as a person, which means that it is the answer to the question 'who am I?'

Erikson's theory of development maintains that the adolescent needs to achieve identity during adolescence in order to accomplish the psychosocial crisis of this critical point in the

development life-cycle. If adolescents do not accomplish this, they will end up confused about who they are and where they fit into society (Donald *et al.* 2002:78). If adolescents do not reach this goal and do not fit into society, they may find themselves with identity problems and behaviour that is not acceptable to the community at large. If this happens, they may find it hard to get the support they need. Ultimately, this influences their perception of themselves and also their ability to perform well at school.

Identity diffusion and identity moratorium are two problems that adolescents may experience during identity formation. They are briefly described below.

✓ Identity diffusion

Identity diffusion arises when the adolescent is incapable of taking any decisions about herself and her role, or when there is too little opportunity for experimentation with social roles. Identity diffusion causes adolescents to live in a carefree way, avoiding commitments. They are drifters without goals who are easily persuaded to follow others and assume whatever identity is required. This is the result of a lack in self-confidence (Gouws and Kruger, 1996:90). Identity diffusion leads to poor school performance as the adolescent has no or little commitment to school work and is easily persuaded.

✓ Identity moratorium

Identity moratorium refers to the postponement of the adoption of any set identity. Adolescents in this phase are experimenting actively with a variety of roles and investigating a wide diversity of ideologies. They are hesitating to make any fixed commitments and are therefore still in the middle of the identity crisis but are actively investigating a variety of alternatives (Gouws and Kruger, 1996:90).

Since the adolescent still does not have her identity within this context, it influences her school performance negatively.

2.3.3 Ecological context

The ecological factors impacting negatively on school performance can be summarized as follows for this study:

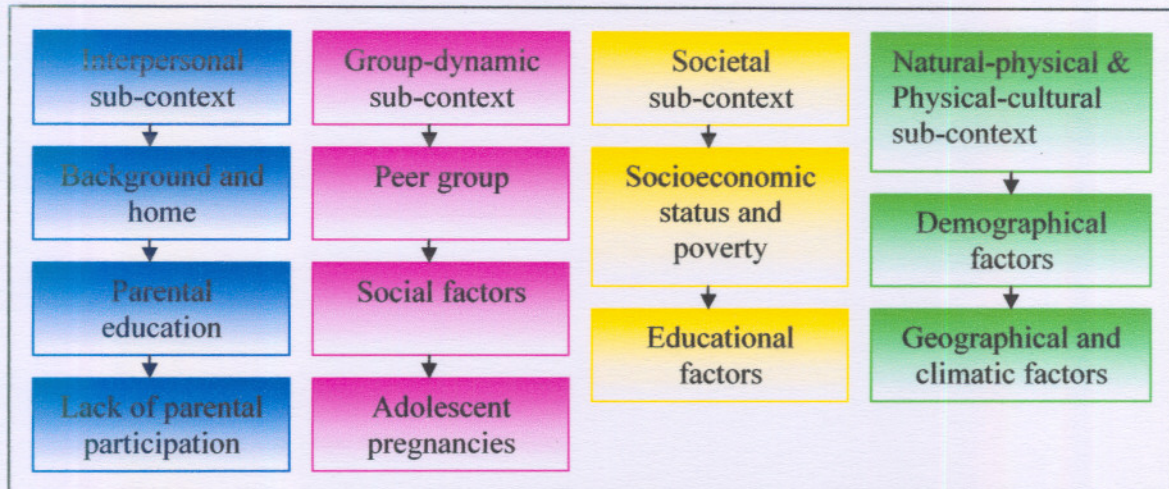


Figure 2.6: Ecological context

2.3.3.1 Interpersonal subsystem

The interpersonal subsystem refers to parents, other family members or significant other people that a person communicates with. Interpersonal factors hindering school performance include:

✓ Background and home

A study done for the Improving School Effectiveness project showed that a learner's background and prior attainment affects school performance (MacBeath and Sammons, 1998). If a learner's background and home are inconsistent with the school's culture, the learner's chances of success at school decrease. The learner does not fit in easily into the school environment because it is different from the home environment. The learner also finds it hard to assimilate and accommodate new information which impacts negatively on her school performance.

✓ Parental education

Studies done by Mizala, Romaguera and Reinaga (2000) confirmed that as the level of parental education increased so did the level of learners' performance. Wolff, Schiefelbein and

Valenzuela (1993) considered the parents' educational level as the most significant variable that influences school performance. Educated parents can help learners with homework and with work that they don't understand. A better education also means in some instances better work which in turn can help with special needs such as extra classes. If parents are not educated, however, they cannot help learners with scholastic work and will most probably not be able to afford extra support. All of this will impact negatively on school performance.

✓ **The lack of participation from parents**

According to Carlyon, Carlyon and McCarthy (1998:67) functioning, supportive families and social support within communities contribute to a learner's success. If learners feel that their parents do not support their education and do not attend meetings when called to school, they are less likely to perform well. This happens more for parents who leave the care of learners to relatives or maids and those with broken or problematic homes. Learners may feel that the lack of participation from their parents is an indication of their worth and ability and may thus continue to perform poorly.

2.3.3.2 Group-dynamic subsystem

The group-dynamic subsystem refers to formal and informal groups such as clubs, classes, sport teams, families and social groups. Group-dynamic factors that hinder school performance include:

✓ **Peer group**

Reber and Reber (2001:518) define a peer group as any group consisting of several members who are roughly equal in status within the confines and functions of the group. This term is used for both adults and adolescents.

During adolescence, the peer group has a powerful influence on behaviour (Muuss in Donald *et al.* 2002 244). The adolescents' need to belong influences their participation in the peer group. This could be positive or negative, depending on the values held by the peer group.

The peer group often influences decision making and thus study time. During adolescence the peer group plays a big role in the self concept of the learner as they express and experience the need to belong to a group (Allender, 2002:630). Some of them will go to great lengths just to fit in somewhere, even to the point of neglecting their school work, especially if the peer group's dominant ethos is a disapproval of scholastic success.

If a learner feels left out by her social group, it might influence her self-concept, which in turn impacts negatively on school performance (Allender, 2002: 630).

✓ **Social Factors**

Social factors are factors that influence the learner on a social level. Social factors refer to any variable that has an impact on behaviour in a social setting for example substance abuse, violence and sexuality. Social factors are especially important during adolescence as this is a time when the peer group plays an influential role and there may be pressure to experiment (Donald *et al.* 2002:3):

✓ **Substance abuse**

Substance abuse is defined by Reber and Reber (2001:722) as "A substance-related disorder characterized by a maladaptive pattern of substance use such that the user experiences clinically significant cognitive and behavioural impairment or emotional distress that has an impact on work, school or home."

According to Vaughn (2002), substance abuse has long been linked to physical problems. Recent studies show that alcohol and drug abuse can negatively influence learners' school performance. Frequent drowsiness due to drug intake interferes with concentration, affecting school performance negatively.

Due to wide-spread social use of alcohol (illegal to anyone under the age of 18) and tobacco (illegal to anyone under the age of 16), it is often not seen as a drug. In South Africa the same might be true for marijuana (commonly known as *dagga*) although it is illegal. All of these drugs affect behaviour by affecting the brain. Experimentation with these drugs is common in learners

(Donald *et al.* 2002:253). If the brain is affected by drugs, learning can not take place as it should causing poorer school performance.

✓ Violence

Different kinds of violence can be distinguished including: political violence, gang violence and criminal violence. Political violence relates to an imbalance and distortion in power and access to resources of different groups in society, and basic differences in political viewpoints and goals. The younger the learners when they encounter political violence, the greater the risk for permanent 'damage' to their psychological development (Dawes and Donald, 1994). As stated in paragraph 2.3.2.3, emotional difficulties do have a negative impact on school performance. During times of violence, classes may also be disrupted and learning might not take place.

Gang violence also appears to be more prominent in the poorer urban areas of South Africa. One of the reasons given for gang violence is economic needs. Violence within gangs, between members, between gangs and the community at large creates a problem for the community as they all struggle for the same limited resources (Donald *et al.* 2002:261). Learners involved in these gangs may feel threatened and afraid. Gangs also take up valuable time that could have been spent learning, thus influencing school performance negatively.

Accumulated frustration and anger play a role in criminal violence. Criminal violence can take place in a gang or on an individual level. An imbalance in resources and survival needs seem to be key factors for criminal violence (Donald *et al.* 2002:264). Learners learn in fear and without resources that they need due to a lack of resources. Those who have less may feel that they are discriminated against and this may lead to a feeling of resentment. This may cause the learners to stop learning as they have nothing to learn for.

✓ Child Abuse

Relationship violence and child abuse happen most often where there is an existing interpersonal relationship. According to Levett in Dawes and Donald (1994), child abuse is of particular concern as it is disturbingly common and a serious social problem in South Africa.

Child abuse can be divided into three different types namely: sexual abuse, physical abuse and emotional abuse. Child abuse causes inattention causing learners to perform poorly.

✓ **Adolescent pregnancies**

Adolescent pregnancies have been increasing because of an increase of earlier sexual intercourse, high risk sexual intercourse, lack of parental guidance, family disintegration, insufficient sexual education and not using contraception (De Visser and Le Roux, 1996).

Reasons given by various sources about the high number of pregnancies can be summarized as follows:

- ✓ family disorganization (Boult and Cunningham, 1992);
- ✓ urbanization and westernization (Boult and Cunningham, 1992);
- ✓ poor socio-economical status and low educational levels (De La Rey, Duncan, Shefer and Van Niekerk, 1997); and
- ✓ sign of fertility in certain cultures (De Visser and Le Roux, 1996).

According to Blum and Goldhagen (*in* Louw, van Ede and Louw, 1998:415), adolescents bearing children is what has been described as the syndrome of failure: failure to fulfill the functions of adolescence, failure to remain in school, failure to limit family size, failure to establish a vocation and become self-supporting and failure to have children who reach their potential in life.

Also associated with sexual relationships is the risk of contracting one of many sexually transmitted diseases. Sexually transmitted diseases have devastating effects on individuals, unborn children, families and society as a whole (Donald *et al.* 2002).

Adolescent pregnancies are especially disruptive when it comes to school attendance. Many leave school early in the pregnancy. Some never return to school and most of them are unemployed six months after giving birth (Phoenix, 1991:218). Learners thus lose a lot of work and other opportunities in life.

2.3.3.3. Societal subsystem

The societal subsystem refers to institutional structures such as the educational structure. Societal factors which hinder school performance include:

✓ Socioeconomic status and poverty

Low socioeconomic status and poverty affect learning in a number of ways. Inadequate medical care and inadequate nutrition are related to poverty. Inadequate medical care can cause learning difficulties and absenteeism. Inadequate nutrition sabotages effective learning (as discussed in paragraph 2.3.1.3). Poverty also affects a learner's home life and limits opportunities for learning outside of school. It limits the range of background experience learners have, meaning that they come to school and go through their school career less prepared than their counterparts to succeed in school activities (Demie, Butler and Taplin, 2002).

Further more low socioeconomic status is often associated with circumstances that do not encourage or support learner's education. Even if parents want their children to have an education, they may be needed, at relatively young ages, to help with family responsibilities, and during adolescence, to work relatively long hours to contribute to the family income, reducing the time available for them to study and succeed in school (Bissell, 2004; Mizala *et al.* 2000).

A lack of support in homes is more often found in homes of lower income groups. These learners may lack reading material and other stimulation or may be the child of an illiterate parent (Mizala *et al.* 2000).

✓ Educational factors

“A school with inadequate resources - too few classrooms, poor teaching and library resources, high pupil-educator ratios, and inadequately qualified educators - will struggle to help its learners achieve” (Donald *et al.* 2002).

According to Donald *et al.* (2002), communities in South Africa differ widely in terms of resources and values. Both influence social and interpersonal problems. Living in conditions associated with poverty has many negative effects on learners' growth and development.

Mizala *et al.* (2000) found that there is a positive relationship between the availability of didactic materials and learners' performance. Other resources such as libraries and the provision of textbooks also contribute to better performance. Other resources of importance at schools, especially in South Africa, is electricity, enough class rooms, tables and chairs, running water and sanitation (Steyn, Steyn, De Waal and Wolhuter, 2003). According to a study done by the KwaZulu-Natal Educational Department in 1996 (Steyn *et al.* 2003), 1 239 schools out of 5 400 schools were not fit for education, 1 913 schools do not have running water, 3 314 schools do not have electricity and 551 schools do not have sanitation, 3 559 schools do not have telephones and 1 887 principals do not have offices. Schools without these, influence their learners negatively.

In 1997 a study done by the University of the Free State about the current state of education in South Africa the following was revealed: there are 27 867 schools in South Africa of which 13% have no toilets, less than 43% have electricity and 24% have no running water within walking distance (Steyn *et al.* 2003). Learners have to walk far to toilets, thereby losing study time. Without electricity, resources such as Internet, computers and projectors cannot be used. This causes learners to lose valuable information and opportunities, thus impacting negatively on school performance.

Learners are influenced by the models they see around them. In South Africa there are some schools where drunkenness occurs amongst the staff; where educators initiate sexual relationships with their learners; where violence is modeled through physical punishment; and where race, gender and other forms of discrimination regularly occur (Goetzl and Lo, 1997). Such influences can be inimical to adequate learning.

✓ **Inadequate discipline at school**

Not all learners are self-disciplined. Some pupils do not do their homework, come late to school and are not keen on learning. This not only affects the learner exhibiting this behaviour but also the others in the class (Waudu and Wawire, 2002:69). Educators have to spend time asking the learners to behave in order to give a lesson, check their homework more regularly to insure that they understand the work and wait after break or even when the school starts for those learners who come late. This means that learning time is shortened.

✓ School language requirements

The South African Bill of Rights (108/1996) determines that everyone has the right to use the language of her choice and to participate in the cultural activities of their choice. No one may however practise her rights in a way which is unconstitutional. Every person also has the right to receive education in the language of her choice where it is possible to do so.

Language can be seen as a barrier for many learners who have to study in another language than their home language. According to Thomas (2001) language is seen as one of the most important variables that influences school performance.

Learners learning in a language other than their home language struggle to learn effectively (Lazarus: 2000). Studies done show that these learners take longer to learn new work (Donald, *et al.* 2002:219). Mizala *et al.* (2000) also found that if the language used at a school is not the learner's home language, it influences their school performance negatively as they battle to communicate, participate and comprehend.

✓ Teaching

In spite of being highly qualified and experienced, some educators seem to not teach with dedication. Some have even mastered boredom (Wilkinson, 1996). The work that is prepared for the learners and effort being put into work is decreased. This impacts on learners. Learners are thus not as motivated. They pick up from their educators their dedication and willingness to help them to perform well and the lack of dedication then results in poor learner motivation.

Psachropoulos in Mizala *et al.* (2000) states that the time spent with learners and homework positively influences learners' performance. If learners are not motivated to do homework or if homework is not given, it influences their school performance negatively. According to Avellar-Flemin in Mizala *et al.* (2000) educator's absenteeism is associated with poorer performance as time is not spent with the learners. They can thus not ask if something is unclear to them.

Educators' absenteeism due to sickness has been a hindrance to good learner performance. HIV in South Africa also plays an important role. During the more developed stages of HIV,

educators are more absent and if an accident happens at school, learners stand the chance of being infected (Damons, 2004:16).

Piaget's theory on cognitive development sets out different stages of cognitive development. These stages are connected to age and the different kinds of actions and learning processes associated with each of them (Donald *et al.* 2002:67). Misinformed educators may require learners to perform age-appropriate tasks without understanding that individual learners develop uniquely. If the learner has not yet acquired a specific skill, she may perform more poorly due to a lack in current ability. This can cause a learner to feel negative about herself and ultimately influences her school performance.

✓ **Learner-educator ratio**

On average in South Africa, the ratio in primary schools is 1:34 and in secondary schools 1:32. These statistics do not however distinguish between areas nor do they distinguish between rural and urban schools. The ratio in any given school might be much higher than 1:32 or 1:34 (Steyn *et al.* 2003). Donald *et al.* (2002) estimated that most South African educators are likely to face classes averaging about 40. According to the Gauteng Department of Education (2004) the new ratio that the education department is aiming for is 1:35 in secondary schools and 1:40 in primary schools.

It is widely accepted that the educator ratio of educator to learner influences school performance. The more learners per educator, the poorer the performance (Mizala *et.al.* 2000).

✓ **Length of time spent in school**

The longer learners stay at one school, the better their performance according to a study done by Lambeth Education (2001). If a learner moves regularly from one school to another, it impacts negatively on the learner's school performance.

2.3.3.4 Natural-physical and physical-cultural subsystem

Climate, rainfall, water, energy, housing, transport and other natural and physical factors all form part of this subsystem and can hinder scholastic progress:

✓ Demographical factors

Steyn *et al.* (2003) state that South Africa is one of the most heterogenic countries in the world. People are divided into race, ethnicity and cultural composition. At any given time the number of people in a region, the age division and the racial status, will differ from another place. All of these factors influence the educational system and therefore also school performance. Learners are exposed to different cultures through other learners as well as through educators. Some learners may feel inferior to other cultures or may feel uncomfortable, especially if they are in the minority. This may influence their school performance negatively (Noguera, 2001).

✓ Geographical and climatic factors

Factors being looked at here are the rainfall of any given area and temperatures (Steyn, *et al.* 2003). Both of these have the potential to influence school attendance negatively and erratic school attendance can give rise to learner problems. Rainfall may cause transport problems, especially in rural areas. Temperature influences concentration. When it is too hot or too cold, learners find it difficult to concentrate. If learners find it hard to concentrate or do not concentrate at all, they lose out on important work which is inimical to adequate school performance.

2.3.4 Metaphysical context

The metaphysical context refers to values and beliefs that a person has which contribute to life's meaning. Victor Frankl, a prisoner of the Nazi concentration camp, believed that the essence of being human lies in searching for meaning and purpose (Corey 2001:141).

The metaphysical context impacting negatively on school performance can be summarized as follows:

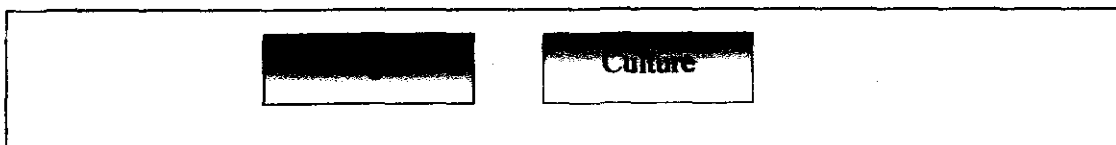


Figure 2.7: Metaphysical context

Each will be discussed individually.

2.3.4.1 Religion

About 80% of the South African population see themselves as Christians. The Bill of Rights (108/1996) states that every person has the right to freedom of conscience, religion, thought, belief and opinion. "Subject to the Constitution and any applicable provincial law, religious observances may be conducted at a public school under rules issued by the governing body if such observances are conducted on an equitable basis and attendance of them by learners and members of staff is free and voluntary" (Rossouw & Oosthuizen, 2003).

Religion is practiced as a choice. The learners at school have the opportunity to participate in the religion of their choice. Some religions require that time is spent on meditation and prayer at certain times of the day. If the minority group in a school practices this religion, they may fall behind in their work since normal school continues. This can impact them negatively. Having special holidays in certain religions which are not recognized by the government may also cause learners not to attend school and fall behind in work, impacting negatively on their school work.

Religion is multifaceted - involving beliefs, behaviours and social networks. Studies are rare that link religious practice with school performance, but those that do, tend to find a positive influence, regardless of the religion. A study done in Iowa indicated that as religiosity increased, so did school performance progress (Regnerus, 2000). If learners do not participate in any religion or religious activity, it influences their school performance negatively.

2.3.4.2 Culture

People from different ethnic group's, performance also differ (Lambeth Education, 2001). Social and cultural differences have been reported as affecting learners' performance (Beiser, Sack, Manson and Dion, 1998). Culture can be defined as the values, understandings, norms, beliefs and traditions of a group of people (Donald, *et al.* 2002:24). Some cultures focus on performance more than other cultures. Some cultures also have rituals that have to do with age, such as initiation ceremonies. Learners who are exposed to certain ceremonies, might lose work which is done while they are away, thus influencing them negatively. If a culture is not focused on performance, learners might be less motivated to perform and thus influence them negatively.

2.4. Conclusion

Different factors impact negatively on a learner's school performance. What influences one learner might not influence another learner. As can be seen from the Meta-approach, factors ranging from within a person to factors associated with the outside world, all influence a person to some extent as all of these factors are interrelated.

Factors impacting negatively on school performance identified in this chapter are:

✓ Genetic vulnerability	✓ Parental education
✓ Sensory difficulties	✓ The lack of participation from parents
✓ Chronic illness	✓ Peer group
✓ HIV/Aids	✓ Substance abuse
✓ Gender and age	✓ Violence
✓ Health and nutrition	✓ Child abuse
✓ Physical difficulties	✓ Adolescent pregnancies
✓ Sensory difficulties	✓ Socioeconomic status and poverty
✓ Neurological difficulties	✓ Educational factors
✓ Attention deficit	✓ Inadequate discipline at school
✓ Thinking, learning and remembering	✓ School language requirements
✓ Learning difficulties	✓ Teaching
✓ Motivation	✓ Learner\educator ratio
✓ Mental handicap	✓ Length of time spent in school
✓ Emotional intelligence	✓ Demographical factors
✓ Resilience	✓ Geographical and climatic factors
✓ Emotional difficulties	✓ Religion
✓ Self-concept	✓ Culture
✓ Background and home	

Table 2.1: Summary of factors impacting negatively on school performance

The following chapter focuses on the adoption process and the impact of adoption on the adolescent's school performance.

Graphically the chapter can be summarized as follow:

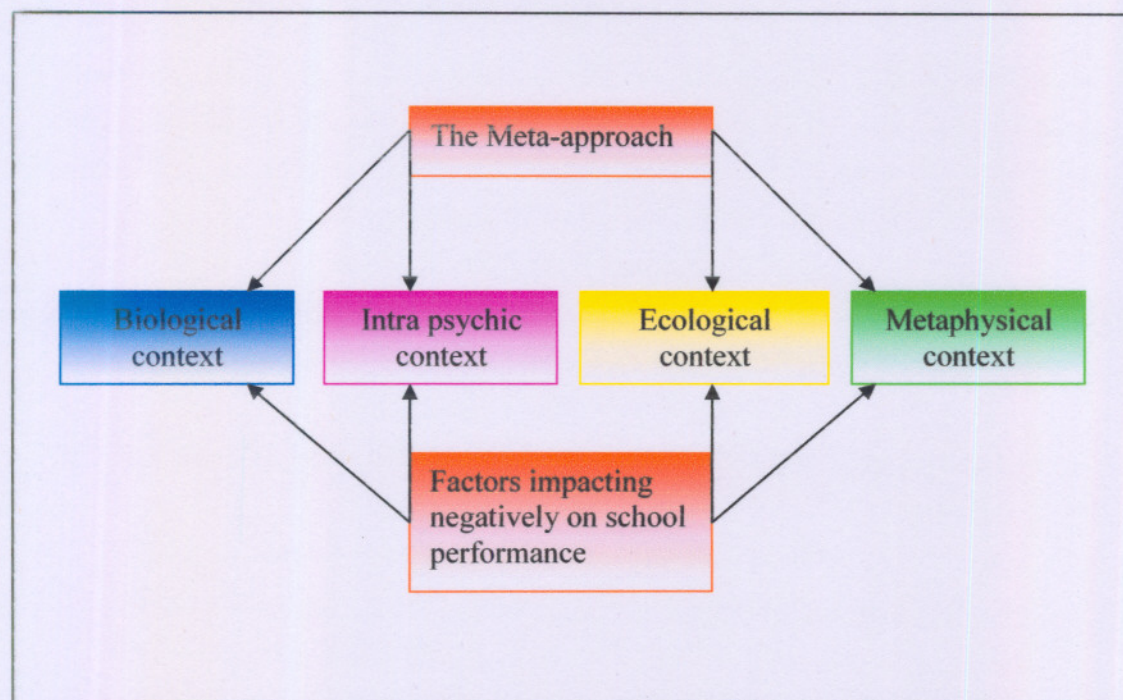


Figure 2.8: Summary of Chapter 2

CHAPTER 3

THE ADOPTION PROCESS AND IMPACT

"I was responsible for my life and that it would be the choices I made...that would determine the kind of life I had in the future...my doom was not sealed. My fate was not set. It was true that I could do nothing about what had happened, but I could do everything about how I continued to react about what had happened." - Elizabeth H Neeld (Caplan and Lang, 1995:67)

OVERVIEW OF CHAPTER 3

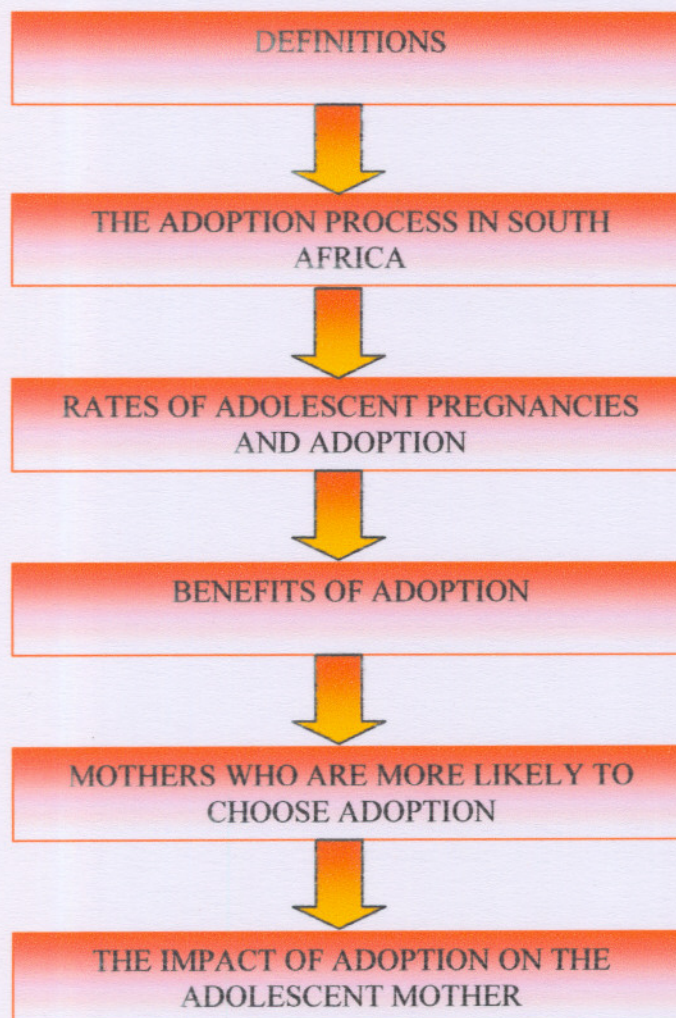


Figure 3.1: The adoption process and impact on the adolescent birthmother

3.1. Introduction

Relinquishing a child is a traumatic experience and is alluded to over and over again throughout literature (Carlini, 1992; Jones, 1993; Verrier, 1993). Unresolved grief, guilt and shame are signatory of many birthmothers (Gediman & Brown, 1989; Logan, 1996).

Only a few adolescent birthmothers choose to let their children be adopted. The reasons as to why these adoption rates are so low and the factors influencing the choice made by the birthmother will be looked at in the following chapter. Within this chapter, clear definitions will be given to define adolescence, adoption and the law of South Africa with regard to adoption. The reasons why adoption is seen as a solution will also be delineated. The effect which adoption has on the birthmother is also discussed.

3.2. Defining adolescence and adoption

3.2.1 Adolescence defined

Gouws and Kruger (1996:3) state: "The term 'adolescence' derives from the Latin verb *adolescere*, meaning 'to grow up' or to grow to adulthood". They are thus referring to a developmental phase in the human life cycle that occurs between childhood and adulthood.

According to BrainyDictionary (2004) adolescence is the state of growing up from childhood to manhood or womanhood, youth, or the period of life between puberty and maturity, generally considered to be, in the male sex, from fourteen to twenty-one. For women, however, the ages of puberty differ because women mature quicker. The ages for a woman start from 11 to 14, with girls reaching puberty on average two years earlier than boys (Lerner and Noh, 2000:121).

Adolescence is defined by Reber and Reber (2001:13) as the period of development marked at the beginning by the onset of puberty and at the end by the attainment of physiological or psychological maturity.

In South Africa adolescence ends legally when the adolescent is able to vote – 18 years. Adulthood is attained at the age of 21 when parental consent is no longer needed.

From the previous definitions, it can be concluded that an adolescent is:

- ✓ a person who is growing up to adulthood;
- ✓ a person who has already finished childhood;
- ✓ in a period of life between puberty and maturity; and
- ✓ aged from approximately 14 to 21 for boys and 11 to 19 years for girls.

Adolescents need to master certain developmental tasks (Thom, Louw, Van Ede and Ferns, 1998:392). These tasks include:

- ✓ acceptance of their changing physical appearance;
- ✓ development of their male or female gender role identity;
- ✓ development of cognitive abilities and the gaining of knowledge;
- ✓ development of own identity;
- ✓ development of independence from parents and other adults;
- ✓ career choice and preparation;
- ✓ development of socially acceptable behaviour;
- ✓ acceptance and adaptation of certain groups;
- ✓ forming heterosexual relationships;
- ✓ development of strong emotional ties with another person;
- ✓ preparing for marriage and family responsibilities;
- ✓ reaching economic independence;
- ✓ development of moral norms and values which are used as guidelines for behaviour;
- ✓ development of values which are in relation to realistic and scientific world views; and
- ✓ the development of a life philosophy.

Psychologically adolescence ends when a person attains certainty of identity, can be emotionally independent from parents, has developed his¹ own system of values and norms, and can enter into adult relationships based on love and friendship. From an economic point adolescence ends when the individual has the ability to live by his own means and follow a successful occupation (Gouws and Kruger, 1996:3).

¹ Within this Chapter the term "his" also refers to "her".

3.2.2 Adoption defined

Human (2000:101) defines adoption as the legal process through which the existing legal relationship between a child and his/her birthparents is terminated and a new legal parental relationship is created between the adoptive parent(s) and the adoptive child.

Adoption also means that the adopted child is legally considered the legitimate child of the adopting parent (Davel, 2000:31).

Until there is an adoption, the person planning adoption is referred to as a parent, mother or father. It is only after the adoption that the term birthparent is used. The adoption process changes the birthparent's role as a parent (Betzen, 2004:1).

3.3 The adoption process in South Africa

The adoption process in South Africa is a long and difficult process. Aspects within the following section on adoption in South Africa deal with the law, the procedure to follow, agencies and the open adoption process. Aspects of the adoption process can be summarized as follows:

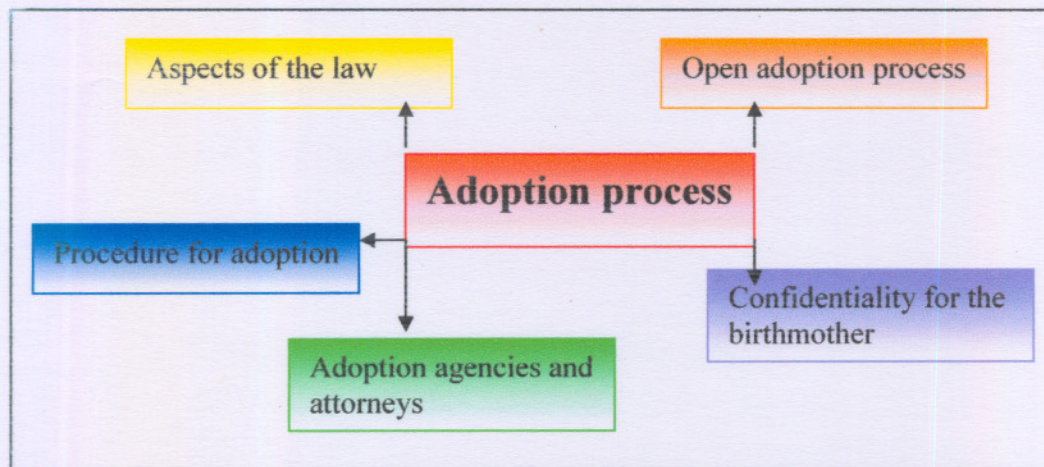


Figure 3.2: The adoption process in South Africa

Each of these will be discussed individually.

3.3.1 Aspects of the law

The legal introduction of adoption came with the passage of the Adoption of Children Act (25/1923). Today adoption is regulated in its entirety in Chapter 4 of the Child Care Act (74/1983). Only a children's court can grant a valid order of adoption and bring about the legal consequences aimed at when adopting a child (Human 2000:102).

3.3.2 Procedure for adoption

Generally, the adoption procedure is initiated by identifying the orphaned child through a welfare organization. After a home study has been completed, the case is referred to a children's court for the final hearing. An order of adoption terminates all the rights and obligations existing between the child and any legally recognized parent. The adopted child is thereafter deemed by law to be the legitimate child of the adoptive parent(s). The order of adoption confers the surname of the adoptive parent on the adopted child (Human 2000:113).

The adoption procedure described above has multiple steps:

3.3.2.1 Jurisdiction

The children's court of a district, in which the child concerned resides, must grant an order for the adoption. According to Human (2000:103), the prospective adoptive parent must apply for the adoption by completing form 11 and lodge it with the clerk of the children's court.

3.3.2.2 Adoption proceedings without and with a hearing

If the court has satisfied itself on the strength of the prescribed report by the social worker that the requirements of section 18 of the Child Care Act (74/1983) have been met (according to the Amendment of Section 18 of Act (74/1983), it has the discretion to consider the application and make an order granting the adoption without giving a hearing to any person. If the application cannot be finalized on the strength of the social worker's report, a formal hearing is set (Human 2000:104).

3.3.2.2.1 Amendment of section 18 of Act 74 of 1983

The amendment which is used to consider the application and make an order for granting the adoption without giving a hearing is as follows:

a) by the substitution of subsection (1) with the following subsection:

(1) (a) The adoption of a child shall be effected by an order of the children's court of the district in which the child concerned resides.

(b) The children's court shall not make any order referred to in paragraph (a) before the consideration of a prescribed report from a social worker or an accredited social worker;

(b) by the substitution of paragraph (d) of subsection (4) with the following paragraph:

(d) that consent to the adoption has been given by both parents of the child, or, if the child is illegitimate born out of wedlock, by the mother of the child, whether or not such mother is a minor or married woman and whether or not she is assisted by her parents, guardian or husband, as the case may be; and

(c) by the substitution of paragraph (g) of subsection (4) with the following paragraph:

(g) in the case of an application for the adoption of a foster child by a person other than his or her foster parent, that the foster parent consented has stated in writing to the adoption of that he or she does not wish to adopt the child: provided that such consent statement shall not be necessary if the foster parent refuses or fails, within one month after being called upon in writing by an assistant of the children's court to do so, to indicate to him or her in writing whether he so consents or not that he or she does not wish to adopt the child; and

(d) by the addition of the following subsections:

(8) Notwithstanding the provisions of any other law the parent of a child who has given consent to the adoption of his or her child shall have the right to withdraw such consent up to 60 days after such consent has been given.

(9) A children's court shall not make any order of adoption before the expiration of the period of 60 days referred to in subsection (8) Child Care Act (96/1996).

3.3.2.3 Who may be adopted

Only a child under the age of eighteen years who is unmarried may be adopted. Only a child in need of care – according to section 14(4) of the Child Care Act (96/1996) – may be made available for adoption.

The following requirements must be satisfied (Human, 2000:106):

- (a) The court must give consideration for the religious and cultural background of the child, his/her parents and the prospective adoptive parents.
- (b) The court must consider the prescribed report from a social worker or accredited by a social worker.
- (c) The court must be satisfied that the applicant is (or both applicants are) qualified to adopt a child – Child Care Act (96/1996) section 18(4)(a) – that they have adequate means to maintain and educate the child, that they are of good repute and fit and proper to be entrusted with the custody of the child, and that they qualify for South African citizenship.
- (d) The court must be satisfied that the necessary consent for the adoption has been obtained or that it has been dispensed with.
- (e) The court must be satisfied that, if relevant, the child has consented to the adoption.
- (f) The court must be satisfied that, where required, the child's foster parent has furnished a statement, confirming that he or she does not wish to adopt the child.

3.3.2.4 Consent to adoption

The adoption of a child born out of wedlock requires the consent of both parents. If only one parent has given consent, the commissioner must serve notice on the other parent within fourteen days (section 7(b) of act (96/1996) and as amended by section 4 of Act (56/1998)).

The Adoption Matters Amendment Act as described in Human (2000) requires that the consent of the biological father, excluding rapists and incestuous fathers, be obtained before a child born out of wedlock is placed for adoption. Previously, only the consent of the biological mother was required. However, married or divorced biological fathers can prevent their wives or former wives from having their children adopted. This substitutes section 18(4)(d) which required only the mother of the child that is illegitimate or born out of wedlock.

3.3.2.5 Dispensing with parental consent

According to section 19 of the Act on Child Care (96/1996), parental consent may be dispensed with in the case of a parent:

- ✓ who as result of mental illness is incompetent to give any consent;
- ✓ has deserted the child or whose whereabouts is unknown;
- ✓ who has physically, emotionally or sexually assaulted, ill-treated or abused the child;
- ✓ who allows the child to be assaulted, ill-treated or abused;
- ✓ who has caused or condoned the seduction, abduction or prostituted sexual exploitation of the child or the commission by the child of immoral acts; or
- ✓ who is withholding his or her consent unreasonably.

No parental consent is required for the adoption of a child whose parents are dead and for whom no guardian has been appointed. The biological father's consent may also be dispensed with if the father failed to acknowledge himself as the father of the child, has failed to discharge his parental duties with regard to the child, whose child was conceived as a result of an incestuous relationship with the mother, or who was convicted in a criminal court of rape or assault.

3.3.2.6 The child's consent

If the child is over the age of ten, his or her consent is required.

3.3.2.7 Withdrawal of consent

Sixty days are given to the parents to consider and withdraw consent. An adoption order may not be granted in this period by the Children's court (Human 2000:110).

3.3.2.8 Prohibition of payment in respect of adoption

Except as provided for in the Social Work Act 110 of 1978 in Human (2000), it is an offence for any person to give, undertake to give, receive or contract to receive any consideration, in cash or kind, in respect of the adoption of a child.

3.3.2.9 Access to information

The adoptive parent may inspect records of adoption proceedings from the date on which the child reaches the age of eighteen years. An adopted child may only inspect the records from the age of twenty-one, while the birthparents may only with written consent from the adoptive parents after the child has reached the age of twenty-one. The registrar may for good reason refuse any person access to the records and register and may also require the person inspecting to go for counselling first (Human 2000:114).

3.3.2.10 Inter-country adoptions

Under South African laws, inter-country adoptions are governed under the Child Care Act (74/1983). This act determined that inter-country adoption was not allowed and a section of the Act prohibited foreigners from adopting South African born children, unless one of the adoptive parents was a South African citizen resident in South Africa or otherwise had residential qualifications and had applied for naturalization. However, with the inception of the new government in May 1994 and passage of the new Constitution, along with a specific Constitutional Court decision in the year 2000, drastic changes have been made to the Act and

American citizens are now able to adopt South African born children (International Adoption South Africa, 2004).

3.3.3 Adoption agencies and attorneys

There are no host government approved agencies or attorneys. Applicants usually complete the adoption process through a U.S. adoption agency for international adoptions or directly through the South African government (International adoption South Africa, 2004) for local adoptions.

3.3.4 The open adoption process

According to Betzen (2004) an open adoption is where the biological parent is encouraged to continue parenting along with the adoptive parent. Biological parents continue to play a role. The biological parent must be able to select a family of her choice. Furthermore, biological parents are encouraged to realize that relinquishing their baby is their choice and they should not be manipulated into making decisions for which they are not yet ready. The birthmother must be able to change her mind. Open adoption thus means any sharing of information between the adoptive parents and the biological parents. There are no agency regulations restricting contact between adoptive parents and biological family – all face-to-face contact after placement is based on the trust and developing relationships between the adoptive parents and biological parent.

Most birthmothers prefer open adoption because it gives them the chance to:

- ✓ search and select an appropriate family for their child;
- ✓ become friends with the adoptive family. This may result in personal contact and not just contact through the agency;
- ✓ be there as the child grows up and answer questions only the mother can answer;
- ✓ help with family research if there are genetically related health questions that develop; and
- ✓ reassure the child (Betzen, 2004).

3.3.5. Confidentiality for the birthmother

Shawyer (as quoted by Logan, 1996) writes, "Adoption is a violent act, a political act of aggression towards a woman who has supposedly offended the sexual mores by committing the unforgivable act of not suppressing her sexuality, and therefore is not keeping it for traditional marriage: the crime is a grace one, for she threatens the very fabric of our society. The penalty is severe. She is stripped of her child by a variety of subtle and not so subtle maneuvers and then brutally abandoned..."

Today, things look somewhat different for older birthmothers. Young birthmothers however are still labeled according to the above statement. It is for this and other reasons that confidentiality is so important.

Confidentiality is needed for the following reasons:

- ✓ birthmothers are protected from the stigma of pregnancy without the benefit of marriage;
- ✓ she is protected from the stigma of illegitimacy and the concerns of 'bad blood';
- ✓ it prevents the confusion of having two different sets of parents and the conflict that might arise should contact occur;
- ✓ protection from intrusion into the privacy of all parties;
- ✓ protection from blackmail;
- ✓ protecting the adoptee from disturbing acts surrounding their birth – incest, rape, etc.
- ✓ enhancing the adoptee's feeling of permanency;
- ✓ enhancing the family's stability and preserving the nuclear family; and
- ✓ encouraging the use of adoption instead of abortion, black market placement, child abuse, or neglect (Tx CARE, 2004:4).

3.4. Rates of adolescent pregnancies and adoption

Novick (2001) states that one in three adolescent mothers drop out of school in the USA due to pregnancy. Only 50% of girls who give birth before the age of 18 finish high school. In South Africa, Kaufman, De Wet and Stadler (2000) reported that 30% of adolescents have already given birth once by the age of 19. Statistics on the percentage of birthmothers who complete school in

South Africa is probably not known as the researcher could not find any information relating to this.

Adoption rates in the United States have declined in recent decades as adoption has fallen out of favor with state governments and the social services establishment. In 1979 one in four adopted babies was born out of wedlock. In 1991, only one in twenty five babies was adopted (Fagan, 1996:2). There is a drop in the proportion of white mothers who put their babies up for adoption. In a 1995 survey, of the 51 percent of teens that became pregnant, 35 percent sought abortion, 14 percent had miscarriages and less than 1 percent had their babies adopted (Child Trends, 1995).

Adoption rates in South Africa are difficult to document as little research has been done. Unconfirmed adoption rates obtained from adoption agencies are as follows: Abba, a home in Pretoria, working with adoption has since January 2004 had 41 mothers who considered having their babies adopted. From the 41 only 15 finally gave permission for adoption (Pieterse, 2004). In this sample, therefore, actual adoption appears to be at 36%.

3.4.1 Reasons given why adoption rates are so low

The various reasons cited, include:

- ✓ Counsellors do not appear to encourage adoption. Some 40 percent of individuals in a variety of settings who identify themselves as “pregnancy counsellors” do not even raise the issue of adoption with pregnant clients. An additional 40 percent provide inaccurate or incomplete information to clients. By contrast, 38 percent of the clients whose counsellors offered adoption went on to choose adoption (Mech and Leonard, 1984:8).

In South Africa, social workers counsel birthmothers. Presently there are 45 Pregnancy Crisis Centres throughout South Africa. General information is given, including the development of the baby in the womb, the preciousness of life, abortion and the after-effects, single parenting and adoptions (SA Cares for Life, 2004). Adoption does not seem to be emphasized or prioritized.

Lack of support from helping professionals has been found to be related to the following:

- ✓ their lack of knowledge;
 - ✓ personal subscription to the general societal belief that adoption is not an appropriate action;
 - ✓ beliefs that client uninterest is certain, and
 - ✓ preferences for nondirective counselling strategies (Mech and Leonard, 1984:2).
-
- ✓ The initial drop in placement rates among white women does not reflect the increase in abortion rates after the legalization of abortion. According to Freundlich (1998), no research done is showing that women are choosing to abort their children rather than place these children for adoption.
 - ✓ The continuing decline in placement rates reflects the diminishing stigma attached to unwed parenthood (Bachrach, Stolley and London, 1992:24). Mothers can raise illegitimate children with less disgrace and may therefore be less inclined to opt for adoption.
 - ✓ Societal sanctions against relinquishing a child initiate and support the adolescent's belief that adoption would not be good for the child. It is acceptable to be a single adolescent mother, but it is definitely not acceptable to give a baby away (Custer, 1993:1).
 - ✓ Low level of knowledge – very few pregnant adolescents report on knowing something about adoptions. According to Custer (1993:4) this low level of adoption knowledge nurtures the stereotypical beliefs held by society in general.
 - ✓ Anticipated psychological discomfort is mostly expected due to social sanctions. This coupled with low levels of knowledge and the absence of professional interventions discourages adoption as a choice. Themes of anticipated guilt, wondering, grieving, and belief that the child would hate them are repeatedly described within the phenomena of loss, owning and responsibility (Custer, 1993:4).

3.4.2. Reasons why adolescents choose adoption

Despair, joy, desperation and disbelief are but a few of the convoluted emotions adolescent birthmothers experience when they find out that they are pregnant and realize they cannot keep the child for whatever reason (Mathewes-Green, 1994). The complex emotional response contributes to an adolescent's decision to choose adoption.

Adolescent childbearing is heavily concentrated among poor and low-income teenagers, most of whom are unmarried. Low-income youths may not intend to have a baby, but may not be sufficiently motivated to avoid pregnancy. According to Christensen and Rosen (1996:2), low-income youth without a prize beckoning from the future – a good job, financial independence and marriage – may have little incentive to delay childbearing. Adoption therefore allows their offspring a future different from theirs.

A study done by Daly (1994:346) showed that on an individual level, adoption was generally viewed as quite favourable by young pregnant women. The decision to release a child for adoption is difficult and complicated (Martin, 1989). A set of intertwined conditions, experiences, relationships and attitudes which affect the social world of the adolescent mother seem to be the foundation of her decision. However, relatively little research on factors that influence adolescents to resolve pregnancies through adoption have been conducted to date (Donnelly and Voydanoff, 1991).

3.5 Benefits of adoption

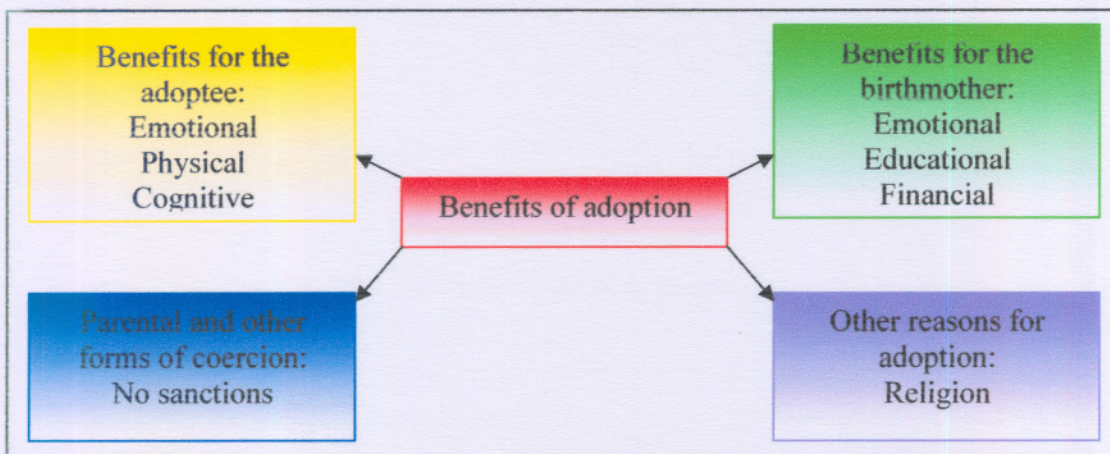


Figure 3.3: The benefits of adoption for the birthmother and adoptee

Each of these will be discussed individually.

3.5.1 Benefits of adoption for the birthmother

Many adolescent mothers cannot afford to raise a child and therefore have the choice of adoption or abortion (Christensen and Rosen, 1996). According to Novick (2001) early unmarried parenthood is generally tied to reduced educational achievement, marginal income and welfare dependence. This influences both the health of the mother and the child. If the mother however chooses to relinquish the child, she can complete her education and have fewer expenses. Adoption is thus both beneficial for the mother and the child.

Teenage mothers who choose adoption have the following benefits (McLaughlin, Manninen and Wings, 1988:6; Stolley, 1993:26):

- ✓ continued higher educational aspirations;
- ✓ more likely to finish school;
- ✓ less likely to live in poverty and receive public assistance than mothers who keep their children;
- ✓ delay marriage longer and are more likely to marry eventually;
- ✓ more likely to be employed 12 months after the birth and less likely to repeat out-of-wedlock pregnancy; and
- ✓ no more likely to suffer negative psychological consequences, such as depression, than are mothers who rear children as single parents.

3.5.2 Benefits of adoption for the child being adopted

According to Fagan (1996:5), adoption increases the emotional, physical and cognitive capacities of the children who are adopted:

- ✓ Adolescents who were adopted at birth are more likely, than children born into intact families, to live with two parents in a middle class family.
- ✓ Adopted children score higher than their middle class counterparts of single parents on indicators of school performance, social competency, optimism and volunteerism. This may be due to parental support from two parents.

- ✓ Adopted adolescents generally are less depressed than children of single parents and less involved in alcohol abuse, vandalism, group fighting, police trouble, acts of violence and theft.
- ✓ Adopted adolescents score higher than children of single parents on self-esteem, confidence in their own judgment, self-directedness, positive view of others, and feelings of security within families (Marquis and Detweiler, 1985:1054).
- ✓ On health measures, adopted children and children of intact families share similarly high scores, and both those groups score significantly higher than children raised by single parents.
- ✓ Adopted children do well at school.
- ✓ Compared with the general child population, children placed with adoptive couples are better off economically. Their parents are better educated and older than the parents of other children.
- ✓ Adoptive parents are less likely to divorce.

3.5.3 Immunity from parental and other forms of coercion

Kelly (1999) stated that during 1965 and 1972, pregnant teens were expelled from schools, and out of wedlock pregnancies could result in dismissal from work. Educators and other influential people thus forced pregnant learners to leave school. Learners or mothers were thus encouraged not to fall pregnant as the consequences were severe if birthmothers were not married. Parents and other influential people at times coerced pregnant adolescents to have their babies adopted. They believed that this would give them a better future. By agreeing, birthmothers faced less conflict.

3.5.4 Other reasons for adoption

Religious beliefs can motivate adoption. Abortion is not seen as an alternative for some young mothers as they see it as murder and against their religious beliefs. According to Donnelly and Voydanoff (1991:165), premarital pregnant adolescents are more likely to resolve their pregnancies by giving birth than abortion, if they have firm religious beliefs.

The adolescent's perception of what others would expect her to do may also have some influence on her decision making (Allender, 2002: 413).

3.6. Mothers who are more likely to choose adoption

According to Fagan (1996:3) birthmothers who place their babies up for adoption are more likely to have well educated mothers, are still at school, have never worked, and are older. Mothers who give birth to a daughter are also more likely to give up a daughter than a son for adoption (Bachrach *et al.* 1992:27). In many cultures boys are seen as an investment since they will one day be the provider for a family.

3.7. The impact of adoption on the adolescent mother

Adoption impacts on all areas of the birthmother's life. The meta-approach, as discussed in paragraph 2.2 will be used as framework to discuss this impact.

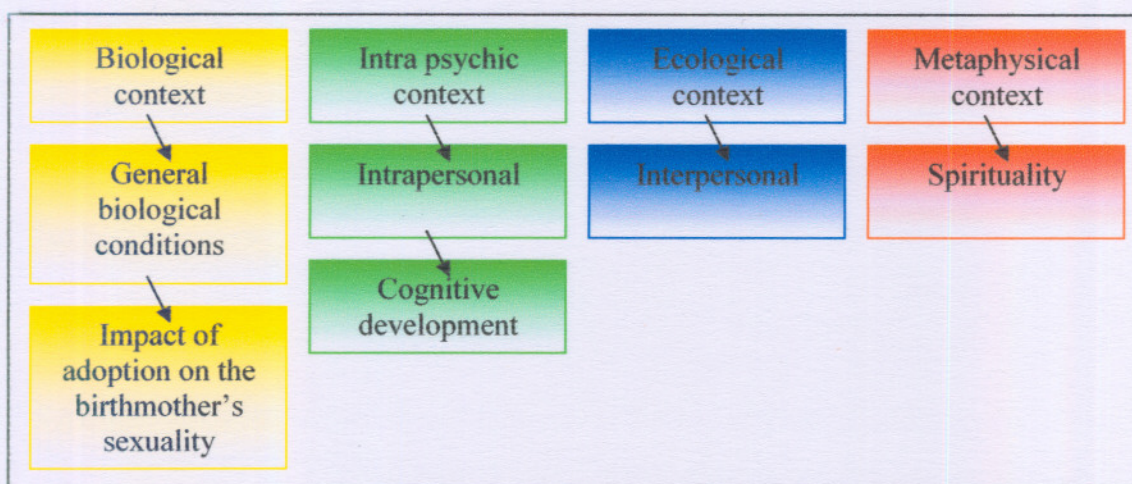


Figure 3.4: Metaphysical context and the impact of adoption on the birthmother

Each of these contexts that influence the birthmother will be discussed individually.

3.7.1 Biological context

The biological context was described in Chapter 2 as physiological development, physical development and general functioning.

3.7.1.1 General biological conditions

After giving birth to a child, the mothers' body has to accept the changes that took place during pregnancy. Her physical body changed to carry the baby and then again to give birth. Pregnancy and childbirth are seen as ways that women suffer for certain biological conditions (Senior and Viveash, 1998:139). Adolescents who fall pregnant should be referred to a practitioner who can provide physical monitoring and care as well as emotional and developmental support (Allender, 2002:634).

3.7.1.2 Impact of adoption on the birthmother's sexuality

Sexuality education for adolescents in general is very important. Hence unwanted pregnancies, HIV Aids and sexually transmitted diseases can be reduced (Gouws and Kruger, 1996:130). Another unwanted pregnancy can thus be prevented if the adolescent abstains from sexual interaction or uses some form of contraceptive. According to Christensen and Rosen (1996), effective sex education can decrease sexual activity and increase contraceptive use amongst those already sexually active. Sexuality education is used as a means to prevent repeated adolescent pregnancies. Most women who have consented to either adoption or abortion in a study done by Phoenix (1991:97), knew which contraceptive methods were available, and many had used contraceptives at some time. Women who have had abortions are thoroughly instructed at the clinic in contraceptive use. Homes for unmarried mothers also give information as well as social workers (SA Cares for Life, 2004). This decreases their chances of becoming pregnant again, unless planned. Some adolescent birthmothers may even feel that they learned from the experience and may choose not to have sex again unless they are married or are able to bear the consequences of raising a child.

Becoming pregnant in her early sexual experience, is a heart breaking trauma for an adolescent. She may go through a post traumatic stress reaction in her later relationships, associating sex with loss, shame and loss of control (Shiffler, 1991).

Up to 71% of birthmothers who marry find that their earlier birth experience affects their marital interaction with problems such as commitments, allegiance and heightened jealousy (Shiffler, 1991).

3.7.2 Intra psychic context

There are various factors which impact intra psychically. These include:

3.7.2.1 Intrapersonal relationships

Most birthmothers place the child up for adoption out of love, because they believe it to be the best thing for their children. Most of them find bittersweet satisfaction in knowing they have done the right thing by giving their children life and by placing them with sound families where they can enjoy the best prospects for a full and healthy life (Mathewes-Green, 1994). Adoption causes intrapersonal conflict.

According to Sachdev (2001) 95 percent of birthmothers report grief and loss after they have signed their consent to adoption, and two-thirds continue to experience these feelings 5 to 15 years after relinquishment. Woolfson (1995) stated that the birthmother confronts issues such as loss, guilt, suffering and finding meaning amidst difficult circumstances. The process of adapting to adoption starts at the discovery of pregnancy and continues indefinitely. On the day of the baby's birth the mother is besieged by all-consuming fear, grief, relief, pain, numbness, and humiliation (Smith, 1995). The birthmother continues to grieve until she has accepted the reality of the adoption.

The birthmother's maelstrom is fuelled by the following factors:

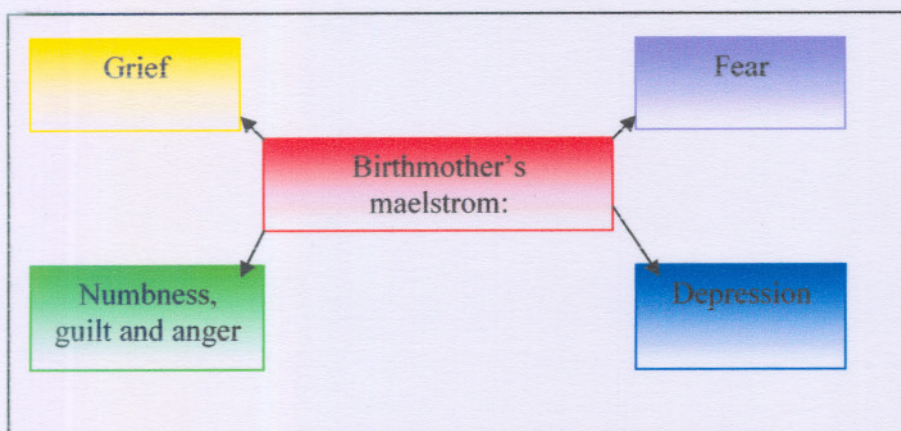


Figure 3.5: Factors impacting emotionally on the birthmother

✓ Fear

Fear is an emotional state in the presence or anticipation of a dangerous or harmful stimulus. It is characterized by an internal, subjective experience of extreme agitation (Reber and Reber, 2001:270).

Fear expressed by the birthmothers range from and extends to the fear that the (Begleiter, 1983):

- ✓ adoptee will never know of his adoptive status;
- ✓ adoptee has suffered negative feelings and had other problems related to his adoption;
- ✓ adoptee has hateful and angry feelings toward his birthmother. Birthmothers often question how they will cope with this if contact occurs, although one birthmother recently stated she would prefer to hear negative feelings voiced directly rather than never have the opportunity to meet the adoptee face to face;
- ✓ adoptee will believe his birthmother did not want him, and never know she did and still cares and continues to be concerned about his progress and welfare;
- ✓ adoptive parents have told the adoptee lies, such as "your mother is dead", or painted a very bleak picture of his natural parents;
- ✓ adoptee is dead or fears for his welfare should his parents die while he is still dependent;
- ✓ child relinquished for adoption was not placed and instead grew up in an institution; and
- ✓ adoptee will not search, despite his desire, because of his adoptive parents' opposition or because he feels they will be really hurt if he searched.

✓ Grief

Part of the birthmother's process of moving on is grieving. The grieving process entails that the person accepts that the baby will not return, works through the feelings of loss, anger or whatever feeling is associated with the loss, learns to live in the environment without the baby and then lastly moves on with life.

According to De Jongh van Arkel (2003:293) one does not easily get over the reality of a great loss. Equilibrium and relief only come after the person is willing to accept the pain. To recover, requires firstly intellectual acceptance of the loss, secondly emotional acceptance and thirdly,

modifying one's model of oneself and the outside world so that it fits the new reality (Parkes and Weiss, 1982:155).

The following social and psychological factors were identified by De Simone in Kelly (1999) as contributing to unresolved grief among birthmothers:

- ✓ absence of social recognition regarding the loss;
- ✓ perceived absence of social support from family and friends;
- ✓ lack of opportunity to express feelings about the relinquishment;
- ✓ uncertainty over the loss due to the continued existence of the child;
- ✓ feelings of guilt and shame regarding the decision to relinquish;
- ✓ perception of coercion by family, friends, or professionals to relinquish the child; and
- ✓ involvement in search behaviour.

With an adoption, there are no standard grieving processes or approved rituals to help birthparents cope. According to Smith (1995) when someone dies, there are rituals; when you change jobs and go to another, there are different rituals. However, when a mother lets her child be adopted there is no ritual and the adoption is often not spoken about as it is not always socially acceptable. This makes it harder for the birthmother to come to terms with her grief.

All birthparents who choose adoption must deal with grief. Many are sad about not being able to raise or have a relationship with their child. Some have said that they eventually adjusted to the loss of the child, but that the pain and grief lasted a very long time. Others have said that life was *never* the same after placing the child. Birthparents' whole lives are affected (Betzen, 2004).

Advice given by Smith (1995) on how to deal with these matters is as follows:

- ✓ going to counselling;
- ✓ talking with supportive family members or friends;
- ✓ attending birthparent support group meetings;
- ✓ writing their feelings down in a story or poem;
- ✓ writing letters, even if they are not sent, to their child; and
- ✓ holding a private ceremony each year on their child's birthday.

Counselling will help birthmothers to deal with the intrapersonal impact of their decision. However, from the above it can be generally accepted that the intrapersonal impact is lengthy and painful.

✓ **Numbness, guilt and anger**

Many birthmothers cope by becoming numb or denying the importance of what they went through. This helps them deal with the hurt they are experiencing. Some birthmothers become angry, either at their parents, their partner, the adoption agency, or "society". They may act out, steal, lie, stay out late, quit school, or get involved with a bad crowd. Or they turn their anger inward and become depressed. Some birthmothers get stuck in this phase for a long time, moving from denial to anger to depression over and over again (Smith, 1995).

The majority of women in a study done by Condon (1986) reported no diminution of their sadness, anger and guilt over the considerable number of years which had elapsed since their relinquishment. A significant number actually reported an intensification of these feelings, especially anger.

The birthmother experiences a lot of anger towards different people. She is angry at:

- ✓ her helplessness;
- ✓ the officialdom that represents the power to decide what happens to her baby, a power she is without;
- ✓ all those known and unknown persons who could not and would not rescue her;
- ✓ her prolific body;
- ✓ her parents and friends;
- ✓ the "unfairness" that allows the man involved freedom from the experience she must endure and integrate;
- ✓ the adoptive parents, for they have all she needs;
- ✓ the world that elevates motherhood to sanctity but fails her as a mother;
- ✓ her discovery that "approved of and supported motherhood" is very rigidly defined and excludes her; and
- ✓ her baby whom she feels is defined as unwanted unless the baby is removed (Rynearson, 1982).

The birthmother may experience numbness for many years and only become angry after her lost baby is grown up and the specific persons involved are far distant or dead in her present life.

✓ Depression

Feelings of sadness or depression at the time of relinquishment were rated on average by birthmothers as intense and "the most intense ever experienced" (Grob-Whiting, 2004).

Major risk factors for depression include (Long, 1997):

- ✓ a personal or family history of depressive disorder;
- ✓ prior suicide attempts;
- ✓ female gender;
- ✓ lack of social support;
- ✓ stressful life events; and
- ✓ current substance abuse.

For birthmothers, three of the above apply without even further consideration of past or current history. Birthmothers are female, faced with the stress of birth and adoption and frequently lack social support during their crisis time. These factors elevate the risk of depression.

3.7.2.2 Cognitive functioning

Vygotsky's theory is centred on the notion that cognitive development takes place through social relationships. Youngsters are engaged in constructing shared meaning through their interaction with parents, peers, educators and others in their social context. Youths cannot be separated from their social context (Donald *et al.* 2002:70). According to Piaget during adolescence, learners engage in more abstract thinking. They are thus able to think about hypothetical or 'if ... then' situations and to develop a philosophy about abstract concepts such as right and wrong (Donald *et al.* 2002:68). The birthmother's thinking influences her decision to have her baby adopted. Abstract thinking helps the birthmother to determine the consequences of adoption versus abortion or single-parent families. She can think about and plan her future, with and without the child.

Once the decision is made, however, and the adoption carried out, it can impact on cognitive functioning:

- ✓ After the adoption, the birthmother can get stuck on or obsess about the 'what if' questions. This can cause her to lose focus of other important things in life and of acceptance.
- ✓ Obsession with abstract hypotheses concerning her child can cause concentration to wane and in so doing result in scholastic problems (Theron, 2004).

3.7.3 Ecological context

There are various ecological factors that have an impact. These include:

3.7.3.1 Interpersonal factors

Interpersonal relationships refer to relationships with parents, siblings, educators and other adults, a peer group and friends.

Unlike young children, adolescents no longer accept without question whatever their educators or significant others tell them. Their critical attitude and understanding of what is and what can be often leads to depression, dissatisfaction and rebellion against authority and school rules (Gouws and Kruger 1996:116). The decision to give a child up for adoption has the potential to compound such dissatisfaction and rebellion. Furthermore, such a decision might cause relationships with significant others (including educators) to change and cause the birthmother to feel rejected.

During adolescence relationships with peers are highly significant for self-concept formation and for self-actualization. Vrey in Gouws and Kruger (1996:117) states that the parent home as sanctuary is functionally replaced by the peer group as a basis for safety. Individual friendships take up a lot of the adolescent's time. Many things are discussed with them, which are not discussed with parents and even the peer group. Adolescents choosing adoption often receive little support or understanding from their peers or their families (Donnelly and Voydanoff, 1991). The birthmothers' self-concept is not the same after adoption as is discussed under the grieving

process. The birthmother may feel that her peers do not understand what she is going through and thus feels unsupported. In the long run, this may influence her self-concept.

Smith (1995) points out that unresolved grief can cause problems in a number of areas. It can affect romantic relationships, parent-child relationships, the ability to work effectively, and a person's feelings of happiness and usefulness.

According to Barber, Axinn and Thornton (1999) mothers with unwanted births have lower quality relationships with all their children, not only with the child that resulted from an unwanted birth. These lower quality relationships translate into socialization problems for the children, affecting their development, self-esteem, personality, educational and occupational accomplishment, mental health and marital relationships. When they choose adoption, their relationships with their children, siblings, parents, friends, and society at large are influenced by a range of psychological and behavioural patterns which may include unresolved grief, intrusive thoughts, avoidance, guilt, remorse depression, low self-esteem and self destructive behaviour (Kelly, 1999).

Jones (1993) reports that many birthparents report difficulty in their romantic relationships following placing a child up for adoption. She also points out that many women report success in their second marriage due to forgiving themselves.

Birthparents usually feel powerless and experience a lack of monetary and emotional support. Many of them feel socially stigmatized (Smith, 1995). This influences their individual relationships. The experience of someone who previously understood them, but who seems not to understand any more coupled with guilt feelings, may lead birthmothers to feel rejected by even their individual, close friends.

3.7.4 Metaphysical context

3.7.4.1 Impact on spirituality

The relinquishing of a child has a profound spiritual impact on birthmothers in its cultural-religious milieu (Shiffler, 1991). Many birthmothers had gone to their churches for advice and support during pregnancy and were counselled in a manner they now regard as anti-ethical to

Christianity as it is shame based. The results were feelings of demoralization, lowered self-esteem and estrangement from the church (Shiffler, 1991).

Many of the birthmothers feel rage for not being warned about the severity of the depression that follows the relinquishment. Others feel deceived by their social workers who promised them that the baby would be placed with parents of a particular denomination and later found out that it did not happen (Shiffler, 1991).

Compensation used by some committed Christian birthmothers after relinquishing a child for adoption is to:

- ✓ become super-spiritual;
- ✓ devote herself to church work;
- ✓ judge herself and others; as well as
- ✓ avow a strong belief in the power of prayer (Shiffler, 1991).

In spite of all this she may have grave doubts and feel spiritually frozen because her primary request to God is to know the whereabouts and welfare of her child. If she is reunited with a child, she feels close to God, like her original encounter with God (Shiffler, 1991).

3.8. Conclusion

Relinquishing a child for adoption improves the life chances of the birthmother and the adoptee. Adoption also increases the emotional, physical and cognitive capacities of the adoptee. This leads to some motivation for adolescents who choose to let their babies be adopted. Nevertheless, adoption remains an emotionally wrenching experience.

The next chapter will focus on the research design.

CHAPTER 4

RESEARCH DESIGN AND METHOD

"First seek to understand, then to be understood" - S. R. Covey (2003:237)

OVERVIEW CHAPTER 4

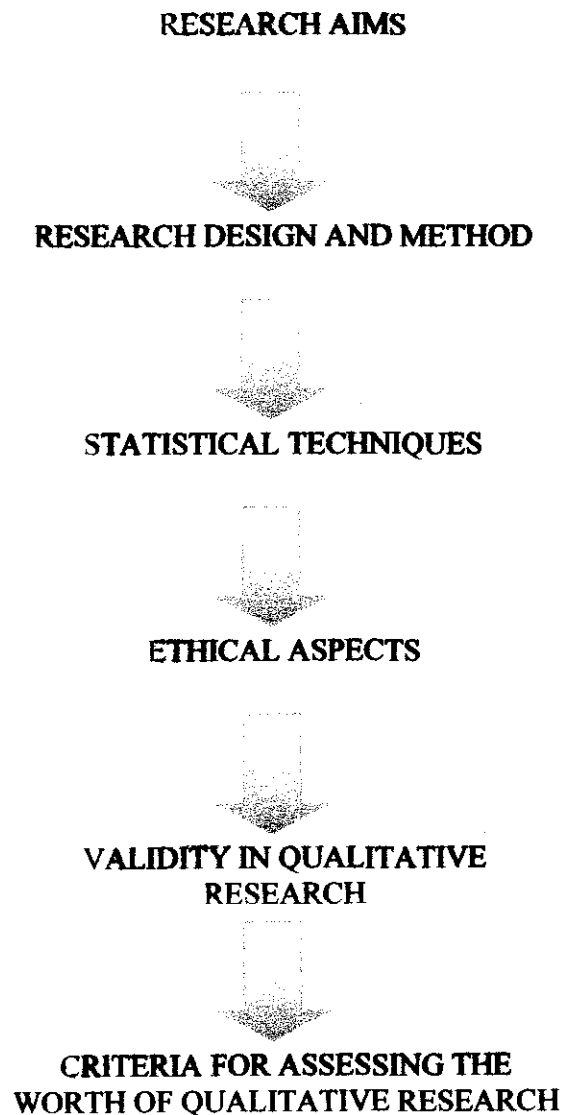


Figure 4.1: Overview of Chapter 4

4.1. Introduction

The aim of this chapter is to delineate the entire research process by means of a concentrated holistic description. Since only five phenomenological interviews are used as a method of data collection, the findings regarding the influence that relinquishing a child for adoption has on the adolescent birthmother will be limited.

In this chapter relevant information regarding qualitative research designs and methods used to investigate the influence of relinquishing a child for adoption has on the adolescent birthmother, in all contexts of existence (i.e. biological, ecological, intra-psychic and metaphysical) will be presented.

4.2. Research aims

The overall aim of the study is to indicate what influence giving a child up for adoption has on the adolescent birthmother's holistic school performance.

4.2.1 Sub aims

The above aim can be operationalised into the following sub-aims:

- ✓ to conduct a literature study on the impact of adoption on the adolescent birthmother's school performance by looking at the adoption process and factors impacting school performance;
- ✓ to conduct interviews with adolescent birthmothers who have given their babies up for adoption to gain phenomenological data on the impact of adoption on the adolescent birthmother's school performance; and
- ✓ to write guidelines for Life Orientation educators to help birthmothers who have chosen adoption and returned to school, adjust to school following the adoption.

4.3 Research design and method

Since this research deals with the impact of adoption on the school performance of adolescent birthmothers, a qualitative research design is considered to be the most appropriate, especially

because it is aimed at gaining in-depth insight into the impact of adoption on the adolescent birthmother's school performance.

To motivate the choice of the research design, a brief description of qualitative research designs and the investigation group is given.

4.3.1 Qualitative research

According to Schurink (1995:11) qualitative researchers have different perspectives, based on their world views of what scientific truths entail. Although the term qualitative research refers to several approaches, they have two common factors:

- ✓ qualitative research focuses on phenomena that occur in natural settings; and
- ✓ qualitative research studies phenomena occurring in natural settings in all their complexity.

The qualitative approach requires that the researcher should interpret the real world from the perspective of the subjects of his investigation (Mouton and Marais, 1994:205). The aim of qualitative research is to understand social life and the meaning that people attach to everyday life (Schurink, 1995:11). The investigator usually acts as an observer in the setting that is being studied (McMillan, 2000:53). Nothing is unimportant for a qualitative researcher.

Qualitative research has both positive and negative attributes. A summary of the advantages and disadvantages is presented below.

The advantages include:

- ✓ qualitative research provides the opportunity to uncover the nature of people's actions, experiences and perspectives (Glaser and Peshkin, 1992:231; Leedy and Ormrod, 2005:133);
- ✓ qualitative research gives the researcher the opportunity to refine and recognize his questions as his understanding of the phenomena increases (Glaser and Peshkin, 1992:231);

- ✓ qualitative research is useful when one needs to supplement, validate, explain, illuminate or reinterpret qualitative data (Miles and Huberman, 1994:338);
- ✓ qualitative research allows the agenda to be set by the interviewee (Mouton and Marais, 1994:205);
- ✓ qualitative research is primarily concerned with the interviewee's view and opinions on a range of phenomena that relate to past and present events (Mouton and Marais, 1994:205);
- ✓ behaviour is studied as it occurs naturally (Leedy and Ormrod, 2005:133);
- ✓ information is obtained directly from the source (McMillan, 2000:53);
- ✓ qualitative research is not limited to a single ultimate truth, but there may be multiple perspectives (Leedy and Ormrod, 2005:133);
- ✓ data are presented in the form of words (Neuman, 1994; Denzin and Lincoln, 1994 in Schurink 2001:243);
- ✓ the unit of analysis is holistic. The whole is always more than the sum of its parts (Neuman, 1994; Denzin and Lincoln, 1994 in Schurink 2001:243);
- ✓ the research design is flexible and unique and evolves throughout the research process (Neuman, 1994; Denzin and Lincoln, 1994 in Schurink 2001:243); and
- ✓ concepts are in the form of themes, motifs and categories (Neuman, 1994; Denzin and Lincoln, 1994 in Schurink 2001:243).

The disadvantages include:

- ✓ qualitative research is only an interpretation of the real world and is thus subjective (Mouton and Marais, 1994:205; Schurink, 2001:242); and
- ✓ the themes, motifs and categories are not rigid and differ from one setting to the next, thus making it hard to compare research (Neuman, 1994; Denzin and Lincoln, 1994 in Schurink 2001:243).

4.3.2 The literature study

A literature study formed the foundation for this research and was conducted on the following:

- ✓ the meta-approach as it was used as the conceptual framework;
- ✓ factors that impact negatively on school performance;

- ✓ adolescence;
- ✓ adolescent pregnancies;
- ✓ the adoption process in South Africa;
- ✓ rates of adolescent pregnancies;
- ✓ benefits of adoption;
- ✓ impact of adoption on the birthmother; and
- ✓ coping with adoption.

4.3.3 The empirical study

The empirical study is conducted to provide deeper meaning. Within this study the empirical study was primarily conducted to obtain in-depth information about how having a child adopted influences the school performance of an adolescent birthmother. The empirical study was necessitated as very little information is currently available, especially in South Africa. Information available does not give clear guidelines for Life Orientation educators to help these learners in schools.

The empirical study can be summarized as follows:

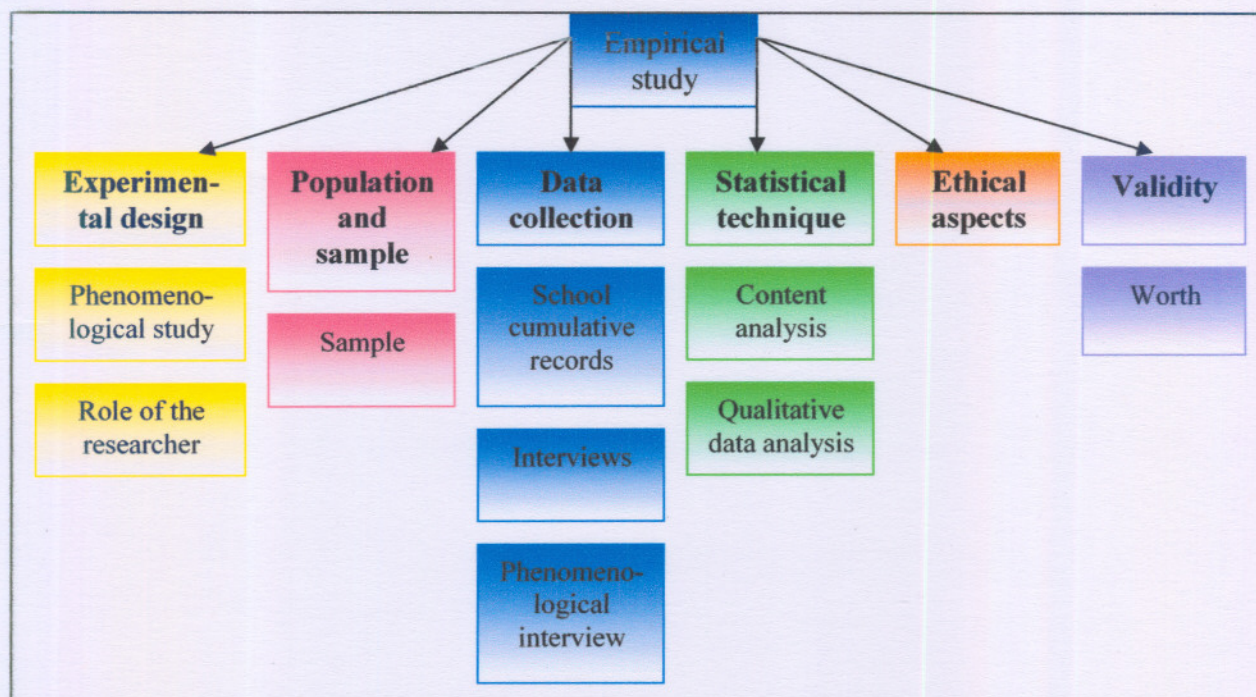


Figure 4.2: Overview of the empirical study

4.3.3.1 Experimental design

The experimental design refers to the method that is going to be used to obtain the information needed for the study. In this study the choice of experimental design is a phenomenological study.

✓ Phenomenological study

A phenomenological study is a study that attempts to understand people's perceptions, perspectives and understandings of a phenomenon or particular situation (Leedy and Ormrod 2005:139; De Vos and Fouche, 2001:80). It is thus their understanding, interpretation and meaning creating in a given situation that the researcher wants to understand. The data are systematically collected and analyzed within a specific context (De Vos and Fouche, 2001:80).

✓ The role of the researcher

Glaser and Peshkin (1992:35) state that the researcher needs to clearly define her roles. There are, however, predispositions that all qualitative researchers should carry with them into the research situation. De Vos (2001:256) states that the researcher that does fieldwork does not leave the field unscathed. He compares qualitative fieldwork to a journey into a minefield where there are potential moral and ethical pitfalls. The qualities include:

a) Use of self

One of the amazing strengths of qualitative research is the ability to use all the senses to undertake the research act (Janesick, 1998:61). Sight, hearing, touch, smell, and taste often must be used to collect data. The use of self is a key factor in phenomenological research since the researcher is able to react to the responses of the interviewees, and thus provide the interview with great depth. The deliberate use of empathy and intuition also assists the researcher by allowing her to become closely involved with the experience of the interviewee. It helps the researcher to remain open to the perceptions of the interviewee, rather than to give own meaning to their experiences (Burn & Grove, 1993:80).

b) Communication techniques of the researcher

The researcher must be ever-conscious of her verbal and non-verbal behaviour, because the researcher is more than usually attuned to her behaviour and its impact on the interviewee (Kirsten, 2001:213). Important communication techniques that are employed by the researcher include:

- ✓ reflecting which is the ability to restate, paraphrase or reformulate what the client has just said in new, different words (Mazabow, 2003:33). Reflecting reassures the participant that she has been understood and demonstrates empathy when the researcher communicates with the adolescent about how she understands the adolescent birthmother's perceptions, experiences and feelings (Nelson-Jones, 1993:40);
- ✓ paraphrasing, that entails reformulating a statement that was made (Nelson-Jones, 1993:40);
- ✓ summarizing, that is feedback given to the learner on the general content of the interview on part thereof (Nelson-Jones, 1993:53);
- ✓ a request for clarification (Nelson-Jones, 1993:4), which is an attempt to obtain greater clarity when the adolescent birthmother's response is vague, confused, or unclear; and
- ✓ a request for examples and descriptions (Nelson-Jones, 1993:51).

c) Creation of a relaxed atmosphere

The climate of the interview should contribute to the interviewee's feelings of comfort and ease (Thompson and Rudolph, 1992:32). Effective researchers are skilled in creating a warm and relaxed atmosphere and in establishing rapport with their interviewees. It is important that before the interview the researcher checks whether she is free from distracting worries and thoughts and ready to devote her attention to the adolescent birthmother, because adolescents are extremely sensitive to adult moods and can recognize insincerity or lack of concern quickly (Thompson and Rudolph, 1992:34).

4.3.3.2 Population and sample

The investigation population consists of adolescent birthmothers who have given up their babies for adoption and returned to school. Due to potential logistical and practical problems, it was

decided to focus the research and to limit it to one province. Therefore the sample targeted for this study will be adolescent birthmothers from different schools in the Vaal Triangle who have given up their babies for adoption and returned to school. The reason for targeting the Vaal Triangle was that the researcher works as a counsellor at a school in the Vaal Triangle. The choice of adolescent birthmothers who have given up their babies for adoption and returned to school in the Vaal Triangle therefore makes this a convenience sample.

✓ Sample

Sampling theory is a technical accounting device to rationalize the collection of information, to choose in an appropriate way the restricted set of objects, persons, events and so forth from which the actual information will be drawn (Bless and Higson-Smith, 2000:83). It is possible to reach accurate conclusions by examining only a portion of the total group.

According to Sandelowski (1999:79) in qualitative research numbers are unimportant in ensuring the adequacy of a sampling strategy. There are no computations or power analysis to determine a priori the minimum number and kinds of sampling units required, but there are factors, including the aim of sampling and type of purposive sampling and research method employed, which researchers can consider in ascertaining whether enough data has been collected.

For phenomenological studies, Gall, Borg and Gall (1996: 201) do not stipulate sample size but do specify that participants should be selected according to their direct experience of the phenomenon being studied. Creswell in Leedy and Ormrod (2005:139) states that the typical sample size is from 5 to 25 individuals, all of whom have had direct experiences with the phenomenon. For the purposes of this research, five case studies will be used to gain as much information as possible about the influence adoption has on the adolescent birthmother.

The sample was purposive and convenient. All participants reside in the Vaal Triangle as explained in paragraph 1.5. The sample was purposive in that the following criteria were adhered to:

Participants

- (a) must be a birth mother who relinquished her child for adoption;
- (b) must have gone back to school after relinquishing her child; and

- (c) must still have school performance records available.

Due to practical reasons, finding five participants was quite a task. Many participants who agreed to participate withdrew due to anticipated emotional discomfort that they wished to avoid. Agencies through which the learners work to have their babies adopted are not willing to give out names of adolescent birthmothers for ethical reasons. Reasons given by some included that birthmothers would like to move on with their lives without looking back. For other organizations, it was all about confidentiality.

4.3.3.3 Data collection

School cumulative records and interviews will be used to obtain information.

✓ School cumulative records

The cumulative school records (i.e. report cards) will be obtained from the learners' schools. These records will be used to provide comparative data of the birthmother's school performance. Such records will be used to verify the perceptions of the birthmothers concerning their academic achievement prior to and following adoption.

✓ Interviews

Interviews are forms of data collection where questions are asked orally to the interviewee and the interviewee's responses are recorded (McMillan, 2000:165). Interviews are data collection tools with great flexibility which can be adapted to suite a wide variety of research questions. Interviews promote understanding of the closed world of individuals, families, organizations, institutes and communities (Schurink, 1995:11). The researcher can however be prone to subjectivity and lose the research objectives set out beforehand.

Within a phenomenological study the interview is often very unstructured. A typical interview looks more like an informal conversation, with the participants doing most of the talking and the researcher most of the listening (Leedy and Ormrod, 2005:139). In this study the researcher will conduct semi-structured interviews with five adolescent birthmothers who gave up their children for adoption. Semi-structured interviews will be used to facilitate conformity of data being

assimilated. This type of interview involves the implementation of a number of predetermined semi-structured questions and/or special topics. The semi-structured questions are typically asked for each interview. The interviewer can probe for more information this way (Berg, 1998:6). The phenomenological interviews will be taped and transcribed verbatim. A copy of the semi-structured interview is included in the addendum.

Interviews have both advantages and disadvantages.

Interviews hold the following advantages:

- ✓ interviews are helpful in exploratory research;
- ✓ interviews allow for the discovery of new aspects of the problem by exploring the explanations supplied by the interviewee;
- ✓ interviews help with comparing the responses of large numbers of participants;
- ✓ interviews can be administered to respondents who cannot read or write;
- ✓ interviews help overcome misunderstandings of words or questions; and
- ✓ interviewers can ensure that all the questions have been considered, even the difficult ones (Bless and Higson-Smith, 2000:107).

Interviews hold the following disadvantages:

- ✓ interviews may introduce many biases if the interviewer is not competent;
- ✓ interviews are time consuming and expensive;
- ✓ the interviewer can affect the respondents answer; and
- ✓ the presence of an interviewer can be perceived as a handicap for anonymity and the respect of the private life of the interviewee (Bless and Higson-Smith, 2000:108).

The specific type of interview used in this research was a semi-structured phenomenological interview.

✓ **Phenomenological interview**

An in-depth phenomenological interview will be used to obtain information from the birthmothers.

According to Reber and Reber (2001:532) the word phenomenon is derived from Greek, meaning an appearance, or that which appears. It further refers to a philosophical doctrine that advocates the scientific study of immediate experience. The focus is on events, occurrences, happenings, etc. as one experiences them, with a minimum of regard for the external, physical reality and for the so-called scientific biases of the natural sciences. This thus gives the interviewer the opportunity to gain a better understanding by looking at the content of what is said as well as the circumstances that lead up to the event and the way that the person is still experiencing things. It is an attempt at the direct description of experience, without any consideration about its origins or causes (Omery, 1983:50). This gives a clearer understanding of the human experience.

It also entails phenomenological reduction on the part of the interviewer, which involves delaying judgment as to the existence or non-existence of the content of an experience (Kvale, 1983:182). The absence of judgment is an attempt to place the common sense and scientific foreknowledge about the phenomena into parentheses in order to arrive at the essence of the phenomena. In other words, judgment is suspended – the experience is taken at face value. This way all preconceived ideas are eliminated. It thus gives the researcher the opportunity to observe all facets of the phenomenon objectively (Burn and Grove, 1993:80).

Phenomenological research depends almost exclusively on lengthy interviews with people who had direct experience with the phenomenon being studied (Leedy and Ormrod, 2005:139). The actual implementation of the study is in both the hands of the participants and the researcher. The interview is unstructured in which the researcher and the participant both work to arrive at the heart of the matter (Tesch, 1994 in Leedy and Ormrod, 2005:139). The researcher listens attentively as participants describe their everyday experiences related to the phenomena. The researcher is alert to subtle, yet meaningful cues given by the participants.

4.3.3.4 Statistical techniques

In this study, statistical techniques refer to the processes of content analysis and data analysis.

✓ Content analysis

Reber and Reber (2001:152) describe content analysis as a general term covering a variety of methods for analyzing a discussion or message for varying themes, ideas, emotions, opinions, etc.

According to Leedy and Ormrod (2005:142) content analysis is the detailed and systematic examination of the contents of a particular body of material for the purpose of identifying patterns, themes or biases. The following steps are typical to content analysis (Leedy and Ormrod, 2005:142):

1. the specific body of material is identified by the researcher to be studied;
2. the characteristics or qualities to be examined are defined by the researcher in precise, concrete terms;
3. if the material contains complex or lengthy items, the material to be analyzed is broken down into small manageable segments and analyzed separately; and
4. the research material is scrutinized for instances of each characteristic or quality defined in step 2. The frequency of each characteristic found, is noted and helps to interpret the data on the problem being investigated.

✓ **The method of qualitative data analysis**

From a phenomenological point of view, data analysis consists of four steps that are followed after the interviews are transcribed:

1. identifying statements that relate to the topic – relevant information is broken up into small segments that each reflects a single, specific thought;
2. group segments into “meaning units” – the segments are grouped into categories that reflect the various aspects of the phenomenon as it is experienced;
3. seek divergent perspectives – the various ways participants experience the phenomena are looked at and considered by the researcher; and
4. construction of a composite – the various meanings that were identified are used to develop an overall description of the phenomenon (Creswell, 1998 in Leedy and Ormrod, 2005:140).

In this research, the nature of the semi-structured questions asked during the interviews was determined by the paradigmatic perspective of the researcher and that of the study.

The construction of questions was done from the framework of the four contexts of human existence, namely:

- ✓ Biological context;
- ✓ Ecological context;
- ✓ Intra psychic context; and
- ✓ Metaphysical context.

Within these four contexts, respondents' responses were grouped in terms of common and divergent themes, biases and patterns.

4.3.3.5 Ethical aspects

Informed consent of all the participants in the sample was gained. The researcher asked them if they would participate in the research study and explained what it would entail. The researcher also indicated to them that anonymity would be ensured in all documentation pertaining to this study and that they may choose a pseudonym. The participants (in this case the birthmothers who relinquished their children for adoption) signed a consent form. Participants' parents also signed a consent form giving them permission to participate in the study.

All information obtained from the participants is in safe keeping. The tapes on which the interviews are recorded are safely stored.

4.3.3.6 Validity in qualitative research

Validity is concerned with just how accurately the observable measures actually represent the concept in question or whether, in fact, they represent something else. Leedy and Omrod (2005:100) refer to methods to ensure validity in qualitative research. They are:

- ✓ extensive time in the field – the researcher spends time observing a particular phenomenon, forming tentative hypotheses and continues to look for more evidence;
- ✓ negative case analysis – the researcher looks for cases that contradict the existing hypotheses;

- ✓ thick description – the situation is described in sufficiently rich detail that readers can draw their conclusions from the data presented;
- ✓ feedback from others – the opinion of colleagues in the field is sought to determine whether they agree or disagree about whether the conclusions and interpretations drawn from the data is valid; and
- ✓ respondent validation – the conclusions, derived from the research are taken back to the participants who are asked whether they make sense based on the participants' own experience.

In this study, the above was attempted as follows:

Validity component	Description of use
Extensive time in the field	Five birthmothers were interviewed and the interviews were lengthy. When two of the original five withdrew, the researcher spent time in the field recruiting a further two participants.
Negative case analysis	The researcher did not specifically set out to find a case which contradicted the others, but by using multiple participants from various walks of life, this possibility was catered for. Not all the participants were unanimous in their responses.
Thick description	The data was carefully analyzed and common themes were sought. Content analysis is considered as a reliable method of proving validity (Leedy and Ormrod, 2005:142) and is known to be a "detailed" (Leedy and Ormrod, 2005: 154) examination. In so doing it provides a rich description of each participant's experience of the phenomenon.
Feedback from others	The researcher was in constant consultation with her study leader and with educators in the field. She spent lengthy time in intersubjective discussion.
Respondent validation	Following the content analysis, the researcher shared the conclusions drawn from the study with the participants to find out from them whether they agree with the conclusions.

Table 4.1: Validity as used in the research

4.3.3.7 Criteria for assessing the worth of qualitative research

Qualitative research should be judged according to the nine general criteria as set out in Leedy and Ormrod (2005:154):

Criterion	Definition of criterion	Application in this study
Purposefulness	The research question coerces the method used to collect and analyse data.	The information needed to answer the research question will best be answered by a phenomenological study.
Explicitness of assumptions and biases	The researcher identifies and communicates any assumptions, beliefs, values, and biases that may influence data collection and interpretation.	As a convenience sample, the researcher did not have any biases or assumptions about them.
Rigor	Rigorous, precise, and thorough methods to collect, record and analyze data are used by the researcher. The researcher also takes steps necessary to remain objective throughout the project.	As the researcher had no contact with the participants prior to or after the interviews, it minimizes the chances of the researcher becoming subjective.
Open-mindedness	The willingness of the researcher to modify hypotheses and interpretations when newly acquired data conflict with previously collected data.	Since no study on this was previously undertaken, all information is regarded as new. The researcher's study leader helped with intersubjective discussion in order to interpret newly acquired information.
Completeness	The study in all its complexity is depicted by the researcher.	The researcher spent a lot of time in the field to understand all the nuances of the phenomenon. She documented the interviews in detail.
Coherence	Multiple data sources are interpreted to give one consistent picture.	Literature sources and empirical data are used in conjunction to arrive at coherent interpretation. The data yield consistent findings in such a way that the researcher can present a portrait of the findings.
Persuasiveness	The presentation of logical arguments to conclude that one interpretation outweighed the others.	Logical arguments are presented by the researcher and the weight of the evidence suggests that adoption impacts on school performance.

Consensus	Other individuals who agree with the researcher's interpretation and explanations.	By means of qualitative analysis, followed by intersubjective discussion with the study leader, consensus was sought. Examination of this dissertation is a further means of seeking consensus.
Usefulness	Conclusions are yielded that promote better understanding of the phenomenon, enabling more accurate predictions about future events, or lead to interventions that enhances the quality of life.	Guidelines will be written to help support the birthmothers who relinquished their babies for adoption and returned to school.

Table 4.2: Criteria for assessing the worth of qualitative research

A strong effort will be made to establish a strong chain of evidence among the research questions, methodology, raw data and findings to strengthen the validity of the study. This will be done by describing and explaining the research process in order to allow the readers to follow the researcher's reasoning to enable the readers to determine whether the conclusions offered are logical or not.

4.8 Conclusion

In this chapter a concentrated holistic description of the entire research process, including the qualitative research design and the qualitative means of data collection and data analysis as well as the measure to be implemented to ensure the trustworthiness of the research, was provided. The chapter can be summarized as follows:

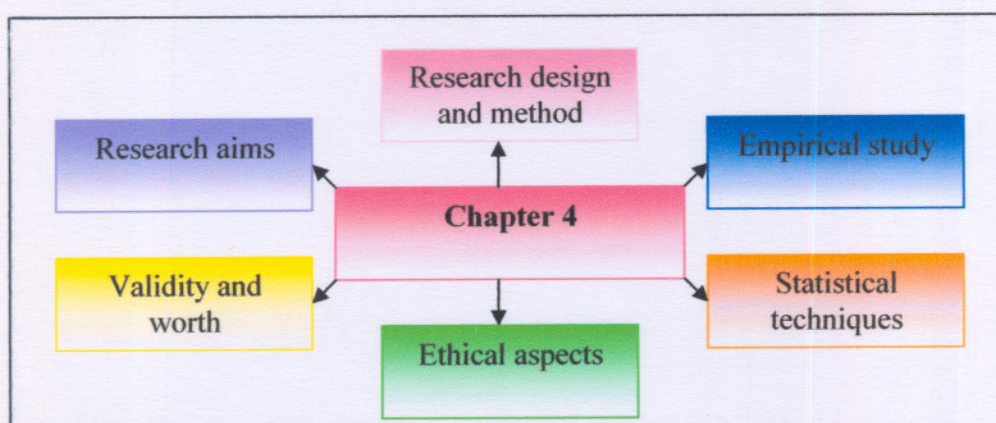


Figure 4.3: Summary of Chapter 4

CHAPTER 5

REPORT ON THE PHENOMENOLOGICAL STUDY

"Those who bear the mark of pain are never really free, for they owe a debt to the ones who still suffer." - Albert Schweitzer (Caplan and Lang, 1995:102)

OVERVIEW OF CHAPTER 5

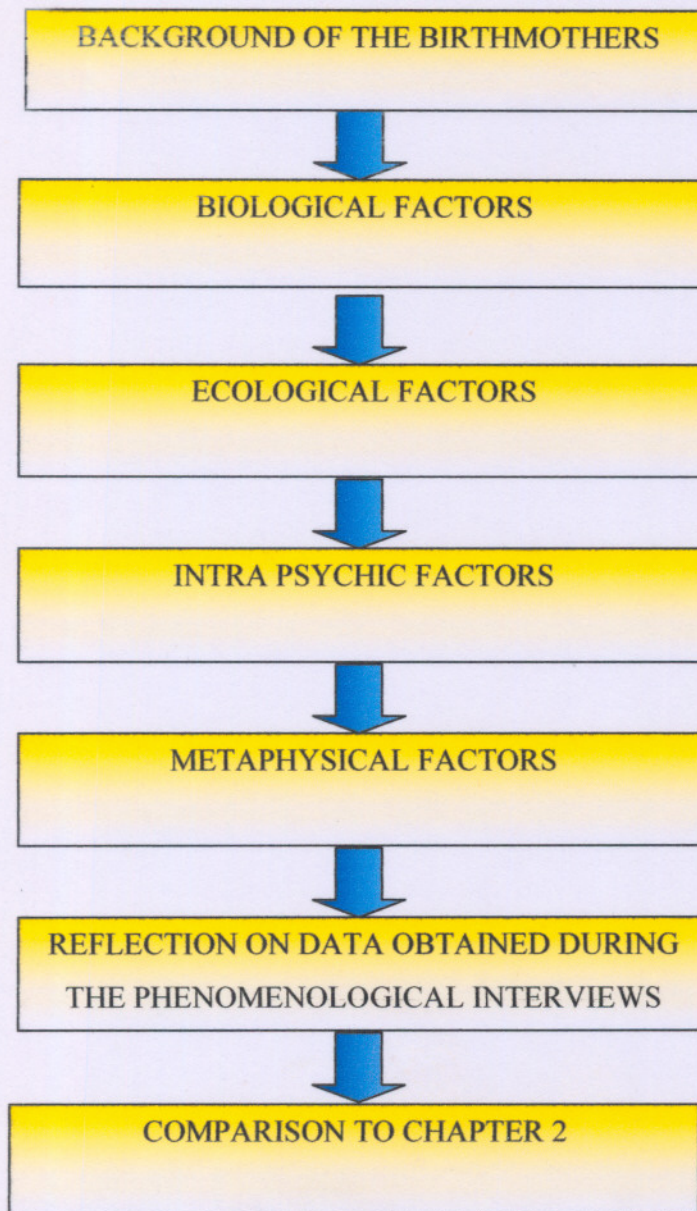


Figure 5.1: Overview of Chapter 5

5.1 Introduction to the study

In this chapter, the researcher will provide the reader with an overview of the process of the phenomenological study and discuss the results from the study. As was explained in Chapter Four, five subjects who relinquished their babies for adoption were interviewed. The interview questions have been grouped according to Jordaan and Jordaan's Meta-approach and will be discussed group by group.

5.2 Background of the birthmothers

Five birthmothers were interviewed. Background information gathered can be summarized as follows:

	Age at the adoption	School performance before the adoption	School performance after the adoption	Home circumstances
Birthmother 1	14	Above average	Below average	Adopted
Birthmother 2	17	Above average	Average	Good
Birthmother 3	16	Above average	Below average	Poor
Birthmother 4	17	Above average	Above average	Good
Birthmother 5	14	Above average	Above average	Poor

Table 5.1: Summary of Birthmothers' information

Birthmother 1 herself is adopted. During her pregnancy she visited her biological mother and was later sent to attend Hospital School in Pretoria during her pregnancy. After giving birth, she ran away. She is currently staying with people that took her in only after she relinquished her baby for adoption. The time of the adoption coincided with her transition from primary school to high school. Her school performance was above average prior to her pregnancy and the adoption, but dropped to below average following this incident in her life.

Birthmother 2 had a calm home environment and good relationships with her family. She also performed at an above average level at school prior to becoming pregnant. After the adoption, her school performance deteriorated to become average.

Birthmother 3 had a very unhappy home environment. Her parents were constantly fighting and economically they were struggling. She felt that she had to do everything on her own to get

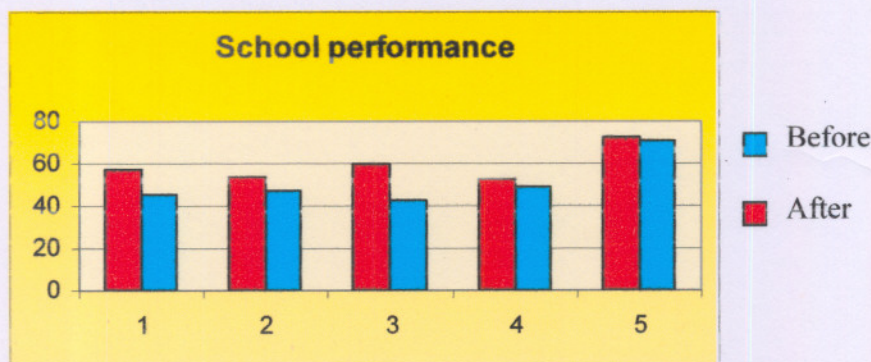
somewhere in life. Her school performance was above average prior to her pregnancy and the adoption, but dropped to below average following this incident in her life.

Birthmother 4 has a happy home environment, where there is enough money to buy what is necessary. She also reported that she received a lot of support during the pregnancy as well as after the adoption. Money did, however, play a role in her decision to have the baby adopted. There is very little discrepancy between her pre- and post-adoption school performance.

Birthmother 5 described her home environment as hectic. Furthermore, they are struggling financially. They experience a shortage of money from time to time. She is currently in grade 9 and does not feel part of the school that she is attending. There is almost no discrepancy between her pre- and post-adoption school performance.

5.2.1 School performance as indicated with report cards

The report cards obtained from the birthmothers are included in Addendum D and can be presented graphically as follows:



Graph 5.1: School performance

5.2.2 General conclusion

As can be seen from the graph, all the birthmothers' school performance did deteriorate after they relinquished their babies for adoption and returned to school.

- ✓ Birthmother 1's school performance deteriorated by 11.6%;
- ✓ Birthmother 2's school performance deteriorated by 6.1%;

- ✓ Birthmother 3's school performance deteriorated by 17.2%;
- ✓ Birthmother 4's school performance deteriorated by 4%; and
- ✓ Birthmother 5's school performance deteriorated by 1.7%.

All of the birthmothers experienced some form of deterioration in marks after they relinquished their babies for adoption. To determine what influenced the deterioration in school performance, in-depth interviews were conducted with each of the birthmothers. The information gained from the interviews will be discussed in the next few paragraphs.

5.3 Biological factors

5.3.1 Introduction

In the interview, questions relating to biological factors were grouped together and consist of questions 46 to 56. These questions focus on the:

- ✓ age of the birthmother;
- ✓ health and physical status before, during and after the birth of the child;
- ✓ sexually transmitted diseases; and
- ✓ contraceptives.

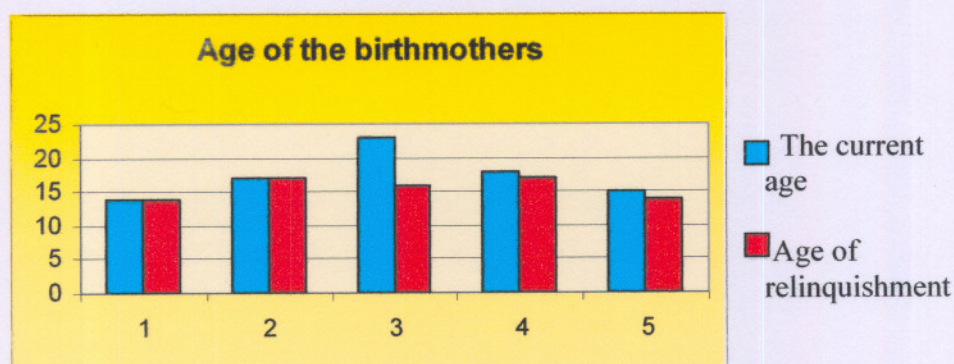
5.3.2 Age of the birthmother

Questions 46 and 47 dealt with the age of the birthmother when she relinquished her baby for adoption and her current age. The questions are:

- 46) How old are you now?

47) How old were you when you gave birth and had your baby adopted?

Graphic summary of responses:



Graph 5.2: Questions 46 and 47: The ages of the birthmothers

Analysis of responses to Questions 46 and 47

- ✓ Birthmother 1 reported that she was 14 years old when she relinquished her baby for adoption and she is currently 14 years old.
- ✓ Birthmother 2 was 17 years old when she relinquished her baby for adoption and is currently 17 years old.
- ✓ Birthmother 3 was 16 years old when she relinquished her baby for adoption but is currently 23 years old.
- ✓ Birthmother 4 was 17 when she relinquished her baby for adoption and she is now 18 years old.
- ✓ Birthmother 5 was 14 years old when she relinquished her baby for adoption and is currently 15 years old.

Therefore the ages of the birthmothers determined that:

- ✓ The mean age of the birthmothers who participated in this study were 17 years and 5 months old, with the youngest being 14 and the oldest being 23.
- ✓ The average age for a birthmother to have given birth was 15 years and 7 months.
- ✓ 80% (4 out of 5) of the birthmothers had their babies relinquished for adoption in the year preceding this interview. Only 20% (1 out of 5) was relinquished for adoption more than 7 years ago.

Impact on school performance

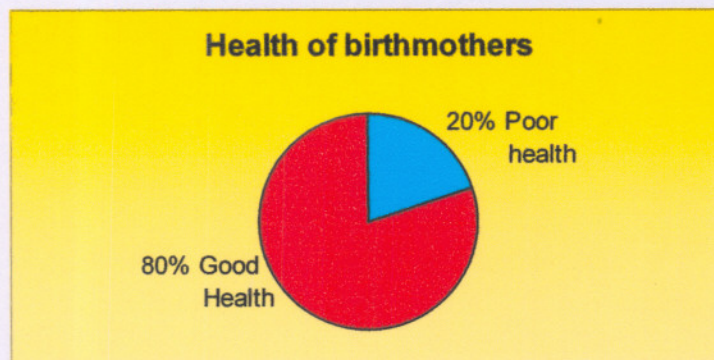
In this sample the birthmothers were the correct age for their grades. This information was found on their report cards. Their age was thus not a reason for their negative school performance that they encountered after they relinquished their babies for adoption.

5.3.3 Health and physical status

Questions 48, 49 and 50 deal with the health and physical status of the birthmothers before they became pregnant, during the pregnancy and after they relinquished their babies for adoption. The questions are:

- 48) Describe your health and physical status before you became pregnant?
- 49) Describe your health and physical status while you were pregnant?
- 50) How is your health and physical status now after the birth?

Graphic summary of responses:



Graph 5.3: Questions 48 to 50: Health of birthmothers

Analysis of responses to Questions 48, 49 and 50

- ✓ 80% (4 out of 5) of the birthmothers reported that they were healthy before they became pregnant. Birthmother 1 reported that she became ill quite frequently before she became pregnant.

- ✓ 80% (4 out of 5) of birthmothers reported to be of good health now after the birth and the adoption. Birthmother 1 is still frequently ill. However she avoids doctors, as she is afraid of needles.

The birthmothers' health before and after the adoption did not change drastically, as the one that was ill a lot before the time still becomes ill frequently.

Impact on school performance

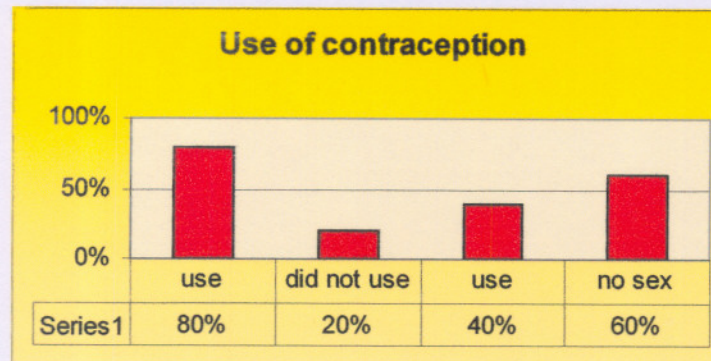
Being ill impacts negatively on school performance, as learners cannot concentrate and might be absent from school frequently. The one birthmother might have performed even better before the adoption if she was less frequently ill. Her report card shows that she was absent 26 days in a period of 7 months, excluding holidays. Generally, illness cannot explain poorer school performance in the case of this sample as all of the birthmothers, despite the majority experience of good health, experienced some deterioration of their school performance and not just the birthmother who reported that she is frequently ill.

5.3.4 Sexually transmitted diseases and contraception

Questions 52, 55 and 56 deal with sexually transmitted diseases and the use of contraception prior to and after the birthmothers relinquished their babies for adoption. The questions are:

- | |
|--|
| <p>52) Have you ever contracted any sexual diseases?</p> <p>55) Did you use contraception prior to your pregnancy?</p> <p>56) What methods are you using now to prevent another pregnancy?</p> |
|--|

Graphic summary of responses:



Graph 5.4: Questions 55 and 56: Use of contraception

Analysis of responses to Questions 52, 55 and 56

None of the birthmothers interviewed have contracted any sexually transmitted diseases.

- ✓ 80%(4 out of 5) of the birthmothers used contraceptives before becoming pregnant. Only one birthmother did not use contraception before she became pregnant;
- ✓ 40% (2 out of 5) of the birthmothers are now using contraceptives; and
- ✓ the remaining 60% (3 out of 5) are abstaining from sexual intercourse.

Impact on school performance

Because none of the mothers in this sample report STDs, STDs cannot be a factor contributing to poorer school performance within this sample. After the adoption, all birthmothers interviewed, reported that they have learned something about the use of contraceptives or have chosen to abstain. The use of contraceptives decreases the chances of becoming pregnant. Pregnancy does impact negatively on school performance as can be seen in paragraph 2.3.3.2. In this sample, the experience of a pregnancy out of wedlock might have been so traumatic that poor performance was the result. Biological factors associated with pregnancy and sexual activity is, however, not contributory factors to poor school performance for this sample.

5.3.5 General conclusion

Biological factors cannot account for poorer post-adoption school performance in this sample. The interviewees do not perceive biological factors to be obstacles.

5.4 Ecological factors

5.4.1 Introduction

In the interview, questions relating to ecological factors were grouped together and consist of the first 39 questions. The questions focus on the:

- ✓ home environment, before, during and after the adoption;
- ✓ relationships with the mother, father, siblings and teachers¹ before, during and after the adoption;
- ✓ support from parents, teachers, friends, family and the father of the baby, before, during and after the adoption;
- ✓ general information about school attendance, environment and performance; and
- ✓ economic status of the birthmother.

The impact on school performance will be discussed where applicable, after every group of questions.

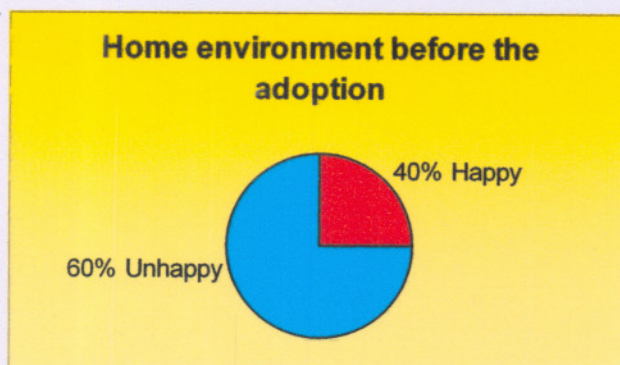
5.4.2 Home environment

Questions 1, 2 and 3 deal with birthmother's home environment before she became pregnant, once she decided on adoption and after the adoption. The questions are:

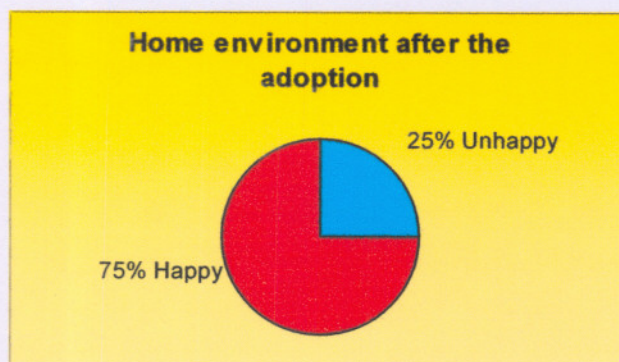
- 1) Describe your home environment before you became pregnant.
- 2) Describe your home environment after you became pregnant and decided on adoption.
- 3) Describe your home environment after the adoption.

¹ The term "teacher" is used throughout Chapter 5 as it the term used during the interviews. The term does refer to educators.

Graphic summary of responses:



Graph 5.5: Question 1. Home environment of the birthmothers before they became pregnant



Graph 5.6: Question 3. Home environment of the birthmother after the adoption

Analysis of responses to Questions 1, 2 and 3

- ✓ 40% (2 out of 5) of the birthmothers interviewed reported that their home environment was good before they became pregnant. The other three (Birthmothers 1, 3 and 5) described their home environment as hard, lonely, hectic and scary.
- ✓ 100% (5 out of 5) of the birthmothers reported that their home environment became worse after they fell pregnant. Birthmother 1 ran away from the parents that she was staying with at that stage to her aunt. Birthmother 5 said that her home environment did improve after a while.
- ✓ 75% (3 out of 4) of the birthmothers viewed their home environment as better after the adoption although one stated that her home environment is still not as it was. Birthmother 1 is now staying with new foster parents and she views her current home

environment as better as before. She was not included in the questions and therefore it was calculated out of 4.

Impact on school performance

Most of the birthmothers' home environment improved after the adoption, but was negative during the pregnancy and adoption. Birthmother 4's home environment improved after the adoption while the home environment of Birthmother 5 is also reported to be back to normal (although normal is equivalent to a hectic state according to the birthmother). Of significance is the fact that these two birthmothers' school performance deteriorated the least. Birthmothers 1 and 3 felt that their home environment is still lousy after the adoption. This could explain their poorer results. It would seem therefore that the home environment of the birthmother following the adoption does impact on school performance.

5.4.3 Relationships with important others

Questions 4 to 16 deal with the birthmother's relationship with her mother, father, siblings, and teachers, before, during and after the adoption. The questions are:

- 4) Describe your relationship with your mother before you became pregnant.
- 5) Describe your relationship with your mother while you were pregnant and decided on the adoption.
- 6) Describe your relationship with your mother after the adoption.
- 7) Describe your relationship with your other siblings before you became pregnant.
- 8) Describe your relationship with your other siblings while you were pregnant and decided on adoption.
- 9) Describe your relationship with your other siblings after the adoption.
- 10) Describe your relationship with your father before you became pregnant.
- 11) Describe your relationship with your father while you were pregnant and when you decided on adoption.
- 12) Describe your relationship with your father after the adoption.
- 13) Describe your relationship with your teachers before you became pregnant.
- 14) Describe your relationship with your teachers while you were pregnant and decided on adoption.
- 15) Describe your relationship with your teachers after the adoption.

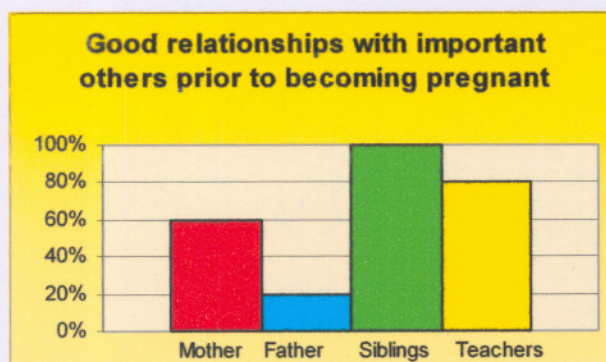
Summative table of responses:

Responses indicated with √ refer to a good relationship while responses indicated with x indicated a bad relationship. The responses are tabulated as follow:

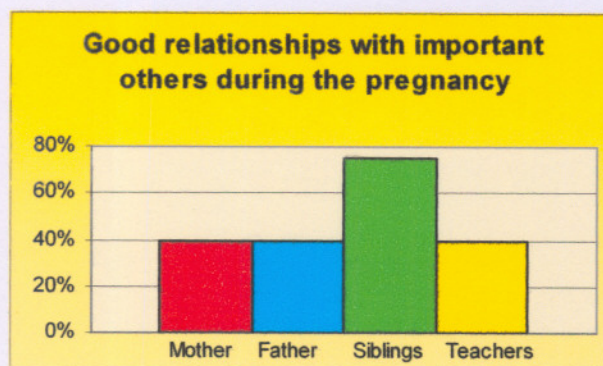
	Before	During	After	Before	During	After	Before	During	After	Before	During	After
Birthmother 1	x	x	√	x	√	x				√	√	√
Birthmother 2	√	x	x	x	√	√	√	x	√	√	x	√
Birthmother 3	x	x	√	x	x	x	√	√	√	x	x	√
Birthmother 4	√	√	√	√	x	x	√	√	√	√	x	x
Birthmother 5	√	√	x	x	x	x	√	√	√	√	√	√
	Mother			Father			Siblings			Teachers		

Table 5.2: Responses of birthmothers about their relationships with important others

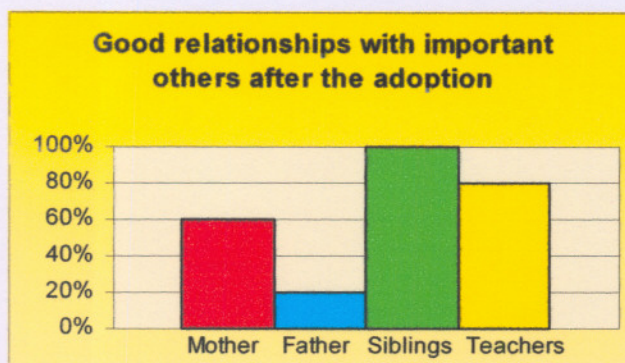
Graphic summary



Graph 5.7: Questions 4, 7, 10 and 13. Good relationships with important others prior to becoming pregnant



Graph 5.8: Questions 5, 8, 11 and 14. Good relationships with important others during the pregnancy



Graph 5.9: Questions 6, 9, 12 and 15. Good relationships with important others after the adoption

Analysis of responses to Questions 4 to 15

Birthmother 1 did not have any siblings therefore the total for siblings was calculated for four responses only instead of five.

Relationships before pregnancy:

- ✓ 60% (3 out of 5) of birthmothers reported that they had a good relationship with their mother before they became pregnant;
- ✓ 20% (1 out of 5) of the birthmothers had good relationships with their fathers before they became pregnant;
- ✓ 100% (4 out of 4) of the birthmothers had good relationships with their siblings before they became pregnant; and

- ✓ 80% (4 out of 5) of birthmothers reported that they had good relationships with their teachers before they became pregnant.

Relationships while pregnant:

- ✓ 40% (2 out of 5) of the birthmothers reported a good relationship with their mothers while they were pregnant. These same birthmothers had a good relationship with their mothers prior to their pregnancy. Birthmother 2 had a good relationship with her mother prior to becoming pregnant but not during the pregnancy or after the adoption. The remaining two birthmothers who did not receive support prior to the pregnancy were still not supported by their mothers;
- ✓ 40% (2 out of 5) of the birthmothers had a good relationship with their fathers while they were pregnant. Both of these relationships were new as these birthmothers did not have a relationship with their fathers prior to becoming pregnant. Birthmother 4 who had a relationship with her father before she became pregnant did not have a relationship with her father during the pregnancy. The remaining two birthmothers did not have a good relationship with their fathers during pregnancy;
- ✓ 75% (3 out of 4) of the birthmothers had a good relationship with their siblings while they were pregnant. Only Birthmother 2 felt that her relationship with her siblings deteriorated; and
- ✓ 40% (2 out of 5) of the birthmothers had a good relationship with their teachers while they were pregnant. Birthmothers 1 and 5 had good relationships with their teachers during the pregnancy as well as prior to the pregnancy. Birthmothers 2 and 4 who used to have a good relationship before the pregnancy did not have a good relationship with their teachers while they were pregnant. The fifth birthmother did not receive educator support prior to or during her pregnancy.

Relationships after the adoption:

- ✓ 60% (3 out of 5) of birthmothers reported that they had a good relationship with their mothers after the adoption. Birthmothers 1 and 3 who did not have a good relationship before with their mothers have good relationships now after the adoption. Birthmother 2 who had a good relationship before becoming pregnant does not have a good relationship

now after the adoption while Birthmother 4 had a good relationship throughout the pregnancy, adoption and now after the adoption.

- ✓ 20% (1 out of 5) of the birthmothers had good relationships with their fathers after the adoption. The same birthmother who had a good relationship with her father during the pregnancy, had a good relationship after the adoption;
- ✓ 100% (4 out of 4) of the birthmothers had good relationships with their siblings after the adoption; and
- ✓ 80% (4 out of 5) of birthmothers reported that they had good relationships with their teachers after the adoption. Birthmother 3 who did not have a good relationship with her teachers before or during the pregnancy has a good relationship now after the adoption. Birthmother 4 who used to have a good relationship with her teachers before she became pregnant still don't have a good relationship with her teachers, even after the adoption.

Impact on school performance

With the exception of paternal relationships, the above data suggests that generally the relationships that these birthmothers have with significant others after the adoption are supportive and positive. In this study, all the birthmothers indicated that they felt encouraged to perform well at school due to their relationships. The birthmothers' relationships with important others can thus not be given as a reason for poor school performance after they returned to school.

Some of the birthmothers lost relationships with important others when they became pregnant that were not restored. This might impact negatively on their school performance now after the adoption. Other birthmothers built relationships that they did not have before the time that can influence them to perform better. Relationships could thus have impacted positively on the birthmothers as well as negatively.

What supports the hypothesis that inadequate relationships to significant others cannot account for poorer school performance, is that birthmother 4 and birthmother 5 indicated that significant relationships had declined. Nevertheless, the deterioration in their scholastic performance is minimal. By the same token, birthmothers 1, 2 and 3 refer to various improved relationships, but their performance deteriorated markedly.

5.4.4 Support received from significant others

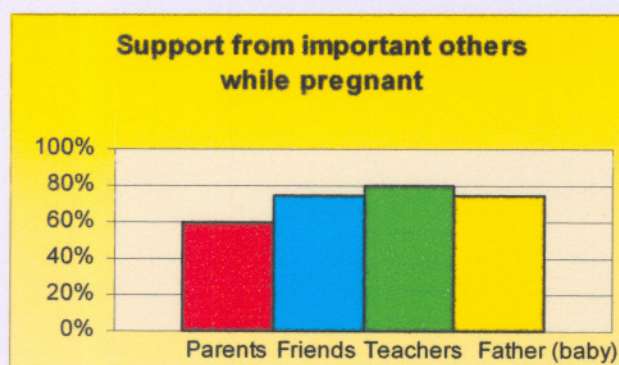
- 17) What kind of support did you get from your parents, teachers, friends, the father of the baby and other family during the pregnancy?
- 18) What kind of support did you get from your parents, teachers, friends, the father of the baby and other family once you decided on adoption?
- 19) What kind of support did you get from your parents, teachers, friends, the father of the baby and other family after the adoption?

Summative table of responses:

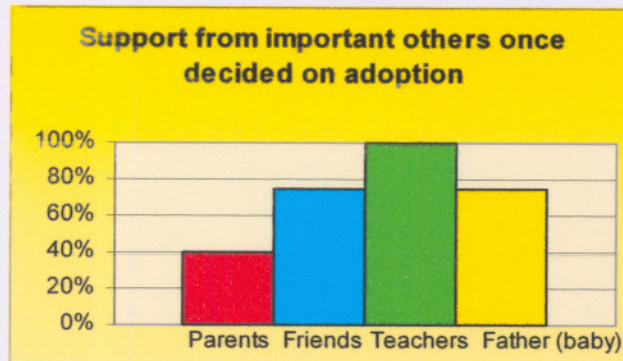
	While	Decided	After	While	Decided	After	While	Decided	After	While	Decided	After
Birthmother 1	x	x	✓				✓	✓	x			
Birthmother 2	✓	✓	✓	x	✓	✓	✓	✓	✓	x	x	x
Birthmother 3	x	x	x	✓	x	✓	x	✓	✓	✓	✓	✓
Birthmother 4	✓	x	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Birthmother 5	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Parents			Friends			Teachers			Father of the baby		

Table 5.3: Responses of birthmothers about support received from important others

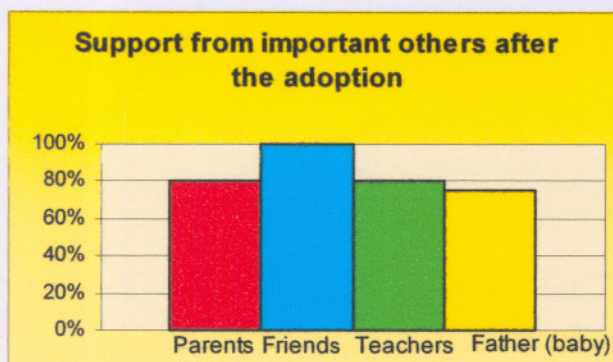
Graphic summary



Graph 5.10: Question 17. Support received from important others while pregnant



Graph 5.11: Question 18. Support received from important others once decided on adoption



Graph 5.12: Question 19. Support received from important others after the adoption

Analysis of responses to Questions 17, 18 and 19

Birthmother 1 did not have any friends as she moved from one town to another and the father of the baby does not know about the baby. The total for friends and father of the baby were therefore calculated for four responses only instead of five.

Support received while pregnant:

- ✓ 60% (3 out of 5) of birthmothers reported that they received support from their families while they were pregnant (Birthmothers 2, 4 and 5);
- ✓ 75% (3 out of 4) of the birthmothers received support from their friends while they were pregnant (Birthmothers 3, 4 and 5);

- ✓ 80% (4 out of 5) of the birthmothers received support from their teachers while they were pregnant (Birthmothers 1, 2, 4 and 5); and
- ✓ 100% (4 out of 4) of birthmothers reported that they received good support from the father of the baby while they were pregnant. The question was not asked to the birthmother who did not tell the father of the baby about the baby.

Support once decided on adoption:

- ✓ 40% (2 out of 5) of birthmothers reported that they received support from their families once they decided on adoption. Only Birthmother 4 who was supported by her family before she became pregnant was not supported any more. The other birthmothers who were supported still received support and those who did not receive support still did not get support despite their decision;
- ✓ 75% (3 out of 4) of the birthmothers received support from their friends once they decided on adoption. Birthmother 2 was not supported before she decided to have the adoption but once she decided, she received support from her friends. Birthmother 3 was supported by her friends prior to the decision, but once she decided, they did not support her anymore;
- ✓ 100% (5 out of 5) of the birthmothers received support from their teachers once they decided on adoption; and
- ✓ 75% (3 out of 4) of birthmothers reported that they received good support from the father of the baby once they decided on adoption. Only Birthmother 2 did not receive support from the father of the baby once she decided on adoption.

Support after the adoption:

- ✓ 80% (4 out of 5) of birthmothers reported that they received support from their families after the adoption. All the mothers who supported the birthmothers before they became pregnant supported them afterwards. Birthmother 1 who did not have support prior to becoming pregnant is receiving support now after the adoption;
- ✓ 100% (4 out of 4) of the birthmothers received support from their friends after the adoption. Birthmother 1 did not respond to the question as her friends are new (given her change of schools and relocation) and most of them do not know about the adoption;

- ✓ 80% (4 out of 5) of the birthmothers received support from their teachers after the adoption (Birthmother 1 did not return to the same school after the adoption). Only Birthmother 1 does not feel supported by her teachers; and
- ✓ 75% (3 out of 4) of birthmothers reported that they received good support from the father of the baby after the adoption.

20% of parents, and 25% of friends who supported the birthmothers who became pregnant did not support their decision to have an adoption. Birthmother 1 did not feel supported by her teachers after the adoption although she stated later in the interview that they had given her advice. Birthmother 3 did not feel supported by her parents after the adoption.

Impact on school performance

The above data suggests that generally the support received after the adoption is more than the support given during the adoption, especially from friends and parents. The teachers reported on seem to have been supportive throughout. The support the birthmothers received from important others cannot therefore account for the deterioration in their school performance. These birthmothers are motivated by teachers, friends and family to perform better. Yet they did not perform better in spite of all the support received. What is of significance, is that Birthmothers 4 and 5 who showed the least deterioration in school performance, appear to have received the most consistent support. It could therefore be assumed that when support is inconsistent, school performance may be negatively affected.

5.4.5 The adoption and school work

- 22) What support do you get from your teachers now after the adoption to help you cope at school?
- 23) Is it working for you?
- 24) How would you like them to help you?

Summation of verbatim responses

- ✓ Birthmother 1 was the only one who did not feel that the teachers are supporting her. Her response to the question was: "I just tell them what news there is and then I stand on my own. I stand alone everywhere."
- ✓ Birthmothers 2, 3, 4 and 5 experienced support from the teachers and one birthmother reported that she felt motivated by her teachers.
- ✓ Even though the birthmothers feel supported by their teachers, Birthmother 3 reported that the support did not help her. Birthmother 1 said "I think about it a lot", referring to advice given by the school counsellor, who is also one of her teachers. This contradicts her statement that she does not get support from teachers. The support they feel they receive from their teachers does not help them to do well at school.
- ✓ When the birthmothers were asked how they would like to be supported by the teachers, their responses differed. Birthmother 1 just repeated that she wanted teachers to help her cope and then referred to advice given. Two of the birthmothers said that there is nothing teachers can do but support them, and be there for them but they could not elaborate on how they wanted the teachers to do that. This lack of information about how to support the birthmothers effectively makes supporting them hard. Birthmother 5 said that she would ask teachers for help if she felt she needed to, otherwise she feels that they are reminding her constantly of her decision of which she would like to forget.

Analysis of responses to Questions 22, 23 and 24

- ✓ 80% (4 out of 5) of the birthmothers felt that their teachers did support them when they went back to school. Birthmother 1 stated that she did not feel supported but later did talk about the support she received; and
- ✓ different responses were received from the birthmothers about the support they wanted from their teachers. 60% (3 out of 5) of the birthmothers said that they just want the teachers to be there for them. Birthmother 5 felt that they are trying to support her too much. Birthmother 1 could not articulate what support she needed from them, just that she needed their support.

Impact on school performance

Based on the above data about the support the birthmothers feel they received, the conclusion can be drawn that they did feel supported. Even though they did feel supported after they went back to school, their marks still deteriorated and the support they did receive was not adequate to ensure continued scholastic success. This could perhaps be linked to their inability to articulate precisely what support they need.

5.4.6 School attendance

25) When you became pregnant, which school did you attend?

26) After you gave birth, which school did you attend?

Summation of verbatim responses

From the interviews, conclusions can be drawn to show that all except one did not go back to the same school. Birthmother 1 ran away after she gave birth. She is currently in a different school from the one she attended before the time.

Analysis of responses to Questions 25 and 26

- ✓ 80% (4 out of 5) of the birthmothers went back to the school they attended before they became pregnant. Only Birthmother 1 did not attend the same school she attended before she became pregnant.

Impact on school performance

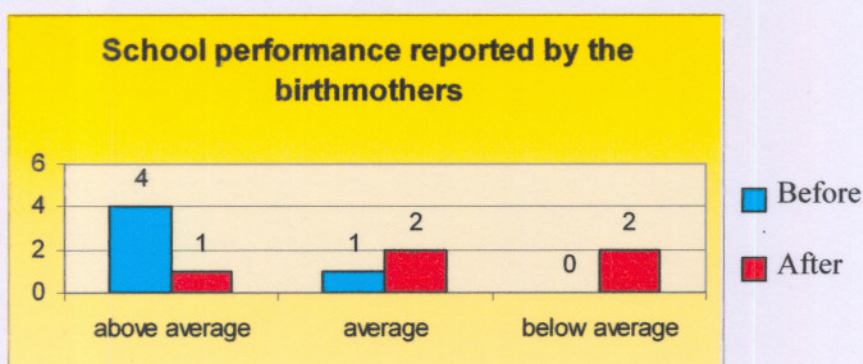
As stated in paragraph 2.3.3.3, if a learner changes from one school to another, the change in schools impacts negatively on the school performance. Birthmother 1 who did change schools reported a drastic drop in performance as can be seen in table 5.1 of this chapter. This might be due to the shift from primary school to high school and can thus not solely be just moving from one school to another.

The other four birthmothers attended the same school after they relinquished their babies for adoption. Only one of them (Birthmother 3) showed a marked decline. The other three birthmother's school performance deteriorated marginally, thus the conclusion can be reached that their deterioration in school performance must be linked to some other reason and cannot necessarily be explained by changing schools or by remaining in the same school.

5.4.7 Birthmothers' view on the impact the adoption had on their school performance

- 35) What was your school performance like before you became pregnant?
 36) Did it change and if yes, how?
 63) How does giving up your baby for adoption influence your school work?

Graphic summary



Graph 5.13: Question 35 and 36. School performance reported by the birthmothers

In the above graph, above average refers to performance that is 3% or more above the average of the class, while average can be seen as ranging between 3% from the average of the class and below average will be more than 3% less than the average of the class.

Analysis of responses to Questions 35, 36 and 63

- ✓ Before the adoption, four of the birthmothers reported that they performed at a level which was above average to the class, and one reported performing at average or class level. After the adoption, only one still reported performing above the average of the class while two of the birthmothers' described their performance as being on par with the

class average. The remaining two were of the opinion that they performed below the class average;

- ✓ all of the birthmothers reported that they performed in the good to above average range at school prior to them becoming pregnant;
- ✓ after the adoption, Birthmothers 1, 2 and 3 reported that their marks changed drastically while Birthmother 4 reported some change and Birthmother 5 reported that her marks were about the same after the adoption; and
- ✓ Birthmother 1 felt that getting her marks up is very hard, especially in certain subjects. Birthmother 2 felt motivated to get her marks up again, Birthmother 4's marks did not change according to her. Looking at the graphic summary given at the beginning of the chapter, Birthmothers 4's school performance hardly deteriorated, which validates her perception.

Impact on school performance

Falling pregnant while still school going and having their babies adopted affected the birthmother's school performance in that their school performances deteriorated. 80% (4 out of 5) of the birthmothers reported some deterioration. When looking at the school records that were accounted for in 5.2, it is clear that all the birthmothers' marks did deteriorate. Of greater significance is that two of the birthmothers rated their performance more poorly than it in fact was, suggesting poor scholastic self-image.

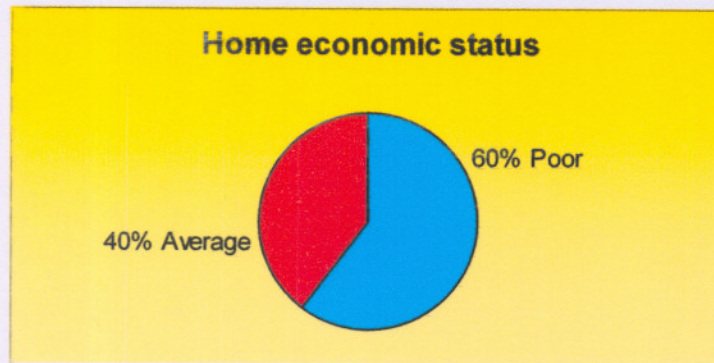
Reasons given for the deterioration by Birthmother 1 was that she struggles to concentrate: "I cannot concentrate. It is hard to sit and concentrate because you try to forget about it at that moment, you want to blank your mind and focus on your school work. You cannot do that, it is hard. It's just every time I tell just go away, go away. That's hard." From this the statement it can be seen that she struggles to concentrate and that not being able to concentrate influences her school work. Birthmother 2 reported that the teachers help her after school because she loses track in class, referring to the work because she also struggles to concentrate. It would seem that the adoption experience sabotages consistent concentration.

5.4.8 Home economic status

38) Describe your home economic status.

39) Did your economical status influence your decision to have your baby adopted?

Graphic summary



Graph 5.14: Question 38. Home economic status

Analysis of responses to Questions 38 and 39

The home economic status of the birthmothers referred to their economic statuses before and during the adoption. Birthmother 1 did answer the questions. She based her answers on her mother's economic status.

Economic status of the birthmothers

- ✓ 60% (3 out of 5) of the birthmothers reported that they are poor. Birthmothers 1, 3 and 5 suffered from financial deprivation at home;
- ✓ 40% (2 out of 5) of the birthmothers said their economic status is average. Birthmothers 2 and 4's households have average incomes.

The economic status' influence on the decision

80% (4 out of 5) of the birthmothers reported that their economic statuses did influence their decision to relinquish their babies for adoption. Only Birthmother 2 said that her home economic status did not influence her decision to relinquish her baby. On the question of whether their economic statuses influenced their decision to relinquish their babies for adoption, Birthmother 1 did not sound too sure about her answer. When she was asked for clarification, she responded that she would have kept him if she was able to provide for him. So indirectly, Birthmother 1's decision was also based on economic status.

Birthmother 1 who at the time of the adoption viewed herself as poor, is now living in a middle income home where there is always food in the house.

Impact on school performance

In chapter 2.3.3.3, economic status was noted to be one of the factors that influenced school performance negatively. The two birthmothers that said that they are poor did perform above average at school before the adoption. Their economic status did thus not influence their school performance prior to the adoption. They may however feel guilty about not being able to support the baby due to economic factors, thus impacting negatively on their school performance.

5.4.9 General conclusion

Ecological factors cannot generally account for poorer post-adoption school performance in this sample. When ecological factors do seem to play a role (e.g. economic status), the factors were true prior to the adoption too when school performance was as yet unaffected.

What does seem to impact is inconsistent support: when birthmothers received fluctuating support, school performance appears to have been negatively affected. Furthermore, it would appear as if the birthmother's home environment following the adoption impacts on her school performance.

5.5 Intra psychic factors

5.5.1 Introduction

In the interview, questions relating to intra psychic factors were grouped together and consist of questions 57 to 81. The questions focus on:

- ✓ how adoption influences the birthmothers' feelings, thoughts and behaviour;
- ✓ why adoption was chosen over abortion;
- ✓ adoption's influence on the future of the birthmother, the adopted child, the family and the father of the child;

- ✓ benefits and disadvantages of adoption for the birthmother, the adopted child and the family;
- ✓ grieving process of the birthmother after relinquishing a child for adoption; and
- ✓ birthmother's view of herself.

The impact on school performance will be discussed where applicable, after every group of questions.

5.5.2 Thoughts, feelings and behaviour

57) How does the adoption influence the way you are feel, think and behave?

Summation of verbatim responses

- ✓ Birthmother 1 reported that she is very emotional. She adds that other people struggle to cope with her being so emotional;
- ✓ Birthmother 2 sees herself as positive and thinks that she did make the correct choice in relinquishing her baby;
- ✓ Birthmother 3 feels that having her baby adopted makes her more sensitive to other people's pain and that she now cares more about children;
- ✓ Birthmother 4 reported that she thinks twice before she does something; and
- ✓ Birthmother 5 said that the adoption changed her entire outlook on life. She also thinks that she is more mature now and thinks twice about everything before she just does something, and sees herself as more responsible.

80% of the birthmothers, every one except Birthmother 1, reported that the adoption had a positive impact on their lives.

Impact on school performance

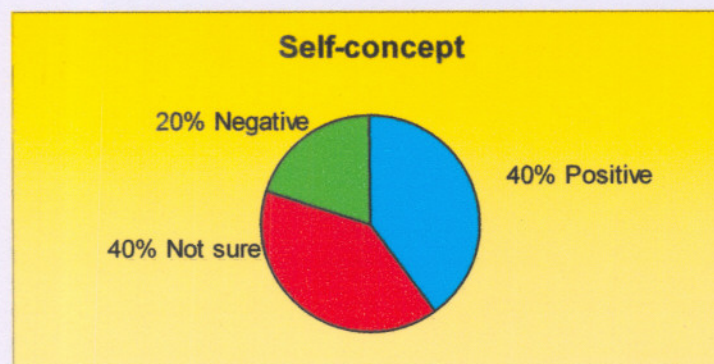
Generally the birthmothers seemed to be content with their decisions about relinquishing their babies for adoption. The experience appears to have made them less impulsive. This positive outlook could influence their school performance positively although their scholastic performance after the adoption does not entirely reflect this positive outlook on life. Birthmothers 2, 4 and 5

show the least deterioration in school performance and they evidence more positive reflections about their decisions to pursue adoption, whereas Birthmothers 1 and 3's responses suggest painful reflections. Thus it would appear that more positive reflections makes it easier for the birthmothers in this sample to cope scholastically, whereas negative reflections stymie school performance.

5.5.3 Birthmothers' view of self

- 58) What do you regard as your weak and strong points in your life?
80) Do you have a positive self-concept?
81) Do you view yourself as emotionally mature?

Graphic summary



Graph 5.15: Questions 80 and 81. Self-concept

Analysis of questions 58, 80 and 81

From the above graph it is clear that the birthmothers in this sample are more inclined towards a negative or poorly-formed self-concept:

- ✓ Birthmothers 3 and 4 felt that they had a positive self-concept;
- ✓ Birthmothers 1 and 5 did not seem really sure or convincing about their self-concept; and
- ✓ Birthmother 2 said that she does not have a positive self-concept.

All of the birthmothers viewed themselves as emotionally mature. Birthmother 1 said that she has to be emotionally mature. This can be due to them believing that indirectly they now have a

responsibility towards the child they relinquished and/or that they entered into the adult world through becoming pregnant and have to act accordingly. They might also view themselves as emotionally mature as they see themselves as capable of coping with the situation at hand.

The following strong and weak points were expressed by the birthmothers:

Strong points

- ✓ Birthmother 1 said that she doesn't think she has any good points. After some encouragement, she said that she is a good listener;
- ✓ Birthmother 2 reported that she is self-motivated and loving;
- ✓ Birthmother 3 said she is friendly;
- ✓ Birthmother 4 said that she wants to achieve something with her life;
- ✓ Birthmother 5 reported that she is independent and can go out and do what she wants.

Weak points

- ✓ Birthmother 1 reported that she cannot concentrate and she just sits on her bed (i.e. passive);
- ✓ Birthmother 2 said that she is irresponsible and stubborn;
- ✓ Birthmother 3 reported that she is impatient;
- ✓ Birthmother 4 said that she cannot think of any at the moment but she does have; and
- ✓ Birthmother 5 reported that she is influenced easily.

Their strong and weak points can be summarized in the following table:

Birthmother	Strong points	Weak points
Birthmother 1	Good listener	Cannot concentrate
Birthmother 2	Self-motivated	Irresponsible
Birthmother 3	Friendly	Impatient
Birthmother 4	Ambitious	Cannot think of anything
Birthmother 5	Independent	Influenced by others easily

Table 5.4: Strong and weak points as the birthmothers see themselves

None of the birthmothers share any weak or strong points. There are, however, some contradictions regarding their perceived strong and weak points. Birthmother 1 is a good listener who cannot concentrate. Birthmother 2 is self-motivated but also irresponsible. Birthmother 3 is friendly yet she is also impatient. The ambitious Birthmother 4 cannot think of weak points while the independent Birthmother 5 becomes dependent as she is influenced by other people.

The above responses suggest a lack of self-knowledge.

Impact on school performance

Paragraph 2.3.2.5 pointed out that a negative self-concept leads to poor school performance. Since only 40% of the birthmothers viewed themselves as having a positive self-concept, conclusions can be made that their school performance following the adoption might be influenced negatively by their negative self-concept. Because school performance was adequate prior to adoption the assumption can be made that the pregnancy and adoption impacted negatively on their self-concept. It is of significance that Birthmother 5 whose school performance deteriorated least has a poor self-concept and that birthmother 3 whose school performance deteriorated markedly projects a good self concept.

What is clear from the above is that the birthmothers in this sample do not yet possess sufficient self-knowledge as revealed in their conflicting responses about their strong and weak points. It must be added that all the birthmothers in this sample are adolescents which compounds self-knowledge as adolescence is the phase during which identity is formed. What could be hypothesized is that these birthmothers' inadequate self-knowledge might make it hard for them to determine who they are especially following the adoption and that this might impact negatively on school performance. This ties in with their perception that their school marks are worse than the report cards indicated (as discussed in 5.4.7).

5.5.4 The influence currently and in the future

61) How do you think adoption influences your life currently?

62) How do you think the adoption will influence your life in the future?

Summation of verbatim responses

The following responses were given by the birthmothers about how they think adoption influences their lives currently.

Currently

The responses of the birthmothers varied.

- ✓ Birthmother 1 feels like she is going in the wrong way and sees her life as a struggle;
- ✓ Birthmother 2 feels that she has learned something through the adoption;
- ✓ Birthmother 3 says that the adoption leaves her with emptiness;
- ✓ Birthmother 4 feels that the adoption will only catch up with her later in life when she is older. Currently she does not see the adoption as bad; and
- ✓ Birthmother 5 reported that knowing that a part of her is out there somewhere is hard. She does however look at life positively and can help people who are in a situation similar to hers.

The following responses were given by the birthmothers about how they think adoption will influence their lives in the future.

In the future

- ✓ Birthmother 1 feels that the adoption is going to be very tough on her in the future;
- ✓ Birthmother 2 feels that she will be able to help other birthmothers;
- ✓ Birthmother 3 thinks that her future is going to be the same as now, although she imagines the emptiness will shrink;
- ✓ Birthmother 4 is unsure how the adoption will influence her future; and
- ✓ Birthmother 5 said that she is scared to know about the future. On the one hand she wants to know the child. She is also worried that the child will one day come back to haunt her, which suggests that she experiences guilt.

Summary of questions 61 and 62

Birthmother	Currently	In the future
Birthmother 1	Going the wrong way	Very tough
Birthmother 2	Felt she learned something	Can help others
Birthmother 3	Emptiness	Emptiness will shrink
Birthmother 4	Good, the adoption will catch up later	Unsure
Birthmother 5	Part of her out there	Scared, feels guilty

Table 5.5: Birthmothers' view on how adoption influences them currently and in the future

The above suggests that:

- ✓ 60% (3 out of 5) of the birthmothers feel that the adoption influences their lives in that they learned something from the adoption. Only birthmothers 1 and 3 felt negatively about their current situation;
- ✓ 40% (2 out of 5) of the birthmothers felt that in the future their experience will empower them to help others or that what they are currently thinking will in a way become more manageable;
- ✓ 40% (2 out of 5) of the birthmothers did not feel positive about the future but rather scared; and
- ✓ 20% (1 out of 5) of the birthmothers did not know how the future would be.

Impact on school performance

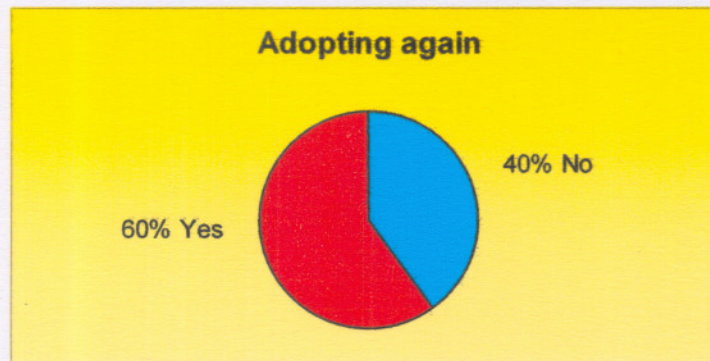
Most of the birthmothers feel positive about their current situation. Feeling positive should impact positively on their school performance. There is a correlation between the birthmothers who feel positive (2, 4 & 5) and the least deterioration in school performance. Birthmothers 1 and 3 view their current situation most negatively and also show the most deterioration.

Their view of the future, suggests that they are either afraid of the future or expect it to continue being (relatively) bleak. Only Birthmother 2 foresees some degree of future meaningfulness. Negative future expectations must impact negatively on current performance. The birthmothers' view on the future probably plays a negative role in their school performance.

5.5.5 The choice to allow adoption

65) If you had a choice, would you choose adoption again? Why or why not?

Graphic summary



Graph 5.16: Question 65. Adopting again

Analysis of question 65

- ✓ 40% (2 out of the 5) of the birthmothers said that they would not choose adoption again if they had the opportunity to raise the child and if they were financially secure. Another reason given was that they would not choose adoption a second time due to the emotional discomfort that they are currently experiencing: Birthmother 4 felt that it was a piece of her that had been ripped away and therefore she would not do it again; and
- ✓ 60% (Birthmothers 2, 3, 5) of the birthmothers said that they would make the same choice to let their child be adopted. The main reason given is that they still want a future for themselves. It is significant that the birthmothers whose school performance deteriorated the least are the ones who would repeat their choice. This may be ascribed to the fact that they have probably made peace with their choice.

Factors impacting negatively on school performance

Most of the birthmothers felt that they made the right decision about relinquishing their babies. 40% however felt that they made the wrong decision. Making the wrong decision might make the birthmothers feel guilty about the decision they made. As Birthmother 1 said earlier, she

cannot concentrate on her work because she constantly thinks about her baby. She is also one of the two birthmothers who felt that she should not have relinquished her baby for adoption. Feeling guilty impacts negatively on school performance.

5.5.6 The benefits of adoption

- 67) What benefits, do you think, adoption held for your baby?
- 68) What benefits, do you think, adoption held for you?
- 69) What benefits, do you think, adoption held for your family?
- 70) What benefits, do you think, adoption held for the father of your child?

Summation of verbatim responses

All of the birthmothers had some idea of the benefits which adoption holds for the child:

Benefits for the baby

- ✓ Birthmother 1 felt that the child would have an education and would not have to suffer;
- ✓ Birthmother 2 felt that her baby now has a loving family and a future;
- ✓ Birthmother 3 said that the baby now has parents that can give the baby what he deserves.
- ✓ Birthmother 4 said a good house and love;
- ✓ Birthmother 5 said that the child now has the opportunity of life, to strive for something and to just be different from his mother.

Benefits for the birthmother

- ✓ Birthmother 1 said that she just worries too much. She could not think of any benefits for herself. Later during another question, she said that she and her mother can build a relationship now which they did not have prior to the adoption;
- ✓ Birthmother 2 said that she could go and study further and have a life;
- ✓ Birthmother 3 did not think that there are any benefits for her in the adoption;
- ✓ Birthmother 4 first said that there are no benefits but changed that to the fact that she can go on with her life; and
- ✓ Birthmother 5 felt that she had learned a lot.

Benefits for the family of the birthmother

- ✓ Birthmother 1 declined to answer the question on the benefits for the family as she is living with a new family and was not living with her mother while she was pregnant;
- ✓ Birthmother 2 said that the atmosphere would be less tense in the house, and she hopes that her relationships with the other people in the house will be restored;
- ✓ Birthmother 3 does not feel that the adoption benefited her family as they would not have done anything for the child;
- ✓ Birthmother 4 said that the adoption helped with her parents' finances since they do not have to pay for the things that the baby needs; and
- ✓ Birthmother 5 felt that the adoption helped her sister realize that she could become pregnant as well and that she, the birthmother could take responsibility for her own actions and decisions.

Benefits for the father of the baby

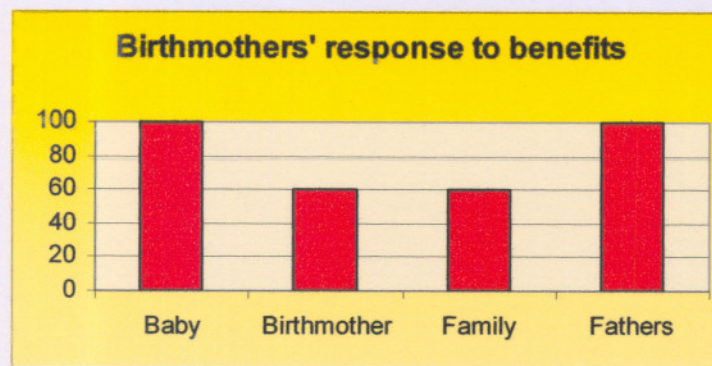
- ✓ Birthmother 1's father of the baby does not know about the baby so there can be no benefits in his case;
- ✓ Birthmother 2 said that he does not need to feel that there is something that has a hold on him and the fact that he does not have a child to provide for;
- ✓ Birthmother 3 said that the father of the baby had the opportunity to complete his studies and sort out his life;
- ✓ Birthmother 4 felt that the father of the baby was better off financially since he did not need to provide for the child; and
- ✓ Birthmother 5 said that she thinks that he has learned a lot from the adoption and pregnancy.

Analysis of questions 67, 68, 69 and 70

Overall, the benefits associated by the birthmothers with adoption can be summarized as follows:

- ✓ 100% (5 out of 5) of the birthmothers sampled were of the opinion that their babies benefited from the adoption;
- ✓ 60% (3 out of 5) felt that they (the birthmothers) benefited personally;

- ✓ 60% (3 out of 5) felt that their families benefited as there would be no fiscal or emotional demands on family members and because their siblings could learn indirectly from the situation; and
- ✓ 100% (4 out of 4) felt that the fathers benefited fiscally and emotionally. The other father was not aware of the baby and could therefore not be included.



Graph 5.17: Question 67 to 70. Birthmothers' view of benefits for different people

Impact on school performance

All the birthmothers could articulate benefits for the adopted child and for the father of the child. They were not able to do so equally easily for themselves or for their families. Once again how the birthmothers view the adoption can be correlated with the extent of the deterioration in their school performance:

- ✓ Birthmothers 1 and 3 do not believe the adoption held any benefit for them personally or for their families. Their school performances deteriorated most.
- ✓ Birthmothers 2, 4 and 5, who showed the least deterioration in school performance, could articulate benefits for themselves and their families. This suggests that they have made personal meaning of the adoption and can rationalize their decisions in terms of benefits. This should decrease the amount of guilt experienced.

The above suggests that when the birthmothers have made meaning of the adoption event, they can focus on the task at hand, which is their schooling. When inadequate meaning has been made, the impact on school performance is negative.

5.5.7 The disadvantages of adoption

- 71) What disadvantages, do you think, is there for your baby after the adoption?
- 72) What disadvantages, do you think, is there for you after the adoption?
- 73) What disadvantages, do you think, is there for your family after the adoption?

Summation of verbatim responses

Disadvantages for the baby

- ✓ Birthmother 1 could not think of any disadvantages;
- ✓ Birthmother 2 said that he will come to a stage in his life where he will know that he was rejected and this might influence his ability to adapt;
- ✓ Birthmothers 3 and 4 said their babies will never know their biological parents; and
- ✓ Birthmother 5 said that if she put herself in his shoes, she would hate to find out one day that she was adopted. For her not knowing her biological parents would be negative.

Disadvantages for the birthmother after the adoption

- ✓ Birthmother 1 said the fact that she could not stop thinking of her baby influences her school work;
- ✓ Birthmother 2 said that the only disadvantage is thoughts of the adoption and that her child is not with her anymore;
- ✓ Birthmother 3 felt that a part of her is somewhere and that she will never be able to be a whole person;
- ✓ Birthmother 4 said that she will not be able to see her child grow up, see his first smile, or when he gets hurt; and
- ✓ Birthmother 5 made a joke of the question by saying that the child might turn out to be a serial killer and come and haunt her. This suggests that she feels immense guilt.

Disadvantages for the family

- ✓ Birthmother 1 who is herself adopted was not asked the question because she is new to her current family;

- ✓ Birthmother 2 said that she does not think that there are any disadvantages for the family;
- ✓ Birthmother 3 said there is nothing;
- ✓ Birthmother 4 said that the disadvantages affecting her are the same as the ones affecting her family; and
- ✓ Birthmother 5 said that the child might feel that the family also owes him.

Analysis of questions 71, 72 and 73

The above responses can be summarized as follows:

- ✓ 80% of the birthmothers fear that the adoption will hold emotional disadvantages for the child. The most common answer on the disadvantages for the baby was the fact that the child will one day not know his biological parents;
- ✓ The disadvantages which the birthmothers saw for themselves differed. The dominant themes include that they will not be able to be part of the child's life, to see the child grow up and the thoughts that they have to live with for the rest of their lives. The disadvantages can be summarized as fixation (recurrent thoughts) and guilt; and
- ✓ Most of the birthmothers responded that they do not think that there are any disadvantages for the family. Only birthmother 4 said that the family will be losing the child's firsts of everything.

Impact on school performance

All the birthmothers can articulate disadvantages associated with the adoption. Once again there is a correlation between the responses and the degree of deterioration in school performance:

- ✓ The birthmothers whose performance deteriorated most, experience recurrent thoughts, emptiness and guilt about the child they relinquished. As this takes up both time and emotional energy, they cannot focus on their school work as they are supposed to, which impacts negatively on their school performances.
- ✓ The birthmothers whose performance deteriorated least, are realistic about their loss – they are aware that they will never know their child or share in their child's life, but there is no sense of trauma or fixation in these responses.

5.5.8 Grieving

78) Did you grieve for your baby?

79) What form did this grieving take?

Summation of verbatim responses

All of the birthmothers said that they did grieve about the baby they relinquished for adoption. The form the grieving took was different for the mothers.

- ✓ Birthmother 1 says that she cries about the child every night, even now;
- ✓ Birthmother 2 also cries about her baby;
- ✓ Birthmother 3 said that she cried, was very negative and isolated herself from people;
- ✓ Birthmother 4 reported that she was very emotional about the adoption and relinquishing her child but she will get over the child; and
- ✓ Birthmother 5 said that she would cry by herself, but most of the time she would keep her feelings in. She also uses music, which she writes, to express herself.

Analysis of questions 78 and 79

All of the birthmothers cried about their babies as a form of grieving. What is different is whether the birthmothers view this grieving as temporary or not and whether they know how to channel their grieving or not. Birthmother 5 uses music and writing to express her feelings. Birthmother 1 handed the researcher a letter that she wrote to her baby to proofread. Permission was received and the letter is attached in the addendum. The letter is an expression of grief that she is experiencing as her baby turns one year old.

Impact on school performance

All of the birthmothers reported that they did grieve. The grieving process is an integral part of the healing process. If the birthmother did not go through the grieving process up to a point where she can carry on with life, the unresolved grief will impact negatively on her school performance and her wellness.

Again, there is a correlation between the extent of the deterioration in school performance and how the mothers grieved:

- ✓ Birthmother 1's grieving appears to be unabated and a permanent part of her daily life and birthmother 3 isolated herself from others. This will stymie the amount of support which she can receive to empower her in her grief. Continued grieving and emotional isolation are not conducive to healing and must impact negatively on school performance.
- ✓ Birthmother 4 sees her grief as being time-limited and birthmother 5 uses channeling to cope with her grief. This is conducive to healing and could explain why their school performances have deteriorated less.

5.5.9 General conclusion

Intra psychic factors can account for poorer post-adoption school performance in these samples. Factors which appear to impact negatively on school performance include:

- ✓ inadequate self-knowledge;
- ✓ painful reflections about the adoption;
- ✓ inadequate meaning-making of the adoption in terms of personal advantage;
- ✓ negative perception of current situation;
- ✓ negative future expectations;
- ✓ continued grieving and emotional isolation; and
- ✓ recurrent thoughts, emptiness and guilt about the relinquished child.

5.6 Metaphysical factors

5.6.1 Introduction

In the interview, questions relating to metaphysical factors were grouped together and consist of questions 40 to 45. Questions that are related were group together. The questions focus on the:

- ✓ birthmother's view on teenage pregnancy;
- ✓ birthmother's view on adoption and abortion;
- ✓ birthmother's view on future pregnancies and sex before marriage;

- ✓ birthmother's view on spirituality and religion;
- ✓ birthmother's view on community and society; and
- ✓ what makes her life meaningful.

5.6.2 Teenage pregnancy

- 40) What is your view on teenage pregnancy?
- 74) How has the adoption impacted on your view of future pregnancies?

Summation of verbatim responses

- ✓ Birthmother 1 said that teenage pregnancy is a continuous struggle through life, and that being pregnant as a teenager is very hard;
- ✓ The other birthmothers reported that teenage pregnancy is not the best thing to have happened to them and they will encourage other teenagers not to fall into the same trap they did;
- ✓ Birthmother 5 said that being pregnant as a teenager is unfair on the baby; and
- ✓ Birthmother 4, however, said that if you love the father of the child and you can support the child, being pregnant as a teenager can be a good thing.

On the questions about how the adoption influenced their view of future pregnancies the birthmothers responded as follows:

- ✓ Birthmother 1 felt that if you cannot look after the child, you should give the child up;
- ✓ Birthmother 2 was convinced that children should be planned and only be conceived within a marriage;
- ✓ Birthmother 3 said that she will fall pregnant again at the right time;
- ✓ Birthmother 4 views adolescent pregnancies as acceptable if you plan the pregnancy and can look after the child; and
- ✓ Birthmother 5 said that children should be planned and that the children should be the product of a union of love.

Analysis of questions 40 and 74

Their overall view on teenage pregnancy is that teenage pregnancy is not feasible and should be avoided.

Their views on future pregnancies suggest that pregnancy per se is not negative, but that the timing is pivotal. Therefore the conclusion can be made that the birthmothers' experiences have not generally made them negative towards future pregnancies or especially careful about future plans.

Implications on school performance

The mere fact that these mothers do not see teenage pregnancy as feasible suggests that they experienced it as disruptive. One of the areas that it disrupted is schooling, as is evident from their pre-and post-adoption school performance profiles and their self reports.

5.6.3 View on adoption and abortion

- 41) What is your view on adoption?
- 42) What is your view on abortion?

Summation of verbatim responses

- ✓ Birthmother 1 said that adoption does not feel right for her, suggesting that she has not yet come to terms with her child's adoption;
- ✓ Birthmothers 2, 3 and 4 said that adoption is better than abortion and that they have done what is best for the child. They see adoption as the better alternative; and
- ✓ Birthmother 5 had previously believed that abortion was the better option, but once she realized that there was a life growing inside of her, she could not have that life aborted. The reality of her experience altered her prior belief.

Analysis of questions 41 and 42

Adoption

- ✓ 80% (4 out of 5) of the birthmothers felt in one way or another that adoption was the best choice for their babies; and
- ✓ 20% (1 out of 5) of the birthmothers felt that having a child adopted did not feel right.

Abortion

- ✓ 80% (4 out of 5) of the birthmothers said that abortion is either terrible, negative or that they are totally against abortion;
- ✓ 40% (2 out of 5) of the birthmothers did consider abortion. Once Birthmother 5 realized that the baby is a life growing inside of her, she could not abort that life. Birthmother 1's mother found out that she was pregnant and that prevented her from having an abortion. When Birthmother 1 was asked about her view on abortion, she said that you are taking a life that God created that is precious.

Impact on school performance

From the above it is clear that these birthmothers generally favour adoption above abortion. Only Birthmother 1 feels differently. It would seem that her mother prevented her from having an abortion, which suggests that adoption was not her choice. This might explain why she is struggling to come to terms with the experience. Her school performance has deteriorated markedly. The inference can be made that when free choice is not respected in terms of adoption and a belief system is challenged, it is hard to come to terms with the experience. This in turn impacts negatively on being able to continue meaningfully with life, including school performance.

5.6.4 Future pregnancies and sex before marriage

74) How has the adoption impacted on your view of future pregnancies?

75) How has the adoption impacted on your view of sex before marriage?

Summation of verbatim responses

View on future pregnancies

- ✓ 60% (3 out of 5) of the birthmothers said that they want children again, only when they are married and they have planned for the child; and
- ✓ 40% (2 out of 5) of the birthmothers said that if you cannot look after the child you should give the child up or you will fall pregnant at the right time. They are not taking much responsibility to prevent future pregnancies.

View on sex before marriage

- ✓ 60% (3 out of 5) of the birthmothers said that you should rather wait until you are married; and
- ✓ 40% (2 out of 5) said that you should think about the complications and things like whether you plan to spend the rest of your life with the person.

Analysis on questions 74 and 75

All of the birthmothers said that they will have children again. 60% of the birthmothers said that their pregnancies will be planned while the other 40% said that they will become pregnant when they become pregnant. 60% (3 of the birthmothers) are either abstaining or using contraceptives to prevent another pregnancy.

Impact on school performance

Giving a child up for adoption seems not to have altered how the majority of respondents in this sample view future pregnancies but does seem to have altered views on sex before marriage. Having sex with someone improves the chance of becoming pregnant and contracting sexually transmitted diseases. Both of these factors do impact negatively on school performance. If one of the birthmothers should fall pregnant again or contract a sexually transmitted disease, her school performance can be influenced negatively even more. Currently none of the birthmothers are sexually active and so poorer school performance cannot be explained by premarital sexual activity.

5.6.5 View on spirituality and religion

43) What is your view on spirituality and religion? Explain.

66) Did this event change your view on religion and in what way?

Summation of verbatim responses

- ✓ Birthmother 1 became a Christian on a camp and wants to go and see a priest;
- ✓ Birthmother 2 does not go to church gatherings because she sees her relationship with God as not very good at this stage;
- ✓ Birthmother 3 says that one should believe in something and that that influences how you think, how you are with other people and how you spend your money;
- ✓ Birthmother 4 said that the adoption did not really affect the way that she views religion; and
- ✓ Birthmother 5 said that she became a strong Christian.

Analysis of questions 43 and 66

40% (2 out of 5) of the birthmothers attend church while another one wants to join a church.

On the question whether the adoption influenced their views of religion, not one of the birthmothers felt that adoption influenced their religious lives in a remarkable way. Birthmother 2 said that after her Christian friend came to pray for her, she realized that she is missing something. In the mean time she has done nothing about going to church.

Birthmothers 1 and 5 view religion as important in their lives now after the adoption. Birthmother 5's school performance did not deteriorate as the other birthmothers did. Religion thus could have impacted positively on her. The opposite of this is true for Birthmother 1.

Impact on school performance

The birthmothers' school performance cannot be ascribed to religion as the birthmothers did not view religion as equally important. The birthmothers' view on religion did impact on their

decision on whether they should have their babies adopted or aborted, but not on their school performance.

5.6.6 What makes life meaningful

- 44) What made your life meaningful before the adoption?
45) What makes your life meaningful now after the adoption?

Summation of verbatim responses

80% (4 out of 5) of the birthmothers had a person whom they loved and lived for. Birthmother one had her mother whom she says she loves too much, Birthmother 2 has her boyfriend and Birthmother 3 says there was nothing, while Birthmother 4 says her friends and boyfriend. Birthmother 5 says God.

After the adoption, this changed. Birthmother 1 feels like she has nothing to live for even though she still loves her mother. Birthmother 2 lives for the adopted child and birthmother 3 lives for both her current child and her husband. Birthmother 4 lives for her adopted child and her friend while Birthmother 5 lives for God.

Analysis of questions

From the above 80% (4 out of 5) of the birthmothers found something to live for after the adoption. 40% (2 out of 5) of them live for a child they might never see while one of them feels hopeless. During a later conversation, Birthmother 1 talked about committing suicide as she has nothing more to live for.

Impact on school performance

After the adoption the birthmothers have to find something new to make life worth living. They have to find a ray of sunshine in the midst of their despair to move on. This will motivate them to perform better in life, including school work. Significantly, all the birthmothers (except Birthmother 1) chose another person or being rather than a hobby or a pet. This suggests that they have a need to connect with other human beings or a being (God).

If the birthmothers have nothing to live for, their school performance will be sabotaged, as they are not motivated for something or someone. This is true of Birthmother 1, whose school performance deteriorated remarkably. She has nothing to live for and this lack of impetus is reflected in her schoolwork too.

5.6.7 General conclusion



Metaphysical factors can account for poorer post-adoption school performance in this sample. Factors which appear to impact negatively on school performance include:

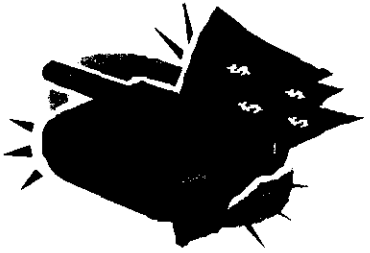

- ✓ disrespect for personal belief systems (e.g. abortion is preferable to adoption) makes it hard to cope;
- ✓ forced adoption is difficult to work through; and
- ✓ a lack of something or someone to live for fuels apathy.




5.7 Reflection on data obtained during the phenomenological interviews

The following factors were identified during the interview and analyzed according to their role in deteriorated school performance following the adolescent birthmother's decision to have her baby adopted:

Age	The age of the birthmothers did not appear to influence their school performance.
Health and physical status	One birthmother reported that her health was poor before and after the adoption. The birthmothers' health did not impact negatively on their school performance.
Sexually transmitted diseases and contraception	None of the birthmothers contracted any sexual diseases and some did use contraception before they became pregnant. Neither factor appears to have impacted on their school performance.

Home environment	<p>The school performance of the birthmothers who enjoyed a supportive home environment after the adoption deteriorated the least. It would seem therefore that their home environment impacted on school performance.</p>
Relationships with important others	<p>There does not seem to be a correlation between the relationships the birthmothers have with important others and school performance.</p>
Support received from significant others	<p>The birthmothers received support from family, friends and teachers. The birthmothers who received the most consistent support also had the least deterioration in their school marks. A lack of consistent support can therefore be linked to poorer school performance.</p>
Support in school work 	<p>The birthmothers received support before and after the adoption from educators. The birthmothers could not articulate what support they needed most.</p> <p>Even though the birthmothers did feel supported after they went back to school, their marks still deteriorated and the support they did receive was not adequate to ensure continued scholastic success. This could perhaps be linked to their inability to articulate precisely what support they need.</p>
School attendance 	<p>Only one birthmother changed schools after she became pregnant. Her school marks deteriorated significantly in the new school and it can thus be concluded that going to a new school and making the transition from primary to high school influenced her school performance negatively. For the other birthmothers school attendance made no difference.</p>

Inability to concentrate	<p>Some of the birthmothers (significantly those whose school performance deteriorated following the adoption) did report that they struggled to concentrate as they constantly think about the child they relinquished. This impacts negatively on their school work as they lose work in class.</p>
Own perception of school performance	<p>Four out of the five birthmothers reported that their school performance did deteriorate after the adoption. This can be linked to their negative self-esteem and self-concept, also in terms of scholastic self-image.</p>
Home economic status 	<p>The economic status of the birthmothers before and after the adoption was the same although economic statuses influenced some of the birthmothers' decisions to relinquish their babies. Their economic statuses did thus not impact on their school performances directly, but might have indirectly, as they may feel responsible for not being able to provide for the child.</p>
Thoughts, feelings and behaviour	<p>The birthmothers who had positive reflections on the adoption showed the least deterioration in their school performances while the birthmothers who reflected painfully on the experiences, showed the greatest deterioration in school performance. Negative reflections thus impacted negatively on school performance.</p>
View of self 	<p>Two of the birthmothers reported having a positive self-concept. There did not seem to be a correlation between self-concept and poorer school performance. Conflicting views about their strong and weak points showed that the birthmothers do not possess sufficient self-knowledge which can impact negatively on their school performance.</p>

<p>Influences currently and in the future</p> 	<p>There is a correlation between the birthmothers who feel positive about their current situation and less deterioration in school performance. The birthmothers who viewed their future most negatively also deteriorated the most at school. Negative perceptions of their current reality and negative future expectations seem to impact negatively on school performance.</p>
<p>The choice to allow adoption</p>	<p>The birthmothers who have made peace with their choice to relinquish their child show the least deterioration in school performance. When birthmothers had not yet come to terms with their choice, their lack of meaning making and probable guilt interfere with school performance.</p>
<p>Benefits of adoption</p> 	<p>The school performance of the birthmothers who had made meaning of the adoption deteriorated the least while those who could not reason about the benefits of adoption showed poorer school performance.</p>
<p>Disadvantages of adoption</p> 	<p>The birthmothers whose school performances deteriorated the most focus on the disadvantages of adoption: they experience recurring thoughts, guilt and emptiness which impacts negatively on their school performances. The birthmothers who had a realistic view of their loss evidenced school performance which deteriorated least.</p>
<p>Grieving</p>	<p>Unresolved grief impacts negatively on school performance. The school performance of birthmothers who understood grief to be time-limited or who could channel their emotion deteriorated the least.</p>
<p>Teenage pregnancy</p>	<p>The birthmothers see teenage pregnancies as disruptive and impacting negatively on school performance.</p>


View on adoption and abortion	Adoptions are generally favoured above abortion. However, when adoption is enforced and personal choice denied, it seems to affect the birthmother negatively.
Future pregnancies and sex before marriage	The birthmothers' view on future pregnancies did not change but they altered their views on sex before marriage as they realize the impact of becoming pregnant again or contracting a sexually transmitted disease on their school performances.
Spirituality and religion 	The birthmothers' spirituality and religion did not impact on their school work as none of them had strong beliefs about spirituality and religion before they became pregnant and only two took on a definite religion after the adoption.
Life meaningfulness	The birthmothers who do not see life as meaningful and who cannot actively pursue a goal show poorer school performance.

Table 5.6: Factors emerging from the phenomenological interviews

5.8 Comparison to Chapter 2

At the end of chapter 2, a summary was given on the factors that impact negatively on school performance according to the literature. After completing the interviews and doing an analysis, the factors that also influenced the birthmothers' school performance negatively in this study were indicated with a √. If a factor only influenced one birthmother, the factors are indicated. New factors mentioned by the participants but not covered by literature are not included in this table.

Genetic vulnerability		Parental education	
Sensory disabilities		The lack of support from parents	√
Chronic illness		Peer group	
Gender and age		Substance abuse	
HIV/Aids		Violence	
Health and nutrition	√	Child abuse	
Physical disabilities		Adolescent pregnancies	√
Sensory disabilities		Socioeconomic status and poverty	√
Neurological disabilities		Inadequate discipline at school	
Attention deficit	√	School language requirements	
Thinking, learning and remembering	√	Teaching	√
Learning difficulty		Learner-teacher ratio	
Motivation	√	Length of time spent in school	√
Mental handicap		Demographical factors	
Emotional intelligence		Geographical and climatic factors	
Resilience		Religion	
Psychological problems (including inadequate self-knowledge and prolonged grieving)	√	Culture	
Self-concept	√	Background and home	√

Table 5.7: Factors impacting negatively on school performance evaluated for birthmothers

The new factors emerging from this study which impact negatively on the school performance of birthmothers who choose adoption and return to school include:

- ✓ fluctuating support received before, during and after the adoption process;
- ✓ negative future orientation and negative reflection on past events;
- ✓ guilt;
- ✓ inability to articulate exactly what support is needed;
- ✓ inadequate meaning-making of adoption;
- ✓ disrespect for personal belief systems; and
- ✓ finding meaning in life.

Table 5.8: New factors emerging from this study impacting negatively on adolescent birthmothers' school performance

5.9 Conclusion

In this chapter the phenomenological interviews were analyzed and discussed. The following needs of the birthmothers were identified in which Life Orientation teachers can assist in:

- ✓ developing a positive self-concept;
- ✓ setting out a plan for the future;
- ✓ helping those who feel that they have made the wrong choice about the adoption to accept and make meaning of their choices;
- ✓ rediscovering the benefits of adoption for everyone involved and dealing with the disadvantages;
- ✓ working through the grieving process;
- ✓ helping with concentration skills;
- ✓ working through feelings associated with adoption such as guilt;
- ✓ helping birthmothers cope with their home environments;
- ✓ building consistent relationships with important others;
- ✓ working through disrespect for personal belief systems;
- ✓ identifying and learning to ask for support; and
- ✓ helping the birthmother to find meaning in life or even spirituality.

The following chapter will look at some guidelines for the Life Orientation teacher, based on the above.

CHAPTER 6

GUIDELINES FOR LIFE ORIENTATION TEACHERS

"Although the world is full of suffering, it is also full of the overcoming of it." – H. Keller

(Caplan and Lang, 1995:89)

OVERVIEW CHAPTER 6

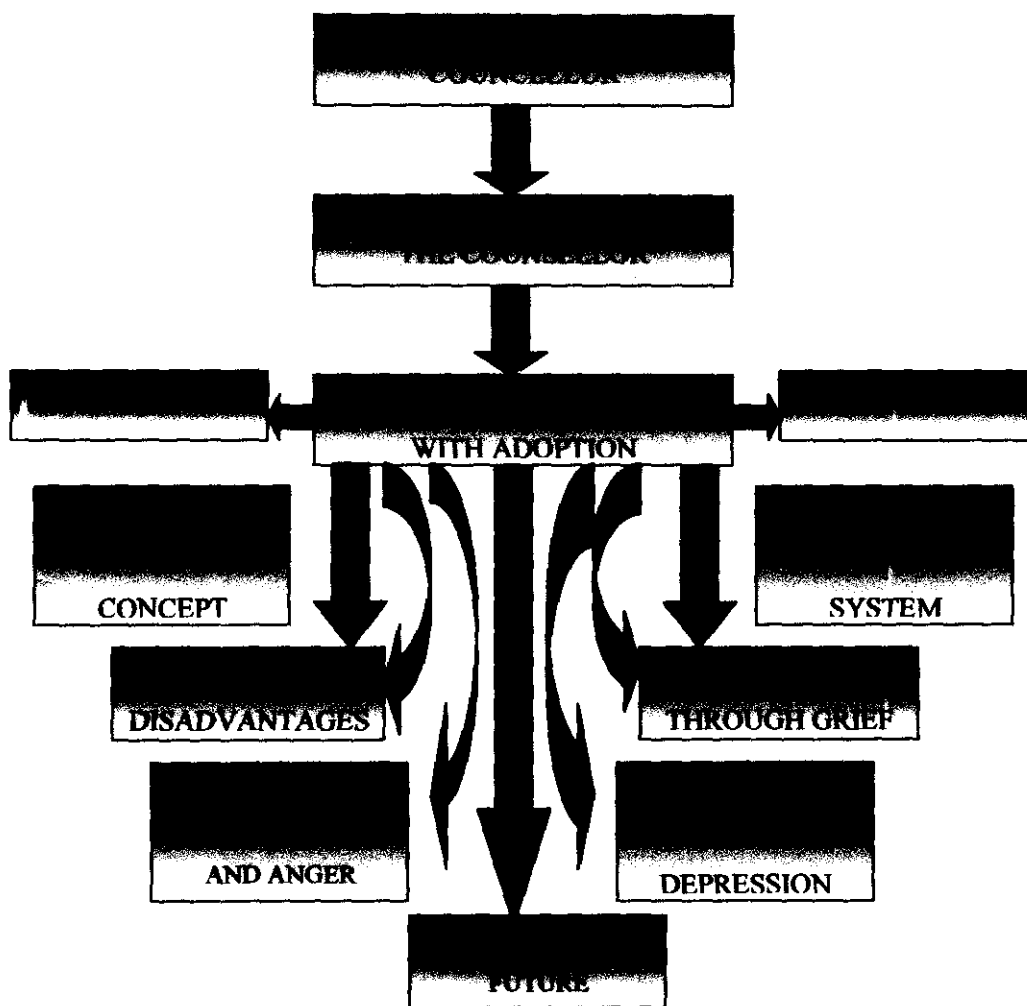


Figure 6.1: Overview of Chapter 6

6.1 Introduction

The researcher wishes to caution the reader that the recommendations for guidelines that follow, are by no means exhaustive. The guidelines which are given are either ones with which the researcher is familiar and confident in, or ones that the researcher believes will go a long way to help birthmothers adapt after relinquishing their babies, given the responses noted from birthmothers in this study.

All guidelines will be influenced by how the counsellor or Life Orientation facilitator implements them and for this reason, all guidelines need to be prefaced by characteristics, attitudes and skills indispensable to the effective counsellor.

6.2 Characteristics of the counsellor

The following counsellor characteristics are seen as essential for counsellors counselling adolescent birthmothers (Mazabow, 2003:14):

- ✓ the belief that every birthmother is a unique person with unique and different ways of seeing the world and responding to events;
- ✓ the ability to put their own needs and values aside and to respect the birthmother as a human being even if the counsellor does not approve of adoption or any other actions the birthmother might have performed;
- ✓ accepting the birthmother as worthwhile individual, rather than judging her;
- ✓ genuine interest and caring for the birthmother;
- ✓ the ability to communicate acceptance, respect and interest to the birthmother, using words and body language;
- ✓ an attitude of responsibility to the birthmother and to the community;
- ✓ patience, sincerity, sensitivity, honesty and consistency;
- ✓ the ability to identify the birthmother's strengths, potentials and positive qualities;
- ✓ not being afraid of own intense emotions;
- ✓ not being afraid of the birthmother's intense emotions, instead being able to remain calm and consistent;
- ✓ the ability to resist the urge to 'fix' things or to take away the birthmother's pain, as well as the ability to tolerate uncertainty;

- ✓ the ability to listen carefully to the birthmother and to communicate own understanding, without distorting the message; and
- ✓ the ability to allow the birthmother the dignity of making her own decisions and choices.

6.3 Attitude and skills of the counsellor

The counsellor needs the following attitude towards the birthmother:

- ✓ respect;
- ✓ genuineness;
- ✓ empathy;
- ✓ acceptance;
- ✓ understanding; and
- ✓ rapport (Walker, 2001:3).

The most important characteristics or skills according to Walker (2001:3) are:

- ✓ listening and attending;
- ✓ probing and questioning;
- ✓ summarizing;
- ✓ paraphrasing and clarification;
- ✓ reflecting;
- ✓ showing empathy and understanding.

Each of these skills will now be described individually:

6.3.1 Listening and attending

Good listening and attending is the hallmark of counselling. The following tools are valuable:

- ✓ warmth – maintaining close physical proximity;
- ✓ eye-contact – making direct eye contact;
- ✓ body posture – relaxed, leaning toward the birthmother;
- ✓ overall empathy – focus on the birthmother;

- ✓ vocal style – soft soothing voice; and
- ✓ verbal following – staying in focus with the birthmother (Walker 2001:7).

These attending and listening behaviours demonstrate to the birthmother that the counsellor is with her and is listening to her. Active listening requires the counsellor to observe the client and at the same time pay attention to one's own reactions. It is also important to notice what the birthmothers do not say.

6.3.2 Probing

Probing or questioning helps the birthmothers tell their story and also helps the counsellor to obtain the necessary information. When probing or questioning, use open-ended questions as often as possible. These questions allow the client to express her real self without the imposed subjectivity of the counsellor (De Jongh van Arkel, 2003:228).

The following ways of asking questions or probing, should be avoided:

- ✓ Avoid using why questions, as it might make the birthmother feel that she did something wrong, that she needs to explain, or she might feel that the counsellor is judging her and therefore have to explain her actions.
- ✓ Avoid using closed questions as closed questions only require a short answer and therefore restrict the birthmother in telling her story. When the counsellor is obtaining factual information, closed questions may be used. E.g. How old are you now? Did you know the father of the baby?
- ✓ Leading questions should also be avoided. Leading questions force the birthmother to think in a certain way and ask the birthmother to respond on only what the Life Orientation educator thinks. Leading questions take away the birthmother's freedom to express how she is feeling. Instead, when leading questions are used, the counsellor seems to imply how or what the birthmother is feeling. If she does not have the courage to tell the counsellor otherwise, the counsellor might be misled. The birthmother might also feel that the counsellor does not understand her as the counsellor is not listening to what she is saying.

Probing helps birthmothers to:

- ✓ achieve concreteness and clarity;
- ✓ fill in missing pieces of the picture;
- ✓ get a balanced view of problem situations;
- ✓ move into beneficial stages and steps of the helping process;
- ✓ move forward in respect of some steps in the process; and
- ✓ ask themselves, "What is going on?" (De Jongh van Arkel, 2003:228).

6.3.3 Summarizing

Summarizing involves gathering up the main points of what the birthmother has said and then presenting them to the birthmother as a review of what she has said. Summarizing is putting together the main feelings and content without adding anything extra. This allows the birthmothers to organize and order their thoughts and also allows the counsellor to check her understanding. It shows the birthmother that you understand and you are rewarding her for talking (Mazabow, 2003:41).

Summarizing is also useful in:

- ✓ ending a session;
- ✓ beginning a session by reviewing the previous session;
- ✓ when the birthmother gets "stuck" and goes over the same things without any progress;
- ✓ when the birthmother expresses ambivalent feelings;
- ✓ presenting the various aspects of the birthmother's problem-situations to her so that she can choose which needs to be dealt with first; and
- ✓ smooth transition from identifying the problem to finding coping strategies (Mazabow, 2003:41).

Although most of the time the counsellor does the summarizing, the birthmother can also be asked to summarize. It must be done in such a way that she does not feel threatened or afraid to make mistakes.

6.3.4 Paraphrasing and clarification

Paraphrasing and clarification are used to clear up confusion or ambiguity so as to avoid misunderstanding the birthmother and to confirm the accuracy of what the counsellor has heard. Statements like “So are you saying that...” can be used to clarify.

Paraphrasing is restating the whole message in different words. The message stated by the birthmother contains content, feelings and meaning, verbally or non-verbally. E.g. “I’m so afraid that when I tell him how I really feel, he’ll dump me.”

Paraphrasing can be directed at any or all of the three components and can be directed at (Mazabow, 2003:34):

- ✓ The simplest content level of the message. E.g. “So you are afraid he’ll leave you.”
- ✓ The meaning behind the content. E.g. “If I understand you correctly, you don’t think he will be able to handle how you really feel.”
- ✓ The current feelings behind the birthmother’s experience. E.g. “Perhaps you’re feeling that you cannot handle your own emotions.”
- ✓ All three components. E.g. “You are afraid that your boyfriend will leave you if you tell him how you really feel.”

6.3.5 Reflecting

The ability to restate, paraphrase or reformulate what the birthmother has just said in new, different words, is called reflecting. The reflection must contain or reflect the same meaning the original statement had for the birthmother. Reflection is a powerful tool in creating an empathic environment. E.g. “You seem to be feeling afraid that your boyfriend will leave you, is that how it is for you?”

The skill of empathy can be broken down into:

- ✓ responding to content;
- ✓ responding to underlying meaning of the content;
- ✓ responding to feeling; and

- ✓ responding to the reasons for feelings (Mazabow, 2003:33).

Reflecting helps the birthmother to express her own feelings about a situation; teaches her to manage her feelings; and helps her to express her feelings towards the counsellor.

When reflection is used, look for:

- ✓ affective feelings;
- ✓ contradictory feelings;
- ✓ ambivalent feelings;
- ✓ positive feelings;
- ✓ painful feelings; and
- ✓ non-verbal feelings (Walker, 2001:10).

6.3.6 Empathy and understanding

Empathy is the ability to perceive accurately what the birthmother is saying/experiencing/feeling/meaning, and then to communicate this understanding accurately to the birthmother. The counsellor must not only listen for words that the birthmother uses, but also for what she is not saying. Furthermore, the counsellor should look at her body language or non-verbal cues and must be able to link or connect these things with what the birthmother has already said (Mazabow, 2003:15).

This helps the counsellor to pick up:

- ✓ what the birthmother is saying;
- ✓ what the birthmother means by what she says; and
- ✓ what the birthmother is feeling at the moment.

Using the above, the counsellor enters into and understands the world of the birthmother as the birthmother sees it. This enables the counsellor to empathically guide and support the birthmother.

The following were identified as blocks to empathy (Mazabow, 2003:16):

- ✓ sympathy;
- ✓ judgment;
- ✓ reassurance;
- ✓ advice
- ✓ jumping to conclusions;
- ✓ interrogation;
- ✓ prematurely changing the topic; and
- ✓ assumptions.

In order for the above not to obstruct empathy, the following guidelines are provided when working with a birthmother:

Do not:

- ✓ Sympathize - sympathy is what the birthmother gets from her friends and family. Since they are very close she does not have the opportunity to really explore and understand the full dimensions of the problem. Counselling on the other hand, involves a controlled emotional involvement where everything the counsellor does is based on the birthmother's interests rather than the counsellor's.
- ✓ Judge, evaluate, criticize, moralize about the birthmother's behaviour - most of the time birthmothers already feel guilty about their behaviour or choice they have made and are judging themselves harshly. If the birthmother feels judged by the counsellor she might become inhibited, causing her to close up and withdraw from the counsellor. Some birthmothers can even respond by becoming aggressive or defensive or even argumentative.
- ✓ Give simple reassurance - giving simple reassurance will cause the birthmothers to feel that their problems have been minimized and reduced in importance by the counsellor. If the birthmothers feel misunderstood, they could become angry and inhibited. Other birthmothers may become dependent on receiving reassurance which will work against the overall goal of counselling which is to empower clients to help themselves.
- ✓ Offer advice or solutions - advice or solutions might work for the counsellor's situation, but it will not necessarily help the birthmother. Giving advice sends the message that the counsellor is not recognizing the birthmother's uniqueness. The counsellor is not seeing

the birthmother as a person as the counsellor is seeing the problem and not the person. Offering advice puts the counsellor in a higher position than the birthmother. This is contradictory to the ethos of counselling where relationships are built between two equal individuals and consist of a mutual collaborative process. Furthermore, giving advice might foster dependence.

- ✓ Interpret the client's words - interpreting means jumping to conclusions or fitting the birthmother's words into a theory. It implies that the counsellor is standing outside the birthmother's frame of reference whilst relying on her own ideas and assumptions about the birthmother's behaviour. This causes birthmothers to feel unnoticed or misunderstood. It further implies an unequal relationship.
- ✓ Interrogate - counselling is not a question-answer process. As described in paragraph 6.3.2, questioning is a very useful tool to help birthmothers clarify issues or tell their story. It is not the only tool to be used, however. The birthmother might feel unnoticed as a whole person when she is bombarded with questions.
- ✓ Change the subject prematurely or interrupt the birthmother - by changing the subject you are avoiding what the birthmother feels is important to talk about. Rather give birthmothers enough space to explore and discuss whatever they feel the need to talk about. This will convey the message that counsellor is interested in what the birthmother has to say, and that the counsellor recognizes the birthmother's needs. It also indicates that the birthmother and the counsellor have equal input into the helping process.
- ✓ Assume that the counsellor knows what the birthmother is thinking - a counsellor cannot read the mind of the birthmother or any other person. Do not even assume that the counsellor's understanding of a term used by a birthmother is the same as the birthmother's understanding of that term. Check your understanding with the birthmother. It sends the message that you are willing to try and understand the world as the birthmother sees it (Mazabow, 2003:16).



Guidelines will now be given on how to deal with some of the feelings the birthmothers experience after they relinquish their babies for adoption. The feelings that will be discussed are primarily those cited by birthmothers participating in this study.

6.4 Guidelines for working through the adoption

Dealing with grief, fear, sadness and depression can be a daunting task, especially when these emotions follow adoption. The task may be more daunting following adoption because there is a lack of social support for the birthmother, compared with the social support which a mother who buries her child receives. This section will provide guidelines for the counsellor to help the birthmother to cope with her feelings when she returns to school. During the interviews with the birthmothers the following factors were identified as contributors to poor school performance:

- ✓ inadequate self-knowledge;
- ✓ inconsistent support;
- ✓ poor concentration;
- ✓ inability to articulate exactly what support is needed;
- ✓ painful reflections about the adoption;
- ✓ inadequate meaning-making of the adoption in terms of personal advantage;
- ✓ negative perception of the current situation;
- ✓ negative future expectations;
- ✓ continued grieving and emotional isolation;
- ✓ recurrent thoughts, emptiness and guilt about the relinquished child;
- ✓ a lack of something or someone to live for; and
- ✓ disrespect for personal belief systems (e.g. abortion is preferable to adoption).

The above have been grouped and addressed as follows:

	
✓ Inadequate self-knowledge	Guidelines for developing a positive self-concept
✓ Inconsistent support	Guidelines for building a strong support system
<ul style="list-style-type: none"> ✓ Painful reflections about the adoption ✓ Inadequate meaning-making of the adoption in terms of personal advantage ✓ Negative perception of current situation ✓ Negative future expectations ✓ Continued grieving and emotional isolation 	<ul style="list-style-type: none"> Working through depression Working through grief Forgiveness Benefits and disadvantages of adoption

✓ Recurrent thoughts, emptiness and guilt about the relinquished child	Working through guilt and anger
✓ A lack of something or someone to live for	Planning the future
✓ Disrespect for personal belief systems (e.g. abortion is preferable to adoption)	Assertiveness
✓ Inability to articulate exactly what support is needed ✓ Poor concentration	Helping birthmothers cope at school

Table 6.1: Factors impacting negatively on the birthmother

Steps or guidelines will be given to Life Orientation educators to help assist these learners to perform better at school and also in their personal lives in terms of the above. Inability to concentrate is linked to grief, anger and a negative self-concept and will not be dealt with separately.

6.4.1 Working through grief

Worden's model (1991) identifies four tasks to be accomplished when dealing with grief. They are:

- ✓ accepting the reality of loss;
- ✓ working through the pain of grief;
- ✓ adapting to an environment from which the deceased is missing; and
- ✓ emotional relocation and carrying on with life.

All four tasks are important. According to the birthmothers' responses, tasks 1 and 2 are the ones they really struggle with. These two tasks were thus elaborated on more than task 3 and 4.

➤ Task 1

De Jongh van Arkel (2003:294) describes accepting the reality of loss as overcoming the sense that it has not happened. The first task of Worden's four tasks is to come full face with the reality that the person, in this case the baby, will not return. Part of the acceptance of reality is to bring

oneself to believe that reunion is impossible. For the birthmother, this means at least for the next 18 years, if ever, in this life. ~~A way in which~~ people protect themselves from reality is to deny the meaning of the loss. ~~Another~~ way is to practise “selective forgetting”. The first task can be summarized as follows: Step out of the dark by accepting the reality of the loss, both intellectually and emotionally. This can be accomplished by the following:

- ✓ Traditional rituals such as funerals can help the birthmother accept the fact that the child is not returning. The birthmother, counsellor and other people the birthmother would like to include can have a private ceremony for the child that she relinquished where she can express her feelings of loss and sadness. This can be done through writing a funeral letter or simply writing or saying to the child in absence how she feels (Smith, 1995).
- ✓ The following questions (Freed and Salazar, 1993:61) might also guide the birthmother to accept the reality and also to reflect on what has happened:
 - ✓ Was there a moment before (or after) the adoption when you wondered if you made the right choice?
 - ✓ What caused the most pressure as you decided whether or not to relinquish the child for adoption?
 - ✓ Were you alone during the time you had to make the decision?
 - ✓ You may have felt you had no choice. What led you to believe that?
 - ✓ Did you believe that the adoption would end this chapter in you life? What do you think about it now?
 - ✓ What purpose, significance, or meaning did you believe your life had at the time of the adoption? What do you believe now?
 - ✓ Was getting on with your life after the adoption difficult? What was the hardest thing for you to do after the adoption?
 - ✓ Have you been keeping your adoption a secret? How has keeping this secret affected you? Who are you most intent on keeping the secret from? Do you feel that keeping this secret has cost you anything?
 - ✓ Do you feel like you are denying yourself anything because of the adoption? What longings and desires have you denied yourself? What activities have you not allowed yourself to participate in?
 - ✓ What are you doing to keep you from facing difficult feelings about the adoption?

- ✓ Has anyone in your life supported your denial? How has that affected you? How has that affected them? How has that affected your relationship?
 - ✓ What emotions did you avoid in order to go through with the adoption?
 - ✓ What emotions have you not allowed to surface since the adoption? What feelings do you try to avoid?
 - ✓ What purpose, significance, and meaning did you believe your baby's life had at the time of the adoption? What do you believe now?
- ✓ The following can be used to encourage expression of feelings (Freed and Salazar, 1993:67):
- ✓ How are you currently feeling?
 - ✓ How did you feel on the day of the adoption?
 - ✓ How did you feel the day after the adoption?
 - ✓ How do you feel towards the father of the baby?
 - ✓ How do you feel towards the adoptive parents of the baby?
 - ✓ How do you feel about your attorney and social worker?
 - ✓ How do you feel towards the people who encouraged you to relinquish your baby for adoption?
 - ✓ How do you feel towards the people who have not supported you in ways you felt you needed?
 - ✓ How do you feel towards yourself?

Any of the above can be symbolized using drawings, paintings, collages, clay, movement, music or role play. It is not advisable to limit the birthmother to verbal responses only, as diverse mediums encourage expression of emotion (Rooth, 1999:130).

- ✓ As the birthmother is journeying through her loss, she might have made bargains to deal with how she is feeling. These bargains are costly in the long run and should be avoided or worked through. Bargaining is a defense mechanism to shield oneself from pain, to get back some feeling of personal power, or to make up for an action or a loss. Questions related to bargaining can be used to make the birthmother aware of what she is doing.

Such questions include (Freed and Salazar, 1993:77):

- ✓ What bargains do you think you have made?
- ✓ On what foundation are your bargains built?
 - What are your fears?
 - What chances have you taken?
 - What are your fantasies?
- ✓ What were you hoping to gain by making this deal with yourself, your feelings, or someone else?
- ✓ How well has your attempt at bargaining worked? What has it cost you?
- ✓ What concessions or life choices do you feel you have made that were not a good deal at all?
- ✓ What decisions or life choices do you feel you have made that are great deals?

➤ Task 2

The second task is working through the pain or grief. Not everyone experiences the same intensity of pain or feels it in the same way, but it is impossible to lose someone you have been deeply attached to without experiencing some level of pain (De Jongh van Arkel, 2003:295). Even though the mother gave the baby up very early, the mother-child bond already existed. As Kelly (1999) said: "What happens after birth is an elaboration of, and depends on, what happened prior to it." If the birthmother thus connected well with the baby in her womb, she might experience the loss intensely.

The following steps can be given to birthmothers who chose adoption and returned to school (Kander, 1992:26):

- ✓ Release emotional pain through crying, being angry, talking it out or using appropriate physical means. This is an ongoing process that will need to be done repeatedly;
- ✓ Set appropriate goals – this is an act of will as it signifies a decision to survive, to keep going and later to find life meaningful again. Start out with simple goals which you can achieve without difficulty and as you move along, gradually regain the sense of competence which gives you courage. For example, choose to spend at least one school morning per week focused on your studies without thinking once about your adopted

child. If this is too hard, start with one period per week and increase the amount of focused time gradually until you no longer think about your adopted child when you are at school. Reward yourself for this;

- ✓ Find a context of meaning – searching for new views, fresh approaches to the significance of life and to each person's philosophy, your own spirituality, or common sense is the source from which you draw meaning. For example, spend time with people who think logically and who enjoy life.
- ✓ Further expression of emotion and self-liberation needs to be encouraged. Letting go can be summarized in the following steps (Kander, 1992:28):
 - ✓ letting go of self-control and giving vent to feelings - express your feelings. Once again, encourage expression of feelings through various mediums. Expressive art helps birthmothers express and take ownership of feelings. She can draw, paint, make a collage or work with clay (Brink, 2004). Encourage the birthmothers to choose ways and time that suit her and allow herself the healing that the release of emotion brings;
 - ✓ letting go of anger (this can be done by using any of the recommendations discussed in 6.4.2) – it may come to a point where a deliberate decision needs to be made to relinquish anger;
 - ✓ letting go of relationships that seem too demanding – the birthmother may feel overwhelmed with the support from others as she needs time to be left alone to grieve without any demands, responsibilities or advice. At school this does not seem possible since the birthmother is already behind in school work and then comes the demand of new work that needs to be mastered. Encourage her to make time for herself at home to help her deal with these feelings. Alternatively she may need to relinquish relationships which do not allow her to be her own person, such as friends who pressure her or do not understand what she went through;
 - ✓ letting go of suicidal thoughts – after relinquishing a child for adoption some birthmothers (like Birthmother 1) feel suicidal. They can feel very desperate and then death seems to offer release. Encourage the birthmothers to take it one day at a time and if one day is too long, one hour or even one minute at a time and celebrate the victories. In this regard the following can be shared with them:

There are two days in every week
about which we should not worry,
two days which should be kept free
from fear and apprehension.

One of these days is Yesterday
with all its mistakes and cares,
its faults and blunders,
its aches and pains.

Yesterday has passed forever
beyond our control.
All the money in the world
cannot bring back Yesterday.

We cannot undo a single act
we performed;
We cannot erase a single word
we said.

Yesterday is gone forever.

The other day we should not
worry about is Tomorrow
with all its possible adversities,
its burdens, its large promise,
and its poor performance;
Tomorrow is also beyond
our immediate control.

Tomorrow's sun will rise,
either in splendor or
behind a mask of clouds,
but it will rise.
Until it does,
we have no stake in Tomorrow,
for it is yet to be born.

This leaves only one day,

Any person can fight the battle
of just one day.
It is when you and I add the burdens
of those two awful eternities
Yesterday and Tomorrow
that we break down.

It is not the experience of Today
that drives a person mad,
it is the remorse or bitterness
of something which happened Yesterday
and the dread of what Tomorrow may bring.

Let us, therefore, live but one day at a time.
(Tootsie-Pie, 2001)

When birthmothers struggle to let go of suicidal thoughts, they must be referred to a registered psychologist for professional treatment.

- ✓ Letting go of hopes and dreams for the adopted child – the birthmother gives up all her plans and ambitions she might have had for the child she relinquished as she will probably never see the child. This is necessary. Simultaneously encourage the birthmothers by reminding them that the child is with someone who cares and would be the best for the child. By relinquishing the child the child was given better opportunities than what the birthmother could provide at that moment;
- ✓ Letting go of the child – the child who was relinquished will always be a part of the birthmother as the child was in the birthmother's womb for a few months. Encourage the birthmother to cherish the child's memory. Fusion work (Brink, 2004) can be used in this regard, if the birthmother is amenable to it. A fusion ritual entails mixing colours together; making new colours in the process. This conveys the idea that in memory, the birthmother and child, although separated in reality, can be fused. This may empower the birthmother to feel symbolically whole.

➤ Task 3

The third task is to adjust to an environment from which the deceased is missing. In the case of the birthmother, she will never have her baby after the adoption. It can leave her with emptiness (as emphasized by Birthmother 3). According to De Jongh van Arkel (2003:296) this means different things do different people, depending on the relationship they had with the person. A sense of self has to be regained. The adjustment of one's sense of the world may also be necessary sometimes. This may also include some challenges of one's fundamental life values and philosophical beliefs. The birthmother may decide not to have unprotected sex again or to abstain until marriage.

Practical tasks include:

- ✓ the birthmother can build a grave for the child that she relinquished and spend time at the grave, to accept the loss and deal with associated feelings;

- ✓ she needs to focus on present tense daily tasks, such as her school career. In so doing she finds a means of filling the void and managing the emptiness; and
- ✓ she can find a surrogate focus for her emotions. For example, she can buy a cuddly pet to nurture or she could do volunteer work in an old age home where she can spend time caring for people who are needy.

➤ **Task 4**

The last task is emotional relocation and getting on with life. A mourner never forgets the dead person who was so highly valued in life and never totally withdraws his investment in his representation (De Jongh van Arkel, 2003:297.) According to Volkan (as quoted by De Jongh van Arkel, 2003:297), mourning ends when the mourner no longer has a need to reactivate the representation of the dead with exaggerated intensity in the course of daily living. It is necessary to find an appropriate place for the dead in their emotional lives. The same goes for the birthmother who gave up her baby. Some suggestions given by Smith (1995) include the following:

- ✓ holding private ceremonies each year on the child's birthday;
- ✓ writing letters to the child even though they are not sent; and
- ✓ writing stories or a poem about the feelings the birthmother is experiencing.

A letter one of the birthmothers in the story wrote to the child she relinquished can be found in Addendum E.

6.4.2 Working through guilt and anger

Guilt and anger are normal responses to loss. In paragraph 5.7, guilt was expressed as one of the reasons why the birthmothers struggle to perform well at school. Related to guilt and anger is the birthmothers' inability to concentrate at school. If the following steps are worked through properly with the birthmothers (along with acceptance and working through of the grieving process), the recurring thoughts as well as the inability to concentrate should be minimized.

✓ **Guilt**

The following steps can be given to birthmothers to overcome guilt. Each step will need to be worked through with the birthmother:

1. accept the truth – accept who you are and what you have done (that you gave up your baby for adoption) and the consequences (Meyer, 1998:32);
2. confess your mistakes (for example, that you wish you had been able to raise your child yourself) – confess to someone you trust, it is like a weight coming off your shoulders (Meyer, 1998:33);
3. confess the truth towards yourself – stop lying to yourself about what happened and how you could have done it differently (Meyer, 1998:34);
4. confront the guilt – see your true worth as your worth is not determined by the fact that you relinquished your child for adoption (Levang, 1996:98);
5. let go of the idea that others will not be able to provide and that you have to accomplish everything, especially since you could not provide for you child either economically or emotionally (Levang, 1996:100);
6. let go of the idea that life will not get better and you cannot do anything about it. Most of the birthmothers reported that as time goes by, they learn to live with the idea and move on (Levang, 1996:102);
7. stop denying your feelings by expressing them to someone that you trust (Levang, 1996:58). The person might not know what you are going through but can help and support you by listening to you;
8. be honest about your pain – be honest about what causes the pain and how intense the pain is that you are experiencing (Levang, 1996:58);
9. accept forgiveness and forgive yourself (Meyer, 1998:35) – living with the guilt that the child you relinquished might never forgive you is not your responsibility. Your responsibility is to forgive yourself and accept that the child you relinquished also has the choice of forgiveness. What you can change is how you think about it. Look at the positive side of the adoption and accept forgiveness that others might offer to you; and
10. accept your personal responsibilities – my responsibility is now to make a success of my remaining school career and future (Meyer, 1998:36).

✓ **Anger**

Guidelines to work through anger include (Kander, 1992:44):

- ✓ the birthmother needs to talk through and let go of past hostility that was not resolved and still troubles her;
- ✓ if the birthmother is having difficulty with guilt about the anger, recognize the guilt and work through the guilt with the steps listed under guilt;
- ✓ fury against the individuals who coerced adoption will have to be worked through if such people were present;
- ✓ the birthmother will need to discover whether the anger with herself is rational or irrational, and if the latter is true, let it go. If the former is true, she must give deep consideration to acceptance and self-forgiveness;
- ✓ the birthmother needs to seek help about animosity towards the father of the baby, the family and other important people in her life;
- ✓ anger towards the relinquished child which continues for many months without lessening in intensity, could be talked through with someone who can help, for example a psychologist. It is important to remember that the birthmother can still love the child she relinquished whilst feeling furious or hurt by the child; and
- ✓ visualization is effective for some birthmothers. They need to see the child in their mind's eye and interact with the child. For example, they could explain to the child why adoption was chosen or they could imagine the child happy in its new home and so on. The birthmother would visualize whatever would bring her relief. The birthmother may have to repeat this exercise a number of times at intervals before a way is cleared for more rational thought.

Practical, physical expressions that the birthmother can use to alleviate anger include (Kander, 1992:42):

- ✓ beating pillows;
- ✓ stamping up and down;
- ✓ kicking a ball;
- ✓ jogging or going to a gymnasium;
- ✓ digging in the garden until she is tired out;

- ✓ screaming into a pillow;
- ✓ screaming in her head;
- ✓ doing tiring household chores like washing windows;
- ✓ packing out cupboards and cleaning the room; and
- ✓ participating in active sport such as squash or hockey.

What complicates working through anger, are all the misconceptions surrounding anger. It might be worthwhile to discuss the following misconceptions and truths about anger with the birthmother:

Misconceptions about anger:

1. anger is bad;
2. good people don't get angry;
3. anger always means you yell, throw things, hurt people, and get it out of your system any way you want;
4. if I get angry, it is always better to pretend that I am not;
5. when another person does not meet my expectations, I should stay angry until they change;
6. when someone does something I don't like or treats me in a way I don't want to be treated, I have a right to my anger.

Truths about anger:

1. all humans get angry;
2. anger is a feeling, one that is not good or bad;
3. my response to the feeling of anger can be either positive or negative;
4. being angry does not always mean yelling or violence;
5. when some hurts me or fails to meet my needs and expectations, I need to express my feelings and move on;
6. it is my choice how I respond to my anger and my choice if I remain angry;
7. sometimes people do things I don't like. All people are different; they do not and will not always measure up to my standards;
8. I do not have the right to harm myself or anyone else because of my anger.

(Freed and Salazar, 1993:95)

6.4.3 Working through depression

Although depression was not overtly referred to by the birthmothers in this study, it is a normal part of grieving and for this reason guidelines will be given. Basic symptoms of depression include (Copeland, 1997:53):

- ✓ a disrupted sleep pattern – the birthmother struggles to fall asleep easily or she awakes at night and cannot fall asleep again, or she sleeps much more than normal;
- ✓ all activity seems to happen in slow motion and her energy levels are low;
- ✓ the birthmother seems to have lost interest in life;
- ✓ the birthmother's self-esteem has hit rock-bottom;
- ✓ the birthmother experiences lack of concentration – the inability to focus on anything for very long, or is easily distracted and finds herself daydreaming most of the time;
- ✓ the birthmother is constantly dwelling on her loss;
- ✓ there is a change in the eating habits of the birthmother;
- ✓ the birthmother might struggle with drug or alcohol abuse ;
- ✓ the birthmother may have become totally withdrawn; and
- ✓ the birthmother's lack of memory is severe.

When depression becomes prolonged, treatment may be necessary. Treatments for depression are numerous. It is important that the Life Orientation educator remember to refer the birthmother whose depression has become entrenched to a psychologist and/or psychiatrist. The following guidelines can be used as additional support (Copeland, 1997:53):

- ✓ encourage the birthmothers to share their sorrow, thoughts and feelings. This can be done either by talking to someone or writing in a journal;
- ✓ form a support group at school – it is not necessary that the other people in the support group have had the same experience. They are there to encourage each other and to work through the unresolved feelings. If a support group is not possible at school, find support groups in the area and refer the birthmother to them. Psychologists might be able to help place the birthmother with the right support group;
- ✓ support can also include the following (Copeland, 1997:55):
 - ✓ talking it out with an understanding person;
 - ✓ getting emotional support from a person she trust;

- ✓ ~~peer~~ counselling;
- ✓ talking to people who validate her feelings;
- ✓ spending time with good friends;
- ✓ talking to staff at a crisis clinic or hotline;
- ✓ arranging not to be alone; and
- ✓ spending time with and taking responsibility for a pet.
- ✓ Acknowledge and accept positive qualities – focus on positive qualities by rewarding the birthmother when she acknowledges these qualities. Teach the birthmother to focus on positive qualities about herself and others and to be thankful for what she has;
- ✓ participate in activities – the following suggestions are given to alleviate depression by engaging in positive activity (Copeland, 1997:54):
 - ✓ exercise;
 - ✓ sport such as hockey, and athletics;
 - ✓ long walks;
 - ✓ yoga;
 - ✓ reading;
 - ✓ listening to music;
 - ✓ long, hot baths;
 - ✓ drawing or painting;
 - ✓ journal writing;
 - ✓ writing poems or letters;
 - ✓ playing a musical instrument;
 - ✓ cleaning;
 - ✓ watching TV; and
 - ✓ helping others.
- ✓ Help the birthmother change her attitude by:
 - ✓ staying active;
 - ✓ remembering that depression ends;
 - ✓ recalling good times;
 - ✓ being good to herself;
 - ✓ diverting attention to more positive things;
 - ✓ being gentle with herself;

- ✓ refusing to feel guilty;
- ✓ focusing on living one day at a time;
- ✓ endorsing and affirming efforts made by herself; and
- ✓ laughter (Copeland, 1997:56).
- ✓ Encourage self-care, which includes making the birthmother aware of the following:
 - ✓ Changing eating habits by eating food that is high in complex carbohydrates and eliminating food that worsens depression like chocolates (Copeland, 1997:248).
 - ✓ Getting sufficient sleep and maintaining a balance between rest and activity.

6.4.4 Guidelines for developing a positive self-concept

When the birthmother's self-esteem or self-concept is low, it contributes to the following (Schiraldi, 2001:5):

- ✓ depression;
- ✓ anxiety;
- ✓ stress symptoms;
- ✓ alcohol and drug abuse;
- ✓ eating disorders and unhealthy dieting;
- ✓ poor communication;
- ✓ promiscuity;
- ✓ dependency;
- ✓ sensitivity to criticism;
- ✓ social difficulties such as withdrawal;
- ✓ poor performance; and
- ✓ preoccupation with problems.

The following guidelines are given by Schiraldi (2001:29) to help build a positive self-concept or self-esteem. Birthmothers will also benefit from these guidelines:

- ✓ all humans have infinite, internal, eternal and unconditional worth as a person – help the birthmother to see her worth as a person as her worth is not determined by what she has done;

- ✓ recognize and replace self-defeating thoughts – everything is not about the birthmother and when something happens it does not mean it is directed at the birthmother. Help the birthmother to look beyond herself and think of other reasons why a person reacts the way she does. The following beliefs need to be questioned:
 - ✓ I (the birthmother) must be loved or approved by everyone I consider significant;
 - ✓ I (the birthmother) must be thoroughly competent and adequate in everything I do. I should not be satisfied with myself unless I am the best or excelling;
 - ✓ if something is or may be dangerous or fearsome I must be terribly concerned about it and keep on guard in case it happens;
 - ✓ it is easier to avoid than face life's difficulties and responsibilities;
- ✓ acknowledge reality – the birthmother's worth as a person is not determined by her external events. If the birthmother did something wrong, it does not determine her worth as a person;
- ✓ regard her core worth – help the birthmother to realize that her desirable traits and behaviours express her worth, and serve as reminders of her worth;
- ✓ create the habit of core-affirming thoughts – encourage the birthmother to repeat the thoughts that are positive about herself to herself;
- ✓ the good opinion of others – love and approval of others does not equal self-esteem but can augment the growth of self-esteem. The birthmother should be encouraged to learn to accept compliments from others and to look for the positive in what others say without fearing implied meaning or hidden agendas;
- ✓ acknowledge and accept positive qualities – encourage the birthmother to make a list of her qualities or strengths and then to acknowledge them by using them;
- ✓ reinforce and strengthen body appreciation – looks do not determine the worth of a person and the birthmother should be confronted with her acceptance of her body. If she is not satisfied with her body as it is, ask her what she would change and if that would really make her feel worth more;
- ✓ liking the face in the mirror – the birthmother needs to learn to accept and love herself for who she is. Let the birthmother tell herself every morning in the mirror that she is valued and loved;
- ✓ the birthmother needs to accept that she is not perfect – help the birthmother to realize that she does not need to be perfect and good in everything. If the birthmother was good at everything, she would not need other people and would definitely not make wrong

decisions. The opposite is true and therefore life stays a learning experience which she needs to grab with both hands.

6.4.5 Guidelines for building a strong support system

The school performance of birthmothers who experienced constant support during and after the pregnancy and adoption only deteriorated marginally. The school performance of birthmothers whose support fluctuated deteriorated significantly. It is therefore of importance that the birthmothers get constant support from various sources.

It would be beneficial for the birthmothers if they have a network of support. The benefit of having a support network is that when one of the supporters withdraw, the other supporters can still support the birthmothers, who will then still have continued support.

Copeland (1997:115) suggests that each person have at least five good friends or supporters that they can be called on when someone to talk to is needed. Family members can also be candidates for this support network but they should not be the only people involved. This information must be shared with birthmothers.

The support network should consist of people who can:

- ✓ empathize with the birthmother;
- ✓ affirm the birthmothers individuality and strengths;
- ✓ relax with the birthmother;
- ✓ be open-minded;
- ✓ accept the birthmothers ups and downs; and
- ✓ work with the birthmother as she decides on her next best step and support her as she continues with her life.

The support system can help birthmothers cope better with their home environments as the support group can give the birthmothers multiple perspectives and ideas about how to improve or cope with their home environment.

The Life Orientation educator can empower the birthmother by encouraging her to draw up a concept support list. By so doing she will know whom to contact for support. Such a support list should include:

- ✓ someone to rely on in a crisis;
- ✓ someone who makes the birthmother feel good about herself;
- ✓ someone the birthmother can be totally herself with, who makes her feel wanted;
- ✓ someone who will tell the birthmother how well or badly she is doing;
- ✓ someone the birthmother can talk to when she is worried;
- ✓ someone who really makes the birthmother stop and think hard about what she is doing;
- ✓ someone who is lively to be with; and
- ✓ someone who introduces the birthmother to new ideas (Nienaber, 1997:135).

6.4.6 Assertiveness

Assertiveness is the ability to stand up for one's rights in an honest and forthright manner, while still showing respect for other people (Du Toit, 1997:228). This is especially necessary when belief systems are challenged (as with Birthmother 1 who was forced to choose adoption) and pressure is experienced (as with Birthmother 5). Being assertive has the following benefits for the birthmother:

Assertiveness encourages:

- ✓ active participation in making important decisions (as opposed to being passive);
- ✓ getting what you want without alienating others;
- ✓ emotional and intellectual satisfaction or respectfully exchanging feelings and ideas;
- ✓ saying no when the birthmother means it;
- ✓ looking at the future positively;
- ✓ confidence when interacting with others; and
- ✓ good self-esteem (Du Toit, 1997:228).

Assertiveness questionnaires can be given to the birthmothers to ascertain their current thoughts about assertiveness and later determine whether assertiveness skills have improved.

Teaching the birthmothers communication skills can help them better express their needs. If the birthmothers see that others are responding to what they hear, this might impact positively on the birthmother. Conflict management is included in this. Help the birthmother to learn how to handle conflict and what style she prefers to use when confronted with unpleasant situations.

Good negotiating principles are:

- ✓ conflict is inevitable – everybody fights from time to time;
- ✓ do not use name-calling, threats and anger;
- ✓ negotiation involves two parties with important, legitimate, but opposing interests;
- ✓ separate your feelings from the issue;
- ✓ focus on interests, not positions;
- ✓ seek mutually agreeable options;
- ✓ be flexible: there are almost always several solutions what will benefit you; and
- ✓ be persistent: do not give up – usually there is a solution (Claassens, 1997:118).

Using the above negotiation skills can help the birthmother cope with conflict better.

Assertiveness challenges the birthmother's perception about traditional beliefs and thus when the birthmother has more information about the traditional view of adoption and her right to choose her own belief system she is empowered to feel less guilty and enabled to move on with her life.

If a birthmother is assertive, it will help her cope with the idea that although abortion appears to be currently more popular than adoption, she has the right to an individual choice and that her choice as personal belief is valued and respected. This will give the birthmother the opportunity to come to terms with the adoption of her baby as she may feel less guilty about her decision and may even look past the judgments issued by others about her choice.

The assertive birthmother will also be able to ask for help when she needs it as she has more confidence when she is interacting with other people.

Assertiveness, like writing, is a skill that is learned with time. The more it is practised, the better the person becomes with the skill. Numerous sources on the development of assertiveness are available and the educator is referred to these books as further guidelines.

Books available on line at www.amazon.com are:

- ✓ *Your perfect right: A guide to assertive training* – by R.E. Alberti and M.L. Emmons;
- ✓ *Assertiveness at work: A practical guide to handling awkward situations* – by K. Back and K. Back;
- ✓ *The assertiveness workbook: How to express your ideas and stand up for yourself at work and in relationships* – by R.J. Paterson;
- ✓ *Developing your assertiveness* – by Sue Bishop; and
- ✓ many more.

6.4.7 Forgiveness

Birthmothers forced to have their babies adopted will need to forgive the people who forced them into relinquishing their baby for adoption. It must be remembered that even though the birthmother feels that she was forced to relinquish the child for adoption, according to laws relating to adoption, the mother of the baby is the only person to sign the adoption forms and it has to be her choice. Nevertheless, a teenager is still dependent on her parents and so her right to choose can be manipulated. The birthmother who felt that her mother bullied her into having her child adopted may need to forgive her mother some time in the future. The other birthmothers may also have people they need to forgive such as the father of the child, the doctors, the people involved in the legal system and important others. Birthmothers who are struggling to come to terms with their own actions, will also need to engage in self-forgiveness.

Characteristics of forgiveness (Freed and Salazar, 1993:118) include:

- ✓ forgiveness restores hearts and even relationships;
- ✓ forgiveness also releases emotions and renews life;
- ✓ forgiveness is to release yourself or someone else from guilt for their actions;
- ✓ forgiveness acknowledges pain and comes to understand better the events that led up to the adoption; and
- ✓ forgiveness is not only an intellectual exercise but also a matter of the heart. No one can force the birthmother to forgive. The choice to enter into forgiveness is the birthmother's choice.

The following aspects of forgiveness need to be shared with the birthmothers:

- ✓ forgiveness is a hard thing to do. Blocks to forgiveness are anger and fear as these are natural responses to injury (Freed and Salazar, 1993:120). Anger makes the birthmother feel powerful and without it she may feel disarmed;
- ✓ the birthmother may try to let herself or others off the hook by justifying behaviour. It is important to realize that the birthmother needs to forgive people for the things she blames them for and the bad things they have done e.g. her boyfriend for impregnating her or her parents for not being supportive enough. Help the birthmother place the responsibility where it belongs. The birthmother needs to be specific about what the wrong action was and the degree of pain that resulted from the action;
- ✓ forgiveness does not mean forgetting. The birthmother will always remember her child and the negative event surrounding the adoption. If forgiveness was about forgetting, valuable lessons would be lost and the same mistakes would be made. Forgiveness further does not imply that all the pain is gone. There is something profoundly sad about things that cannot change. The birthmother will not see the child she relinquished until the child is 18 years old and at that stage, it is the child's choice if the child wants to be re-united with his biological mother (Freed and Salazar, 1993:120; Van der Watt, 1998:7);
- ✓ forgiveness is not based on others' reactions. The birthmother cannot control the other person's reaction and actions and therefore has to make the choice to forgive regardless of other people's responses; and
- ✓ the birthmother cannot earn forgiveness for herself. Forgiveness is a gift that you receive. Like giving forgiveness, receiving forgiveness is also a choice.

The researcher has implemented the following with the birthmother whom she counsels and has found these techniques to be of value:

Let the birthmother make a list of people that she needs to forgive. After she made the list it is important that she makes another list with the things she needs to forgive them for. The next step is to forgive them. This can be done little by little as she becomes ready to forgive someone. When she decides to forgive someone it helps to verbalize what she is doing by saying something like:

"Mother, I forgive you for forcing me to have the adoption."

Remember that forgiveness is not about accusing people but setting people free. It is therefore advisable that the birthmother include feeling words in her statement of forgiveness such as:

"Mother, I forgive you for forcing me to have the adoption as it made me feel unvalued."

If it will benefit the birthmother and the person that needs forgiveness, the birthmother can practice through role play and then tell the person that she forgives the person. This will not be possible with all people and should be done in a non-threatening way.

6.4.8 Benefits and disadvantages of adoption

It is important that the Life Orientation educator have knowledge on both the benefits of adoption and the disadvantages. The Life Orientation educator also needs to know how the families of the birthmother are influenced by adoption and what benefits adoption holds for the birthmother's family.

The benefits of adoption are discussed in paragraph 3.5 and the impact it has on the birthmother is discussed in 3.7. These documented benefits can be used by Life Orientation educators to inform birthmothers. It can help the birthmother to realize that what she is feeling and experiencing is not restricted to her and that other birthmothers experience similar feelings and problems.

Encourage the birthmother to make a list of the advantages for herself, the child, for her family, the community and friends. Discuss these advantages with the birthmother. If the birthmother struggles with articulating advantages, help the birthmother by giving her a few examples such as those listed in paragraph 3.5.

After a discussion with the birthmother about the advantages and disadvantages, encourage the birthmother to make a list of people she thinks is influenced by the adoption. Underneath each person she can then list both the advantages and disadvantages. Help her to work through forgiving herself for the disadvantages she caused others and also if necessary help her seek forgiveness from the people that she feels she disadvantaged.

6.4.9 Planning the future

Some of the birthmothers interviewed felt that they have nothing to live for. This feeling might be caused by depression or because she has no future plans as the birthmother may feel that all she was living for was the child that is now adopted.

The birthmother has to reorganize her time after the adoption to fit her current needs (Viviers, 2001:223). This can be done by:

- ✓ creating order – the birthmother needs to create definite spaces in her room, to sleep, to pack away things, and to do homework;
- ✓ dividing time – the birthmother needs to set out her priorities and goals, get a year planner, notice board, monthly planner, diary to do a week plan and a time table;
- ✓ control time – the birthmother needs to work out a daily program or timetable to fit her needs.

Using time tables gives the birthmother:

- ✓ stability;
- ✓ helps the birthmother to be more in control of what she is doing;
- ✓ utilizes the birthmother's time better;
- ✓ helps the birthmother to enjoy things she likes without feeling guilty because they have been planned for;
- ✓ increases study time;
- ✓ controls the things that can distract the birthmother; and
- ✓ helps the birthmother focus on what is really important.

When the birthmother sets her time table it is important that she makes sure of her:

- ✓ limitations;
- ✓ available time;
- ✓ ongoing commitments;
- ✓ needs;
- ✓ goals;

- ✓ the promises she made to others and herself;
- ✓ principles; and
- ✓ capacity – she needs to watch out for burnout (Viviers, 2001:224).

Help the birthmothers to set goals for the future (long term goals) and short term goals. The short term goals must be reachable for the birthmother. Help the birthmother to determine steps to reach these goals. All the goals must be agreed on by the birthmother and she has to see them as worthwhile. The rewards linked to these goals must thus be worthwhile for the birthmother.

Questions related to setting goals used by the researcher to help the birthmother she counselled include:

- ✓ What do I want to achieve in the next few days?
- ✓ What do I need to do to achieve the goals for the next few days?
- ✓ What do I want to achieve in the next few weeks?
- ✓ What do I need to do to achieve the goals for the next few weeks?
- ✓ What do I want to achieve in the next few months?
- ✓ What do I need to do to achieve the goals for the next few months?
- ✓ What do I want to achieve in the next year?
- ✓ What do I need to do to achieve the goals for the next few years?
- ✓ What do I want to achieve in the next five years, ten years, and twenty years from now?
- ✓ What do I need to do to achieve the goals for the next five, ten and twenty years from now?

Setting goals will help the birthmother find meaning in her own life and will help her to move on from the adoption.

6.5 Helping birthmothers cope at school

After the birthmother has returned to school, it is important that the school counsellor or Life Orientation educator helps the birthmother to adjust. If permission is received from the birthmother or if she chooses to do it herself, it would be helpful if teachers know about what happened so that they could give the necessary support, especially in terms of assistance to catch up on missed work.

The Life Orientation educator can use the above information (covered in 6.4.1) to work through the grieving process with the birthmother. Other feelings related to the relinquishing will also need to be worked through. The Life Orientation educator must, however, remember that the adoption process is experienced differently by every birthmother and the steps given above should be altered as needed to suit each individual's needs. It is important to bear in mind that the birthmothers in this sample could not articulate what support they required from their educators. For this reason the Life Orientation educator needs to take care to get to know the birthmother as an individual and to form a bond with her, in order that support offered can be tailored to the individual birthmother's needs.

During the counselling process or after the counselling process it would be helpful for the birthmother to have a support system such as a buddy system, mentors and a support group. Peer tutoring can also be encouraged as this is an effective manner of re-integrating the birthmother into the classroom (Bender, 2002: 94).

Lastly, do not lose hope. Most of the birthmothers in this study are progressing at school even though it is taking some of them longer to come to terms with what has happened and to readjust and continue.

The following poem encourages a person to be all that you can be. As a Life Orientation educator, be all you can and need to be to encourage the birthmother to be all she is and can be.

If I could be – Ken Kirk (from Schiraldi 2001:32)

If I could be a tree I would
provide shade for all mankind.

If I could be the sea I would
be calm for all to travel.

If I could be the sun I would
provide warmth for all living things.

If I could be the wind I would
be a cool breeze on a hot summer day.

If I could be the rain I would
keep the earth fertile.

But, to be any one of these things would be to miss out on all the rest. And this is why,
if I could be anything I would be nothing more than me.

2.6 Conclusion

Relinquishing a child for adoption has a negative impact on a birthmother's school performance as well as on her emotions. Practical guidelines were provided on how to help these birthmothers cope better at school after the adoption. They are by no means exhausted.

The next chapter will focus on the conclusions reached by the study.

CHAPTER 7
CONCLUSION

"Power is strength and the ability to see, yourself through your own eyes and not through the eyes of another. It is being able to place a circle of power at your own feet and not take power from someone else's circle".- Agnes Whistling Elk (Capland and Lang, 1995:78)

OVERVIEW CHAPTER 7

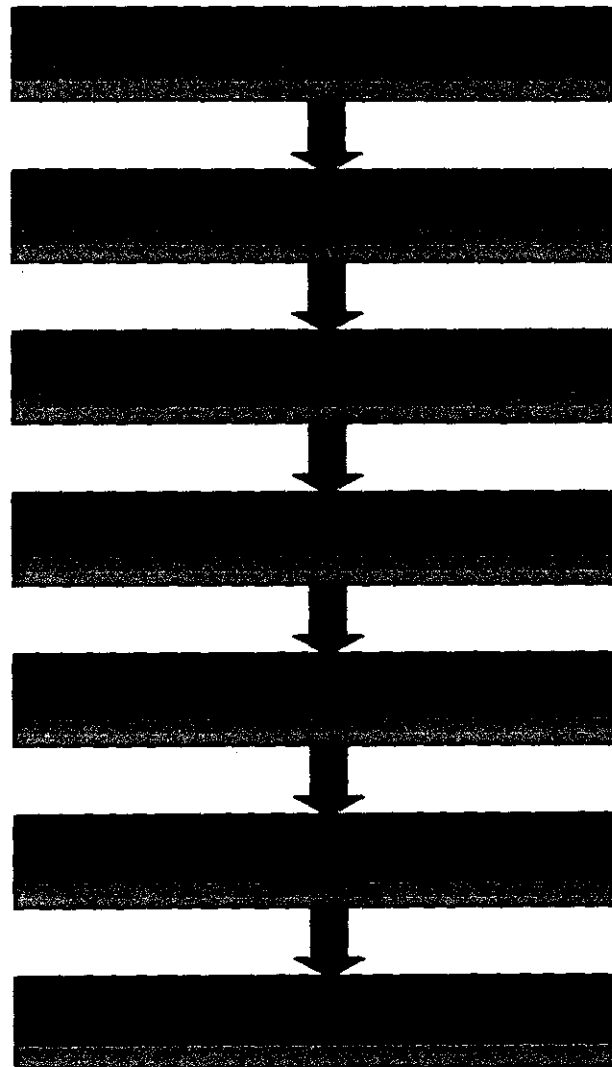


Figure 7.1: Overview of Chapter 7

7.1 Introduction

The aim of this chapter is to provide a summary of the findings of this study and to explain the conclusions deduced. The chapter will also provide a discussion of future research and the limitations of this study.

7.2 Aims governing this study

In the following table the aims of this study and the achievements thereof are summarized:


AIMS	ACHIEVEMENTS
☛ to conduct a literature study on the impact of adoption on the adolescent birthmother's school performance by looking at the adoption process and factors impacting on school performance;	☺ an intensive literature study was conducted into factors that impact negatively on school performance as well as the adoption process and factors relating to adoption. This literature study was elucidated in two chapters;
☛ to conduct interviews with adolescent birthmothers who have given their babies up for adoption to gain phenomenological data on the impact of adoption on the adolescent birthmother's school performance;	☺ five phenomenological interviews were conducted to gather data on the experience of going back to school after relinquishing a child for adoption; ☺ 100% of the birthmothers reported that their school work had deteriorated after the adoption;
☛ to write guidelines for Life Orientation educators to help birthmothers who have chosen adoption and returned to school, adjust at school following the adoption.	☺ from the identified needs recommendations and guidelines were developed for Life Orientation educators to help these learners adjust at school by working through the adoption.


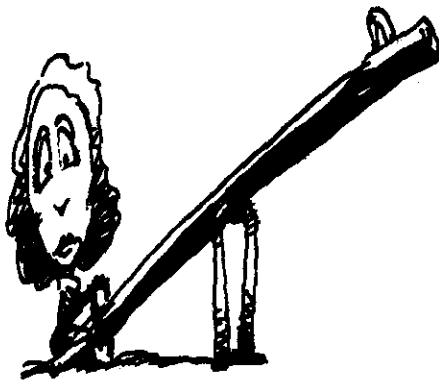

Table 7.1: Aims governing the study

From the above it is clear that the aims targeted were achieved.

7.3 Conclusions drawn from the literature

The following conclusions were drawn from the literature:

<p>Factors impacting negatively on school performance.</p> 	<p>The following factors were identified as impacting negatively on school performance:</p> <ul style="list-style-type: none">▪ genetic vulnerability;▪ inadequate intelligence;▪ sensory disabilities;▪ chronic illnesses;▪ HIV/Aids;▪ gender and age;▪ health and nutrition;▪ physical disabilities;▪ neurological disabilities;▪ attention deficit;▪ thinking, learning and remembering;▪ motivation;▪ learning difficulty;▪ mental handicap;▪ emotional intelligence;▪ identity formation;▪ resilience;▪ psychological problems;▪ self-concept;▪ background and home;▪ parental education;▪ lack of parental participation;▪ peer group;▪ social factors;▪ socio-economic status and poverty;▪ educational factors;▪ demographic factors;▪ geographical and climatic factors;▪ religion; and▪ culture (Donald, Lazarus & Lolwana, 2002; Gouws and Kruger, 1996; Barlow & Durand, 1999).
---	--

<p>The adoption process in South Africa.</p> 	<p>The adoption process within South Africa consists of the aspects of the law and the adoption procedure (Betzen, 2004; Child care act (74/1983), section 18; Human, 2000). Aspects of the law have the following steps: identifying the child to be adopted;</p> <p style="text-align: center;">↓</p> <p>home study of the adoptive parents;</p> <p style="text-align: center;">↓</p> <p>hearing in the children's court; and</p> <p style="text-align: center;">↓</p> <p>if approved the child is deemed the legitimate child of the adoptive parents.</p>
<p>The phenomenon of adoption.</p> 	<p>Adoption is a complex phenomenon. In addition to its legal aspects, it involves an understanding of the following:</p> <ul style="list-style-type: none"> • emotional, educational and financial benefits of adoption for the birthmother; • emotional, physical and cognitive benefits of adoption for the adoptee; • adoption as immunity for the birthmother from social sanctions; and • which birthmothers are more likely to choose adoption (McLaughlin, Manninen and Wings, 1988; Stolley, 1993; and Fagan, 1996).
<p>The impact of adoption on the birthmother.</p> 	<p>The impact of adoption on the birthmother is multilayered. It affects:</p> <ul style="list-style-type: none"> ▪ physiological functioning; ▪ sexuality; ▪ intrapersonal functioning; ▪ cognitive development; ▪ interpersonal functioning; and ▪ spirituality (Shiffler, 1991; Donald, Lazarus and Lolwana, 2002; Gouws and Kruger, 1996; Sachdev, 2001; and Smith, 1995).


	<p>Adoption requires coping with varied emotions. These include:</p> <ul style="list-style-type: none"> ▪ fear; ▪ grief; ▪ anger; and ▪ depression (De Jongh van Arkel, 2003; Begleiter, 1983; Meyer, 1998; Long, 1997) as these form part of the healing process for the birthmothers.
---	---

Table 7.2: Conclusions from the literature

The literature is therefore clear that the adoption process has a profound influence on the adolescent birthmother and that there are a range of factors that influence her school performance negatively.

7.4 Conclusions from the empirical study

From the phenomenological interviews that were held with 5 birthmothers who relinquished their babies for adoption and then returned to school, the following information was obtained:

- ✓ the average age (at which birth was given and the baby relinquished for adoption) of the birthmothers who participated in this study was 15 years and 7 months; it would seem therefore that teenage pregnancies are a reality and that the impact must be addressed at schools since adoption can occur during compulsory school age;
- ✓ the following basic needs that were identified in the interviews are:
 - ✓ inadequate self-knowledge;
 - ✓ inconsistent support;
 - ✓ poor concentration;
 - ✓ inability to articulate exactly what support is needed;
 - ✓ painful reflections about the adoption;
 - ✓ inadequate meaning-making of the adoption in terms of personal advantage;
 - ✓ negative perception of current situation;
 - ✓ negative future expectations;

- ✓ continued grieving and emotional isolation;
- ✓ recurrent thoughts, emptiness and guilt about the relinquished child;
- ✓ a lack of something or someone to live for; and
- ✓ disrespect for personal belief systems (e.g. abortion is preferable to adoption).

All of the above needs were noted and guidelines (based on these needs) were compiled for the Life Orientation educator.

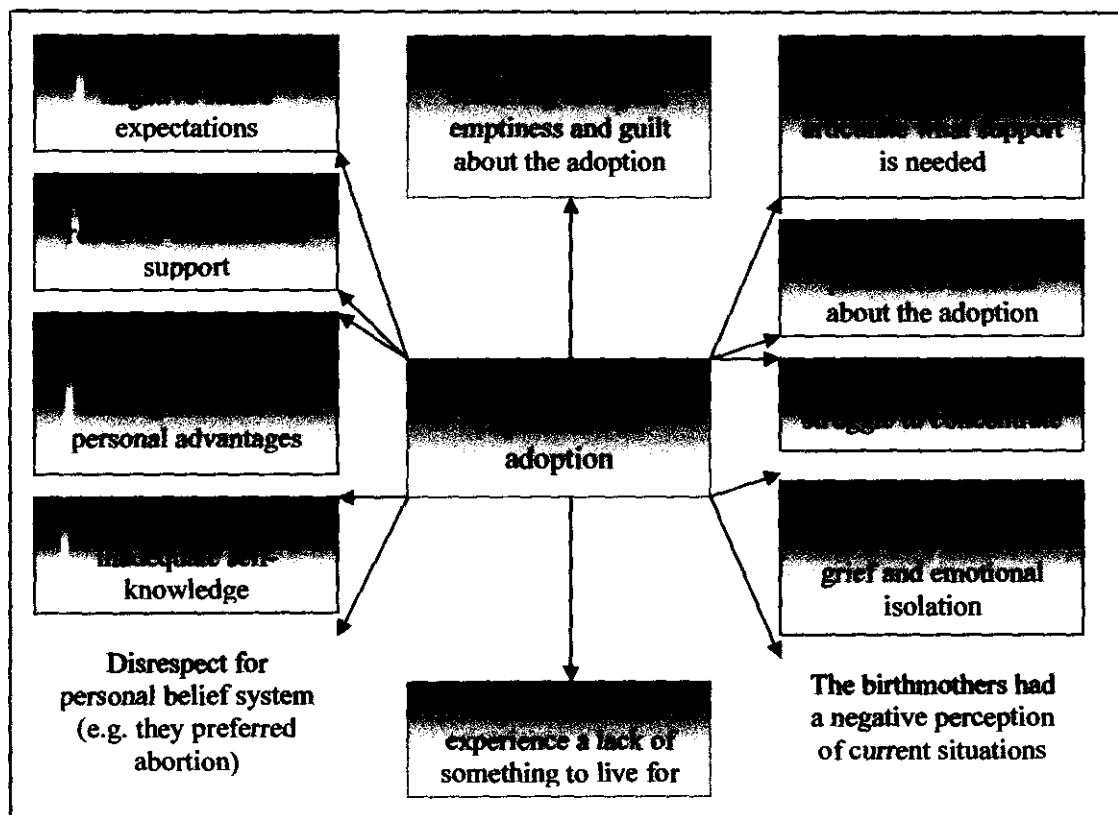


Figure 7.2: Conclusions from the empirical study

For more detail the reader is referred back to chapter 5.

Although the study seems to have achieved the aims, there are some limitations, which will be discussed next.

7.5 Limitations for the study

The following limitations are noted:

- ✓ The phenomenological interviews were conducted with only 5 birthmothers. The sample size is small and no generalizations can be made from this study other than for the birthmothers involved in the study.
- ✓ All birthmothers who participated in this study come from the same geographical region. This homogeneity of natural ecological conditions limits the study in the sense that no comment can be made about the impact of natural ecological conditions on school performance following adoption as these conditions are uniform to all participants.
- ✓ The study's participants were only white adolescent birthmothers. This study could thus not be applied across culture nor could cross-cultural conclusions be drawn from this study.

7.6 Contributions made by the study

The study made the following contributions:

- ✓ To the researcher's knowledge, this is the first study done in South Africa to document the effect that relinquishing a child for adoption has on the adolescent birthmother's school performance.
- ✓ The findings of current literature were summarized in table and diagram form facilitating an easy overview of the current literature.
- ✓ The adoption process is meaningfully summarized. This can be of use to psychologist and Life Orientation educators wanting to counsel pregnant adolescents on the option of adoption.
- ✓ The most important contribution from the researcher's point of view is the findings of the study that adoption can influence school performance negatively. This does not imply that adoption is negative, but rather that an effort must be made to support the adolescent birthmother in order to minimize such negative effects.
- ✓ The study provides guidelines for Life Orientation educator's to help them help birthmothers deal with adoption.
- ✓ The guidelines are practical, including questions and activities which will empower both birthmothers and Life Orientation educators.

- ✓ The researcher is of opinion that this study provides hope for birthmothers and the educators of the birthmothers as there are now guidelines to assist these learners cope better at school following adoption. This study also gives the Life Orientation educators a glimpse of the experience that the adolescent birthmother is going through to better assist her in her journey.

7.7 Recommendations for further study

This study did not address all the aspects involved which influence both school performance negatively and the adolescent birthmother's choice of relinquishing a child for adoption. Therefore it is hoped that this study will motivate other researchers to conduct further studies, such as:

- ✓ the influence culture plays in the relinquishment of babies;
- ✓ the influence the environment has on the learners' school performance after the relinquishment of a child;
- ✓ developing a program for educational psychologists to assist Life Orientation educators in the support of birthmothers;
- ✓ the impact adoption has on the birthmother's family after the birthmother has relinquished the baby for adoption;
- ✓ the correlation, if any, between school performance of the adolescent birthmother before and after the adoption with a bigger sample size and cultural diversity so that it can be generalized; and
- ✓ an in-depth study on the effect guilt plays after the relinquishment to become religious.

7.8 Conclusion

The reality of adoption in South African schools today is just as real as adoptions in the USA. In order for the Life Orientation educator to help these learners, it is necessary to understand the process and the influences adoption has on the adolescent birthmother.

The researcher chooses to conclude her study with a poem written by a birthmother for her relinquished baby, which in the writers' opinion epitomizes the essence of the experience the

birthmother has after relinquishing her baby for adoption, as it was presented in the literature study; but more so in the empirical study.

Memories of an Angel- Jae 2000

Memories of an angel sent from God in Heaven
A baby born so precious and so small
Born to a young mother, just a child herself
Who made the choice to sacrifice it all

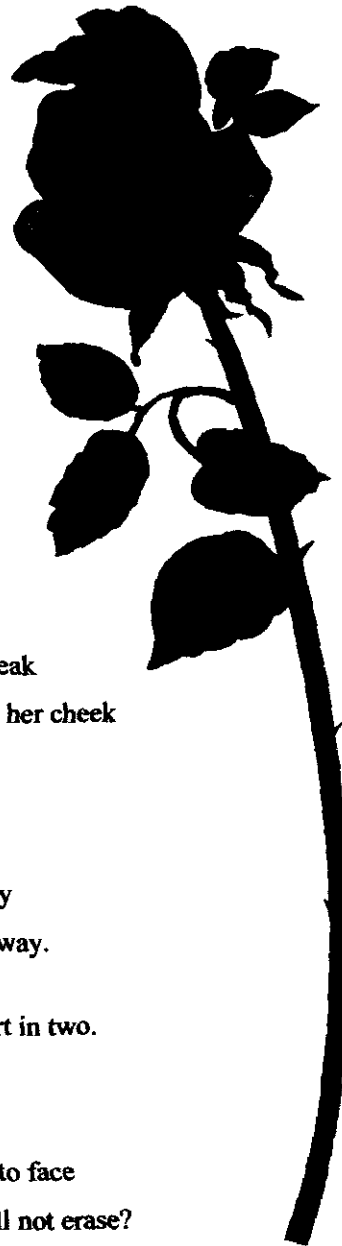
She didn't have any money, the Daddy was long gone
Knew she couldn't raise a baby solely on her own
So she had to find another to do what she could not
Who could provide that child a safe and happy home

She held her Angel before they took her child away
Another couple waits to take that baby home today
Kissed her Angel, said goodbye, for she could not be weak
Searching for the strength to cope as the tears ran down her cheek

A story to be told, perhaps, a lesson to be learned
A choice that led to sacrifice, a lifetime of concern
Love is not supposed to hurt, although sometimes it may
But we still seem to make it through, we always find a way.

Choices that we have to make in life can break our heart in two.
When it comes to love we know what's right,
We do what we have to do
It may not be easy but sometimes this is what we have to face
Will the pain diminish, or is it something even time will not erase?

Memories of an Angel...Sent from God in Heaven.



BIBLIOGRAPHY

ACTS see SOUTH AFRICA.

ALLENDER, M. 2002. Adolescent. (*In* Edelman, C.L., & Mandle, C.L., *eds.* Health promotion: throughout the lifespan. 5th ed. Missouri, St.Louis : Mosby. p. 617-647.)

ALLENDER, M. 2002. Overview of Growth and Development Framework. (*In* Edelman, C.L., & Mandle, C.L., *eds.* Health promotion: throughout the lifespan. 5th ed. Missouri, St. Louis : Mosby. p. 399-415.)

APA see AMERICAN PSYCHIATRIC ASSOCIATION. 2002. Diagnostic and statistical manual of mental disorder. DSM-IV-TR. 4th ed. Washington, DC.

BABBIE, E., MOUTON, J., VOSTER, P. & PROZENSKY, B. 2001. The practice of social research. South African Edition. Cape Town : Oxford.

BACHRACH, C.A., STOLLEY, K.S. & LONDON, K.A. 1992. Relinquishment of premarital births: evidence from national survey data. *Family planning perspectives*, 24 (1): 27-32, January/February.

BARBER, J.S., AXINN, W.G. & THORTNTON, A. 1999. Unwanted childbearing, health, and mother - child relationships. *Journal of health and social behavior*, 40 (3): 231-257.

BARBER, J.S., eds. Intrusive parenting: how psychological control affects children and adolescents. Washington, D.C. : American Psychological Association.

BARLOW, D.H. & DURAND, V.M. 1999. Abnormal psychology: an integrative approach. 2nd ed. Pacific Grove : Brooks/Cole.

BEGLEITER, E. 1983. Fear in the natural mother: aftermath of adoption. (*In* Affects of adoption on the mental health of the birthmother. What they knew but didn't tell us). [Web:] <http://www.anglefire.com> [Date of access: 14 September 2004].

- BEISER, M., SACK, K., MANSON, S.M. & DION, R. 1998. Mental health and the academic performance of first nations and majority - culture children. *American journal of orthopsychiatry*, 68: 455- 467.
- BENDER, W.N. 2002. Differentiating instruction for students with learning disabilities. London : Corwin Press.
- BERG, B.L. 1998. Qualitative research methods for the social sciences. 3rd ed. Boston : Allyn & Bacon.
- BETZEN, B. 2004. Recommendations for parents considering placement of a child. [Web:] <http://www.openadoption.orh/bbetzen> [Date of access: 14 March 2004].
- BILL OF RIGHTS see SOUTH AFRICA.
- BISSELL, D. 2004. Diversity in today's school. [Web:] <http://www.gse.uci.edu/ed124online/124home.html> [Date of access: 7 April 2004].
- BLESS, C. & HIGSON-SMITH, C. 2000. Fundamentals of social research methods: an African perspective. 3rd ed. Lansdowne : Juta Education.
- BOSMAN, D.B., VAN DER MERWE, I.W. & HIEMSTRA, L.W. 1984. Bilingual dictionary. Cape Town : Tafelberg.
- BOULT, B.E. & CUNNINGHAM, P.W. 1992. Black teenage pregnancy: an African perspective. *International journal of adolescence and youth*, 3 (3-4): 303-309.
- BRAINYDICTIONARY. 2004. [Web:] <http://www.brainydictionary.com> [Date of access: 17 March 2004].
- BRINK, M. 2004. Family Violence. Johannesburg. (Unpublished Lecture Notes.)

BUNDY, D., McGUIRE, J., HALL, A. & DOLAN, C. 2004. School-based health and nutrition programmes: a survey of donor and agency support. [Web:] <http://www.unsystem.org/csn/archives/scnnews16/ch04.html> [Date of access: 7 April 2004].

BURN, S. & GROVE, S.K. 1993. The practice of nursing research: conduct, critique and utilization. Philadelphia : Saunders.

CAPLAN, A. & LANG, G. 1995. Grief's courageous journey: a workbook. Oakland : New Harbinger.

CARLINI, H. 1992. Birth mother trauma: a counseling guide for birth mothers. Saanichton : Morning side.

CARLYON, P., CARLYON, W. & MCCARTHY, A.R.. 1998. Family and community involvement in school health. (*In* Marx, E., Wooley, S.F. & Northrop, D., *eds.* Health is academic. New York : Teachers College Press. p. 67-95.)

CELANO, M.P. & GELLER, R.J. 1993. Learning, school performance, and children with asthma: how much at risk? *Journal of learning disabilities*, 26 (1): 23-32, January.

CHILD TRENDS. 1995. Trends in pregnancies and pregnancy rates: estimates for the United States, 1980-92. Washington, DC: National center for health statistics, centers for disease control. [Web:] <http://www.adoption.com> [Date of access: 17 February 2004].

CHRISTENSEN, S. & ROSEN, A. 1996. Teen pregnancy. [Web:] <http://www.community.michiana.org/famconn/teenpreg.html> [Date of access: 17 February 2004].

CLAASSENS, E. 1997. Communication. (*In* du Toit, M., Nienaber, A., Hammes - Kirsten., Kirsten, T., Claassens, E., Du Plessis, W. & Wissing., *eds.* A lifeskills and coping programme for adolescents. Potchefstroom : PU for CHE. p. 99-128.)

CLAYTON, R.R. 1992. Transitions in drug use: risk and protective factors. (In Glantz, M.D. & Pickens, P.W., *eds.* Vulnerability to drug abuse. Washington, DC : American Psychological Association. p. 15-51.)

CONDON, J.T. 1986. Psychological disabilities in birthmothers. (In Affects of adoption on the mental health of the birthmother. What they new but didn't tell us). [Web:] <http://www.anglefire.com> [Date of access: 14 September 2004].

COPELAND, M.E. 1997. The depression workbook: a guide for living with depression and manic depression. Oakland : New Harbinger.

COREY, G. 2001. Theory and practice of counseling and psychotherapy. 6th ed. Belmont : Brooks/Cole.

COTTON, K. 1993. Building positive student self-concept. Stevenson-Carson school district Stevenson, Washington. [Web:] <http://www.nwrel.org> [Date of access: 7 April 2004].

COVEY, S.R. 2003. The 7 habits of highly effective people: powerful lessons in personal change. New York : Free Press.

CUSTER, M. 1993. Adoption as an option for unmarried pregnant teens. *Adolescence*, 28 (112): 891-902, Winter.

DALY, K.J. 1994. Adolescent perceptions of adoption: implications for resolving an unplanned pregnancy. *Youth and Society*, 25 (3): 330-350.

DAMONS, V.M. 2004. Attitudes of learners towards teachers living with HIV/AIDS. Johannesburg : RAU. (Dissertation - M.Ed.)

DARKE, S., SIMS, J., McDONALD, S. & WICKES, W. 2000. Cognitive impairment among methadone maintenance patients. *Addiction*, 95 (5): 687-696, May.

DAVEL, C.J. 2000. Introduction to child law in South Africa. Ndabeni : The Rustica Press.

- DAWES, A. & DONALD, D., *eds.* 1994. Childhood adversity: psychological perspectives from South African research. Cape Town : David Philip.
- DE JONGH VAN ARKEL, J.T. 2003. Caring for all: exploring the field of pastoral work (CGM 309-4.) Pretoria : University of South Africa.
- DE LA REY, C., DUNCAN, N., SHEFER, T. & VAN NIEKERK, A. 1997. Contemporary issues in human development: a South African focus. Johannesburg : Thompson International.
- DE VISSER, J. & LE ROUX, T. 1996. The experience of teenage pregnancy in Knoppieslaagte. *Suid-Afrikaanse Tydskrif vir Sosiologie*, 27 (3): 98- 106, August.
- DE VOS, A.S. 2001. Designing qualitative research. (*In* De Vos, A.S., *ed.* Research at grass roots: a primer for the caring professions. Pretoria : Van Schaik. p. 76-94.)
- DE VOS, A.S. & FOUCHE, C.B. 2001. General introduction to research design, data collection methods and data analysis. (*In* De Vos, A.S., *ed.* Research at grass roots: a primer for the caring professions. Pretoria : Van Schaik. p. 76-94.)
- DE VOS, A.S., *ed.* Research at grass roots: a primer for the caring professions. Pretoria : Van Schaik.
- DEMIE, F., BUTLER, R. & TAPLIN, A. 2002. Educational achievement and the disadvantage factor: empirical evidence. *Educational Studies*, 28 (2): 101-110, June.
- DFL. 2003. AIDS STATISTICS. [Web:] <http://www.dfl.org.za> [Date of access: 7 April 2004].
- DONALD, D, LAZARUS, S. & LOLWANA, P. 2002. Educational Psychology in Social Context. 2nd ed. Cape Town : Oxford.
- DONNELLY, B.W. & VOYDANOFF, P. 1991. Factors associated with releasing for adoption amongst adolescent mothers. *Family Relations*, 40 (4): 404-411.

DU TOIT, M. 1997. Assertiveness training: a way to cope with peer pressure. (*In* du Toit, M., Nienaber, A., Hammes - Kirsten., Kirsten,T., Claassens, E., Du Plessis, W. & Wissing., eds. A lifeskills and coping programme for adolescents. Potchefstroom : PU for CHE. p. 225-253.)

DU TOIT, M., NIENABER, A., HAMMES - KIRSTEN., KIRSTEN,T., CLAASSENS, E., Du PLESSIS, W. & WISSING., eds. A lifeskills and coping programme for adolescents. Potchefstroom : PU for CHE.

EDELMAN, C.L., & MANDLE, C.L., eds. Health promotion: throughout the lifespan. 5th ed. Missouri, St.Louis : Mosby.

ENGELBRECHT, P. 2001. A theoretical framework for inclusive education. (*In* Engelbrechts, P., Green.L., Naicker, S. & Engelbrecht, L., eds. Inclusive education in South Africa. Pretoria : Van Schaik. p. 1-11.)

ENGELBRECHTS, P., GREEN.L., NAICKER, S. & ENGELBRECHT, L., eds. Inclusive education in South Africa. Pretoria : Van Schaik.

FAGAN, P.F. 1996. Promoting adoption reform: congress can give children another chance. 6 May. [Web:] <http://www.heritage.org> [Date of access: 3 August 2004].

FORISHA-KOVACH, B. 1984. The flexible organization. Englewood Cliffs, N.J. : Prentice-Hall.

FREED, L. & SALAZAR, P.Y. 1993. A season to heal: help and hope for those working through post- abortion stress. Nashville : Cumberland House.

FREUNDLICH, M. 1998. Supply and demand: the forces shaping the future of infant adoption. *Adoption Quarterly*, 2 (1): 13-42.

GALL, M.D., BORG, W.R. & GALL, J.P. 1996. Educational research: an introduction. 6th ed. New York : Longman.

GAUTENG EDUCATION DEPARTMENT. 2004. A motshekga: Gauteng education province budget vote 2004/2005. Pretoria : Government Printer. 30 June.

GEDIMAN, J.S. & BROWN, L.P. 1989. Birth bond: reunions between birthparents and adoptees: what happens after.... far hills, N.J. : New Horizon.

GLANTZ, M.D. & PICKENS, P.W., *eds.* Vulnerability to drug abuse. Washington, DC : American Psychological Association.

GLASHER, B. & PHESKIN, L. 1992. The qualitative-quantitative distinction in the social science. L Kluwer : Dordrecht.

GOETZL, A. & LO, H. 1997. Teachers' negative acts affect students' views. [Web:] <http://www.jordan.durham.k12.nc.us/fc/> [Date of access: 7 April 2004].

GOUWS, L.A., LOUW, D.A., MEYER, W.F. & PLUG, C. 1979. Pigologie- woordeboek. Johannesburg : McGraw-Hill.

GOUWS, E. & KRUGER, N. 1996. The adolescent: an educational perspective. Johannesburg : Heinemann.

GROB-WHITING, J. 2004. Post Adoption Depression: A Parenting Transition. [Web:] <http://library.adoption.com/author/Judy-Grob-Whiting/1722/1.html> [Date of access: 14 September 2004].

HEIN, S. 2004. EQ informational site on emotions, emotional intelligence, teen suicide and related things. [Web:] <http://www.eqi.org> [Date of access: 20 June 2004].

HUMAN, S. 2000. Introduction to child law in South Africa. Ndabeni : The Rustica Press.

INTERNATIONAL ADOPTION SOUTH AFRICA. 2004. Contributed by U.S. department of state. [Web:] <http://travel.state.gov/adopt.html> [Date of access: 13 March 2004].

- JAE. 2000. Memories of an angel. [Web:] <http://forums.adoption.com/f299.html> [Date of access: 7 April 2004].
- JANESICK, V.J. 1998. "Stretching" exercises for qualitative researchers. Thousand Oaks, Calif. : Sage.
- JONES, M.B. 1993. Birthmothers: women who have relinquished babies for adoption tell their stories. Chicago : Chicago Review.
- JORDAAN, W. & JORDAAN, J. 1989. Man in context. 2nd ed. Johannesburg : Lexicon.
- KANDER, J. 1992. So will I comfort you... Cape Town : Lux Verbi.
- KAPLAN, S.J., LABRUMA, V., PELCOVITZ, D., WEINAR, M., SALZINGER, S. & MANDEL, F. 1999. Physically abused adolescents. Behaviour problems, functional impairment, and comparison of informant reports. *Pediatrics*, 104 (1): 7, Jul.
- KAUFMAN, C.E., DE WET, T. & STADLER, J. 2000. Adolescent pregnancy and parenthood in South Africa. [Web:] http://www.dec.org/prf_docs/PNAC904.pdf [Date of access: 7 April 2004].
- KELLY, J. 1999. Birthmother research project. The trauma of relinquishment: the long-term impact of relinquishment on birthmothers who lost their Infants to adoption during the years 1965 - 1972. [Web:] <http://www.webring.org> [Date of access: 7 April 2004].
- KIRSTEN, G.J.C. 2001. The use of mediation as a strategy for stress management and the promotion of wellness in teachers: an educational psychological study. Potchefstroom : PU for CHE (Thesis - Ph.D.)
- KVALE, S. 1983. The qualitative research interview: a phenomenological and a hermeneutical mode of understanding. *Journal of phenomenological psychology*, 13: 171-196, March.
- LAMBETH EDUCATION. 2001. GCSE examination performance in Lambeth Schools. Executive summary. [Web:] <http://www.lambeth.gov.uk> [Date of access: 9 August 2004].

LAZARUS, E. 2000. The new colossus. [Web:] <http://www.asha.ucf.edu/Bufalo2000.html> [Date of access: 7 April 2004].

LEEDY, P.D. & ORMROD, J.E. 2005. Practical research: planning and design. 8th ed. N.J. : Engelwood Cliffs : Pearson.

LERNER, J.V. & NOH, E.R. 2000. Maternal employment influences on early adolescent development: a contextual view. (*In* Taylor, R.D. & Wang, M.C., *eds*, Resilience across contexts- family, work, culture and community. London: Lawrence Erlbaum Associates. p. 121-146.)

LEVANG, C. 1996. As maskers en mure nie meer help nie... en die ware jy na vore kom. Kaapstad : ABC.

LEVINGER, B. 1986. School feeding programs in developing countries: an analysis of actual and potential impact. *Aid evaluation special study number 30*, U.S. Agency for International Development. [Web:] <http://www.edc.org/INT/CapDev/sfp.txt> [Date of access: 20 August 2004].

LIVADITIS, M., ZAPHIRIADIS, K., SAMAKOURI, C., TELLIDOU, TZAVARAS, N. & XENITIDIS, K. 2003. Gender differences, family and psychological factors affecting school performance in Greek secondary school students. *Educational psychology*, 23 (2): 223-231, March.

LOGAN, J. 1996. Uncharted territory. (*In* Effects of adoption on mental health of the mother: what they knew and didn't tell us.) [Web:] <http://www.KeepYourBaby.com> [Date of access: 14 August 2004].

LONG, P.W. 1997. Depression in primary care: volume 1. Detection and diagnoses. Clinical practice guideline. [Web:] http://www.pni.unibe.ch/depression_Guidelines/AHCPR/p44-d1.html. [Date of access: 9 August 2004].

LOUW, D.A. & EDWARDS, D.J.A. 1998. Sielkunde: 'n inleiding vir studente in Suider-Afrika. 2de uitg. Johannesburg : Heinemann.

LOUW, D.A., VAN EDE, D.M. & LOUW, A.E. 1998. Menslike ontwikkeling. 3de uitg. Pretoria: Kagiso Tersiër.

MACBEATH, J. & SAMMONS, P. 1998. Raising standards: setting targets: the improving school effectiveness project- summary of secondary schools. [Web:] <http://www.scotland.gov.uk> [Date of access: 19 April 2004].

MACFARLANE, L.C. 1998. An Educational-psychological perspective of the personal attributes which serve to anchor resilience. Pretoria : University of South Africa. (Dissertation - M.Ed.)

MANDIGO, J.L. & HOLT, N.L. 2000. Putting theory into practice. How to overcome evaluation theory can help us better understand how to motivate children in physical activity environments. *Journal of physical education, recreation and dance*, 71 (1): 44-49.

MARQUIS, K.S. & DETWEILER, R.A. 1985. "Does adoption mean different? An attributional analysis." *Journal of personality and social psychology*, 48 (4): 1054-1066. (In <http://www.earlychildbehavioralhealth.com>). [Date of access 19 September 2004].

MARTIN, A. 1989. A mother's love. Detroit : Free Press.

MARX, E., WOOLEY, S.F. & NORTHROP, D. 1998. Health is academic: a guide to coordinates school health programs. New York : Teachers College Press.

MATHEWES-GREEN, F. 1994. Compassion and concentric circles of support. [Web:] <http://www.fnsa.org/vln2/green1.html>. [Date of access: 8 March 2004].

MAYER, J.D. and SALOVEY, P. 1997. Definitions of emotional intelligence. [Web:] <http://eqi.org/#DefinitionsofEmotionalIntelligence> [Date of Access: 11 May 2002].

MAZABOW, M. 2003. Counselling. As part of the B-well learning program. Boston wellness learning program. As part of a further diploma in community wellness (HIV/AIDS). Vereeniging. (Unpublished lecture notes.)

- McLAUGHLIN, S.D., MANNINEN, D.L. & WINGES, L.D. 1988. Do adolescents who relinquish their children fare better or worse than those who raise them? *Family planning perspectives*, 20 (1): 13-18, January/February.
- McMILLAN, J.H. 2000. Educational Research: Fundamentals for the Consumer. 3rd ed. Menlo Park : Addison Wesley Longman.
- MECH, E.V. & LEONARD, E.L. 1984. Orientations of pregnancy counselors towards adoption. University of Illinois. [Web:] <http://www.mechrsch.org/SumLink3.pdf> [Date of access: 20 August 2004].
- MEYER, J. 1998. Wees meester van jou emosies. Springs: VG Uitgewers.
- MFONO, Z. 1998. Teenage contraceptive needs in urban South Africa: a case study. *International family planning perspectives*, 24 (4): 180-183.
- MILES, M.B. & HUBERMAN, A.M. 1994. Qualitative data analysis: An expanded sourcebook. 2nd ed. Thousand Oaks, Calif. : Sage.
- MIZALA, A., ROMAGUERA, P. & REINAGA, T. 2000. Determinants of School Achievement and School Effects in Bolivia. [Web:] <http://http://www.lacea.org/meeting2000/PilarRomaguera.PDF> [Date of access: 21 April 2004].
- MODISE, O.J. 2003. The world of experience of adolescents with emotional and behavioural problems with reference to the supportive role of the school. Potchefstroom: PU for CHE (Thesis - Ph.D.)
- MOUTON, J. & MARAIS, H.C. 1994. Basic concepts in the methodology of the social sciences. Pretoria : HSRC.
- NELSON-JONES, R. 1993. You can Help! Introducing lifeskills helping. London : Cassell.
- NEUMAN, L, W. L. 1994. Social Research Methods: Qualitative and Quantitative Approaches. 2nd ed. Boston, Mass. : Allyn and Bacon.

- NIENABER, A. 1997. Building social support systems. (*In* du Toit, M., Nienaber, A., Hammes - Kirsten., Kirsten, T., Claassens, E., Du Plessis, W. & Wissing., *eds.* A lifeskills and coping programme for adolescents. Potchefstroom : PU for CHE. p. 129-140.)
- NOGUERA, P.A. 2001. The role and influence of environmental and cultural factors on the academic performance of African American Males. *Motion magazine*. February 11. [Web:] <http://www.inmotionmagazine.com> [Date of access: 7 April 2004].
- NOVICK, D. 2001. The teenage baby room. Adolescence: change and continuity. [Web:] <http://inside.bard.edu/academic/specialproj/darling/adpar.htm> [Date of access: 17 February 2004].
- OLIVIER, M.A.J., MYBURGH, C.P.H. & POGGENPOEL, M. 2000. Adolescents' views on termination of pregnancy. *South African Journal of Education*, 20 (3): 213-222, August.
- OMERY, A. 1983. Phenomenology: a method for nursing research. *Advances in nursing*, 5 (2): 49-63.
- PARKES, C.M. & WEISS, R.S. 1982. Recovery from bereavement. New York : Basic books.
- PHOENIX, A. 1991. Young mothers. Oxford : Polity Press.
- PIETERSE, K (katinka@abbaadoptions.co.za) 2004. Re: Inligting. E-mail to N. Dunn (philip-nadine@absamail.co.za) Jul 21.
- PRINT MASTER 4.0. 1998. Number one value. Novato : Mindscape. [CD- ROM.]
- REBER, A.S. & REBER, E. 2001. The penguin dictionary of psychology. 3rd ed. St Ives plc : Clays Ltd.
- REGNERUS, M. 2000. Shaping schooling success: religious socialization and educational outcomes in urban public schools. *Journal for the scientific study of religion*, 39 : 363-370.
- ROOTH, E. 1999. Introduction to lifeskills. Cape Town : National Book Printers.

- ROSSOUW, J.P. & OOSTHUIZEN, I.J. 2003. Statutes for educational law. Noordbrug : Festina Lenté Publishers.
- RYNEARSON, E.K. 1982. Relinquishing and it's maternal complications. (*In* Effects of adoption on mental health of the mother: what they new and didn't tell us.) [Web:] <http://www.keepyourbaby.com> [Date of access: 14 Augustus 2004].
- SA CARES FOR LIFE. 2004. [Web:] <http://sacaresforlife.com> [Date of access: 7 April 2004].
- SACHDEV, P. 2001. Planned parenthood federation of America, Inc. [Web:] http://www.plannedparenthood.org/library/facts/emoteff_010600.html [Date of access: 19 February 2004].
- SANDELOWSKI, M. 1999. Focus on qualitative methods: time and qualitative research. *Nursing and health*, 22 (1): 79-87, February.
- SCHIRALDI, G.R. 2001. The self-esteem workbook. Oakland : New Harbinger Publications.
- SCHLOSS, P.J, SMITH, M.A. & SCHLOSS, C.N. 2001. Instructional methods for secondary students with learning and behavior problems. 3rd ed. Boston : Allyn and Bacon.
- SCHURINK, W. 1995. Managing morality in the city: the views of sex workers: SANAB officers and the public on dealing with prostitution. *Information update*, 5(11): 11-18.
- SENIOR, M. & VIVEASH, B. 1998. Health and illness. London : Macmillan.
- SHIFFLER, L.H. 1991. Impact of grieve on birthmothers. (*In* affects of adoption on the mental health of the birthmother. What they new but didn't tell us.) [Web:] <http://www.anglefire.com> [Date of access: 14 September 2004].
- SMITH, D.G. 1995. The Impact of Adoption on Birth Parents. (*In* Older Child Adoption Online Magazine.) [Web:] <http://www.olderchildadoption.com> [Date of access: 12 March 2004].

- SMITH, W.J. & SHEPPARD, C. 2001. Indicators of school performance: the barometer of education transformation in South Africa. Peel Montréal : McGill University. Ed-Lex, Faculty.
- SOUTH AFRICA. 1923. Adoption of Children Act, no 25 of 1923. Pretoria : Government Printer.
- SOUTH AFRICA. 1983. Child Care Act, no. 74 of 1983. Pretoria : Government Printer.
- SOUTH AFRICA. 1983. Child Care Amendment Act, no. 74 of 1983. Pretoria : Government Printer.
- SOUTH AFRICA. 1996. Bill of rights, of 1996. [Web:] <http://www.paralegaladvice.org.za/docs/chapter1/06html> [Date of access: 14 August 2004].
- SOUTH AFRICA. 1996. Child Care Act, no. 96 of 1996. Pretoria : Government Printer.
- SOUTH AFRICA. 1996. Child Care Amendment Act, no. 96 of 1996. Pretoria : Government Printer.
- STAUB, L.M. 2000. The correlation between eating breakfast and school performance. [Web:] <http://www.clearinghouse.mwsc.edu> [Date of access: 19 April 2004].
- STEENKAMP, E. 1996. Woorde wat waar bly. Kaapstad : Struik.
- STERN, E. & SILBERSWEIG, D.A. 2001. Advances in functional neuro-imaging methodology for the study of brain systems underlying human neuropsychological functions and dysfunctions. *Journal of Clinical and Experimental Neuro-psychology*, 23 (1): 3-18.
- STEYN, H.J., STEYN, S.C., DE WAAL, E.A.S. & WOLHUTER, C.C. 2003. Suid-Afrikaanse onderwysstelsel: kenmerke. Noordbrug : Keurkopié.
- STOLLEY, K.S. 1993. Statistics on adoption in the United States: the future of children: *Adoption*, 3 (1): 26-42.

STONE, G., BUEHLER, C. & BARBER, A.K. 2002. Interparental conflict, parental psychological control, and youth problem behavior. (In Barber, J.S. eds. *Intrusive parenting: how psychological control affects children and adolescents*. Washington, D.C. : American Psychological Association.)

SUTHERLAND, M.B. 1995. Examining comparisons. *Oxford review of education*, 21 (2): 239-246, June.

TAYLOR, R.D. & WANG, M.C., *eds.* Resilience across contexts- family, work, culture and community. London: Lawrence Erlbaum Associates.

THERON, L.C. 2004. Social and interpersonal problems. Vanderbijlpark: (Unpublished lecture notes.)

THOM, D.P., LOUW, A.E., VAN EDE, D.M. & FERNS, I. 1998. Adolessensie. (*In* LOUW, D.A., VAN EDE, D.M. & LOUW, A.E., *eds.* Menslike ontwikkeling. 3de uitg. Pretoria: Kagiso Tersiër. p. 387-474.)

THOMAS, S. 2001. Dimensions of secondary school effectiveness: comparative analysis across regions. *School effectiveness and improvement*, 12 (3): 285-323.

THOMPSON, C.L. & RUDOLPH, L.B. 2000. Counselling children. 5th ed. Pacific Grove : Brooks/Cole.

TOOTSIE-PIE. 2001. There are two days in every week. [Web:] <http://www.unsolvedmysteries.com> [Date of access: 24 October 2004].

TXCARE. 2004. Texas coalition for adoption resources & education. [Web:] <http://www.txcare.org> [Date of access: 7 April 2004].

VAN DER WATT, J. 1998. Vergifnis. Vanderbijlpark : Carpe Diem.

VAUGHN, C. 2002. Alcohol, drug use influence school performance. [Web:] <http://www.health.org/catalog/audience.aspx> [Date of access: 19 April 2004].

- VERRIER, N.N. 1993. The primal wound: understanding the adopted child. Baltimore : Gateway Press.
- VIVIERS, S. 2001. Survive your life: tips for teens. Goodwood : NDB.
- WALKER, H. 2001. Introduction to counseling skills and the utilization of a counseling framework. Vanderbijlpark. (Unpublished lecture notes.)
- WAUDO, J. & WAWIRE, V. 2002. Evaluation of private schools managed by the Lerato sisters in Kenya. Prepared by the bureau of education research Kenyatta University. [Web:] <http://www.fiuc.org/iaup/esap/publications/kenyatta/LoretoSisters.pdf> [Date of access 20 August 2004].
- WEDDING, D., HORTON, A.M., & WEBSTER, J. 1986. The Neuro-psychology handbook- behavioral and clinical perspectives. New York : Springer.
- WESTERN CAPE EDUCATION. 2004. [Web:] <http://www.wcape.gov.za> [Date of access: 7 April 2004].
- WILKINSON, B.H. 1996. Die 7 skrif-en skolingsbeginsels van die leerder: hoe om bykans enigeiets vir so te sê enigiemand te Leer! Kenwyn : Rustica Press.
- WOLFF, L., SCHIEFELBEIN, E. & VALENZUELA, J. 1993. Improving the Quality of primary education in Latin America: Towards the 21st Century. Latin America and the Caribbean technical department regional studies program report 28. Washington, D.C. : The World Bank. [Web:] <http://www.iadialog.org/publications/preal/preal7en.html> [Date of access: 20 August 2004].
- WOOLFSON, L. 1995. The experience of giving up a child for adoption. Pretoria : PU. (Thesis - M. Psych.)
- WORDEN, J.W. 1991. Grief counseling and grief therapy: a handbook for the mental health practitioner. 2nd ed. New York : Springer.

WORLD HEALTH ORGANIZATION. 1998. The World Health Report: life in the 21st century, a vision for all. [Web:] <http://www.globalhealth.gov> [Date of access: 7 April 2004].

Alcohol
in
the
house

The addendum contains the following in given order:

- ✓ Letter of consent
- ✓ Interview questions
- ✓ Interviews with the birthmothers
 - ✓ Interview with Birthmother 1
 - ✓ Interview with Birthmother 2
 - ✓ Interview with Birthmother 3
 - ✓ Interview with Birthmother 4
 - ✓ Interview with Birthmother 5
- ✓ Report cards of the birthmothers
 - ✓ Report cards from Birthmother 1
 - ✓ Report card from Birthmother 2
 - ✓ Report cards from Birthmother 3
 - ✓ Report card from Birthmother 4
 - ✓ Report card from Birthmother 5
- ✓ Letter from Birthmother 1 to her son

Letter of of consent

**THE IMPACT OF ADOPTION ON THE ADOLESCENT BIRTHMOTHER'S
SCHOOL PERFORMANCE**

12 Cronje Street
Sasolburg
1947

4 Augustus 2004

Dear Parent/ Guardian

Your child has been selected to take part in a research project of the North West University (Previously the Potchefstroom University for Christian Higher Education). Approximately 5 learners from different schools will take part in this study. The information obtained will be used to develop a supportive program for learners who go back to school after having their offspring adopted.

This study is undertaken with strict confidentiality. Your child will be interviewed by a researcher from the University for approximately 2 hours. Please sign the form if you give permission for your child to participate.

We really need your help and co-operation. The findings of this project will be made available to you if you are interested in the outcome.

Thank you for your help. If you have any questions, feel free to contact me.

Mrs. N. Dunn
M.Ed Student
083 324 2949

Parent/ Guardian

Heute
Freitag
15.05.2010

Interview for Adolescent Birth Mothers

A. Ecological Context

- 1) Describe your home environment before you became pregnant.
- 2) Describe your home environment after you became pregnant and you decided on adoption.
- 3) Describe your home environment after the adoption.
- 4) Describe your relationship with your mother before you became pregnant.
- 5) Describe your relationship with your mother while you were pregnant and once you decided on the adoption.
- 6) Describe your relationship with your mother after the adoption.
- 7) Describe your relationship with your other siblings before you became pregnant.
- 8) Describe your relationship with your other siblings while you were pregnant and once you decided on adoption.
- 9) Describe your relationship with your other siblings after the adoption.
- 10) Describe your relationship with your father before you became pregnant.
- 11) Describe your relationship with your father while you were pregnant and once you decided on adoption.
- 12) Describe your relationship with your father after the adoption.
- 13) Describe your relationship with your teachers before you became pregnant.
- 14) Describe your relationship with your teachers while you were pregnant and once you decided on adoption.
- 15) Describe your relationship with your teachers after the adoption.
- 16) Describe your relationship with your social worker and attorney.
- 17) What kind of support did you get from your parents, teachers, friends, the father of the baby and other family during the pregnancy?
- 18) What kind of support did you get from your parents, teachers, friends, the father of the baby and other family once you decided on adoption?
- 19) What kind of support did you get from your parents, teachers, friends, the father of the baby and other family after the adoption?
- 20) When did you tell your parents that you were pregnant?
- 21) What was their initial reaction? Did their reaction change? If yes, in what way did it change?
- 22) What support do you get from your teachers now after the adoption to help you cope at school?
- 23) Is it working for you?

- 24) How would you like them to help you?
- 25) When you became pregnant, which school did you attend?
- 26) After you gave birth, which school did you attend?
- 27) Did you have the opportunity to choose the parents of your baby?
- 28) Who helped you make the decision?
- 29) How do you view your community/society?
- 30) How do you view your church or the church in general?
- 31) What do you do for recreation?
- 32) Describe the physical conditions where you live (e.g. house).
- 33) Describe the natural conditions where you live (e.g. heat, rain, etc.).
- 34) Describe your school environment (e.g. discipline, language, etc.).
- 35) What was your school performance like before you became pregnant?
- 36) Did it change and if yes, how?
- 37) What factors in your environment influenced you to become pregnant?
- 38) Describe your home economic status.
- 39) Did your economical status influence your decision to have your baby adopted?

B. Metaphysical context

- 40) What is your view on teenage pregnancy?
- 41) What is your view on adoption?
- 42) What is your view on abortion?
- 43) What is your view on spirituality and religion? Explain.
- 44) What made your life meaningful before the adoption?
- 45) What makes your life meaningful now after the adoption?

C. Biological Context

- 46) How old are you now?
- 47) How old were you when you gave birth and had your baby adopted?
- 48) Describe your health and physical status before you became pregnant?
- 49) Describe your health and physical status while you were pregnant?
- 50) How is your health and physical status now after the birth?
- 51) How often do you get ill and how frequently do you consult your doctor/clinic?
- 52) Have you ever contracted any sexual diseases?
- 53) Do you suffer from any other diseases/illness or problems?
- 54) Through which method did you give birth and why did you choose that method?

- 55) Did you use contraception prior to your pregnancy?
- 56) What methods are you using now to prevent another pregnancy?

D. Intra-psychical Context

- 57) How does the adoption influence the way you feel, think and behave?
- 58) What do you regard as your weak and strong points in your life?
- 59) What was your initial reaction when you found out that you were pregnant?
- 60) Why did you choose adoption above abortion?
- 61) How do you think this influences your life currently?
- 62) How do you think it will influence your life in the future?
- 63) How does giving your baby up for adoption influence your school work?
- 64) How many times daily do you think of your baby?
- 65) If you had a choice, would you choose adoption again? Why or why not?
- 66) Did this event change your view on religion and in what way?
- 67) What benefits, do you think, adoption held for your baby?
- 68) What benefits, do you think, adoption held for you?
- 69) What benefits, do you think, adoption held for your family?
- 70) What benefits, do you think, adoption held for the father of your child?
- 71) What disadvantages, do you think, is there for your baby now after the adoption?
- 72) What disadvantages, do you think, is there for you now after the adoption?
- 73) What disadvantages, do you think, is there for your family after the adoption?
- 74) How has the adoption impacted on your view of future pregnancies?
- 75) How has the adoption impacted on your view of sex before marriage?
- 76) How has the adoption impacted on your view of relationships?
- 77) How has the adoption impacted on your relationship with your parents, siblings, peers and teachers?
- 78) Did you grieve for your baby?
- 79) What form did this grieving take?
- 80) Do you have a positive self-concept?
- 81) Do you view yourself as emotionally mature?

E. Closing Question

- 82) Is there anything that you think or feel is important for me to know that I have not asked or that you left out?

Afrikaanse vrae vir onderhoude

Ekologiese konteks

1. Beskryf jou huislike omstandighede voor jy swanger geraak het.
2. Beskryf jou huislike omstandighede nadat jy swanger geraak en toe jy besluit het om die kind te laat aanneem.
3. Beskryf jou huislike omstandighede na die aanneming.
4. Beskryf jou verhouding met jou ma voordat jy swanger geraak het.
5. Beskryf jou verhouding met jou ma terwyl jy swanger was en besluit het om die kind te laat aanneem.
6. Beskryf jou verhouding met jou ma nadat jy die kind laat aanneem het.
7. Beskryf jou verhouding met jou broers en susters voordat jy swanger geraak het.
8. Beskryf jou verhouding met jou broers en suster terwyl jy swanger was en besluit het om die kind te laat aanneem.
9. Beskryf jou verhouding met jou broers en susters nadat jy die kind laat aanneem het.
10. Beskryf jou verhouding met jou pa voordat jy swanger geraak het.
11. Beskryf jou verhouding met jou pa terwyl jy swanger was en besluit het om die kind te laat aanneem.
12. Beskryf jou verhouding met jou pa nadat jy die kind laat aanneem het.
13. Beskryf jou verhouding met jou onderwysers voordat jy swanger geraak het.
14. Beskryf jou verhouding met jou onderwysers terwyl jy swanger was en besluit het om die kind te laat aanneem.
15. Beskryf jou verhouding met jou onderwysers nadat jy die kind laat aanneem het.
16. Beskryf jou verhouding met jou maatskaplike werker en prokureur.
17. Watter soort ondersteuning het jy van jou ouers, onderwysers, vriende en die pa van die kind gekry terwyl jy swanger was?
18. Watter ondersteuning het jy van jou ouers, en jou vriende en jou onderwysers verkry toe jy besluit het om die kind te laat aanneem?
19. Watter soort ondersteuning het jy van jou ouers, onderwysers, vriende en die pa van die kind gekry nadat jy die kind laat aanneem het?

20. Wanneer het jy jou ouers vertel dat jy swanger is?
21. Wat was hulle eerste reaksie gewees? Het hulle reaksie verander? Indien ja, watter manier het dit verander?
22. Watter ondersteuning kry jy nou van jou onderwysers af om jou te help aanpas by die skool?
23. Werk dit vir jou?
24. Hoe wil jy graag hê moet hulle jou help?
25. Toe jy swanger geraak het, na watter skool toe het jy gegaan?
26. Na die geboorte, is jy terug na dieselfde skool toe?
27. Het jy die geleenthied gehad om die ouers te kies van die kind?
28. Wie het jou gehelp om die besluit te neem?
29. Hoe sien jy jou gemeenskap?
30. Wat is jou siening van die kerk of die kerk oor die algemeen?
31. Wat doen jy vir ontspanning?
32. Beskryf jou fisiese omgewing waar jy bly (jou huis).
33. Beskryf jou natuurlike omgewing waar jy bly (warm, koud, reënerig).
34. Beskryf jou skool omgewing (dissipline, en die taal in gebruik).
35. Hoe was jou skoolprestasie voordat jy swanger geraak het?
36. Het dit verander? As dit het, hoe het dit verander?
37. Watter faktore in jou omstandighede het jou beïnvloed om swanger te raak?
38. Beskryf julle huis ekonomiese status.
39. Het julle ekonomiese status by die huis, jou besluit beïnvloed om die kind te laat aanneem?

Meta-fisiese konteks

40. Wat is jou siening van tienerswangerskappe?
41. Wat is jou siening oor aanneming?
42. Wat is jou siening oor aborsie?
43. Wat is jou siening van spiritualiteit en geloof? Verduidelik.
44. Wat het jou lewe betekenis gegee voor die aanneming?
45. Wat maak jou lewe nou betekenisvol na die aanneming?

Biologiese konteks

46. Hoe oud is jy nou?
47. Hoe oud was jy toe jy geboorte gegee het aan die kind en die kind laat aanneem het?
48. Beskryf jou gesondheid en fisiese status voordat jy swanger geraak het?
49. Beskryf jou gesondheid en fisiese status terwyl jy swanger was?
50. Beskryf jou gesondheid en fisiese status nou na die geboorte.
51. Hoe gereeld word jy siek en hoe gereeld gaan sien jy 'n dokter of gaan jy na 'n kliniek toe?
52. Het jy enige seksuele siektes opgedoen?
53. Het jy enige ander siektes of probleme?
54. Deur watter metode het jy geboorte geskenk en hoekom het jy die metode gekies?
55. Het jy voorbehoedmiddels gebruik voor jy swanger geword het?
56. Watter manier gebruik jy nou om te voorkom dat jy weer swanger raak?

Intra-psigiese konteks

57. Hoe het die aanneming die manier wat jy dink, voel en optree beïnvloed?
58. Wat sien jy as jou sterk - en swakpunte in die lewe?
59. Wat was jou eerste reaksie toe jy uitgevind het jy is swanger?
60. Hoekom het jy aanneming gekies bo aborsie?
61. Hoe dink jy beïnvloed dit jou lewe huidiglik?
62. Hoe dink jy gaan dit jou lewe in die toekoms beïnvloed?
63. Hoe beïnvloed die aanneming jou skoolwerk?
64. Hoeveelkeer 'n dag dink jy aan jou baba?
65. As jy 'n keuse het, sal jy jou kind weer laat aanneem? Hoekom of hoekom nie?
66. Hoe het die gebeurtenis jou siening van geloof verander en op watter manier?
67. Watter voordele dink jy het die aanneming vir die baba?
68. Watter voordele dink jy het die aanneming vir jou?
69. Watter voordele dink jy het die aanneming vir jou familie?
70. Watter voordele dink jy het die aanneming vir die pa van die kind?

71. Watter nadele dink jy is daar vir die kind wat jy laat aanneem het, nou na die aanneming?
72. Watter nadele dink jy is daar vir jou nou na die aanneming?
73. Watter nadele dink jy is daar vir jou familie na die aanneming?
74. Hoe het die aanneming jou siening oor toekomstige swangerskappe beïnvloed?
75. Hoe het die aanneming jou siening oor seks voor die huwelik beïnvloed?
76. Hoe het die aanneming jou siening oor verhoudings beïnvloed?
77. Hoe het die aanneming jou verhouding met jou ouers, broers en susters asook jou vriende en onderwysers beïnvloed?
78. Het jy getreur oor jou baba?
79. Watter vorm het die treur aangeneem?
80. Dink jy, jy het 'n positiewe selfbeeld?
81. Sien jy jouself as emosioneel volwasse?

Laaste vraag

82. Is daar enige inligting wat jy dink belangrik is wat ek nie gevra het nie of het jy enige vrae?

Handwritten text in a stylized, possibly cursive or shorthand script, oriented vertically. The text is written in black ink on a white background, enclosed within a rectangular border.

Birthmother 1

Interview with Birthmother 1

(All names and places were changed)

Researcher: Describe your home environment before you became pregnant.

Birthmother 1: I was living with step parents because I didn't stay with my mom because she couldn't afford me. It was ok. We fought a lot. I ran away. The thing is we went to visit my aunt. She told me how to use a condom. I didn't understand what she was talking about. And then, I went out a lot, too much, so we started drinking and that. Okay, that was the first week and then the second week, and then it was two weeks afterwards then I got laid by that guy.

Researcher: Describe your home environment after you became pregnant - how did it change?

Birthmother 1: My mom put me in AB (house for pregnant mothers). That wasn't a nice place.

Researcher: From the beginning when did you find out that you were pregnant?

Birthmother 1: No, I still stayed at the people, and then my mom asked me to go and stay at one of her friends, a guy and his dad as well. So I stayed there and I brang up all the time and I couldn't eat. So I went to a doctor to find out what happened. The nurse said lie down on the bed and then she felt my stomach, and then said, 'go for a pregnancy test'. Then I was shaking. I didn't know what was going on. So I stood there and I sat on a bench, and I was wondering what was going to happen now. And then, ja, I think I went to AB because my mom put me in AB because she couldn't care for me.

Researcher: How was your home environment after the adoption? Did it change?

Birthmother 1: It changed a lot.

Researcher: And how did it change?

Birthmother 1: Because I am with Auntie X and Uncle Y now. And they do talk about it. Sometimes when I walk up and down I hear people say disgusting things about woman who are pregnant that is just not right. Rather they don't know. But I still try and get used to it. But I cry every night. It's a daily routine.

Researcher: Describe your relationship with your mother before you became pregnant.

Birthmother 1: It was very rough. It wasn't stable. It still isn't. But we are very close to each other.

Researcher: How was your relationship with your mother while you were pregnant?

Birthmother 1: I think I was too carried away with the child. So I don't think my mom was on my mind.

Researcher: How did it influence your relationship with your mother?

Birthmother 1: I made our relationship like rocks. Like you broke up.

Researcher: Ok, and after the adoption? How is your relationship now with your mother?

Birthmother 1: Um, we are working on it now. My mom's got a job now in Durban and that and she asked me that she is going to try for me to go over next year. That I have to stay up to May and then I can go and stay with her.

Researcher: Good. Your relationship with your brothers and sister before you got pregnant?

Birthmother 1: I don't have any brothers and sisters that care.

Researcher: Do they know about it?

Birthmother 1: I don't think so.

Researcher: Your relationship with your father before you became pregnant?

Birthmother 1: I don't talk to him. I don't want to talk to him.

Researcher: Was that even before you became pregnant?

Birthmother 1: I only visited him when I was 12 years old. Not again.

Researcher: What did he say when he found out that you were pregnant?

Birthmother 1: Nothing much, just like, he was still for a few minutes then the next minute he was in 'why don't you come and stay with me and we will grow up the baby, and we will life happily'. I just said I can't, I can't leave my mom alone.

Researcher: Did you feel supported by your father?

Birthmother 1: Ja, for a few minutes and then... I rather turn to my mom.

Researcher: And your relationship with your father now after the adoption?

Birthmother 1: I don't talk to him at all. For what he has done to me is not good.

Researcher: How was your relationship with your teachers before you became pregnant?

Birthmother 1: Actually, I was a very good girl. I always listened to the teachers, I was always happy in class, I always enjoyed myself, always kind en die witbroodjie.

Researcher: And when they found out that you were pregnant?

Birthmother 1: Some teachers reacted differently, some teachers is like in what is going on in your house. How is your life now?

Researcher: Did it change with your teachers' relationship?

Birthmother 1: I think so because when they look at me and they understand more.

Researcher: And now after the adoption?

Birthmother 1: I think most of them forgot about it. They just carried on.

Researcher: How was your relationship with your social worker and attorney?

Birthmother 1: I'm not talking now. I don't want to talk to the people.

Researcher: Is that the social worker up here or the one in Cape Town?

Birthmother 1: Z (The one up here).

Researcher: So you are not talking to him anymore?

Birthmother 1: Ya, I am not talking to Z anymore. He is now my mom's social worker. He is very stubborn. He is not very nice.

Researcher: And the attorney that you used or did you just work through the adoption agency?

Birthmother 1: My mom handled that.

Researcher: So you had nothing to do with the attorney?

Birthmother 1: No.

Researcher: What kind of support did you get from your parents, teachers, friends and father of the baby during the pregnancy?

Birthmother 1: To be real honest, I didn't receive any from my mom. Aunty N knows about it. She is very supportive. But she's got short term memory.

Researcher: What kind of support did you get from your parents and teachers, once you decided on adoption?

Birthmother 1: My mom was upset.

Researcher: Was she upset about the fact that you wanted the baby adopted or because you were pregnant?

Birthmother 1: I think it is both. She wanted the adoption to go on. She blamed everything.

Researcher: What kind of support did you get after the adoption from your friends and teachers?

Birthmother 1: Most of the teachers were. It depends on how they understand this and how they ... they like in the normal saying like in when you do it again, ah, if you can do it once, you can always do it again.

Researcher: When did you tell your parents that you were pregnant?

Birthmother 1: I first told my niece, and she told my mom.

Researcher: So your niece told your mom?

Birthmother 1: Yes.

Researcher: So you did not tell your mom?

Birthmother 1: My mom freaks and I wasn't at home so she went and go klopping because she new one of the guys, the first one, H. And she went to him and who knows what went on there. I don't know. My niece told me everything.

Researcher: What was her initial reaction?

Birthmother 1: My mom did not talk to us for a while.

Researcher: Did that change?

Birthmother 1: Yeah, everything's changed.

Researcher: What changed?

Birthmother 1: Like my mom, she is acting weird. She is not her old self anymore. She is totally... I don't know her anymore.

Researcher: What kind of support do you get from teachers now after the adoption to help you cope at school?

Birthmother 1: I just tell them what news there is and then I stand on my own. I stand alone everywhere.

Researcher: So you don't get support from teachers or the school counsellor?

Birthmother 1: They do give me advice.

Researcher: Does it help?

Birthmother 1: I think about it a lot.

Researcher: How would you like them to help you?

Birthmother 1: Help me coping.

Researcher: What kind of help do you need?

Birthmother 1: Everyone keeps on telling me that I have to talk to someone. I don't know if I should do that because I keep everything for myself. And I build things up. But I don't know. My dad always told me to be strong.

Researcher: When you became pregnant, which school did you attend?

Birthmother 1: H school.

Researcher: After you gave birth, did you attend the same school?

Birthmother 1: I ran away and came down here and that is the way it goes.

Researcher: Did you have the opportunity to choose the parents of the baby?

Birthmother 1: No.

Researcher: Who helped you make the decision about where your baby should go?

Birthmother 1: My mom. Everyone told me do this and that. I did not have the time to do that, so I just listened to my mom.

Researcher: How do you view your community/society? How do you see them? In general?

Birthmother 1: I don't understand.

Researcher: When you look at your community how do you see them, aggressive, angry...

Birthmother 1: My mom and that?

Researcher: No, your whole community, your whole environment where you live in, teachers, friends, family.

Birthmother 1: The people that I stay with, they are actually funny towards me. My mom, she doesn't want to come to me. But I mentioned it but she... sy trek 'n skewe gesig.

Researcher: How do you view your church?

Birthmother 1: I don't go to church.

Researcher: So you don't go to church?

Birthmother 1: I don't like going to church.

Researcher: What do you do for recreation?

Birthmother 1: Praying and that?

Researcher: Recreation is like in hobbies and those kind of things.

Birthmother 1: I just sit on my bed and think.

Researcher: Describe your physical conditions where you live. For example your house, is it good?

Birthmother 1: It's clean every day. I always got new sheets on my bed. I am always in order.

Researcher: Its' good. Describe your natural conditions where you live. Is it hot, warm, rainy?

Birthmother 1: Cold.

Researcher: Yah, it is winter. Your school environment, is there good discipline?

Birthmother 1: No.

Researcher: Language? Is the language good for you? Would you rather have been in an Afrikaans school?

Birthmother 1: Yah, the language is ok. Sometimes when I talk to the Afrikaans teachers, they are looking like what is going on now.

Researcher: What was your school performance like before you became pregnant?

Birthmother 1: I don't know.

Researcher: Did you do good at school?

Birthmother 1: Oh, I got good marks.

Researcher: Did they change now?

Birthmother 1: Yah, quite a bit.

Researcher: What factors in your environment influenced you to become pregnant? What caused you to decide to have sex with someone?

Birthmother 1: I wanted to experience it for myself.

Researcher: Describe your home economic status. Poor, rich, average?

Birthmother 1: We are helping one boy now and uncle Y does a lot. Three sons are working and B is not working but there is always food in the house.

Researcher: Before you became pregnant, where were you staying then?

Birthmother 1: Not good at all (referring to her home economic status).

Researcher: Did that influence your decision to have the baby adopted?

Birthmother 1: Not really.

Researcher: If you were able to keep him (with food and those kinds of things) would that influence your decision?

Birthmother 1: Probably if we had food I would have kept him.

Researcher: What is your view on teenage pregnancy?

Birthmother 1: It is a struggle through life. It is really hard.

Researcher: And your view on adoption?

Birthmother 1: I don't like the sound of adoption, it doesn't feel right.

Researcher: And abortion?

Birthmother 1: Terrible. You are taking a life that God created. That is precious.

Researcher: What is your view on spirituality and religion?

Birthmother 1: What I believe in?

Researcher: Should we be spiritual and should we have religion?

Birthmother 1: The only thing I can say is that the camp changed my life. I want to go and see a priest now.

Researcher: What made your life meaningful before the adoption? What motivated you to grow up?

Birthmother 1: My mom. I would kill myself if it wasn't for my mom.

Researcher: What makes your life meaningful now after the adoption?

Birthmother 1: I feel like lying in my bed and not wake up. I don't want to wake up again.

Researcher: Okay, but you are still alive, so something is driving you to wake up tomorrow morning and come to live your life. What is that? What is driving you to continue?

Birthmother 1: I love my mom. I love my mom too much.

Researcher: Only your mom?

Birthmother 1: Yeah.

Researcher: How old are you now?

Birthmother 1: 14.

Researcher: How old were you when you gave birth?

Birthmother 1: 14.

Researcher: Describe your health and physical status before you became pregnant.

Birthmother 1: Like what?

Researcher: Were you healthy, did you struggle a lot with colds and flues and those kind of things?

Birthmother 1: Quite a lot.

Researcher: So you were quite ill before you became pregnant?

Birthmother 1: Not that bad.

Researcher: And now after you gave birth?

Birthmother 1: I catch the flue very quickly.

Researcher: How frequently do you get ill and consult a doctor?

Birthmother 1: I am afraid of needles so I don't like to go.

Researcher: How frequently do you get ill without consulting a doctor?

Birthmother 1: A lot. Right now I think I've got sinus and can't breathe easily at night.

Researcher: Have you ever contracted any sexual diseases?

Birthmother 1: No.

Researcher: Do you suffer from any other diseases or problems?

Birthmother 1: Just sinus.

Researcher: Through which method did you give birth and why did you choose that method?

Birthmother 1: Keiser, because the doctors said I can't because I am to small around my waist. And I couldn't handle the pain.

Researcher: Did you use contraceptives prior to your pregnancy?

Birthmother 1: Like what?

Researcher: Like condoms, the pill or something like that?

Birthmother 1: During the pregnancy?

Researcher: No, before you got pregnant.

Birthmother 1: Yah, I used a condom before I got pregnant. I think I feel trapped by it now.

Researcher: What methods are you using now to prevent another pregnancy?

Birthmother 1: I am not having sex because I am not allowed to.

Researcher: So you are abstaining from having sexual intercourse?

Birthmother 1: When I get near a guy, I feel shaky in my legs.

Researcher: How does adoption influence the way you feel, think and behave?

Birthmother 1: It doesn't feel right. It is not right. I did not want it to happen. And N has got problems with me crying. It is a bit hard. I don't really want to come to school because of the environment.

Researcher: How did it change the way that you are thinking?

Birthmother 1: I don't know.

Researcher: Did you change your behavior from before you became pregnant till now afterwards?

Birthmother 1: I was very naughty before I became pregnant, now I am a good girl.

Researcher: So this was a good thing? What do you regard as your weak and strong points?

Birthmother 1: My weak points - I am a little confused about that one.

Researcher: I am good at this, or good at that, I am not so good at that.

Birthmother 1: Ok, I am not so good at listening to people talk about relationships. I will walk away. And I can't concentrate on my work and my points are low and I just sit on my bed.

Researcher: And your good points?

Birthmother 1: I don't think I have any. I am just alive because of my mom. If she was to die now, I would die with her.

Researcher: So it is not a good point that you want to get better marks this term?

Birthmother 1: The thing is that I am very negative. I can't be positive because if something happens, then it brings me down and I can't get up again.

Researcher: What was your initial reaction when you found out that you were pregnant?

Birthmother 1: Very scared. I didn't know what was going to happen. I didn't know where to start, what to do, but the one thing I knew, is I ran up the stairs.

Researcher: Why did you choose adoption above abortion?

Birthmother 1: Because I couldn't look after him.

Researcher: Is that the only reason why you chose adoption?

Birthmother 1: I wanted an abortion in the early days because I didn't want anyone to find out. Then my mom found out.

Researcher: How do you think this influences your life currently?

Birthmother 1: The adoption?

Researcher: Hum.

Birthmother 1: It's a struggle. It feels like I am going the wrong way. I think that answers that.

Researcher: Good. How do you think it will influence your life in the future, the fact that you had your child adopted?

Birthmother 1: It is going to be hard. Just want to make my life happy for him. I am to happy and every time I try to be happy, it was bad luck. I have to tell my husband that I had a baby before. Say one day he is coming to visit me, then what do I do? I can't just say, oh this is our son. It is wrong, this is mine. It is going to be very tough.

Researcher: How does giving your baby up for adoption influence your school work?

Birthmother 1: Especially LO. There is a lot of things that remind you about it...

Researcher: And your other subjects?

Birthmother 1: I can't concentrate. It is hard to sit and concentrate because you try to forget about it at that moment, you want to blank your mind and focus on your school work. You can't do that, it is hard. It's just every time I tell just go away, go away. That's hard.

Researcher: How many times a day do you think about your baby?

Birthmother 1: Constantly. Twenty -four -seven.

Researcher: If you had a choice, would you choose adoption again?

Birthmother 1: If I have to go back in time, I would rather give him to my niece because she brought me all the way because my mom lied to me in the past. There is a lot of things that she is still not telling the truth about.

Researcher: Would you still choose adoption again?

Birthmother 1: I'd rather not.

Researcher: Okay, did this event change your view on religion, having your baby adopted? In what why?

Birthmother 1: Not really.

Researcher: Not really. What benefits do you think adoption held for your baby?

Researcher: (after a long silence) Food, health, a stable family? (Still no reply)

Researcher: What benefits do you see for your baby in having your baby adopted?

Birthmother 1: I don't know.

Researcher: Don't you understand the question?

Birthmother 1: Yes.

Researcher: Benefits are good things that we wish for someone else. For example benefits of money. I have money. It is my benefit, I can give it up. You give him certain benefits by having him adopted – like a stable family. What else can you add to the list? What did you give him by having him adopted?

Birthmother 1: Education, he doesn't have to suffer.

Researcher: What benefits does it give you to have him adopted?

Birthmother 1: I don't understand.

Researcher: You can get back to education, go back to school, so you get a better education. What else is there in it for you to have him adopted?

Birthmother 1: I worry too much about him.

Researcher: There are some good things too. One day when you walk into a relationship, you can basically start over again.

Birthmother 1: Okay, can get married.

Researcher: What benefits do you think adoption had for the father of the baby?

Researcher: Does he know about the baby?

Birthmother 1: No.

Researcher: No, so you can't really answer that question. What advantages do you think is there for your baby now after the adoption?

Birthmother 1: Advantages...(silence)

Researcher: Disadvantages?

Researcher: What about one day when he wants to know where his real mom and dad is, one day when he grows up?

Birthmother 1: They are going to tell him when he is old enough to understand.

Researcher: The people who adopted him?

Birthmother 1: Yes.

Researcher: What advantages do you think is there is for you now after the adoption?

Birthmother 1: Me and my mom can start a relationship.

Researcher: School teachers?

Birthmother 1: To walk into a family that loves me (referring to the teachers that cares about her).

Researcher: Do you blame your mother for the adoption?

Birthmother 1: I have to blame myself therefore.

Researcher: How has the adoption impacted your view on future pregnancies?

Birthmother 1: If you can't look after a child, you must give it up.

Researcher: How has adoption impacted your view on having sex before marriage?

Birthmother 1: I would rather say you must wait.

Researcher: So before that, you would not say that?

Birthmother 1: No.

Researcher: How has adoption impacted your view on relationships?

Birthmother 1: You must wait until you are ready.

Researcher: Did you grief for your baby?

Birthmother 1: I don't understand.

Researcher: Did you mourn for the baby?

Birthmother 1: Yes, I cry every night about him.

Researcher: Do you have a positive self-concept?

Birthmother 1: I think so. Is this what we discussed earlier the year?

Researcher: Yes, it is. Do you view yourself as emotionally mature?

Birthmother 1: Yes, I have to be. Everyone in the house expects it of me and that is why I find it so hard. I cannot cry in front of them. That is why I spend most of my time in my room.

Researcher: Is there anything that you feel is important that I did not ask or is there anything that you would like to add on?

Birthmother 1: No.

Researcher: Thank you for your time.

Birthmother 2

Interview with Birthmother 2

(All names and places were changed)

Researcher: Beskryf jou huislike omstandighede voor jy swanger geraak het.

Birthmother 2: Goeie verhoudings, vrolik en rustig.

Researcher: En toe jy swanger geraak het?

Birthmother 2: Onrustig en ja.

Researcher: En toe jy besluit om die kind te laat aanneem?

Birthmother 2: Nog steeds 'n bietjie wrywing.

Researcher: Hoe was jou huislike omstandighede na die aanneming?

Birthmother 2: Nog nie heeltemal soos wat dit was nie.

Researcher: Hoe was jou verhouding met jou ma voordat jy swanger geraak het?

Birthmother 2: Ons was op 'n goeie voet. Ons het 'n goeie verhouding gehad. Ons baie lekker gesels. Ons kon met mekaar kommunikeer.

Researcher: En nadat jy swanger geraak het?

Birthmother 2: Ons is van mekaar vervreem. Sy stel net nie meer belang in my nie.

Researcher: En toe jy besluit het om die kind te laat aanneem?

Birthmother 2: Sy het my nog steeds geïgnoreer.

Researcher: En nou na die aanneming?

Birthmother 2: Sy wil niks van my weet nie. Ons is nie op speaking terms nie.

Researcher: Soe, hoe was jou verhouding met jou broers en susters voordat jy swanger geraak het?

Birthmother 2: Ons het nog altyd 'n goeie verhouding met mekaar gehad. Ons het opgekom vir mekaar.

Researcher: En terwyl jy swanger was?

Birthmother 2: Ja, hulle het my eenkant toe geskuif.

Researcher: En nou na die aanneming?

Birthmother 2: 'n Bietjie beter.

Researcher: Hoe was jou verhouding met jou pa voor jy swanger geraak het?

Birthmother 2: Ek sal nie sê ons het goed gekommunikeer nie of as ons kommunikasie gehad het, was dit actually nie persoonlike kommunikasie nie, so was dit gewees.

Researcher: Hoe was jou verhouding met jou pa toe jy swanger was?

Birthmother 2: Eintlik goed. Ons het, hy is die enigste persoon met wie ek gaan praat.

Researcher: En nadat jy die kind laat aanneem het?

Birthmother 2: Hy het my baie ondersteun.

Researcher: Beskryf jou verhouding met jou onderwysers voor jy swanger geword het.

Birthmother 2: Ek het 'n goeie verhouding gehad.

Researcher: Terwyl jy swanger was?

Birthmother 2: Hulle het snaakse kyke begin gee.

Researcher: En toe hulle uitvind dat jy die kind gaan laat aanneem?

Birthmother 2: Ag, 'n bietjie beter.

Researcher: Hoe was jou verhouding met jou onderwysers nadat jy die kind laat aanneem het?

Birthmother 2: Dis sal nooit weer dieselfde wees nie, maar dis... nie dieselfde as wat dit was nie.

Researcher: Hoe was jou verhouding met jou maatskaplike werker en prokureur?

Birthmother 2: Hulle stel nie rêrig belang nie.

Researcher: Watter soort ondersteuning het jy van jou ouers, onderwysers, vriende en selfs die pa van die kind gekry terwyl jy swanger was?

Birthmother 2: Die pa van die kind, gee ondersteuning...

Researcher: En jou vriende?

Birthmother 2: My vriende, nee, hulle het my vermy, want dit was vernederend vir hulle as ek saam met hulle is.

Researcher: En jou onderwysers?

Birthmother 2: Ja, een spesifieke onderwyser, my Engelse onderwyser het my baie ondersteun, emosioneel.

Researcher: En jou ouers?

Birthmother 2: My pa het my ondersteun, baie moed ingepaat. Maar dit is al.

Researcher: Watter ondersteuning het jy van jou ouers, en jou vriende en jou onderwysers verkry nadat jy besluit het om die kind te laat aanneem?

Birthmother 2: My onderwyser en my pa het my nog steeds geondersteun, my vriende het my 'n bietjie meer. Hulle het my weer genooi in die groep in. Dit was nie so bad as wat hulle gesê het nie. Geen ondersteuning van die pa enigsins nie.

Researcher: Watter soort ondersteuning het jy gekry na die aanneeming?

Birthmother 2: Van wie?

Researcher: Jou ma, jou vriende en jou familie?

Birthmother 2: Ja, nee, ek het nog steeds emosionele en ja, ondersteuning gekry van die onderwyser en vriende.

Researcher: So hulle was nou meer ondersteunend gewees.

Birthmother 2: Ek dink dit het hulle so 'n bietjie gevang aan die begin.

Researcher: Wanneer het jy jou ouers vertel dat jy swanger is?

Birthmother 2: Toe ek was, ek was 4 weke swanger.

Researcher: Wat was hulle eerste reaksie gewees?

Birthmother 2: Soe, nie baie goed nie, hulle het uitgefreak, natuurlik.

Researcher: Het hulle reaksie verander met die tyd?

Birthmother 2: Ja, ja hulle het ja, van hulle het 'n baie groot issue gemaak daarvan in die begin, maar laterhand het hulle dit soort van aanvaar. Omdat hulle niks daaraan kon doen nie.

Researcher: Watter ondersteuning kry jy nou van jou onderwysers af om jou te help aanpas by die skool?

Birthmother 2: Hulle hou my op track van wat aangaan in die klas. Ja, ek verloor nogal so 'n bietjie. En hulle hou my na klas om te verduidelik wat hulle gesê het.

Researcher: Werk dit vir jou?

Birthmother 2: Ja.

Researcher: Hoe wil jy graag het moet hulle jou nog help?

Birthmother 2: Ek weet nie. Ek glo nie, is net, net daar wees.

Researcher: Toe jy swanger geraak het, na watter skool toe het jy gegaan?

Birthmother 2: B.

Researcher: En nadat jy geboorte gegee het, is jy weer terug na dieselfde skool toe?

Birthmother 2: Ja.

Researcher: Het jy die keuse gehad om die ouers te kies van die kind?

Birthmother 2: Nee.

Researcher: Hoe is jou siening van die gemeenskap?

Birthmother 2: Ek dink dit is 'n goeie ding vir die kinders se doeleindes want daar gaan mense na hulle kyk.

Researcher: Hoe is jou siening oor die kerk in die algemeen?

Birthmother 2: Weet jy, ek is nie nou in 'n gemeente nie, ja, ek weet nie.

Researcher: Wat doen jy vir ontspanning?

Birthmother 2: Lees.

Researcher: Waaroor lees jy?

Birthmother 2: Ek hou van 'n Roman. Ek lees baie romans.

Researcher: Hoe was jou fisiese omstandighede by die huis gewees waar julle gebly het?

Birthmother 2: Rephrase?

Researcher: Nice huis..

Birthmother 2: O, o. um..

Researcher: Warm, dak, vensters?

Birthmother 2: Oukei, ons was nie arm nie, ook nie skat ryk nie, ons was net reg.

Researcher: En jou natuurlike omgewing, warm, koud, reëniger?

Birthmother 2: Warm.

Researcher: En by die skool self, hoe was die omgewing? Dissipline, en die taal in gebruik?

Birthmother 2: Die dissipline was baie goed gewees en dit was nie, ek kan sê ek is in 'n baie goeie gedissiplineerde skool.

Researcher: Jou skoolprestasie voordat jy swanger geraak het, hoe was dit gewees?

Birthmother 2: Bogemiddeld.

Researcher: Het die verander?

Birthmother 2: Ja, ongelukkig.

Researcher: Hoe het dit verander?

Birthmother 2: Van bogemiddeld na vrot.

Researcher: Watter faktore in jou omstandighede het daartoe gelei dat jy swanger geraak het?

Birthmother 2: Ek kon nie meer konsentreer nie. Die feit dat ek gevoel het dat niemand my aanvaar het nie, seker omdat ek swanger is.

Researcher: Hoe het jy swanger geraak?

Birthmother 2: Ek was op die pil gewees, en um, obviously nie die instruksies mooi gelees nie. Ek het nie geweet 'n mens mag nie antibiotika gebruik nie.

Researcher: Het julle ekonomiese status by die huis, en die hoeveelheid geld wat julle het, enigsin die besluit beïnvloed om die kind te laat aanneem?

Birthmother 2: Nee.

Researcher: Wat is jou siening oor tienerswangerskappe?

Birthmother 2: Ek wou nooit swanger geword het nie. Maar dit het gebeur en ek sal enige tiener meisie aanmoedig om nie in dieselfde trap te val as waarin ek geval het nie.

Researcher: Jou siening oor aanneming?

Birthmother 2: Ek dink daar is, soos ek gesê het, dis 'n goeie ding, anderste sou ek nie, aborsie is nie vir my nie en dan is daar 'n ander opsie, aanneming, dit is baie beter.

Researcher: So jy sal sê jou siening oor aborsie is?

Birthmother 2: Ja, negatief.

Researcher: Wat is jou siening van spiritualiteit en geloof?

Birthmother 2: Ek sal graag weer so in 'n gemeente wil wees en so aan, want daardie gedeelte is nie op hierdie oomblik baie goed nie.

Researcher: Hoekom sal jy so sê?

Birthmother 2: Ek het nie 'n verhouding met God of iets.

Researcher: Wat gee jou lewe betekenis na die aanneming?

Birthmother 2: Om maar net te aanvaar wat gebeur het en streef na wat vorentoe is.

Researcher: Wat het jou lewe betekenis gegee voordat jy die kind laat aanneem het?

Birthmother 2: Soos?

Researcher: Waarvoor het jy geleef?

Birthmother 2: Vir die kind.

Researcher: Voordat jy uitgevind het jy is swanger?

Birthmother 2: My ou.

Researcher: Hoe oud is jy nou?

Birthmother 2: 17.

Researcher: Hoe oud was jy toe jy geboorte gegee het aan die kind?

Birthmother 2: 17.

Researcher: Hoe was jou gesondheid, jou fisiese status voordat jy swanger geraak het?

Birthmother 2: Goed, redelik stabiel.

Researcher: En jou gesondheid terwyl jy swanger was?

Birthmother 2: Ek was redelik gesond, ja.

Researcher: En nou na die geboorte?

Birthmother 2: Nie fisies of emosioneel nie, nee, ek joke.

Researcher: Fisies, jou gesondheid?

Birthmother 2: Nee, nog steeds goed.

Researcher: Hoe gereeld word jy siek?

Birthmother 2: Hoe gereeld word ek siek, um, so een keer 'n jaar.

Researcher: En dan gaan jy dokter toe of nie eers nie?

Birthmother 2: Nie eers nie.

Researcher: Het jy enige seksuele siektes opgetel?

Birthmother 2: Nee.

Researcher: Het jy enige ander siektes of probleme?

Birthmother 2: Nee.

Researcher: Deur watter metode het jy geboorte geskenk?

Birthmother 2: Epidurale keiser.

Researcher: Het jy voorbehoedmiddels gebruik voor jy swanger geword het?

Birthmother 2: Ja.

Researcher: Watter manier gebruik jy nou om te voorkom dat jy weer swanger raak?

Birthmother 2: Die geen seks manier.

Researcher: Hoe het die aanneeming jou manier wat jy dink, voel en optree beïnvloed?

Birthmother 2: Positief.

Researcher: Hoe so?

Birthmother 2: As ek dink aan my gevoelens, dan, weet jy hy is veilig en dit is vir my genoeg.

Researcher: Wat sien jy as jou sterk - en swakpunte?

Birthmother 2: Sterkpunte, kom ons begin by my swakkes. Hardkoppig, onverantwoordelik.

Researcher: En die sterktes.

Birthmother 2: Sterkpunte is, selfgemotiveerd, en en is daar nog een, en ja, kom ons sê maar liefdevol.

Researcher: Wat was jou eerste reaksie toe jy uitgevind het jy is swanger?

Birthmother 2: Eerste reaksie was -nie nou nie-, jy weet.

Researcher: Hoekom het jy aanneming gekies bo aborsie?

Birthmother 2: Want, dis 'n lewe, ek sal nooit laat 'n lewe moet vernietig word nie so.

Researcher: Hoe dink jy beïnvloed dit jou lewe huidiglik? Die aanneming?

Birthmother 2: Ek weet nie, ek dink ek het daardeur geleer en gegroei.

Researcher: Hoe dink jy gaan dit jou lewe in die toekoms beïnvloed?

Birthmother 2: Ek kan dalk ander meisies help. Wat dieselfde problem het.

Researcher: Hoe het dit jou skoolwerk beïnvloed, die feit dat jy jou kind laat aanneem het?

Birthmother 2: My skoolwerk, wel, ek het weer meer begin werk en meer begin insit weer en daardie 'sense' van aanneming het net vir my 'n soort van sekeriteit geword, dat die lewetjie vir hulle is.

Researcher: Hoeveel keer 'n dag dink jy aan jou baba?

Birthmother 2: So vier keer- (lag skaam).

Researcher: As jy 'n keuse het, sal jy hom weer laat aanneem?

Birthmother 2: Ja.

Researcher: Hoekom sê jy so?

Birthmother 2: Want, ek het nog baie planne vir my lewe vorentoe. Dis nie om selfish te wees nie maar ek wil nog oorsee gaan, ek wil nog my lewe geniet, ek wou nie soos ek gesê het nou regtig swanger geword het nie.

Researcher: Hoe het die gebeurtenis jou siening van geloof verander?

Birthmother 2: Wel, deur die tydperk wat ek swanger was en so aan, was daar eintlik Christene wat my ondersteun het. Soos ek onthou meeste van my vriende ook, hulle het na my toe gekom en vir my gebid. Ek het net besef ek het iets missing.

Researcher: So dit is jou Christen vriende wat vir jou gebid het, wat jou ondersteun het?

Birthmother 2: Ja, dit is reg.

Researcher: Dit was nice van hulle. Watter voordele dink jy het die aanneming vir die baba?

Birthmother 2: 'n Familie waar hy aanvaar word en goed versorg gaan word, en 'n toekoms kan hê.

Researcher: Watter voordele het dit vir jou?

Birthmother 2: Ek kan gaan verder studeer en ek kan 'n lewe hê wat ek wil hê.

Researcher: Watter voordele dink jy het die aanneming vir jou familie?

Birthmother 2: Dit gaan die wrywing verminder wat daarso is en dalk sal die verhouding wat ek en my broer en my sussie en ma gehad, weer regkom.

Researcher: Watter voordele dink jy het die aanneming vir die pa van die kind?

Birthmother 2: Hy hoef nie te voel dat daar iets aan hom vas hou nie, dat hy ook kan aangaan, en die feit dat hy dan, actually nie 'n kind het om voor te sorg nie, is seker vir hom beter.

Researcher: Weet hy van die kind?

Birthmother 2: Ja.

Researcher: Watter negatiewe dinge dink jy is daar nou vir die kind wat jy laat aanneem het?

Birthmother 2: Hy gaan tog op 'n stadium in sy lewe voel, groot word met die wete dat hy verwerp is.

Researcher: Deur jou?

Birthmother 2: Ja, ek dink hy gaan dit moeilik vind om aan te pas.

Researcher: Watter negatiewe goeters gaan dit vir jou inhou nou na die aanneming?

Birthmother 2: Die wete.

Researcher: En vir jou familie?

Birthmother 2: Ek glo nie daar is enige negatiewe dinge nie.

Researcher: Hoe het die aanneming jou siening oor toekomstige swangerskappe beïnvloed?

Birthmother 2: Kinders slegs as jy getroud is en hulle beplan het.

Researcher: Hoe het die aanneming jou siening oor seks voor die huwelik beïnvloed?

Birthmother 2: Geen seks.

Researcher: Hoe het dit jou siening oor verhoudings beïnvloed?

Birthmother 2: Positief.

Researcher: Hoe het die aanneming jou verhouding met jou ouers, broers en susters asook jou vriende en onderwysers beïnvloed?

Birthmother 2: My ouers, dit gaan nou beter tussen my en my pa. My broer en suster tree ook nou al beter teenoor my op en hulle aanvaar my. Soos ek gesê het, my Engelse onderwyser en ek kom goed oor die weg en hy help my baie. My vriende is ook nou meer daar vir my.

Researcher: Het jy getreur oor jou baba?

Birthmother 2: Ja.

Researcher: Watter vorm het die treur aangeneem?

Birthmother 2: Ek het gehuil oor die baba.

Researcher: Dink jy, jy het 'n positiewe selfbeeld?

Birthmother 2: Nee, nie regtig nie.

Researcher: Sien jy jouself as emosioneel volwasse?

Birthmother 2: Ja.

Researcher: Is daar enige inligting wat jy dink belangrik is wat ek nie gevra het nie of het jy enige vrae?

Birthmother 2: Nee.

Birthmother 3

Interview with Birthmother 3

(All names and places were changed)

Researcher: Beskryf jou huislike omstandighede voordat jy swanger geraak het.

Birthmother 3: Dit was maar moeilik met ouers wat permanent baklei en gedrink het en op daardie stadium het dit gevoel of ek alleen in die wêreld was en ek moes maar vir myself sorg.

Researcher: Beskryf jou huislike omgewing nadat jy swanger geraak het.

Birthmother 3: Presies dieselfde as wat dit was voorheen, maar net nog erger, want toe was ek nog meer alleen.

Researcher: En toe jy besluit om die kind te laat aanneem?

Birthmother 3: Dit was die enigste opsie gewees, want ek het gedink as ek die kind hou moet hy nou groot word in so 'n omgewing.

Researcher: Hoe het jou omstandighede verander na die aanneming, of het dit nie verander nie?

Birthmother 3: Dit het verander en dit is hoekom ek nou meer alleen is as wat ek was.

Researcher: Beskryf jou verhouding met jou ma voordat jy swanger geraak het.

Birthmother 3: Ag, ons het nie veel gepraat nie, sy het nie gedeel in die dinge wat ek gedoen het in my lewe nie. En ek was maar heel eenkant.

Researcher: En toe jy swanger was?

Birthmother 3: Absoluut geen praat, sy wou niks weet van die kind nie, niks hoor nie.

Researcher: Die verhouding met jou ma nadat jy die kind laat aanneem het.

Birthmother 3: Dit is dalk 'n bietjie beter want ek sien sy kan darem nou die seerkry sien, maar dit is nog steeds nie soos wat ek dit wil hê nie.

Researcher: Hoe was jou verhouding met jou broers en suster voor jy swanger geraak het?

Birthmother 3: Eintlik goed, want ons was die uitgesonderde klompie gewees.

Researcher: Hoe was jou verhouding met jou broers en susters terwyl jy swanger was?

Birthmother 3: Veral met my suster baie goed. Ek kon my gevoelens met haar deel en het geweet sy voel saam met my.

Researcher: Hoe was dit na die aanneming van die kind gewees, die verhouding met jou broers en susters?

Birthmother 3: Baie beter.

Researcher: Beskryf jou verhouding met jou pa voordat jy swanger geraak het.

Birthmother 3: My pa?

Researcher: Ja, jou pa.

Birthmother 3: 'n Mens sal nie sê hy was daar nie. Geen verhouding nie.

Researcher: En terwyl jy swanger was?

Birthmother 3: Ag, hy het my heeltemal geïgnoreer, dit was maar asof ek nie bestaan het nie.

Researcher: En na die aanneming van die kind?

Birthmother 3: Nog steeds dieselfde.

Researcher: Hoe was jou verhouding met jou onderwysers voor jy swanger geraak het?

Birthmother 3: Ag almal het gesê ek is die washout van die klas en gesê dat as ek net 'n bietjie beter kan doen op skool, sal dit beter gaan by die huis maar eintlik was dit nie so nie.

Researcher: En terwyl jy swanger was en besluit het om die kind te laat aanneem?

Birthmother 3: Hulle was vol dinge.

Researcher: Jou verhouding met die onderwysers na die aanneming?

Birthmother 3: Almal was redelik simpatiek en wou weet waar kan hulle help en so en dring daarop aan dat ek gaan vir ekstra klasse.

Researcher: So hulle het jou gehelp nadat jy die kind laat aanneem het.

Birthmother 3: Ja.

Researcher: Hoe was jou verhouding met jou prokureur gewees waardeur jy die aanneming laat doen het?

Birthmother 3: Vriend van die familie, so nie te goed nie.

Researcher: Watter soort ondersteuning het jy van jou vriende, onderwysers, familie en die pa van die kind gekry terwyl jy swanger was?

Birthmother 3: Goeie ondersteuning van die pa en van onderwysers nie veel nie.

Researcher: Vriende?

Birthmother 3: Hulle het my ook goed ondersteun.

Researcher: En jou ouers dan nou glad nie?

Birthmother 3: Ja, glad nie.

Researcher: Watter soort ondersteuning het jy gekry van jou onderwysers, vriende en familie toe jy besluit het om die kind te laat aanneem?

Birthmother 3: Vriende het hulle onttrek van my, die pa van die kind het saamgestem dat dit 'n goeie idee was, so hy het by my gestaan. Onderwysers het ook gesê dis beter, dan kan ek aangaan met my skoolloopbaan.

Researcher: En jou ouers?

Birthmother 3: Nee, hulle was maar vol strooi soos altyd.

Researcher: Wou hulle gehad het dat jy die kind moet laat aanneem?

Birthmother 3: Ek sal nie kon sê nie, hulle kon nie besluit nie. Either way was dit nie vir hulle 'n goeie opsie gewees nie.

Researcher: Watter ondersteuning het jy gekry van die ouers, vriende en onderwysers nadat jy die kind laat aanneem het?

Birthmother 3: Vriende goeie ondersteuning, onderwysers goeie ondersteuning, pa van my kind goeie ondersteuning, maar my ouers geen ondersteuning nie.

Researcher: Wanneer het jy jou ouers vertel dat jy swanger is?

Birthmother 3: Eers toe hulle dit kon sien.

Researcher: Wat was hulle eerste reaksie gewees?

Birthmother 3: My geïgnoreer soos altyd, gemaak asof dit nie daar is nie.

Researcher: Het hulle reaksie ooit verander?

Birthmother 3: Nee, hulle het die hele swangerskap gemaak asof dit nie so is nie.

Researcher: Wat het die onderwysers by die skool gedoen om jou te help aangaan na die aanneming?

Birthmother 3: Hulle motiveer my om beter te doen op skool en gee my maar net morele ondersteuning.

Researcher: Werk dit vir jou?

Birthmother 3: Nee, lyk dit so?

Researcher: Hoe wil jy graag hê moet hulle jou help?

Birthmother 3: My kind teruggee. Hulle moet net hulle neuse uit my sake uithou.

Researcher: Toe jy swanger geraak het, na watter skool toe het jy gegaan?

Birthmother 3: A.

Researcher: En nadat jy die kind laat aanneem het, is jy terug na dieselfde skool toe?

Birthmother 3: Ja, ongelukkig.

Researcher: Het jy die keuse gehad om die ouers te kies vir die kind?

Birthmother 3: Nee, glad nie.

Researcher: Hoe dink jy is die gemeenskap oor die algemeen, die samelewing?

Birthmother 3: Nie ondersteunend genoeg nie. Jy word sommer dadelik verwerp as jy een van daai ma's is wat 'n kind weggee vir aanneming.

Researcher: Hoe sien jy die kerk oor die algemeen?

Birthmother 3: Ondersteunend want hulle verwyf jou nie. As jy berou het oor jou sondes word jy vergewe.

Researcher: Wat doen jy vir ontspanning?

Birthmother 3: Clubbing en so.

Researcher: Beskryf jou huislike omstandighede waarin jy nou leef.

Birthmother 3: Baie lekker, ek geniet dit om ma te wees en 'n man te hê wat omgee.

Researcher: Jou natuurlike omstandighede waar jy bly soos warm, reëniger, droog?

Birthmother 3: Warm, baie warm, bietjie reën, groen gras.

Researcher: Hoe was jou skool omstandighede wat betref die dissipline en die taalgebruik?

Birthmother 3: Goed.

Researcher: Was julle meer as een taal in die skool of net een taal?

Birthmother 3: Net een taal.

Researcher: Hoe was jou skoolpunte voor jy swanger geraak het?

Birthmother 3: Bogemiddeld sal ek sê.

Researcher: Het dit verander?

Birthmother 3: Ja.

Researcher: Hoe het dit verander?

Birthmother 3: Dit het so effens versleg, maar vir my is dit nou hoër standerds en werk is nou meer en moeiliker.

Researcher: Watter faktore in jou omgewing het dit beïnvloed dat jy swanger geraak het?

Birthmother 3: Vriende en my ouers.

Researcher: Hoe was jou ekonomiese status voordat jy uit die huis uit is?

Birthmother 3: Watter ekonomiese status? Daar was nie so iets nie.

Researcher: Dink jy dit het jou keuse beïnvloed om jou kind te laat aanneem?

Birthmother 3: Defnitief.

Researcher: Hoekom sal jy so sê?

Birthmother 3: Want as ek vir my eie kind kon sorg dan het ek. Dan het sy ten minste iets gehad.

Researcher: Wat dink jy van tienerswangerskappe?

Birthmother 3: Dit is nie die gewenste ding nie, maar alles gebeur soos dit moet.

Researcher: En jou idees of sienings oor aanneming?

Birthmother 3: 'n Mens doen altyd wat die beste vir die kind is. So as aanneming beter is vir die kind, dan doen 'n mens dit.

Researcher: En aborsie?

Birthmother 3: Geen aborsie. Ek is heeltemal, totaal en al teen aborsie.

Researcher: Wat is jou siening oor geestelike goeters?

Birthmother 3: 'n Mens moet glo aan iets.

Researcher: Speel dit 'n belangrike rol in jou lewe?

Birthmother 3: Ja dit doen, dit beïnvloed hoe jy met ander mense is en hoe jy oor jou geld voel en wat jy dink.

Researcher: Wat het jou lewe sinvol gemaak voor die aanneming?

Birthmother 3: Daar was nie iets nie.

Researcher: Wat maak nou jou lewe sinvol na die aanneming?

Birthmother 3: My man en my kind.

Researcher: Hoe oud is jy nou?

Birthmother 3: 23.

Researcher: Hoe oud was jy toe jy aan die kind geboorte gegee het?

Birthmother 3: 16.

Researcher: Hoe was jou gesondheid en jou fisiese status voordat jy swanger geraak het?

Birthmother 3: Ek was altyd maar betrokke by sport en swem en atletiek en you name it en ek het dit gedoen.

Researcher: Hoe was dit terwyl jy swanger was?

Birthmother 3: Toe het ek so 'n bietjie afgeskaal, jy kan nou nie alles doen wat jy wil doen nie.

Researcher: En nou na die geboorte?

Birthmother 3: Die kind en die man hou my besig.

Researcher: Die geboorte van jou eerste kind, die een wat jy laat aanneem het?

Birthmother 3: O nee, toe het ek maar by myself gehou, niks aktiwiteite gedoen nie.

Researcher: Hoe gereeld word jy siek en sien jy 'n dokter?

Birthmother 3: Ag so 5, 6 keer 'n jaar en ek gaan altyd dokter toe as ek siek is.

Researcher: Het jy enige seksuele siektes opgetel?

Birthmother 3: Nee, thank God.

Researcher: En jy het ook nie enige op die oomblik nie.

Birthmother 3: Nee.

Researcher: Deur watter manier het jy geboorte gegee?

Birthmother 3: Keiser.

Researcher: Het jy voorbehoedmiddels gebruik voordat jy swanger geword het?

Birthmother 3: Nee.

Researcher: Gebruik jy nou enige iets om te keer dat jy weer swanger raak?

Birthmother 3: Ja, ek het geleer.

Researcher: Hoe dink jy beïnvloed aanneming jou gevoelens, hoe jy dink en hoe jy optree?

Birthmother 3: Dit maak jou meer sensitief vir ander mense se pyn en leiding en dit laat jou meer omgee vir kinders ook.

Researcher: Wat sien jy as jou swak en sterk punte in die lewe?

Birthmother 3: Sterkpunt is ek is baie vriendelik, swakpunte ek is ongeduldig.

Researcher: Wat was jou eerste reaksie toe jy uitgevind het jy is swanger?

Birthmother 3: Blydskap en toe kom die vraag oor die geld.

Researcher: Hoekom het jy aanneming bo aborsie gekies?

Birthmother 3: Soos ek gesê het, jy dink altyd eerste aan die kind en aborsie is glad nie 'n opsie nie. Daardie kind het nie gevra om gemaak te word nie.

Researcher: Hoe dink jy beïnvloed die feit dat jy'n kind laat aanneem het jou huidige lewe?

Birthmother 3: Dit laat 'n leemte in my lewe.

Researcher: Hoe dink jy gaan dit jou lewe in die toekoms beïnvloed?

Birthmother 3: Ag, seker maar dieselfde as nou. Die leemte sal net kleiner en kleiner word.

Researcher: Hoe het dit jou skoolwerk beïnvloed, die feit dat jy jou kind laat aanneem het?

Birthmother 3: Dit het redelik agteruit gegaan, want dit was natuurlik al waaraan ek kon dink op daardie stadium.

Researcher: Hoeveel keer 'n dag dink jy aan jou baba?

Birthmother 3: Die een wat ek nou het?

Researcher: Nee, die een wat jy laat aanneem het.

Birthmother 3: Aan die begin was dit omtrent die heeldag maar nou, so een of twee keer 'n dag.

Researcher: As jy die keuse het, sal jy weer jou kind laat aanneem, hoekom of hoekom nie?

Birthmother 3: As ek weer die keuse het en ek het geld, sal ek dit nie doen nie, maar as die situasie is soos wat dit toe was en ek het nie geld nie, sal ek dit weer doen.

Researcher: Het die aanneming jou siening van geloof verander?

Birthmother 3: Nee.

Researcher: Watter voordele dink jy het die aanneming vir die kind gehad?

Birthmother 3: Sy is ten minste by ouers wat vir haar kan gee wat sy verdien, wat ek nie op daardie stadium kon gegee het nie.

Researcher: Wat dink jy is die voordele vir jou?

Birthmother 3: Ek dink nie daar is voordele vir my nie.

Researcher: Dink jy daar was voordele vir die familie gewees?

Birthmother 3: Nee, hulle sou in elk geval nie 'n sent uitgehaal het vir die kind nie.

Researcher: Watter voordele dink jy het die aanneming gehad vir die pa van die kind?

Birthmother 3: Hy kon ook klaarmaak met skool en sy lewe regkry.

Researcher: Watter negatiewe dinge is daar vir die kind wat jy laat aanneem het?

Birthmother 3: Dat sy nie by haar biologiese ouers is nie.

Researcher: Watter nadele dink jy is daar vir jou dat jy die kind laat aanneem het?

Birthmother 3: Daar is 'n deel van my wat ek nie weet waar dit is nie en dit maak dat ek nooit 'n heel persoon sal wees nie.

Researcher: Watter nadeel dink jy is daar vir die familie na die aanneming?

Birthmother 3: Geen nadeel vir hulle nie. Hulle gee nie om nie.

Researcher: Hoe het die aanneming jou siening oor toekomstige swangerskappe beïnvloed?

Birthmother 3: Dit het nie regtig nie, want ek het geweet dat as ek weer swanger raak, dan sal dit die regte tyd wees.

Researcher: Hoe het die swangerskap jou siening oor seks voor die huwelik verander of beïnvloed?

Birthmother 3: Dit het dit nie regtig beïnvloed nie. 'n Mens moet net dink aan komplikasies en watter implikasies jou aksies gaan hê.

Researcher: Hoe het die aanneming jou siening oor verhoudings beïnvloed?

Birthmother 3: Dit het nie regtig nie, want ek is in elk geval getroud met die pa van ons eerste kind.

Researcher: Hoe het die aanneming jou verhouding met jou ouers, susters en vriende en onderwysers beïnvloed?

Birthmother 3: Vriende en onderwysers goed beïnvloed, almal is meer simpatiek en dink voor hulle met 'n mens praat. Ouers geen invloed.

Researcher: Het jy getreur oor jou baba?

Birthmother 3: Ja, enige mens sal.

Researcher: Watter vorm het hierdie treur aangeneem? Hoe het jy getreur oor haar?

Birthmother 3: Gehuil en ek was negatief en het nie veel met ander mense gemeng nie en my uitgesluit.

Researcher: Dink jy jy het 'n positiewe self-konsep?

Birthmother 3: Ja.

Researcher: Sien jy jouself as emosioneel volwasse?

Birthmother 3: Ja.

Researcher: Is daar enige iets wat jy dink is belangrik wat ek nie gevra het nie?

Birthmother 3: Nee.

Researcher: Was dit 'n seuntjie of 'n dogtertjie?

Birthmother 3: Dogtertjie.

Researcher: Baie dankie vir jou tyd.

Birthmother 4

Interview with Birthmother 4

(All names and places were changed)

Researcher: Beskryf jou huislike omstandighede voordat jy swanger geraak het?

Birthmother 4: Dit was baie rustige omstandighede in die huis, ek en my ouers kom baie goed oor die weg.

Researcher: En jou huislike omstandighede nadat jy swanger geword het?

Birthmother 4: Daar was 'n atmosfeer gewees vir die eerste ruk, maar toe het my ma-hulle dit begin besef en aanvaar.

Researcher: Hoe was jou huislike omstandighede nadat jy die kind laat aanneem het?

Birthmother 4: Ag ek weet nie. My ma en my pa was bly gewees toe ek die kind laat aanneem het, want hulle het gesê dit is beter vir myself en die kind, want ek kan nog nie vir die kind sorg nie. Ek het nog nie 'n werk nie. Ek is nog in matriek so dit was orraait gewees.

Researcher: Hoe was jou verhouding met jou ma voordat jy swanger geraak het?

Birthmother 4: Baie goed, ek en my ma het 'n baie goeie verhouding gehad.

Researcher: En terwyl jy swanger was?

Birthmother 4: Ag ook goed, ons het baklei en vasgesit en so aan.

Researcher: En nadat jy die kind laat aanneem het?

Birthmother 4: Ek en my ma het baie nader aan mekaar gekom.

Researcher: Hoe was jou verhouding met jou broers en susters voordat jy swanger geraak het?

Birthmother 4: Ons het 'n goeie verhouding, ek het net susters.

Researcher: En terwyl jy swanger was?

Birthmother 4: Ons het baklei en vasgesit, want ek het maar my moods gehad, maar dit was nog goed. Hulle het my baie bygestaan.

Researcher: En nou na die aanneming?

Birthmother 4: Ook baie bygestaan (dis lekker om sulke susters te hê).

Researcher: Hoe was jou verhouding met jou pa voor jy swanger geraak het?

Birthmother 4: Ek en my pa het 'n goeie verhouding, maar ek sien hom min. Ek bly mos by my stiefpa, maar hy was baie bly gewees vir my part. Ons het 'n goeie verhouding.

Researcher: En jou stiefpa?

Birthmother 4: Ag ek weet nie, hy was ook nogal. Ek en hy kom ook goed oor die weg, hy doen baie vir ons.

Researcher: Beskryf die verhouding met jou pa terwyl jy swanger was?

Birthmother 4: Ons het nie 'n baie goeie verhouding gehad nie, ons het baie vasgesit.

Researcher: En nou na die aanneming?

Birthmother 4: Nog steeds sit ons 'n bietjie vas, ons kom nie baie goed oor die weg nie.

Researcher: Jou verhouding met jou onderwysers voordat jy swanger geraak het?

Birthmother 4: Dit was baie goed gewees. Ek het goed oor die weg gekom met my onderwysers.

Researcher: En terwyl jy swanger was?

Birthmother 4: Ag ek weet nie, dit het baie verander want hulle het jou anders uitgekyk en anders behandel.

Researcher: En toe nadat jy die kind laat aanneem het?

Birthmother 4: Dit was maar nog steeds dieselfde gewees.

Researcher: Hoe was jou verhouding met jou prokureur en maatskaplike werker gewees?

Birthmother 4: Ons het 'n goeie verhouding gehad.

Researcher: Watse ondersteuning het jy van jou ouers, vriende, onderwysers en die pa van die kind gekry terwyl jy swanger was?

Birthmother 4: Hulle het my baie ondersteun. Hulle het my bygestaan. Almal het my bygestaan en ek was ook nie een van die maklikste mense gewees terwyl ek swanger was nie, maar hy (die pa van die kind) het my baie bygestaan en my gehelp waar hy kon.

Researcher: Watter ondersteuning het jy gekry toe jy hulle sê dat jy besluit het om die kind te laat aanneem?

Birthmother 4: Hulle het my besluit aanvaar en my ma het my baie gehelp daardeur. Dit was ook goeie ondersteuning gewees.

Researcher: En die pa van die kind?

Birthmother 4: Hy het saamgestem.

Researcher: Watse ondersteuning het jy gekry nadat jy die kind laat aanneem het van ouers, vriende, onderwysers en die pa van die kind?

Birthmother 4: Hulle het my bygestaan want ek het deur 'n moeilike tyd gegaan. Hulle was almal daar vir my. Ek kon met enige iemand gaan praat het.

Researcher: Wanneer het jy jou ouers vertel dat jy swanger is?

Birthmother 4: My ma het gesê ek is swanger oor die manier wat ek gewig opgetel het. Sy het toe 'n swangerskap toets gekoop. Die doktors het gesê dat ek toe al 3 maande swanger was.

Researcher: Wat was hulle eerste reaksie gewees?

Birthmother 4: Hulle was geskok gewees.

Researcher: Het hulle reaksie verander?

Birthmother 4: Ja.

Researcher: Hoe het dit verander?

Birthmother 4: My ma was eers baie geskok en kwaad gewees, maar na dit toe sê sy vir my wat gebeur het, het gebeur en dis goed.

Researcher: Watse ondersteuning het jy gekry by jou onderwysers by die skool om aan te pas by die skool?

Birthmother 4: Hulle het my geen ondersteuning gegee nie. Hulle het vir my gesê ek moet self aanpas, ek moet self my werk inhaal en alles.

Researcher: Hoe wou jy gehad het moes hulle jou help?

Birthmother 4: Hulle moes dalk vir my die werk 'n bietjie minder gemaak het of dit makliker gemaak het. Omdat ek nie permanent by die skool kon gewees het nie, moes hulle dit vir my dit eintlik makliker gemaak het.

Researcher: Toe jy swanger geraak het, na watter skool toe het jy gegaan?

Birthmother 4: C.

Researcher: En nadat jy geboorte gegee het?

Birthmother 4: C.

Researcher: Het jy die geleentheid gehad om die ouers te kies van die kind?

Birthmother 4: Ja.

Researcher: Wie het jou gehelp om te besluit oor wie hulle moet wees?

Birthmother 4: My ouers en die pa.

Researcher: Hoe sien jy jou gemeenskap oor die algemeen?

Birthmother 4: Hulle is baie positief en ondersteunend.

Researcher: Wat is jou siening van die kerk oor die algemeen?

Birthmother 4: Ek gaan kerk toe, maar nie elke Sondag nie. Jy hoef nie kerk toe te gaan om aan die Here te behoort nie. Ek glo in die Here, so ek sal kerk toe gaan wanneer ek voel ek wil nou kerk toe gaan. Niemand moet my dwing om kerk toe te gaan nie, ek sal kerk toe gaan as ek wil.

Researcher: Is kerk 'n goeie ding?

Birthmother 4: Ja.

Researcher: Wat doen jy vir ontspanning?

Birthmother 4: Slaap.

Researcher: Hoe is jou fisiese omstandighede waar jy bly by jou huis?

Birthmother 4: Baie gelukkig.

Researcher: Het julle alles wat julle nodig het?

Birthmother 4: Ja.

Researcher: Julle natuurlike omgewing waar jy bly is dit warm of koud?

Birthmother 4: Warm.

Researcher: Jou skool omstandighede, was daar goeie dissipline?

Birthmother 4: Ja, baie.

Researcher: En die taalgebruik een of twee tale?

Birthmother 4: Twee tale.

Researcher: Hoe was jou skoolprestasie voor jy swanger geraak het, soos in bo-gemiddeld onder gemiddeld ens?

Birthmother 4: Gemiddeld.

Researcher: Het dit verander?

Birthmother 4: Nee, dit hê maar dieselfde gebly.

Researcher: Watter faktore in jou omstandighede het veroorsaak dat jy swanger raak, wat het jou laat besluit om seks te hê?

Birthmother 4: Ek was baie lief vir my kêrel gewees.

Researcher: Julle huis se ekonomiese status, is julle gemiddeld, bogemiddeld?

Birthmother 4: Gemiddeld.

Researcher: Het dit jou keuse beïnvloed om die kind te laat aanneem?

Birthmother 4: Ja, ek dink so.

Researcher: Wat is jou siening van tienerswangerskappe?

Birthmother 4: As jy vir die kind kan sorg en as jy lief is vir die pa dan sal ek sê dit is 'n goeie ding. Dit maak jou verstandiger en volwasse, maar as jy nie vir die kind kan sorg nie, as jy nie finansiële kan sorg nie, moet jy eerder die kind laat aanneem of moenie swanger raak nie.

Researcher: Is jou siening oor aanneming positief?

Birthmother 4: Ja.

Researcher: En oor aborsie?

Birthmother 4: Nee, glad nie.

Researcher: Wat is jou siening oor geloof?

Birthmother 4: Nee, dis jou eie keuse om in iets of iemand te glo.

Researcher: Watter betekenis het jou lewe gehad voordat jy die kind laat aanneem het? Waarvoor het jy geleef?

Birthmother 4: Basies vir myself, want ek wou iets bereik in die lewe. Ek wou bo uitkom.

Researcher: Wat is die betekenis nou nadat jy die kind laat aanneem het?

Birthmother 4: Nog dieselfde.

Researcher: Hoe oud is jy nou?

Birthmother 4: 18.

Researcher: Hoe oud was jy toe jy swanger geword het?

Birthmother 4: 17.

Researcher: Hoe was jou fisiese gesondheid voordat jy swanger geraak het?

Birthmother 4: Baie goed.

Researcher: En terwyl jy swanger was?

Birthmother 4: Ook goed.

Researcher: En nou na die tyd?

Birthmother 4: Dis nog steeds goed.

Researcher: Hoe gereeld word jy siek of gaan sien jy 'n dokter?

Birthmother 4: Ek is nie eintlik baie siek nie.

Researcher: Het jy enige seksuele siektes opgedoen?

Birthmother 4: Nee.

Researcher: Het jy enige ander siektes of probleme?

Birthmother 4: Nee.

Researcher: Deur watter metode het jy geboorte geskenk?

Birthmother 4: Normaal.

Researcher: Hoekom het jy dit gekies?

Birthmother 4: Hulle het vir my gesê die keiser is baie seerder, want daar is nog 'n week of wat, wat jy nie kan opstaan nie. As jy normaal geboorte gee kan jy al na 'n dag of twee al rondloop.

Researcher: Het jy voorbehoedmiddels gebruik voor jy swanger geword het?

Birthmother 4: Nee.

Researcher: Gebruik jy iets nou om te voorkom dat jy swanger word?

Birthmother 4: Ja.

Researcher: Hoe het die aanneming die manier hoe jy dink, voel of optree beïnvloed?

Birthmother 4: Ja, ek dink nou twee keer voor ek iets doen.

Researcher: Wat sien jy as jou sterk en swak punte in die lewe?

Birthmother 4: My sterk punt is ek wil iets met my lewe bereik, ek wil bo uitkom.

Researcher: Wat was jou eerste reaksie toe jy uitgevind het jy is swanger?

Birthmother 4: Ek was baie geskok gewees.

Researcher: Hoekom het jy aanneming bo aborsie gekies?

Birthmother 4: Ek glo nie in aborsie nie, ek dink dit is moord.

Researcher: Hoe dink jy beïnvloed die aanneming jou lewe huidiglik?

Birthmother 4: Ek weet nie. Ek dink dit gaan my later as ek ouer is vang. Nou is dit nie so erg nie omdat ek nog jonk is.

Researcher: Hoe dink jy gaan dit jou lewe in die toekoms beïnvloed?

Birthmother 4: Ek weet nie.

Researcher: Hoe het die aanneming jou skoolwerk beïnvloed?

Birthmother 4: My punte was bietjie swakker gewees, maar ek het reggekom.

Researcher: Hoeveel keer 'n dag dink jy aan jou baba?

Birthmother 4: Baie keer.

Researcher: As jy 'n keuse het, sal jy jou kind weer laat aanneem?

Birthmother 4: Nee.

Researcher: Hoekom nie?

Birthmother 4: Ek het die eerste keer gevoel hoe voel dit, dit is asof 'n deel van jou weggeruk word.

Researcher: Hoe het die gebeurtenis jou siening van geloof verander?

Birthmother 4: Dit het nie eintlik verander nie.

Researcher: Watter voordele het die aanneming van die baba?

Birthmother 4: 'n Goeie huisgesin, liefde.

Researcher: Watter voordele dink jy het dit vir jou?

Birthmother 4: Ek glo nie daar is voordele vir my nie.

Researcher: Watter voordele het dit vir jou familie?

Birthmother 4: Ek weet hoe my ma daaroor voel, ek dink finansiële help dit hulle.

Researcher: Watter voordele dink jy het dit vir die pa van die kind?

Birthmother 4: Ook maar finansiële.

Researcher: Watter nadele dink jy is daar eendag vir die kind?

Birthmother 4: Dat hy nie sy ouers gaan ken nie, sy familie.

Researcher: Watter nadele dink jy is daar vir jou na die aanneming?

Birthmother 4: Ek dink daar is baie. Ek het my kind weggegee. Ons gaan hom nie sien groot word nie. Ons gaan hom nie die eerste keer sien lag nie, eerste keer sien seerkry nie.

Researcher: Watter nadele dink jy is daar vir jou familie?

Birthmother 4: Ek dink dit is maar dieselfde.

Researcher: Het die aanneming jou siening oor toekomstige swangerskappe beïnvloed?

Birthmother 4: Ek sal weer in die toekoms swanger raak, maar nie nou nie. Ek sal eers getroud wees, finansiël reg wees, ek sal dit beplan.

Researcher: Hoe het die aanneming jou siening oor seks voor die huwelik beïnvloed?

Birthmother 4: Dit het 'n baie groot invloed gemaak.

Researcher: Sal jy weer seks voor die huwelik hê?

Birthmother 4: Dit hang af met wie. As ek die persoon baie lief het en dit is die persoon met wie ek die res van my lewe gaan spandeer, dan sal ek.

Researcher: Hoe het die aanneming jou siening oor verhoudings beïnvloed?

Birthmother 4: Ek het baie vriende en vriendinne verloor en hulle kyk heeltemal anders na 'n mens. Hulle kyk! Sy was swanger en het haar kind laat aanneem. Hulle kyk op 'n ander manier na jou.

Researcher: Het jy enige ondersteuning van hulle af gekry?

Birthmother 4: Ek het ondersteuning gekry, maar op 'n ander manier.

Researcher: Het jy getreur oor jou baba?

Birthmother 4: Ja.

Researcher: Hoe het jy getreur oor hom?

Birthmother 4: Ek was baie emosioneel gewees. Dit het my 'n lang ruk gevat om oor dit te kom.

Researcher: Dink jy jy het 'n positiewe selfbeeld?

Birthmother 4: Ja.

Researcher: Sien jy jouself as emosioneel volwasse?

Birthmother 4: Ja.

Researcher: Is daar enige iets wat jy dink ek het uitgelos wat belangrik is?

Birthmother 4: Nee.

Birthmother 5

Interview with Birthmother 5:

(All names and places were changed)

Researcher: Describe your home environment before you became pregnant.

Birthmother 5: It was hectic at home. Nothing serious.

Researcher: And after you became pregnant?

Birthmother 5: After I became pregnant and everybody found out everything was tense. People started to act like there is nothing there but you. The whole atmosphere changed.

Researcher: And after the adoption?

Birthmother 5: After the adoption my mother tried to put things back to normal but you could see it never really worked and everybody was tense about the situation.

Researcher: Describe your relationship with your mother before you became pregnant.

Birthmother 5: We have always been able to talk about everything and we were just normal, mother and daughter relationship.

Researcher: And while you were pregnant?

Birthmother 5: After she found out and got over it she supported me a lot and she acted a lot like she is going to be a grandmother and she was very supportive.

Researcher: And once she found out about the adoption?

Birthmother 5: She went crazy because she really thought I was going to keep it, but when she realized the financial means, we could not support the baby.

Researcher: And after the adoption?

Birthmother 5: Everything was like in very quite. You could see that she was upset, she did not drag very well.

Researcher: How was your relationship with your brothers and sisters before you became pregnant?

Birthmother 5: I have an older sister and she usually comes for help to me, all the time, and for me to come to her was a great shock to her. It was good.

Researcher: How was your relationship while you were pregnant?

Birthmother 5: She was very supportive as well. She gave me a lot of advice.

Researcher: And after the adoption?

Birthmother 5: After the adoption she also tried to keep things normal.

Researcher: And your relationship with your father before you became pregnant?

Birthmother 5: I did not have a very good relationship with my father. We wanted to kill each other.

Researcher: And while you were pregnant?

Birthmother 5: He was like in the last to know, and when he knew, my mom basically kept us apart. Drastic hey?

Researcher: And your relationship with your father after the adoption?

Birthmother 5: We don't talk.

Researcher: Is he angry with you?

Birthmother 5: I think so. I don't think about the adoption, the whole thing.

Researcher: And your relationship with your teachers before you became pregnant?

Birthmother 5: I can talk to them like they are my best friends.

Researcher: That's very nice. And while you were pregnant?

Birthmother 5: They were supportive but I did get frustrated with them because they were acting weird with me.

Researcher: And after the adoption?

Birthmother 5: They try to put things back to normal, but they try to make sure that I am ok all the time. You are reminded of it all the time. Someone is always worried about you. I just want to get back to normal.

Researcher: How was your relationship with your social worker and attorney?

Birthmother 5: My social worker was very supportive, you could see that she felt sorry for me even though it is her job and she is probably trained, she was very loving. My attorney, he wasn't the nicest person to be around. He just wanted to get the job done.

Researcher: What support did you get from your parents, teachers, friends and father of the baby during the pregnancy?

Birthmother 5: They all supported me after getting over it. Did you say the father of the baby?

Researcher: Yes.

Birthmother 5: He was very supportive he, I think, he really wanted to keep the baby because he is five years older than me, but I couldn't take it and her supported my decision.

Researcher: That's good. What kind of support did you get from your parents, teachers, friends and father of the baby once you decided on the adoption?

Birthmother 5: The father still supported me, my family, they were not very happy with it, the teachers were like in 'if that is what you want, then go ahead'.

Researcher: So they supported you?

Birthmother 5: Yah.

Researcher: And then after the adoption? What happened, the parents, the teachers and friends, did they support you?

Birthmother 5: Yah, they did but they were always faking it.

Researcher: When did you tell you parents that you were pregnant?

Birthmother 5: I didn't know for about two weeks, when I found out and the father and I talked about it and went straight to them. About three weeks. I went to my mother first, and she told my dad a few weeks later. So after every body new about it, I told my sister.

Researcher: What was their initial reactions?

Birthmother 5: Hum, my mom was totally shocked. She looked like she was going to break down or something. But then I think she got that whole thing about grandmother and she was all happy again. But I could not tell yet that I did not what to keep the baby.

Researcher: Did their reaction change after a while? Your father's reaction?

Birthmother 5: My father's reaction? I just can't tell he is just so distant from me.

Researcher: What support did you get from you teachers after the adoption to help you cope at school?

Birthmother 5: A lot of them offered counselling and support group but I did not want any of them.

Researcher: Is it working for you?

Birthmother 5: Yah.

Researcher: How would you like them to help you?

Birthmother 5: I would like them to treat me just like anybody else and just realize that I can handle it and I don't need to be reminded of it every day and if I need their help, I would ask them.

Researcher: Don't come to me, I'll come to you. When you became pregnant, which school did you attend?

Birthmother 5: I was in S.

Researcher: And after you gave birth?

Birthmother 5: I still went back there.

Researcher: Did you have the opportunity to choose the parents of the baby?

Birthmother 5: No, I didn't, my social worker did.

Researcher: How do you view your community?

Birthmother 5: My community I think judge me a lot because they don't know me and they only see the outside view but I think if I was them I would probably do the same. I don't get a lot of support from especially people from school. You just get rumours and then you have been sleeping with how many people, and you've got Aids and all of this is just hectic.

Researcher: How do you view church or the church in general?

Birthmother 5: Well, before I fell pregnant, I didn't do anything about religion. Afterwards I started joining a church and I think they are very supportive and I love being in a cell group.

Researcher: So you view them as positive?

Birthmother 5: Yes.

Researcher: What do you do for recreation?

Birthmother 5: Can you explain that one to me?

Researcher: Recreation is like hobbies or...

Birthmother 5: Ok. Well, I spend my time on music and playing guitar and music is my life. I love it. I am not really into sports anymore. Especially when I fell pregnant, I had to drop a lot of sport and activities which I did.

Researcher: Describe your physical conditions where you live. For example your house.

Birthmother 5: Our home is like in very complicated. But everybody has his own room. We have like in normal kitchen, lounge and TV room.

Researcher: And the natural living conditions? Heat, raining?

Birthmother 5: South African weather.

Researcher: Describe your school environment with the discipline and the language.

Birthmother 5: Our school discipline is up to nothing. Everybody does what they want. They try to bring in discipline but it just became worse. And if you boggle up the teachers you just don't get it. It is not a good thing at all.

Researcher: And the language? Is there more than one language in the school?

Birthmother 5: Yah, there are quite a few languages, black languages, Afrikaans and English.

Researcher: So you are quite a big school?

Birthmother 5: Yah.

Researcher: What was your school performance like before you became pregnant?

Birthmother 5: I was doing very well. I was an average student and I could cope.

Researcher: And after the adoption?

Birthmother 5: It is a lot of stress. My marks changed drastically. They went down and I struggled to pick up again because I missed out on so much.

Researcher: What factors in your environment influenced you to become pregnant?

Birthmother 5: Peer pressure as well as urges.

Researcher: Describe your home economic status.

Birthmother 5: We are struggling. There is a bit of a problem there.

Researcher: Did that influence your decision to have the baby adopted?

Birthmother 5: Definitely, that was the main reason.

Researcher: What is your view on teenage pregnancy?

Birthmother 5: My view is that it is not good at all. It is unfair on the mother and the baby.

Researcher: What is your view on adoption?

Birthmother 5: Well, adoption it is hard but it is a fair chance for the baby to actually have a life and to give to somebody who didn't.

Researcher: And abortion?

Birthmother 5: Abortion is something I would usually think of as something I would do, but when you are actually pregnant and realize you have a life inside of you, you don't want to do it.

Researcher: What is your view on spirituality and religion?

Birthmother 5: Well, now after I have developed a lot and grew closer to God. I think it has done me good. It's like loosing my baby, I gained something.

Researcher: What made your life meaningful before the adoption?

Birthmother 5: My boyfriend.

Researcher: Your boyfriend?

Birthmother 5: And my music.

Researcher: What makes your life meaningful now after the adoption?

Birthmother 5: God has like in played a huge role in my life and the fact that I am responsible for a life out there. Even if I'll never know that little life I am still gonna try to be a better person.

Researcher: How old are you now?

Birthmother 5: I am 15.

Researcher: How old were you when you gave birth?

Birthmother 5: I was 14.

Researcher: What was your health and physical status like before you became pregnant?

Birthmother 5: There was nothing wrong. I was fine.

Researcher: And while you were pregnant?

Birthmother 5: You obviously get the odd toughing up stages and pick up weight.

Researcher: You weren't sick, just normal pregnant?

Birthmother 5: No, just normal.

Researcher: Your health and physical status now after the birth?

Birthmother 5: I am fine now, I just gained a lot of weight that I would like to loose.

Researcher: How often do you get ill or do you go and see the doctor?

Birthmother 5: I don't get ill very often and I then usually don't go to the doctor.

Researcher: Have you contracted any sexual diseases?

Birthmother 5: No.

Researcher: Do you suffer from any illness or problems?

Birthmother 5: No.

Researcher: Through which method did you give birth?

Birthmother 5: Natural.

Researcher: Why did you choose that method?

Birthmother 5: I don't know. The doctors said it could be in a way a good thing and I don't fancy having my stomach cut open.

Researcher: Did you use contraceptives before you got pregnant?

Birthmother 5: Yes.

Researcher: What methods are you using currently to prevent another pregnancy?

Birthmother 5: I abstain from sexual intercourse.

Researcher: That is the safest way. How does adoption influence the way you think, feel and behave?

Birthmother 5: It changes your entire look on life. And I think I am mature now. I think twice before I do anything and I am more responsible.

Researcher: What do you regard as your weak points and your strong points?

Birthmother 5: My strong points is I am independent and I can now just go out and do what I want to do and my weak points is that I am influenced easily.

Researcher: What was your initial reaction when you found out you were pregnant?

Birthmother 5: I had so many things going through my head, it was like in happiness, but then on the other hand just wanted to go to my bed and cry and just be away from everybody.

Researcher: Why did you choose adoption above abortion?

Birthmother 5: I have always said, like before, if I fall pregnant I would have an abortion but when I thought of this little life in me and the fact that it is something created, by me and the person I am in love with, it is not fare, I have already done so much.

Researcher: How do you think it influences your life currently? The fact that you had your child adopted.

Birthmother 5: It is hard to know that there is a part of you out there somewhere. But I look at life positively and I know I can help people that are in my situation.

Researcher: And in the future?

Birthmother 5: I am scared about the future because on the one hand I want to know the child and on the other hand I don't. I am worried that it is going to haunt me one day.

Researcher: How does giving up your baby for adoption influence your school work?

Birthmother 5: Well, it is like the only thing on your mind. You can't get this little child off and you can't concentrate on school work. It is very difficult.

Researcher: How many times a day do you think of your baby?

Birthmother 5: Most of the time.

Researcher: If you have a choice, would you choose adoption again?

Birthmother 5: Yes, I would.

Researcher: Why would you do that?

Birthmother 5: Because I can't stand it that that little life be taken.

Researcher: Did this event change your view on religion?

Birthmother 5: Yes it did. I became a strong Christian.

Researcher: What benefits do you think adoption held for your baby?

Birthmother 5: This child has the opportunity to live and strive for something in life and just be different from his mother and maybe be told by the adoptive parents that this is something your mom did.

Researcher: What benefits do you think the adoption held for you?

Birthmother 5: I think I have learned a lot out of it and I think it is something I won't do again.

Researcher: Do you think it has any benefit for you?

Birthmother 5: In a way, yes.

Researcher: What benefits do you think it held for your family?

Birthmother 5: For the family, well they did, I think, they could see the way I handled something like that and my sister, now she used to be very sexually active and when she saw what happened to me, she decided to abstain not totally but more.

Researcher: What benefits do you think adoption held for the father of the baby?

Birthmother 5: He doesn't talk to me a lot about it but I think he has also learned because it takes two to tango so, it was both of us. It has worked for him as well and he is stronger in religion as well.

Researcher: What disadvantages do you think is there for the baby?

Birthmother 5: Well, I know I would hate to one day just find out that I was adopted and want to know who my parents are and I don't know or I might be a threat to the child. You never know what my life would be like.

Researcher: What disadvantages do you think is there for you?

Birthmother 5: That one day it could haunt me, and the child might become a serial killer and haunt me down.

Researcher: And for the family after the adoption?

Birthmother 5: I think that if the child is brought up in the wrong way it might think that I own or my family own it. My family will be in trouble.

Researcher: How has adoption impacted on your view of future pregnancies?

Birthmother 5: No, only a lot later in life, if ever, I don't now.

Researcher: Why would you decide to have another child in the future?

Birthmother 5: When it is planned and I decide to have the opportunity to show motherly love.

Researcher: How did it impact on your view of sex before the marriage?

Birthmother 5: No, out.

Researcher: How has adoption impacted on your view of relationships?

Birthmother 5: What relationships?

Researcher: Any relationships.

Birthmother 5: I think twice before I do anything and I am more open with people as well and people are more open with me. I learn from my mistakes.

Researcher: How has the adoption impacted on your relationships with your parents, siblings, peers, teachers?

Birthmother 5: I am a lot closer to my mother and my sister, the rest I sort-of drifted from. My friends still don't really understand.

Researcher: Did you grieve for your baby?

Birthmother 5: Yes.

Researcher: What form did this grieving take?

Birthmother 5: By myself I would cry, most of the time, I would just keep it all in. Using guitar or music would help me.

Researcher: Do you write your own songs?

Birthmother 5: Yah.

Researcher: Do you have a positive self concept?

Birthmother 5: I think so.

Researcher: Do you view yourself as emotionally mature?

Birthmother 5: Yes.

Researcher: Is there anything you think or feel is important that I haven't asked?

Birthmother 5: Not really.

Researcher: Thank you.

Repos of the
blest
souls

Privaatsak
Pretoria
0001
2003 - 11 - 17

Mnr. _____
Verwysing _____

Insake:

_____ was by die _____ ingeskryf en op ons register vanaf 11 Maart 2003 tot en met 12 September 2003. Gedurende hierdie tydperk was sy 26 dae afwesig, vakansies uitgesluit. _____ het gevorder van n teruggetrokke, afsydige leerder, na n spontane dogter wat fluks gewerk het, met konstante aanmoediging, moet ons byvoeg!

Sy het die volgende punte in haar deurlopende assessering behaal: (Totaal 75)

1. English Primary Language $48 / 75 = 64 \% = 3$
2. Afrikaans Addisionele Taal $74 \% = 4$
3. MLMMS $63 \% = 3$
4. Human & Social Sciences $49 / 75 = 65 \% = 3$
5. Technology $32 / 75 = 45 \% = 2$
6. Economic & Management Sciences $34 / 75 = 45 \% = 2$
7. Life Orientation $37 / 75 = 49 \% = 2$
8. Arts & Culture $37 / 75 = 49 \% = 2$
9. Natural Sciences $61 \% = 3$

Die bogenoemde punte is in haar Portefeuljes beskikbaar – ter insae van die Hoërskool wat sy volgende jaar sal bywoon. Geen summatiewe eksamen is afgelê nie (uit 25); haar totale jaarpunt uit 100 is dus nie beskikbaar nie.

_____ is n intelligente dogter wat gekortwiek word deur omstandighede. In n ordelike en veilige omgewing behoort sy goed te presteer. Daar behoort egter uitsluitel by die distrikskantoor van die betrokke provinsie verkry te word, of _____ na Gr. 8 bevorder mag word met slegs n deurlopende assesseringspunt tot haar beskikking.

Ons beste wense vergesel haar.

Met dank

Me. _____

TERM 1

Birthmother 1

LEARNER :

ID-NO. :

GRADE :

YRS IN GRD. : 1

	SUBJECT NAMES & TOTALS		S1		
			PERC	SMB	GA%
*	LANGUAGE, LIT & COMM	100	46	A	47
	MATH - LIT & SCIENCES	100	24	NA	46
	HUMAN & SOCIAL SCIENCES	100	33	NA	52
	TECHNOLOGY	100	20	NA	63
	NATURAL SCIENCES	100	67	A	70
	ARTS & CULTURE	100	68	A	60
	ECONOMIC & MANAGEMENT SCI	100	56	A	70
	LIFE ORIENTATION	100	51	A	58
AVERAGE			45.6	A	58.3

*	LANGUAGE, LIT & COMMUNICA OG	50	18	PA	21
	TAAL, GELETTERDHEID & KOM OG	50	28	A	26

SYMBOL VALUES

NA = 0.0- 34.9 | PA = 35.0- 39.9 | A = 40.0- 69.9 | O = 70.0-100.0 |

Your child is in danger of not being progressed. See attached letter.

LEARNING AREAS

FORMATIVE EVALUATION

PERFORMANCE INDICATORS

LANGUAGE, LIT & COMM

LANGUAGE, LIT & COMMUNICA

PARTIAL GRASP OF SENTENCE STRUCTURE

2 PARTIALLY ACHIEVED

CANNOT NEGOTIATE MEANING IN TEXT

LITTLE CREATIVE ABILITY

PARTIAL SUCCESS AT VERBAL COMMUNICATION

LEARNER CREATES AND INTERPRETS MEANING & IDEAS

3 ACHIEVED

ABLE TO DO A LISTENING COMPREHENSION

ABLE TO DO A SPEECH & SHOWS KNOWLEDGE OF CONTENT

IDENTIFIES LANGUAGE SKILLS

MATH - LIT & SCIENCES

DOESN'T UNDERSTAND NEGATIVE NUMBERS

1 NOT YET ACHIEVED

CAN'T USE MATHEMATICAL NOTATION

CAN DO SIMPLE MENTAL CALCULATIONS

CAN'T DO CALCULATIONS WITH FRACTIONS

HUMAN & SOCIAL SCIENCES

NEEDS HELP TO WORK INDEPENDENTLY

1 NOT YET ACHIEVED

NEEDS HELP TO EVALUATE INFORMATION IN PICTURE

UNABLE TO IDENTIFY SOURCES OF KNOWLEDGE

NEEDS HELP TO BE ABLE TO SOLVE PROBLEM

Birthmother 2

Privaatsak
Pretoria
0001
2003 - 11 - 17

Mnr. _____
Verwysing _____

Insake:

_____ was by die _____ ingeskryf en op ons register vanaf 11 Maart 2003 tot en met 12 September 2003. Gedurende hierdie tydperk was sy 26 dae afwesig, vakansies uitgesluit. _____ het gevorder van n teruggetrokke, afsydige leerder, na n spontane dogter wat fluks gewerk het, met konstante aanmoediging, moet ons byvoeg!

Sy het die volgende punte in haar deurlopende assessering behaal: (Totaal 75)

1. English Primary Language $48 / 75 = 64 \% = 3$
2. Afrikaans Addisionele Taal $74 \% = 4$
3. MLMMS $63 \% = 3$
4. Human & Social Sciences $49 / 75 = 65 \% = 3$
5. Technology $32 / 75 = 45 \% = 2$
6. Economic & Management Sciences $34 / 75 = 45 \% = 2$
7. Life Orientation $37 / 75 = 49 \% = 2$
8. Arts & Culture $37 / 75 = 49 \% = 2$
9. Natural Sciences $61 \% = 3$

Die bogenoemde punte is in haar Portefeuljes beskikbaar – ter insae van die Hoërskool wat sy volgende jaar sal bywoon. Geen summatiewe eksamen is afgelê nie (uit 25); haar totale jaarpunt uit 100 is dus nie beskikbaar nie.

_____ is n intelligente dogter wat gekortwiek word deur omstandighede. In n ordelike en veilige omgewing behoort sy goed te presteer. Daar behoort egter uitsluitel by die distrikskantoor van die betrokke provinsie verkry te word, of _____ na Gr. 8 bevorder mag word met slegs n deurlopende assesseringspunt tot haar beskikking.

Ons beste wense vergesel haar.

Met dank

Me. _____

Birthmother 2

NAME

NOMMER
NUMBER

GEBOORTEDATUM
DATE OF BIRTH

DATUM
DATE

VAKKE SUBJECTS	Vak Totaal Subject Total	Kwartaal 1/Term 1			Kwartaal 2/Term 2			Kwartaal 3/Term 3			Kwartaal 4/Term 4		
		Leerling/Pupil		Gr.Gem. Gr.Ave. %	Leerling/Pupil		Gr.Gem. Gr.Ave. %	Leerling/Pupil		Gr.Gem. Gr.Ave. %	Leerling/Pupil		Gr.Gem. Gr.Ave. %
		Punte/Marks	%		Punte/Marks	%		Punte/Marks	%		Punte/Marks	%	
AFRIKAANS 1E TAAL HG	400	204	51	48	182	45	46	202	50	49			
ENGELS 2E TAAL HG	300	162	54	47	170	56	51	138	46	51			
WISKUNDE HG	400	89	22	57	124	31	60	61	15	53			
AARDRYKSKUNDE HG	400	176	44	38	228	57	44	173	43	39			
BEDRYFSEKONOMIE HG	400	286	71	52	248	62	47	255	63	50			
REKENAARSTUDIE SG	300	165	55	45	171	57	46	166	55	45			
BYBELONDERRIG		A			A			A					
TOTAAL / TOTAL	2100	1082			1123			995					
GEM. % VAN LEERLING / AVERAGE % OF SCHOLAR		51.5			53.5			47.4					
GEM. % VAN GRAAD / AVERAGE % OF GRADE		47.9			49.1			47.8					
DAE AFWESIG / DAYS ABSENT		1			0			4					
<p>SLAAGVERBODS ORL 8 EN 9</p> <p>1. GESKOEDENS EN AARDRYKSKUNDE ASOOK BIOLOGIE EN NATUUR -EN SKEIKUNDE. WORD AS SEN VAK BESKOU</p> <p>2. 1 VAKKE MOET GESLAAG WORD.</p> <p>40% IN AFRIKAANS OF ENGELS</p> <p>2 VAKKE 40% EN</p> <p>2 VAKKE 35%</p>													
<p>SLAAGVERBODS ORL 10-12</p> <p>1. GROOTTOTAAL VAN 720</p> <p>2. SLAAG 3 VAKKE WAARVAN 1 IN AMPTELIKE TAAL IS</p> <p>3. SLAAGPUNT HG-VAKKE: 180 EN 100 VIR AMPTELIKE TWEEDE TAAL</p> <p>4. HG-VAK TUSSEN 120-180: GESLAAG OP SG</p> <p>5. HG-VAK MINDER AS 120/100. WORD VAK GEDRUP</p> <p>6. SLAAGPUNT SG-VAKKE: 100</p>													

OPMERKINGS:
REMARKS:

SKOOLHOOF:
PRINCIPAL:

KLASONDERWYSE/ES:
CLASS TEACHER:

Supplied by Marion Formu Tel.: (051) 444 2151

NAAM:
NAME:

GR.:
GR.:

KWARTAAL:
TERM:

4

OUERS WORD VRIENDELIK VERSOEK OM HIERDIE VERSLAG NA TE GAAN, HIERDIE GEDEELTE TE ONDERTEKEN, AF TE SKEUR EN TERUG TE STUUR
NA DIE KLASONDERWYSE/ES.

PARENTS ARE REQUESTED TO CHECK THIS REPORT, SIGN THIS PORTION, TEAR OFF AND RETURN TO THE CLASS TEACHER.

HANDTEKENING VAN OUER / SIGNATURE OF PARENT

DATUM / DATE

Birthmother 3

NOMMER	GEBORTE DATUM	DATUM
--------	---------------	-------

VAKKE	Vak Totaal	Kwartaal 1			Kwartaal 2			Kwartaal 3			Kwartaal 4		
		Leerling		St. Gen. %	Leerling		St. Gen. %	Leerling		St. Gen. %	Leerling		St. Gen. %
		Punte	%		Punte	%		Punte	%		Punte	%	
AFRIKAANS 1E TAAL HG	400	170	42	50	162	40	49						
ENGELS 2E TAAL HG	300	137	62	54	169	56	54						
WISKUNDE HG	400	119	29	49	143	35	40						
NATUUR- EN SKEIK HG	400	164	41	50	152	38	45						
BIOLOGIE HG	400	227	56	48	160	40	45						
REKENINGKUNDE HG	400	168	42	51	206	51	58						
BYBELONDERRIG		C			A								
TOTAAL	2300	1035			992								
GEM. % VAN LEERLING		45.0			43.1			.0			.0		
Klasgemiddelde %		50.2			48.1			.0			.0		
DAE AFWESIG		0			0								

OPMERKINGS:	
SKOOLHOOF	KLASONDERWYSE

VAKKE	Vak Totaal	Kwartal 1			Kwartal 2			Kwartal 3			Kwartal 4		
		Leerling		Aan- w.	Leerling		Aan- w.	Leerling		Aan- w.	Leerling		Aan- w.
		Pos.	%		Pos.	%		Pos.	%		Pos.	%	
AFRIKAANS 1E TAAL GG	200	85	42	52	86	43	48	94	47	50	115	57	54
ENGLISH SEC LANG OG	100	51	51	57	52	52	52	51	51	54	52	52	52
WISKUNDE GG	100	46	46	51	34	34	41	44	44	46	54	54	47
SUID-SOTHO GG	100	84	84	71	64	64	64	63	63	73	61	61	66
AARDRYKSKUNDE GG	100	59	59	61	56	56	60	63	63	64	81	81	65
GESKIEDENIS GG	100	75	75	52	62	62	43	62	62	42	70	70	49
REKENINGKUNDE GG	100	56	56	52	61	61	56	40	40	45	49	49	58
ALG WETENSKAP GG	200	115	57	59	98	49	49	118	59	51	121	60	56
BYBELONDERRIG		B			B			B			A		
TOTAAL	1000	571			513			535			603		
GEM. % VAN LEERLING		57.1			51.3			53.5			60.3		
Klasgemiddelde %		56.7			51.0			52.8			55.5		
DAE AFWESIG		3			0			0			1		

OPMERKINGS:

KOOLOHOOF

KLASONDERWYSERES

Birthmother 4

NOMMER	GEBOORTEDATUM	DATUM
--------	---------------	-------

VAKKE	Vak Totaal	Kwartaal 1			Kwartaal 2			Kwartaal 3			Kwartaal 4		
		Leerling		St. Gem. %	Leerling		St. Gem. %	Leerling		St. Gem. %	Leerling		St. Gem. %
		Punte	%		Punte	%		Punte	%		Punte	%	
AFRIKAANS 1E TAAL HG	400	249	62	57	212	53	53						
ENGELS 2E TAAL HG	300	177	59	52	160	53	54						
WISKUNDE SG	300	180	60	45	126	42	30						
NATUUR- EN SKEIK HG	400	182	45	48	164	41	44						
BIOLOGIE HG	400	137	34	44	221	55	53						
AARDRYKSKUNDE HG	400	293	73	63	243	60	44						
BYBELONDERRIG		A			A								
TOTAAL		2200	1218		1126								
GEM. % VAN LEERLING			53.0		49.0								
Klasgemiddelde %			49.5		44.7								
DAE AFWESIG			0		0								

OPMERKINGS: _____	

SKOOLHOOF _____	KLASONDERWYSERES _____

Birthmother 5

PROGRESS REPORT

Learner number:
Learner:
Date of birth:

Class:
Date:

	1*	2*		1*	2*
Language, Literacy and Communication			Arts and Culture		
Afrikaans Formal Testing (Summative 25)	47	48	Formal Testing (Summative 25)	56	78
Afrikaans Continuous Evaluation (Formative 75)	60	66	Continuous Evaluation (Formative 75)	74	86
AFRIKAANS TERM MARK	57	61	Symbol	A	B
English Formal Testing (Summative 25)	66	68	Term mark	70	84
English Continuous Evaluation (Formative 75)	56	59	Attitude and values		
ENGLISH TERM MARK	59	61	Autonomous work is done		
Formal Testing (Summative 25)	58	57	Class average %	63.5	62.9
Continuous Evaluation (Formative 75)	58	62	Economical and Management Sciences		
LLC Symbol	P	A	Formal Testing (Summative 25)	62	55
LLC Term mark	58	61	Continuous Evaluation (Formative 75)	83	92
Attitude and values			Symbol	A	B
Motivation is still needed			Term mark	75	83
Class average %	53.8	56.3	Attitude and values		
Human and Social Sciences			Spontaneous involvement		
Formal Testing (Summative 25)	70	69	Class average %	57.4	61.0
Continuous Evaluation (Formative 75)	74	58	Life Orientation		
Symbol	A	P	Formal Testing (Summative 25)	96	78
Term mark	73	59	Continuous Evaluation (Formative 75)	96	88
Attitude and values			Symbol	B	B
Experience co-operation			Term mark	96	86
Class average %	61.4	65.6	Attitude and values		
Technology			Learner's work is satisfactory		
Formal Testing (Summative 25)	80	48	Class average %	76.7	70.6
Continuous Evaluation (Formative 75)	76	58	Grand total	581	587
Symbol	A	P	Average percentage	72.6	70.9
Term mark	77	54	Class average percentage	62.0	58.3
Attitude and values			Days absent	0	4
Motivation is still needed			Remarks		
Class average %	72.2	43.7	Keep it up!		
Mathematical Literacy, Maths and Mathematical Sciences					
Formal Testing (Summative 25)	82	61			
Continuous Evaluation (Formative 75)	57	68			
Symbol	A	A			
Term mark	63	66			
Attitude and values					
Learner's work is satisfactory					
Class average %	55.3	54.4			
Natural Sciences					
Formal Testing (Summative 25)	45	54	Class educator		Principal
Continuous Evaluation (Formative 75)	77	81			
Symbol	A	A			
Term mark	69	74			
Attitude and values					
Experience co-operation					
Class average %	57.0	51.8			

*1: Term 1 *2: Term 2

Symbols: B - Beyond achieved (80 - 100) A - Achieved (60 - 79) P - Partially achieved (40 - 59) N - Not achieved (0 - 39)

Remarks:

Parents' evening 28 July 2004, 17:00-19:00.

Letter from Benji to Josh

9 September 2004

Dear J

It's your birthday on this day that I'm writing you this letter. You will get this letter when you are older. I just hope that one day you will understand why I did the things I did. I am happy that you are 1 year old today. Happy birthday!

I hope you understand that I wanted what is best for you. An education, a loving family, not that I don't love you but because I love you so much that I want what is best for you. I am unhappy about you not being with me and think of you constantly. I worry that you are ok, that you have what I could not afford, that one day, you will not come and look for me.

I want you to understand why I did this, why I give you up. I hope that one day you read all the letters that I have sent you. I hope that you will come and look for me.

My life was hell and I could not understand why I went through a hard life. I've also been pushed around but you are lucky to have one family that you can stay with. I've been pushed around from family to family since I was 4 years old. My whole life fell apart because my mom and dad fought every night. I am not making excuses for what I have done, but I seek your understanding. If you want to, we can talk about all your questions. You must have quite a lot. Just know that my door is always open for you. Maybe I might just understand you better as I went through much the same as you.

I won't say much and this is all I can say at the moment. I love you very much and can't stop thinking of you. Every night I pray to God that he will guide you and keep you safe.

Love you very much
Mommy

P.S. I was 15 when I wrote this letter to you my baby.