The encouragement of informed decision making in reducing adolescent pregnancies in South African schools

Eleanor Alvira HENDRICKS

ABSTRACT

Unplanned adolescent pregnancies have increased across South Africa over the past two decades. The high rates of adolescent pregnancies increase numbers of school dropouts and results in significantly reduced probabilities of success and emancipation for many girls. There are several methods that have been applied attempting to reduce unplanned adolescent pregnancies such as sex education as part of the life orientation syllabus, support services provided by school social workers, and visits by health care professionals are believed to be the most frequently used approach in South African schools. This study used indigenous research approach as it is an African study, the target population were learners across South Africa who are at risk of falling pregnant. The study sample were 20 participants consisting of 10 learners, seven educators, and three social workers from two schools with the highest rates of adolescent pregnancies in the country. Data was collected using semi-structures interviews and the researcher applied for ethical clearance from the University of Fort Hare. The aim of this paper is to explore the encouragement of informed decision making in reducing adolescent pregnancies in South African schools.

KEY TERMS: *adolescent pregnancy, improvement, education, informed decision making*

Author/s details:
Department of Social Work, University of Fort Hare, Fort Hare, South Africa. Email: ehendricks@ufh.ac.za

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INTRODUCTION

This paper addresses the gap of literature on sex education provided in South African schools. Adolescent pregnancy has been a growing concern globally. Falling pregnant while in one's teens can contribute to a loss of self-confidence, increased possibility of school dropout, stigmatization from community, delay or compromise of life goals and increased possibility of maternal or infant mortality. Furthermore, persons who conceive children during adolescence were less likely to become successful in later life. There are various stakeholders when attempting to curb adolescent pregnancy including adolescent peers, parents/ guardians, educators, social workers and community members. This study provides thought-provoking knowledge of the aforementioned audience/ stakeholders on the most effective type of contraception, the role of school social workers in rendering support to adolescents in terms of informed decision making, the benefits on delayed childbearing until later life, and the significance of attaining financial stability before having children.   The findings of this paper were drawn from participant views. The manuscript alludes on a brief literature review focusing on social group work approach to reduce adolescent pregnancy and increase informed decision making, the research methodology that was used to conduct the study, study findings and discussion, and finally conclusion and declaration are presented.

BACKGROUND

Adolescent pregnancy has been identified as one of the key social issues that negatively impact educational progress and empowerment of women across the African continent (Mathebula, Runhare & Mafumo, 2022). On the African continent there are a wide range of factors contributing to the increasing numbers of adolescent pregnancies. Some of these factors consist of early child marriages in developing countries where the purchase of a child brides by older men is endorsed (United Nations Educational, Scientific and Cultural Organization (UNESCO, 2019). The high figures of pregnancy amongst adolescents highlights the erosion in education causing a gender disproportion in various countries across Africa. Southern Africa has the highest rates of adolescent pregnancy in the world (Mavhunga, 2021). In many regions across Africa adolescent girls are coerced into child marriage as they are rarely allowed to go back to school and to save their parents from humiliation. Over the past decade South Africa has been mentioned on several occasions to have the third highest statistics of adolescent pregnancy worldwide with 1 in 3 underaged girls falling pregnant daily (UNESCO, 2019). In other news Mavhunga (2021) reported that early in 2021 around 5000 girls between the ages of 15-19 fell pregnant in Zimbabwe and 1800 from the approximate total entered into child marriages. The level of education plays a major role, for example girls with lower ranges of educational accomplishment are five times more probable to fall pregnant at a young age due to limited information about reproductive health and the inability to make informed decision unlike older females with adequate knowledge on the subject matter (UNESCO, 2019). In South Africa some factors at play include pressure from certain cultures spreading across the country where girls need to prove their ability to conceive before a male will enter into a committed relationship, sexual violation toward females in recent years has increased drastically and is a major contributing factor of adolescent pregnancies (World Health Organization, 2017). Children born to adolescent mothers are a high-risk group both physically and psychologically. "Poverty, malnutrition, complications of pregnancy, emotional problems such as depression, drug and alcohol use are all risks for an underage mother" (UNESCO, 2019:23). Children are also at larger threat for physical, intellectual, and emotional complications because teen mothers often do not go for prenatal care in early pregnancy stages leading to cognitive deficits and health risks in later life (Mavhunga, 2021). Thus, having children in later life often aids young women to improve their socio-economic standing by means of greater opportunities in a compatible workforce. Furthermore, research has it that reduction in teen pregnancies also saves the public healthcare system substantial resources, which is a major enhancement to the economy of countries as more of tax payers' money can be used to create employment/ study opportunities for young people. "There has been major improvement on pregnancy prevention methods over the years some methods include abstinence, oral contraception, Implanon, injectable contraception, condoms, emergency contraception and sterilization" (Breuner, Mattson, & Committee on Psychosocial Aspects of Child and Family Health, 2016:12).

OVERVIEW OF LITERATURE REVIEW

Globally, pregnant adolescents are no different from their peers who experience "the usual turbulence of development and need support and assistance" (Sarri & Phillips, 2014:538). Social workers use multilevel mediation approaches through principal and subordinate methods to support expecting adolescents, who experience several trials. After numerous   consultations locally and internationally some school social workers piloted the group work approach in aid of reducing adolescent pregnancy and encouraging better decision making among learners. Group work progress includes five platforms namely "pre-affiliation, addressing issues of power

and control, dealing with intimacy, differentiation and separation" (Sheafor & Horejsi, 2012:240). School social workers are often approached to assist learners, families, and educators in addressing issues including but not limited to absenteeism, social isolation, aggression, rebellious behaviour, and the effects of special physical, psychological, or financial difficulties (Skobi & Makofane, 2017). School social workers further address matters like substance abuse and sexuality high schools. In South Africa the group work approach includes the vigorous interactivity amongst group members to advance evolution and transformation (Nicholas, Rautenbach & Maistry, 2010). According to Taylor, Dlamini, Khanyile and Mpanza (2012) group work is an innovative method to educate students about sex and sexuality. Some objectives that can be derived from this type of intervention interlinking with social group work are to:

- Assist students in making responsible choices regarding sex and sexuality

- To inform students on methods of contraception available and additionally methods of preventing sexually transmitted infections

- Altering the views of students of socio-cultural gender roles which marginalize women.

This continuing development embraces belief and information interchange, decision making and support, which forms behavioural patterns relating to character, standards and conflict management (Nicholas *et al.*, 2010). Therefore, universalizing the problems that expecting adolescents' experience peers adopt an understanding that persons never have to experience problems in isolation. Being a part of a peer group eases apprehension and escalates assertiveness and enthusiasm to try new ideas (Toseland & Rivas, 2017). Ultimately after rendering group support to pregnant adolescent social worker started including female peers of the same age group to learn from their peers experiences of falling pregnant while in school. This was a reality check for many group members especially when the young mothers shared their journey and the judgement and challenges they faced. Schools that adopted the group work approach has seen reduction in pregnancy figures (Skobi & Makofane, 2017). Finally, South Africa is one of the more progressive countries on the African continent in terms of human rights it is the responsibility of social workers to educate learners about Chapter 2 of the Children's Act 38 of 2005 that allows adolescent girls from age of 12 year to obtain contraceptives independently and also girls are allowed to consult and get abortions from age 12. Furthermore, the services should be provided free of charge by health care professionals (Hendricks, 2020).

Ubuntu as an African theory to reduce adolescent pregnancies in schools

Ubuntu is deeply rooted in the formation of human relationships under the notion "a person is a person through other people" which resonates with the person-in-environment (PIE) perspective in social work practice (Mbedzi, 2019). The *Ubuntu* social work, welfare and development theory was the best suited for this study, The theory elucidates that social workers across Africa use Afrocentric methods to provide social justice to vulnerable groups in society (Ibrahima & Mattaini, 2019). *Ubuntu* in social work goes beyond the Eurocentric understanding of PIE which focusses on individuals while *ubuntu* focusses on relationships amongst individuals in the environment. Ubuntu social work, welfare and development generally focusses jointly on *ukama* (relationality), *ujamaa* (collaboration) and an holistic view of people in a specific environment (Ibrahima & Mattaini, 2019). Furthermore, ubuntu aligns with social justice one of the core social work values which refers to "an ideal condition in which all members of a society have similar basic rights, protection, opportunities, obligations, and social benefits also, about ensuring that resources are equally disbursed amongst all citizens" (van Breda, 2019: 445). In relation to this study learners are informed about their rights to contraceptives and the termination of a child by social workers (Hendricks, 2020). Furthermore, the study stresses the fact the reduction of adolescent pregnancies in schools is a joint attempt including peers, educators, social workers, care givers, health care practitioners and communities which is an all-round *ubuntu* approach.

RESEARCH METHODOLOGY

This study was guided by the least indigenous approach. This approach states that research should be contextualised and suited to blend in with the specific location where the study will take place (Chilisa, Major, Gaotlhobogwe & Mokgolodi, 2016). The least indigenous approach focusses on embracing diversity through aligning indigenous knowledge with research methodology, data collection methods and reporting of findings to the specific community (Chilisa et al., 2016). Mainly this research approach focusses on cosmetic indigeneity using the local language used by participants in the specific location the study is conducted, ensuring that research instruments in this instance an interview guide specified in a language that is location-specific in this case isiZulu

and Afrikaans (Ping Li, 2011). The least indigenous inquiry was done through the use of semi-structured interviews conducted with learners, educators and social workers as the study participants. The researcher aimed to gain insight into the circumstances of adolescent pregnancy experienced by the participants. The study sample consisted of 20 participants 10 learners, 7 educators, and 3 social workers from 2 schools 1 in Kwazulu Natal Province (using isiZulu language) and 1 in the Eastern Cape (using Afrikaans language). The study was conducted in the selected schools in the aforementioned provinces as these schools have had the highest pregnancy rates for over a decade and have shown tremendous decreases in pregnancy rates since 2019 when social workers started doing group work sessions with adolescent mothers and their peers whom do not have children to share experiences and make informed decisions. Thematic analysis was done where the researcher did data reduction and analysis strategy by which data were "segmented, categorized, abridged, and recreated in a way that captures the important concepts within the data set" (Selvam & Collicutt, 23:98). The themes that were identified from the data were linked to the study aim. The researcher applied for ethical clearance from Faculty Research Higher Degrees Committee at University of Fort Hare and received it prior to gather data. Ethical clearance number was HEN001-22 (Project). Meaning therefore that this study was bound by ethical aspects such as confidentiality, avoidance of harm, informed consent (assent for participants under 18) and validity and reliability.

FINDINGS

Learners (10) who participated in this study were all females aged between 16 and 18 years old, all had children and after delivery returned to school in a quest to complete their secondary level of education. The educators ranged from ages 25 to 59 with majority being aged 45 and older. Educators were both male (2) and female (5). Finally, there were three female school social workers who participated in the study. Participants were recognized using pseudonyms, learners were identified as L1-L10, educators were identified as EDU 1- EDU 7, and social workers were identified as SW 1- SW 3. Below is a table displaying the themes and sub-themes that emerged from the data that was collected.

Table 1: Themes and sub-themes that emerged in this study

Main themes	Sub-themes
Dual contraception is the best method of pregnancy prevention	
Benefits of delaying parenthood until later life	Delayed parenting leading to stronger family bonds Financially stable parent/s offer better prospects to their children
Support services provided by school social workers to adolescents to curb rising pregnancy rates	

Theme 1: Dual contraception is the best method of pregnancy prevention

As part of the South African life orientation syllabus, sex education is taught from grade 9 to grade 12 with learners ranging between the ages of 13 to 18 years. In this syllabus dual contraception is covered ostentatiously in its variety of forms, in the selected schools all life orientation educators liaise with nursing staff from local clinics to visit the school and speak to learners about available contraception and which types of contraceptives is more suited for young women. The most advisable type of contraception taught by educators is abstinence as sex education does not form part of the university syllabus across the globe and the subject can be uncomfortable for many educators who may be influenced by 20th century norms in which talking about sex was taboo in many households and schools. Provided the rising figures abstinence may be advised but it is not practiced by majority of school aged adolescents. Hence, the subject matter of sex education has been altered to have a more modern approach covering dual contraception as a method for adolescent girls to protect themselves because majority of adolescents of school going age are sexually active.

"After numerous consultations with health care practitioners I realized the best way to prevent pregnancy is dual protection condoms and birth control pills/ injection" (EDU 5).

"I am a 16 year old grade 10 learner and I have a 5 month old baby girl my pregnancy resulted from non-use of

contraception. Immediate after delivering my baby the Doctor asked me whether I was interested in getting an Implanon, I was confused but he quickly clarified that it is a contraceptive implant that prevents pregnancy for up to 5 years. I agreed and went back 3 weeks postpartum to get the Implanon. I have been practicing safe sex with my new partner though I have an Implanon we use condoms to protect ourselves against sexually transmitted diseases " (L 1).

"The best method of preventing pregnancy and any form of sexually transmitted infections is through the use of condoms and a mild oral contraception that would not course any conception complications in the future. This is the information I have since than been sharing with my learners and I make it a point that I refer them to some nurses who can assist them" (EDU 7).

Theme 2: Benefits of delaying parenthood until later life

Sex education is more than the teaching of learners about anatomy and the physiology of biological sex and reproduction it also focusses on positive decision making about one's life.

Two sub-themes emerged under the theme, delayed parenting leading to stronger family bonds and financially stable parent/s offer better prospects to their children.

Theme 2.1: Delayed parenting leading to stronger family bonds

There have been numerous studies revealing that in South Africa children born to older mothers aged 27 and upward were more successful in academics and sport. Subsequently, majority of children born to mature mother received proper nutrition and support hence, they were more developed than some of their peers. Majority of educators shared that from their observation on learner performance over the years, learners born to parents in their late twenties and early thirties receive more support and academically perform better than their peers born to younger parents. Furthermore, it has been observed that having children later in life increases strong family bonds, enhances good parenting and increases family stability.

"Planned parenting and spacing of children are all contributing factors to stronger family bonds between parents and children. Planning for children and spacing children requires mature adults not youngsters who have no idea where they are headed in life" (EDU 2).

Research has shown that often teenage boys born to young single mothers tend to display delinquent behaviour and girls are less academically progressive than their counterparts who come from homes with older and stable parent. Hence, it is better to have children at a more mature age where one can be an example to his/her child/ren"(SW 1).

On a similar note than edu 12 weighed on this by arguing that; "I feel that having children when you are older and mature is a better option given that older parents are in a better position to providing a better future for one's children" (L 4).

Theme 2.2: Financially stable parent/s offer better prospects to their children

The income level of parents influences the academic accomplishments of their children. Predominantly research has shown that children born to financially stable parent/s are more likely to become successful in their adult life. Thus, some participant agreed that financially stable parent/s are in a position to afford their children a better life than less affluent parent/s.

I have a beautiful child that I consider a huge blessing. Though I love my baby more than life itself it is so difficult to provide. I receive the child support grant and my mother assists financially but still there are days where I run out of essentials for my baby therefore, I had to resort to a weekend job to provide for my baby (L6).

I am so fortunate that I have two working parents who provide everything for me and my baby. I disappointed my parents by falling pregnant in school, but they motivated me to return and complete my schooling. I hope I will be as financially stable as my parents one day (L5).

I struggle to cope with raising my child it has gotten so bad that I was diagnosed with depression. The only income at home are social grants of my granny and my baby, the financial burden is too much I wish I had a child when I was much older and more financially stable (L 2).

Theme 3: **Support services provided by school social workers to adolescents to curb rising pregnancy rates**

Life has become more complex over the years and adolescents of school going age face multiple adversities therefore, school social workers are essential for supporting learners. Some serious concerns school social workers aid in managing when working with adolescent include adolescent reproductive health, mental health, substance abuse, poverty, and past academic failure.

> *The job of a social worker is to provide council and support to vulnerable persons and adolescents fall under children who are described as a vulnerable group in South Africa. I have weekly sessions with adolescent mothers and they support each other without reservation. I have also referred some of the learners to South African Social Security Agency (SASSA) to apply for child support grants just to ease the financial burden that comes with raising a child (SW 2).*

> *Our assigned social worker does group with us in the group sessions we discuss many challenges among which are pregnancy, mental health and substance abuse" (L6).*

> *I enjoy the group sessions with my peers who also have children whilst in school, we support each other and the social worker supports us without judgement (L 3).*

> *There are many problems in a school setting that require social work intervention. The issue of adolescent pregnancy has been lurking for many years hence, schools that were identifies as high risk received government funding to employ social workers. I am one of the social workers who were employed to assist school management reduce adolescent pregnancies amongst their learners. I use the group work method to support adolescent mothers and also include peers without children to gain first-hand insight on how difficult it is to be a young mother and ultimately use the experience to make informed and better choices about contraception use and sexuality (SW 3).*

> *The social worker discussed contraception in one of our group discussions, during the discussion some scholars indicated that they went to the clinic to get prevention pills but the nurses shouted at them. The social worker accompanied the group of scholars to the clinic that same day and one was assisted the other two were told to return when they go on their next period. That made more of us feel comfortable around the social worker and venture into taking oral contraception and free condoms as well to prevent diseases (L10).*

DISCUSSION

Below follows a deliberation on the discussion of finding generated from this study.

Dual contraception is the best method of pregnancy prevention

The study findings indicated that educating learners about various methods of contraception is very important in enabling informed decision making not only for the current generation but for generations to come. Educating learners mean that they will be equipped with knowledge to make informed decisions on which type of contraception is most suited for them and how to protect themselves against sexually transmitted diseases as well. Machebe, Ezegbe & Onuoha (2017: 1614) stated "we encourage schools to teach the youth about the importance of using condoms along with oral/ injectable contraception not only to prevent pregnancy but also to prevent and reduce HIV transmission and secure a better future for themselves". Comprehensive sex education embraces lasting healthy sexual maturation, positive identity formation, long-lasting interpersonal relations, self-confidence in all adolescents (male and female) even those with mental health issues and physical disabilities (Breuner, Mattson, & Committee on Psychosocial Aspects of Child and Family Health, 2016).

Delayed parenting leading to stronger family bonds

Furthermore, the study revealed that financially stable parent/s are able to provide to a greater extent for their children than younger struggling parent/s can. Deferred motherhood is a fundamental feature of the substantial transformation of family and reproduction in the global North where women complete their schooling, further their education, find employment and generate savings before having children (Sobotka & Beaujouan, 2018). Machebe, Ezegbe & Onuoha (2017) state that parents play a vital role in cultivating the educational accomplishments of their children by providing the ethical, monetary and material sustenance required for their children to be motivated to achieve good grades scholastically.

Financially stable parent/s offer better prospects to their children

 Academic accomplishment is strongly associated with saving, apt uses of income, investments, profits from generated investments, and finally accretion of net value over the life course, free of its effect on labour earnings (Chivez & Wickeman, 2013). Correspondingly, a healthy family foundation is a strongly associated with financial stability. Greater academic accomplishment, matrimony, and deferred fertility each increases a household's capacity to transform inheritance and create generational wealth (Benton & Keister, 2017). Therefore, the finding of this study identified that secure, consistent and cultivating relationships between children and parents/ caregivers are fundamental to a child's healthy development. Such relations offer enduring love, parental alertness, confidence and direction, permitting children to safely discover the world and cultivate the abilities essential to create loving and reassuring relations with others. These findings link with *ubuntu* which signifies bounteousness, thoughtfulness and humanity towards others (Mugumbate & Nyanguru, 2013). The African society is less individualistic caring for others and bounteousness toward individuals carries more significance than in the Western world (Mugumbate & Nyanguru, 2013).

Support services provided by school social workers to adolescents to curb rising pregnancy rates

The study further identified that school social workers play a vital role in addressing issues like postpartum depression in underage girls by sharing methods for managing the perinatal symptoms in a classroom setting, joining forces with healthcare professionals and community organizations that focus on perinatal depression, and educating educators on the impact perinatal depression in the classroom (Van Plett, 2021). Social group work therapy meetings are the main intervention method used in schools and it concentrates on a variety of subjects from overcoming individual challenges, skills training, and trauma counselling. Group work sessions create conducive environments where members share their individual experiences which in turn collectively inspires other members to adopt effective coping strategies that worked for their peers (Mupedziswa, Rankopa & Mwansa, 2019). There are certain skills that adolescents in schools may incur when participating in social group work sessions not in South Africa alone but across the African continent (Skobi & Makofane, 2017). These skills include general life skills, enhanced communication, problem solving, critical engagement, creativity, coping mechanisms for an array of social issues, enhanced self-esteem, identification of inherent strength and enhancement thereof, and emotional intelligence (Chitereka, 2009). Furthermore social workers are obligated to develop appropriate parenting skills programs as stipulated in the Children's Act No. 38 of 2005. These programmes aim to prevent abandonment, exploitation, manipulation and abuse of children and to ultimately prevent family disintegration and promote cohesion in families headed by young mothers. Guided by *ubuntu* which is critically concerned with innate worth and dignity of individuals *ubuntu* means that all individuals have equal rights and no one person should be treated more superior to their peer. Interpersonal relationships according to *ubuntu* accents norms like reciprocity, altruism and synergy contributing to social justice (Mupedziswa, Rankopa & Mwansa, 2019). "Social group work also empowers adolescents to develop an awareness of their bodies, allows the social worker to discuss important factors regarding relationships, and address potential issues that affect their health and safety such as gender-based violence" (Van Plett, 2021:4). In this study learners expressed that they obtained satisfactory support services from social workers. Participants both learners and educators acknowledged that social workers took it upon themselves to assist learners in gaining access to contraceptives and further shared valuable information about sexuality and positive decision making. According to WHO (2009:5), "comprehensive sex education forms the foundation for adolescents and youth to make healthy decisions regarding their sexuality and could contribute to the reduction of unplanned pregnancies and transmission of sexually transmitted infections".

CONCLUSION

The findings of this study clearly indicate that when all stakeholders use an *ubuntu* approach working together it is possible to reduce the figures of adolescent pregnancies in schools. Comprehensive sex education focusing on knowledge production, developing of opinions, philosophies, and ethics about consensus, sexual orientation, gender, identity, relations, contraception and intercourse is the key to decreasing adolescent pregnancies and increasing positive decision making such as delaying parenthood until later life. The availability of social work support services in schools has deemed to be the leading method of effectively empowering learners with knowledge on healthy sexuality and progressive decision making.

Declaration

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