

# **Research Proposal**

**STA1507 Project A** 

**Assignment 4** 

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## **APPENDIX A: DEFINITION OF CONCEPTS**

<u>Anonymize</u> – To remove identifying information from something, such as computer data so that the source cannot be known.

<u>Confidentiality</u> – This means the state of keeping secret or not disclosing information, it is simply the act of keeping that information private.

**Contraceptives** – Devices or drugs serving to prevent pregnancy.

<u>Cross-classification</u> – The placing of observations or individuals into classes based on the features of two or more variables.

<u>**Data**</u> – Any information that has been collected, observed, generated, or created to validate original research findings.

<u>Data Analysis Methods</u> –Methods used to summarize collected data. They involve the interpretation of data gathered using analytical and logical reasoning to determine patterns, relationships, or trends.

<u>Data collection</u> – This is the process of gathering and measuring information on variables of interest, in an established systematic fashion that enables one to answer stated research questions, test hypotheses, and evaluate outcomes.

<u>Descriptive Research</u> – Research that only aims to describe phenomena, so it is used to find out how things are, not to explain why things happen.

<u>Ethical considerations</u> –These are a set of principles that guide your research designs and practices. These principles include voluntary participation, informed consent, anonymity, confidentiality, potential for harm, and results communication.

<u>Frequency distribution</u> – This is an organized tabulation/graphical representation of the number of individuals in each category on the scale of measurement. It allows the researcher to have a glance at the entire data conveniently.

<u>Guidelines</u> – These are general rules, principles, or pieces of advice.

<u>Informed Consent</u> – Permission granted for full knowledge of the possible consequences (risks and benefits).

<u>Methodology</u> – Research methodology is the specific procedures or techniques used to identify, select, process, and analyze information about a topic.

<u>**Population**</u> – An entire group about which some information is required to be ascertained.

**<u>Protocol</u>** – A system of rules that explain the correct conduct and procedures to be

followed in formal situations.

<u>Quantitative Data</u> – Data that can be represented numerically, including anything that can be counted, measured, or given a numerical value.

<u>Questionnaire</u> – This is a set of printed or written questions with a choice of answers, devised for a survey or statistical study.

**<u>Random Sampling</u>** – The sample is chosen by selecting individuals from the population in some random way.

<u>Research Problem</u> – This is a statement about a concern or a situation that needs to be improved or addressed.

**Research Question** – This is a question that a research project sets out to answer.

**Sampling** – Is the selection of a subset of the population of interest in a research study.

<u>Socio-economic</u> – Refers to the interaction between the social and economic habits of a group of people.

<u>Stratified Random Sampling</u> – The sample is obtained by dividing the population into several groups called strata, and then drawing simple random samples from each stratum.

<u>Study Design</u> –A framework, or the set of methods and procedures used to collect and analyze data on variables specified in a particular research problem.

*Variable* – Something that can be changed or adapted.

## 1. INTRODUCTION

South Africa has one of the highest teenage pregnancy rates in the world, with over 30% of girls aged 15-19 falling pregnant each year. This has several negative consequences for the girls themselves, their families, and society.[1] (G Mchunu, 2012).

Teenage mothers are more likely to drop out of school, which limits their future employment opportunities and earning potential. They are also at higher risk of poverty, domestic violence, and health problems. Their children are also more likely to experience health problems, developmental delays, and educational difficulties. [3] (G Mchunu, 2012).

The high teenage pregnancy rate also has several negative social and economic consequences. It contributes to poverty, inequality, and crime. It also puts a strain on public resources such as healthcare and education.[6] (Salisu, 2018).

Several factors contribute to the high teenage pregnancy rate in South Africa. These include:

- Poverty and inequality
- Lack of access to education and sexual and reproductive health services
- Gender inequality and harmful social norms
- Early sexual initiation
- Lack of parental guidance and support. [6] (Salisu, 2018)

The Research Problem for my proposal is: High teenage pregnancy rate in South Africa.

## 2. RESEARCH QUESTIONS

This research proposal aims to answer the following questions:

- 1. What are the main factors that contribute to the high teenage pregnancy rate in South Africa?
- 2. What are the consequences of teenage pregnancy for teenage girls themselves, their families, and society?
- 3. What are some effective interventions to prevent teenage pregnancy?

#### 3. METHODOLOGY

## Study Design

This research will use descriptive research techniques. Descriptive research aims at examining plans to accurately describe a phenomenon or event, which in this case is the high teenage pregnancy rate in South Africa. It will allow the capturing of relevant information and give a comprehensive outline of the problem. [4] (Google, 2019)

## 1. The Population

The target population for this study is teenage girls aged 15 years to 19 years residing in different areas/provinces of South Africa.

#### 2. Sampling

A multi-stage sampling (stratified sampling) method will be used to select a representative sample of teenage girls. In the first stage, a random sample of provinces of 5-10% teenage girls will be selected. In the second stage, a random sample of districts of 5-10% teenage girls within each selected province will be selected. In the third stage, a random sample of 5-10% teenage girls in schools within each selected district will be selected. Finally, a random sample of 5-10% teenage girls within each selected school will be selected. [2] (Brown, 2010)

The sample size of 5-10% teenage girls is sufficient to provide a margin error of 5% and a 95% confidence level. This sampling method was chosen because it is the best way to select a representative sample of teenage girls from a large population. This method ensures that all teenage girls from all provinces, districts, and schools have an equal chance of being selected, regardless of their race, ethnicity, or socioeconomic status ( where they live or attend school).[2] (Brown, 2010)

#### 3. <u>Data Collection</u>

Quantitative data will be collected using a self-regulated survey questionnaire. The questionnaire will be distributed to participants in various ways, including in-person distribution at schools and community centers. The questionnaire will be designed to collect data on the factors that contribute to the high teenage pregnancy rate in South Africa.

## 4. Data Analysis Method

Quantitative data collected using questionnaires will be analyzed utilizing statistical methods such as frequency distributions, cross-classifications, and relapse investigation to recognize the relationship between variables.

Below is a list of all the variables and their measurement scales from the questionnaire, along with an explanation of how their values will be used to answer the research questions.

Variable	Meaning	Measurement	How values will be used to
		Scale	answer the research questions
Age	The number of	Continuous	Age will be used to determine whether the
	years an		participant is a teenage girl (aged 15-19).
	individual has		
	lived.		
Race	A person's	Categorical	Race will be used to describe the demographic
	social and		characteristics of the participants.
	political		
	classification is		
	based on the		
	perceived		
	physical		
	characteristics.		
Ethnicity	A person's	Categorical	Ethnicity will be used to describe the demographic
	cultural identity		characteristics of the participants.
	or affiliation.		
Socioeconomic	A person's	Categorical	Socioeconomic status will be used to assess
status	social and		whether the participant's socioeconomic status is a
	monetary		factor in their risk of teenage pregnancy.
	position.		
Where do you	The type of	Categorical	Place of residence will be used to assess whether
live?	community in		the participant's place of residence is a factor in
(Urban/rural)	which the		their risk of teenage pregnancy.
	person lives.		
Age at first	The age at	Continuous	Age at first sexual intercourse will be used to
sexual	which the		assess whether the participant's age at first sexual
intercourse	person first had		intercourse is a factor in their risk of teenage
	sexual		pregnancy.
	intercourse.		
Number of	The number of	Continuous	Number of sexual partners will be used to assess
sexual partners	people a		whether the participant's number of sexual
	person has had		partners is a factor in
	sexual		their risk of teenage pregnancy.

	intoroguras		
	intercourse		
	with.		
Contraceptive	Whether or not	Categorical	Contraceptive use will be used to assess whether
use (e.g., type	a person uses		the participant's contraceptive use is a factor in
of	contraception,		their risk of teenage pregnancy.
contraceptive,	and if so, the		
frequency of	type they use		
use)	and how often.		
Unintended	Whether or not	Categorical	Unintended pregnancy history will be used to
pregnancy	a person has		assess whether the participant's unintended
history	had an		pregnancy history is a factor in their risk of
	unintended		teenage pregnancy.
	pregnancy.		
Have you ever	Whether or not	Categorical	Pressure to have sex against one's will, be used to
been pressured	a person has		assess whether it is a factor in teenage pregnancy.
to have sex	been forced to		
against your	have sex		
will?	against their		
	will.		
Do you have	Whether or not	Categorical	Access to sexual and reproductive health services
access to	a person has	_	will be used to assess whether it is a factor in
sexual and	access to		teenage pregnancy.
reproductive	sexual and		
health	reproductive		
services?	health services		
	such as		
	contraception		
	testing and		
	treatment, and		
	abortion		
	services.		
Knowledge	A person's	Continuous	Knowledge about contraception will be used to
about different	knowledge		assess whether the participant's knowledge about
types of	about different		contraception is a factor in their risk of teenage
contraception	types of		pregnancy.
and how to use	contraception		F. 29. 30. 107.
them	and how to use		
	them.		
Attitudes	An individual's	Continuous	Attitudes towards sex and contraception will be
towards sex	perspectives	Continuous	used to assess whether the participant's attitudes
and	towards sex		towards sex and
contraception	and		contraception are factors in their risk of teenage
Contraception	anu		contraception are ractors in their fisk of teerrage

	contraception.		pregnancy.
Sources of	Sources from	Categorical	Sources of information about sex and
information	which a person		contraception will be used to assess whether the
about sex and	gets		participant's sources of information about sex and
contraception	information		contraception are a factor in their risk of teenage
	about sex and		pregnancy.
	contraception.		
Peer pressure	The influence	Continuous	Peer pressure will be used to assess whether
	of a person's		peer pressure is a factor in teenage
	friends or		pregnancy.
	peers on their		
	attitudes and		
	behaviors		
	related to sex		
	and		
	contraception.		
Parental	The influence	Continuous	Parental pressure will be used to assess whether
pressure	of a person's		parental pressure is a factor in teenage
	parents on their		pregnancy.
	attitudes and		
	behaviors		
	related to sex		
	and		
	contraception.		
Religious	A person's	Continuous	Religious beliefs will be used to assess whether
beliefs	religious beliefs		religious beliefs are a factor in teenage pregnancy.
	about sex and		
	contraception.		
Access to	A person's	Continuous	Access to contraception and sexual and
contraception	access to		reproductive health services will be used to assess
and sexual and	contraception		whether it is a factor in teenage pregnancy.
reproductive	and sexual		
health services	reproductive		
	health services.		

What are the	The challenges	Open-ended	This open-ended question will be used to gather
main	a person faces		qualitative data on the challenges that teenage
challenges you	in making		girls face in making decisions about sex and
face in making	decisions about		contraception.
decisions about	sex and		
sex and	contraception.		
contraception?			

## 4. ETHICAL CONSIDERATIONS

This research will follow strict ethical guidelines and protocols to protect the rights, privacy, and confidentiality of participants, this means that their names and personal information should not be disclosed without their consent. [1] (Bhandari, 2021)

Informed consent will be obtained from all participants or their legal guardians, it is important to obtain informed consent from all participants, or their legal guardians if they are minors. [1] (Bhandari, 2021)

Participants should be fully informed about the nature of the research, the risks and benefits of participation, and their rights to withdraw from the study at any time (Autonomy). [1] (Bhandari, 2021)

Any personal information collected will be anonymized and stored safely/securely. Ensuring that participants are protected is also of utmost importance since they form part of the vulnerable group. [1] (Bhandari, 2021)

The following will be done to ensure that they are protected:

#### Use of a gatekeeper

A gatekeeper is a person or organization that can help recruit participants and ensure that they are protected. A school principal or community leader will be asked to act as a gatekeeper for this study. [7] (Shivayogi, 2013)

Provision of a safe and supportive environment

Participants should feel safe and comfortable participating in the study. This

implies that a welcoming and non-judgmental environment should be created. Preparation to provide support to participants if they become distressed during the study should be made. [7] (Shivayogi, 2013)

#### Plan to deal with unexpected events

It is important to have a plan for dealing with unexpected events, such as a participant disclosing personal or traumatic information. A list of resources and services (for counseling and support) that participants can be referred to should such events occur will be available. [7] (Shivayogi, 2013)

#### Ethics Review

The research plan will be submitted to an institutional ethics review board for approval, for evaluation of the study's ethical aspects and suggest improvements if necessary. [7] (Shivayogi, 2013)

#### Reporting Child Abuse

If during the research it is suspected or evidence is discovered that a child is/was abused or neglected, it will be reported to the relevant authorities as it is of legal and ethical obligation to do so. [7] (Shivayogi, 2013)

#### 5. REFERENCES

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## APPENDIX B: THE QUESTIONNAIRE

#### **Instructions**

Please answer all the questions to the best of your ability. Your responses will be anonymous and confidential.

This questionnaire is designed to gather information on the factors that contribute to the high teenage pregnancy rate in South Africa. The information will be utilized to help clarify the research and develop interventions to prevent teenage pregnancy.

### **Demographic Information:**

#### Age

- o **15-16**
- o **17**
- 0 18
- 0 19

#### Race

- Black African
- White
- Colored
- Indian/Asian
- Other

#### **Ethnicity**

- o Zulu
- o Xhosa
- Sepedi
- Setswana
- Afrikaans
- o English
- o Other

Socioeconomic status (parent's combined income)

- o Less than R100,000
- o R100,000-R200,000
- o R200,000-R300,000
- o R300,000-R400,000
- o More than R400,000

## Where do you live?

- o Urban
- o Rural

## Sexual Behavior: Age at first sexual intercourse o 12 or younger o 13-14 years old o 15-16 years old o 17-18 years old o 19 years old Number of sexual partners o **2** o **3-4** o **5-9** o 10 or more Contraceptive use (type) o None o Condom o Pill o Injection o Implant o IUD o Other Unintended pregnancy history? Yes o No Have you ever been pressured to have sex against your will? Yes o No Do you have access to sexual and reproductive health services? o Yes o No Knowledge and Attitudes towards Sexual and Reproductive Health: Please list the different types of contraception that you know of and how to use

them.

Where do you g	get your information abou	it sex and contraception?	
	ssure do you feel from yo		
None	Some	A lot	
	sure do vou feel from vo	ur parents to have or not to	have sex?
How much pres	ouro do you rooi iroini yo	al parents to have of hot to	
	Some	A lot	
None	Some	A lot	
None	Some		
None  How do your relactories  Hontraception?	Some igious beliefs influence y	our decisions about sex and	
None  How do your relacontraception?  None	Some  igious beliefs influence y  Some	our decisions about sex and	d
None  How do your relation?  None  How easy is it for the pervices?	Some  igious beliefs influence y  Some	A lot  our decisions about sex and  A lot	d
None  How do your relation?  None  How easy is it fo	Some  igious beliefs influence y  Some  or you to access contrace	A lot  Our decisions about sex and  A lot  eption and sexual reproduct	d
How do your relacentraception? None How easy is it for ervices? Very easy	Some  igious beliefs influence y  Some  or you to access contrace  Somewhat easy	A lot  Our decisions about sex and  A lot  Eption and sexual reproduct  Not easy at all	d ive health
None  How do your relation?  None  How easy is it for the rervices?  Very easy  What are the many is in the many in the many is in the many in the many is in the many in t	Some  igious beliefs influence y  Some  or you to access contrace  Somewhat easy	A lot  Our decisions about sex and  A lot  eption and sexual reproduct	d ive health
How do your relacentraception? None How easy is it for ervices? Very easy	Some  igious beliefs influence y  Some  or you to access contrace  Somewhat easy	A lot  Our decisions about sex and  A lot  Eption and sexual reproduct  Not easy at all	d ive health
How do your relacentraception? None How easy is it for services? Very easy	Some  igious beliefs influence y  Some  or you to access contrace  Somewhat easy	A lot  Our decisions about sex and  A lot  Eption and sexual reproduct  Not easy at all	d ive health

Thank you for your participation!