

See discussions, stats, and author profiles for this publication at: <https://www.researchgate.net/publication/232557121>

Teenage Pregnancy and its 'Negative' Consequences: Review of South African Research -- Part 1

Article in South African Journal of Psychology · February 1999

DOI: 10.1177/008124639902900101

CITATIONS

24

READS

3,166

1 author:



Catriona Ida Macleod

Rhodes University

131 PUBLICATIONS 1,124 CITATIONS

SEE PROFILE

Some of the authors of this publication are also working on these related projects:



Queer kinship [View project](#)



Alcohol use during pregnancy [View project](#)

Teenage pregnancy and its 'negative' consequences: review of South African research – Part 1¹

Catriona Macleod

Department of Educational Psychology, University of Zululand, Private Bag X1001, KwaDlangezwa 3886, South Africa
E-mail: cmacleod@pan.uzulu.ac.za

Teenage pregnancy emerged as a social issue within the United States in the 1970s, and somewhat later in South Africa. In this article I review South African research and literature concerning the consequences of teenage pregnancy, because it is on this level that teenage pregnancy is formulated as a problem. The literature is reviewed against the backdrop of some international research in order to provide a basis for comparison. Research on the disruption of schooling, socio-economic disadvantage, obstetric outcomes, inadequate mothering, neglect and abuse, relationship difficulties and demographic concerns is reviewed. Various gaps in the South African literature are identified. These include an inadequate theoretical grounding, a lack of gender and historical analyses, and no exploration of the power relations within which teenage pregnancy occurs.

Teenage pregnancy emerged as a social problem within the media and social policy debates in the United States in the 1970s (Vinovskis, 1988, 1992). Phrases such as an 'epidemic' of adolescent child-bearing, and 'children having children' became common parlance. People advocating policy reforms and the introduction of various types of programmes did so off the basis of humanitarian concerns for teen mothers and their children, as the consequences of early child-bearing were 'clearly' deleterious. Over the years a vast amount of research has been undertaken in the United States and Britain, with an increase in the sophistication of the questions being asked, and a lot of debate being conducted around the issues.

Teenage pregnancy emerged in the literature somewhat later in South Africa. Research on the subject was extremely scant in the late 1970s, with an increase during the 1980s. Presently there is much interest in the area, and a substantial amount of work is being undertaken. Much of the research has been conducted within the framework of the early literature from developed countries which preceded it. With a few exceptions, the South African literature reverberates the early American and British view of teenage pregnancy being a 'catastrophe' (De Villiers, 1991, p. 231). The complexity of argument currently being conducted in the American and British literature is absent from the South African scene.

This article reviews South African research and literature concerning the consequences of teenage pregnancy. The issue of 'consequences' is focused upon because it is at this level that teenage pregnancy is formulated as a social problem. Most researchers see teenage pregnancy as 'having negative sequelae'; they quote the disruption of schooling, poor child outcomes, health risks associated with early pregnancy, demographic concerns, and marriage and/or other relationship difficulties.

While some of the research on teenage pregnancy in South Africa specifically addresses the consequences of early pregnancy, much of the literature starts with the basic assumption that teenage pregnancy has negative consequences and is therefore a social problem. This article is about taking one step backwards, and reviewing what the research that has been done on the consequences of teenage pregnancy in South Africa actually points to.

The South African literature is discussed against the backdrop of some international (mostly American and British-based) research. The purpose of this is to provide a comparative basis,

while at the same time illuminating ways in which the international literature can inform local debate. Of special comparative interest is the revisionist argument which has gained some ground in Britain and the United States, but which is virtually absent in the South African research scene (except perhaps in the work of Preston-Whyte and colleagues). Essentially the revisionists argue that teenage pregnancy is not as deleterious as has been assumed. They argue that early child-bearing represents a conscious choice of a stratum of disadvantaged adolescents for whom there is little advantage in delaying pregnancy; indeed it is actually functional in a variety of ways, for example, greater access to familial child care (Geronimus, 1991; Testa, 1992).

This article is the first section of a two-part series. In the follow-up article the South African literature on the factors contributing to early pregnancy is reviewed. In order to access the literature on which these two papers are based, the following process was undertaken:

- * NEXUS, PsycLit, Social Science Citation and SABINET searches were conducted; and
- * Letters were sent to Heads of Departments of all relevant social science, education and medical departments at all South African universities, as well as relevant non-governmental organisations requesting information concerning research conducted in the field of teenage pregnancy.

Most of the research reported on in this paper was conducted prior to the legalisation of abortion in South Africa. Clearly, this will significantly impact on the social and personal dynamics surrounding teenage pregnancy.

Why is teenage pregnancy seen as a problem?

Disruption of schooling and socio-economic disadvantage

The disruption of schooling that potentially accompanies teenage pregnancy is seen as detrimental to the teenage mother as it limits her future career prospects, and therefore contributes to a lower socio-economic status for her and her child. Table 1 lists South African researchers who have considered this effect. Column D indicates the percentage of respondents (either pregnant teenagers or teen mothers) who plan on returning to school. This varies from 50% to all of the respondents. Of course, planning or not planning to does not mean actual return or not. The actual return rate has not been investigated by South African researchers. Mkhize (1995) elucidates some of the reasons cited by teenagers for their negative response to returning to school. These

Table 1 Disruption of schooling

A	B	C	D	E
Boult & Cunningham (1992a; 1992b)	145	86	50	
De Villiers & Clift (1979)	120	13		76.6
De Villiers (1991)	140	67		
Gunston (1986)	441			50.0
Mkhize (1995)	200		52	
Mosidi (1992)	15	80	66	
O'Mahoney (1987)	30	80	80	
Ntombela (1992)	116		100	
Zama (1991)	50		50	

A: Author(s)

B: Number of respondents in sample

C: Percentage still at school at the time of falling pregnant

D: Percentage planning on returning to school (including those not at school at time of falling pregnant)

E: Percentage with only a primary school level of education

were: financial constraints, marriage, and doubting their academic capabilities.

Taken on their own, the figures in column D seem to indicate that teenage pregnancy does indeed have a fairly significant disrupting effect on schooling. However, it is important to consider column C in conjunction with column D. Column C lists the percentage of teenagers still at school at the time of conception. While it appears that most teenagers who become pregnant are still at school at the time of conception, there are also a substantial number who have voluntarily left school, finished school already or left owing to various constraints. Furthermore, it is not clear how many of those who were still at school at the time of conception would, under circumstances of non-pregnancy, have completed their schooling.

Preston-Whyte and Allen (1992), in their qualitative study in the 'coloured' community in Durban, found that most of the women interviewed had in fact already left school after Grade 7 or 8, before conceiving. The reasons for leaving included alcoholism in the family, poverty, expulsion, and the 'pointlessness' of school given poor job prospects. It would appear that, in certain instances at least, the disruption of schooling is not a result of pregnancy but rather of the structural constraints under which many teenagers live, and within which early pregnancy may represent a rational decision, as the revisionists would argue.

Most studies on teenage pregnancy in South Africa use clinic- or hospital-based samples. One exception is Richter's (1996) general household survey of 864 young black people between 16 and 20 years in Soweto, Umlazi and Khayelitsha. In this survey, which focused on reproductive health issues, she found that 10.3% of the females had had their schooling interrupted by pregnancy. However, it is not clear exactly how many of these returned to school.

Studies conducted in the United States have shown that many girls who become mothers have in fact dropped out of school before pregnancy. While child-bearing significantly reduces the school completion rates of young women who have already dropped out of school, there is little direct impact on those who are still in school. However, the variety of available life choices, including the option of continuing with post-secondary education, appears to diminish (Brindis, 1993).

An important American study in this area is a 17-year follow-up study conducted by Furstenberg, Brooks-Gunn and Morgan

(1987) of the adolescent mothers studied by Furstenberg in 1976. The number of mothers who had completed high school increased from one half to two thirds, and one third had continued formal education past high school. The authors concluded that while the women who had become pregnant during adolescence remained at a lower level in terms of education and income than comparable women who delayed pregnancy, their education and income levels were far better than would be predicted by a straight deterministic model.

What is absent from both the South African and Western literature is a comment on the disruptive effects on schooling that early parenting has on males. The reason presumably is that it is assumed to have none, which leaves the gendered issue of access to education and childcare arrangements unquestioned.

A major concern expressed in the literature with respect to school completion is its association with socio-economic status. The argument runs that early child-bearing leads to a school disruption which in turn leads to socio-economic disadvantage. However, Geronimus (1991) makes the important point that despite the plentiful evidence in the American literature that there is a correlation between long-term lower socio-economic status and early child-bearing, this does not mean that teen child-bearing in and of itself contributed to the poor outcome. She goes on to state that:

a major shortcoming in the teen child-bearing literature has been the failure to incorporate a comprehensive understanding of the effects a world marked by severely compromised health and shortened life expectancy may have towards moulding population patterns of early fertility (p. 465).

Obstetric outcomes

While some authors have reported increased obstetric risks associated with teenage birth, others have disputed this. Of importance here is the comparison group utilised to reach the particular conclusion drawn. Loening (1992) provides no comparison group at all. He states that 22% of mothers aged 17 years and younger at the King Edward Hospital give birth to infants weighing less than 2.5 kg. However, this statistic is meaningless without a matched comparison group.

Goldberg and Craig (1983) compared the data from 128 teenage mothers presenting at the Peninsula Maternity Services with *those from other studies*. On the basis of this they found that pregnancy induced hypertension, premature labour and anaemia were significant complications in the teenage group, although perinatal mortality was not increased. De Villiers (1985) compared mothers 16 years and younger at the Paarl hospital with *all patients delivered in the maternity ward*. Although the incidence of Caesarian sections was low among the teenagers, there was a significantly higher incidence of small-for-date babies.

Cameron, Richter, McIntyre, Dhlamini and Garstang (1996) compared young teenage gravidas (less than 17 years old) with *older teenage gravidas (17–19 years old) and older women gravidas (20–29 years old)* delivering at Baragwanath Hospital in Soweto. There were no significant differences in birth weight between the teenagers aged less than 17 years and those aged 17–19 years at delivery. However, the offspring of young teen mothers were significantly smaller than those of mothers over 19 years of age. This significant difference remained after correction for gestational age had been made. There were no significant differences in gestational age between the younger and older teenagers although young teenagers' infants had significantly shorter gestational ages than those of the older mothers.

Mukasa's (1992) study compared primigravidas aged 19 years and less with *primigravidas aged 21 – 25 years* at Butterworth Hospital. He found that the perinatal mortality rate was slightly higher among the teen mothers than among the older mothers but the difference was not statistically significant. No differences in birth weights were observed. The risks of antenatal complications, such as anaemia, haemorrhage and pre-eclampsia were the same in both groups. The risk of cephalopelvic disproportion (the commonest indication for Caesarean section) was the same among all primigravidas. Boulton and Cunningham (1993) compared three groups of primigravidae (16 years and younger, 17–18 years old, and 20 years and older) at two hospitals in Port Elizabeth. Significant differences were found regarding the incidence of anaemia and low birth-mass infant between the three age groups (the younger, the higher the incidence of anaemia and the lower the birth-mass).

Ncayiyana and Ter Haar (1989), on the other hand, believe that age *per se* does not confer increased risk. They compared the obstetric outcome of young rural adolescents with that of an equal number of *matched* (in terms of parity and socio-economic status) young adult rural women aged 20–29 years, and found no significant differences. They conclude that the total obstetric population is an unsuitable control group. This view is supported by other authors (Mukasa, 1992; Prinsloo, 1984) who postulate that the increased risk is rather associated with socio-economic status. Others (Boulton & Cunningham, 1992b; Van Coeverden de Groot, 1991) point to inadequate prenatal and antenatal care, positing that with careful obstetric management, teenage pregnancy presents no more problems than does pregnancy in older women. This finding is confirmed in a Zimbabwean study (Mahomed, Ismail & Masona, 1989).

It appears, however, that in many instances pregnant teenagers attend prenatal clinics late (in the last trimester), or irregularly (Boulton & Cunningham, 1991; Goldberg & Craig, 1983). The factors associated with this are largely unexplored in the literature. Burman (1992) points to one of the consequences of the stigma attached to illegitimacy being the reluctance of schoolgirls to admit to anyone, even their mothers, that they are pregnant.

Evidence from Western research points in the same direction as that elucidated above. The teenage mother and her infant are not at risk medically, provided that the mother received good pre and antenatal care and nutrition (Macintyre & Cunningham-Burley, 1993).

Inadequate mothering

Mothering is a topic that has been thoroughly researched within psychology, sociology, social work etc. It is also a topic saturated with notions of well-being and interactional patterns that are, for the most part, Western, middle-class and patriarchal (see Walkerdine & Lucey, 1989; Woertman, 1993). It is within this taken-for-granted framework that the studies which review the parenting skills of teenage mothers in South Africa are situated.

Rubenstein (1992) provides case studies of four white teenage mothers. She notes that they scarcely mentioned their children during the interviews. Further questioning, she states, revealed an ambivalence in these teenagers towards their children, involving both the romantic desire for something to love, and a covert rejection of the child. Mkhize (1995) states that 48% of his sample of teenage mothers found mothering to be difficult; he concludes that the teenagers lack parenting skills.

Erasmus (1990) interviewed pregnant teenagers attending a prenatal clinic at the Pretoria Provincial Hospital. He found that they had a fair knowledge concerning the physical care of the

baby, but their knowledge concerning the baby's emotional needs and their acceptance of parental responsibilities were limited. Fouché (1992) studied the 'needs' of pregnant teenagers before and after birth at the Pelonomi Hospital, hypothesising that tension and stress affect the child-mother interaction, which in turn is detrimental to the baby. Using a rational-emotive theoretical framework, he found that the participants had negative irrational thoughts and feelings concerning their pregnancy and the approaching birth.

An obvious criticism of these studies is that they do not provide comparison groups; mothers in all age groups may, in fact, experience ambivalent feelings towards their children, find mothering difficult, be unclear as to what their children's emotional 'needs' are, and have 'irrational' thoughts and feelings. Less obvious and more subtly pervasive is the implicit construction of the perfect mother who acts as a comparison and, it seems, perfectly understands her child's 'needs', is unambivalently loving and caring, never thinks thoughts such as 'I cannot cope', and who finds mothering natural and easy.

Studies in Britain and the United States provide some comparative data on adolescent parenting although they fall prey to the same ideological notion of mothering. It is suggested in this literature that adolescent mothers vocalise less often to their young children and provide fewer stimulating experiences than do older mothers, thus contributing to later academic difficulties (Barrat, 1991). They do not provide opportunities for affectional exchange, or share emotions inconsistently, leading to increased risk of psychopathology in the child (Osofsky, Eberhart-Wright, Ware & Hann, 1992). They display higher levels of parenting stress and are less responsive and sensitive in interactions with their infants than adult mothers (Passino, Whitman, Borkowski, Schellenbach, Maxwell, Keogh & Rellinger, 1993). However, Buchholz and Korn-Bursztyn (1993) argue that in fact a confluence of factors other than maternal age are implicated. Many studies, they say, make comparisons between teenage and older mothers without identifying the sample's socio-economic status. They postulate that the parent-child interaction is influenced by a range of factors such as the financial, social, emotional and social support resources available to the mother.

Neglect, maltreatment and abuse

Although there are no studies dedicated specifically to investigating of the association between teenage parenting and increased risk of neglect, maltreatment or abuse in South Africa, various authors make reference to this in their discussions. Loening (1992) makes the strongest association, stating that the ages of the mothers of physically and sexually abused children seen during 1988 and 1989 at King Edward VIII Hospital were significantly lower at first conception than that of controls. He also conducted a follow-up study 12–15 months after the birth of babies to younger and older teenagers at the King Edward VIII Hospital. He found that more infants of the young teenage mothers had died or had malnutrition than the infants of the older teenage mothers. However, he does not state whether these two groups were matched for socio-economic status; it is unclear, therefore, whether it was the age of the mother or socio-economic status that conferred increased risk.

Some authors deal with the topic within the context of the structural constraints imposed by poverty. Boulton and Cunningham (1992b), for instance, point out that the greater part of the financial burden for child care within their sample of black teenage mothers fell on the young woman's family. Two thirds of these women lived in single-parent families or with kinfolk,

dependent on old-age pensions, implying that 'the future well-being of these infants may well be in jeopardy for financial reasons' (p. 163).

Various authors comment on the care-taking nexus within poorer communities. Loening (1992) believes that the fact that the vast majority of respondents in his study intended returning to school within months of giving birth indicated that these children would be put into a high-risk situation; they would potentially become 'football' children, being passed from one relative to another with no opportunity of bonding with any one individual. Nash (1990) believes that the common pattern amongst 'the indigent communities in the RSA' (p. 308) of children being raised by the maternal grandmother and then returning to the mother's home to attend school requires considerable adaptation on the part of the child and mother. She adds: 'Where there is tension, the mother's unwanted voorkind becomes a ready scapegoat' (p. 308). Burman (1992) also deals with this pattern but places the issue of maltreatment within the context of the construction of illegitimacy. She believes that subsequent partners or their families may be reluctant to receive illegitimate children into their families, or may ill-treat them.

In an article from the United States, Klerman (1993) points out that attempts to synthesize the research conducted on the relationship between the age of the mother and the likelihood of child abuse or neglect have failed because of methodological problems in the field. The problems include biases in reporting abuse or neglect, the definition of abuse, maltreatment, and neglect, as well as adolescence, and confounding associated variables such as socio-economic status, family size and educational level.

Relationship difficulties

In this section relationship issues surrounding teenage pregnancy are discussed under various categories, viz. relationships with: (1) family of origin; (2) father of the child; and (3) peers. Some studies report descriptive statistics concerning the research participants' self-report of parents' or boyfriend's reactions to the pregnancy, while others make use of the social support model. Two distinct approaches to researching relationship difficulties are then compared: the first is an individualistic approach which isolates the teenager from the context of the event; the second is a contextually-based approach in which the community practices surrounding teenage pregnancy are elucidated.

(1) *Relationship in the family of origin*

According to the self-report of teenagers, the majority of parents react negatively (with anger or disappointment) to the news of the pregnancy (Boult & Cunningham, 1992b; Dlamini & McKenzie, 1991; Ntombela, 1992; O'Mahoney, 1987). This may be because they are embarrassed (Zama, 1991) or because in poor communities the addition of another member of family stretches the family's economic resources (Mkhize, 1995). However, very few of the families actually reject the teenager (De Villiers & Clift, 1979; Ntombela, 1992). The feelings of anger and distress are not extended to the child her/himself (Boult & Cunningham, 1992b), and are somewhat dissipated within the black community by the observance of rituals such as the payment of reparation and cleansing ceremonies (Preston-Whyte & Louw, 1986; Preston-Whyte & Zondi, 1989).

Various researchers have operationalised familial relationships in terms of support. Malivha (1993), Tanga (1991) and Tanga and Uys (1996) used scales such as the Inventory of Socially Supportive Behaviours, and the Arizona Social Support

Interview Schedule in their research. These authors found that the teenagers received the psychological and socio-economic support they required from their families, especially their mothers (Tanga, 1991), whether the baby was planned or unplanned (Malivha, 1993). De la Rey, Parekh, Naidu and Shembe (1995) found the same pattern emerging in their community-based peer group discussions amongst teenage mothers. These mothers found it difficult to combine the roles of mother and scholar, and relied on the assistance of family members, particularly in the areas of child care and financial matters. Greathead (1988), however, sees this pattern as negative. She believes that many grandmothers may feel compelled to assist, and may begin to feel resentment. Conflict may arise between the two women concerning parenting roles. However, these observations, it appears, are based on the author's personal experience rather than systematic research.

In his interviews with teenage mothers, Mkhize (1995) found that the teenagers perceived an improvement in their relationship with their family once the child was born. They perceived their parents as being authoritarian beforehand whereas after the birth, they related to them on an adult-to-adult basis.

Western literature mainly focuses on social support and its correlation with adjustment on the part of the teenager or her child. There are contradictory findings in this regard. While Dunston, Hall and Thorne-Henderson (1987) indicate that adolescents who feel supported by their families feel more positively towards their babies, Davis and Rhodes (1994) found that maternal support was not significantly associated with the teenagers' psychosocial adjustment. Nath, Borkowski, Whitman and Schellenbach (1991) posit that sociocultural contexts influence the availability and importance of different sources of support, with, for example, family being a more critical source of ongoing support for teens living in rural environments than for teens in urban areas.

(2) *Relationship with partner*

No studies in South Africa access their data from partners; instead self-reports by the pregnant teens or teen mothers are relied upon. These reports indicate that fewer partners are negative about the pregnancy than parents. The percentage of partners reported to be unhappy about the conception vary from 28% (Ntombela, 1992) to 50% (Dlamini & McKenzie, 1991). The reliance on self-report measures in partner and family relationships is, of course, somewhat limiting.

An important feature of the interaction between the pregnant teenager and her partner within the black community is the issue of the payment of reparation. Preston-Whyte and Louw (1986) present a case study of the processes surrounding the payment of reparation to the teenager's family. They trace how the process may eventually culminate in marriage which, contrary to the Western tradition, is not the automatic solution to the dilemma of early pregnancy. Boult and Cunningham (1992b) found that reparation had been paid by 63 out of the 145 cases they studied. Tanga and Uys (1996), on the other hand, state that of the 40 adolescents interviewed, only two fathers had paid in full; 25 had undertaken partial payment and the remaining 15 had not paid anything at all.

The stability of the partner relationship is something about which some researchers are surprised (De Villiers & Clift, 1979). Makhetha (1996), for example, found that nearly three quarters of the teenage mothers in his sample still had the fathers of their children as their current boyfriends.

(3) *Relationships with peers*

Very little research has been conducted in this area. Greathead (1988) postulates that teenage mothers may feel resentful and jealous of their peers whom they perceive as having more fun and enjoying life. However, she quotes no research to back up her supposition. Contrary to this, De la Rey *et al.* (1995) report that the teen mothers who took part in their group discussions experienced a sense of loss resulting from having less or no social contact with their former peers.

(4) *Two contrasting approaches to researching relationships*

In this section two approaches to the study of relationships in the context of teenage pregnancy are compared. It is suggested that the second, contextually based model is less likely to blame the teenager than the first, individualistic model.

Pond (1987) presents case studies of five pregnant teenagers resident at a home for unmarried mothers (each of whom was going to give up their child for adoption). She used media such as the Thematic Apperception Test, the Rorschach, the Draw-a-Person and an interview to collect her data. On the basis of these data she discusses the difficulties the teenagers have in their relationships. She found, amongst other things, that the teenagers tended towards passivity in relationships; their relationships were generally superficial and casual, and lacked spontaneity; they experienced a fair amount of anger and hostility, especially towards the father of their child and to the male sex in general; familial relationships lacked warmth and security; they felt ambivalent towards their mothers, and had absent or passive fathers.

There are two problems with this type of individualistic approach. Firstly, it spotlights the teenager, ignoring the context within which relationships take place. Secondly, it relies on implicit assumptions about the nature of healthy, normal relationships (perhaps feeling angry at the father of the child or ambivalent to her mother is healthy?). Essentially, this type of approach serves to re-enforce the image of the pregnant teenager as a person deficient in 'normal' relationship functioning.

Carolissen (1993), on the other hand, places teenage pregnancy within the context of community practices surrounding the event. In her qualitative study of 25 teenage mothers, she examined the exclusionary practices in relation to premarital pregnancy practised by the Moravian Church in the Mamre community. Although these practices are less harsh than they were 30 years ago, the young woman is still excluded from participation in church activities for a period of time. Most of the exclusionary practices are directed towards women. This type of approach, which embeds the notion of relationship within interactional patterns and practices, avoids the pathologising tendencies of the above-described approach.

Demographic issues

Various authors (Anagnostara, 1988; De Villiers, 1991; Van Regenmortel, 1975) have postulated that teenage pregnancy is one of the major contributory factors to population growth. These writers argue that the increase in population in developing countries represents a major obstacle to the economic development of the country. With nearly half the total population in these countries being below the age of fifteen, the low ratio of workers to non-workers creates what is called a 'burden of dependency'.

In this literature, there is either an implied or explicit racial dimension. White South Africans are seen as falling with the desirable phases 3 and 4 of the demographic transition graph

(low death rate, and low or falling birth rate), while black South Africans are in the undesirable phase 2 (high birth rate and low death rate) (Anagnostara, 1988). These racial overtones are an extension of the official rhetoric by the previous government on population control. This rhetoric ranged from blatant statements calling for white people to have more babies in order to equalise the numerical imbalance in South Africa, to more subtle language which implicitly blamed poor people for their poverty as they have too many children (Wilson & Ramphela, 1989). Indeed, various researchers have found widespread suspicion among teenagers concerning the motives of government in promoting birth control for blacks in South Africa (Abdool-Karim, Abdool-Karim, Preston-Whyte & Sankar, 1992; Preston-Whyte & Zondi, 1989).

Demographic concerns are basically absent in the Western literature on teenage pregnancy. Instead, the issue which undergirds similar fears around the perpetuation of poverty is that of welfare dependency. This, too, has subtle racial overtones.

Conclusion

In this review an attempt has been made to indicate the type of research that is being conducted in South Africa concerning the consequences of teenage pregnancy. While it appears that early pregnancy does have a disrupting effect on schooling, many teenagers who fall pregnant are not at school at the time of conception. No studies have been conducted to estimate the return rate or the long-term educational and socio-economic effects of early child-bearing. Some authors have indicated that there are obstetric concerns regarding teen births. Others believe, however, that these are a function of socio-economic status rather than age *per se*. However, it does appear that many teenagers receive less than optimal prenatal care. Studies on the inadequate mothering styles of teenage mothers have been conducted within the framework of the ideologically charged notion of the perfect mother. Furthermore, they fail to provide comparative data, indicating that older mothers in similar circumstances do or do not act in the same way. The research on abuse, neglect or maltreatment of the child suffers from the same limitations experienced in studies conducted in the United States and Britain, viz. confounding associated variables such as socio-economic status, family size and educational level, as well as difficulties around the definition of abuse and neglect. Studies on relationship issues tend to use the rather unsatisfactory method of self-report on the part of the teenager, or a social support model. Finally, the demographic concerns expressed need to be viewed in the context of the previous government's population control strategies.

To conclude, some of the gaps prevalent in the South African research are highlighted. In general there is an inadequate theoretical grounding from which to explore the issues. Many studies are descriptive or medical in nature with little reflection being undertaken on the theoretical, philosophical or ideological underpinnings of the work. Gender issues are seldom explored, despite the fact that this is an area saturated with gender dynamics. As a simple example, there is little research on the consequences of teenage pregnancy for the father. In the context of the illegality of abortion in South Africa until recently, one of the negative consequences of unwanted teenage pregnancy which has not been researched at all is the health risks associated with back street abortions.

There is no historical analysis of the emergence of teenage pregnancy as a social problem in South Africa. Vinoskis (1988, 1992) provides such an interpretation in the United States. She suggests that the common notion that teenage pregnancy is

increasing is in fact false. The emergence of teenage pregnancy as a social problem has more to do, she believes, with political and other grouping's concerns about federal and state welfare programmes, and the increased rate of out-of-wedlock births. A peek into the patterns occurring in Africa is provided by Lloyd's (1994) review of reports on demographic factors in sub-Saharan Africa. She indicates that the social context of adolescent child-bearing is showing signs of changing as a result of rising secondary school enrollments and somewhat later ages at marriage.

Issues of power and the construction of the pregnant teenager as a subject are completely ignored in the South African literature, and largely in Western literature as well. One exception is a paper by Arney and Bergen (1984) called 'Power and visibility: The invention of teenage pregnancy'. In this paper they use a Foucauldian approach to analyse the emergence of a new form of power in the shift from treating pregnant adolescents as moral problems (as illuminated in terms such as the 'unwed mother' and the 'illegitimate child') to treating them as scientific problems which could be endlessly investigated.

Finally, in the South African research, as in American and British research, there is a constant slippage between aspects of teenage pregnancy that are analytically distinct, viz. between planned versus unplanned, and wanted versus unwanted pregnancies; between single or joint parenthood. Teenage pregnancies are assumed to be unplanned, unwanted, and occurring outside the context of marriage (those that occur within a marriage are relegated to the 'okay' category – see Ncayiyana & Ter Haar, 1989). As Macintyre and Cunningham-Burley (1993) point out, there is little concern expressed for those women over 20 years who have unplanned, unwanted pregnancies and may be unmarried or unsupported, just as the women having children over the age of 35 or 40 years who face obstetric or social hazards do not enjoy a high profile. As Macintyre and Cunningham-Burley put it, 'For whom they [teenage births] are problematic, and in what ways, are topics that are too infrequently discussed' (p. 61).

Acknowledgements

I gratefully acknowledge the contribution of the many colleagues who sent me information, references, articles and reports in response to my letters. Thanks also to Dr Kevin Durrheim for his comments on an earlier version of this article.

Note

1. An annotated bibliography of all published and unpublished material on teenage pregnancy in South Africa is available from the author on request.

References

- Abdool Karim, S.S., Abdool Karim, Q., Preston-Whyte, E. & Sankar, N. (1992). Reasons for lack of condom use among high school students. *South African Medical Journal*, **82**, 107–110.
- Anagnostara, A. (1988). The construction and evaluation of a scale for assessing the sexual attitudes of black adolescents. Unpublished master's thesis, Rand Afrikaans University.
- Arney, W.R. & Bergen, B.J. (1984). Power and visibility: The invention of teenage pregnancy. *Social Science and Medicine*, **18**, 11–19.
- Barrat, M.S. (1991). School-age offspring of adolescent mothers: Environments and outcomes. *Family Relations*, **40**, 442–447.
- Boult, B.E. & Cunningham, P.W. (1991). *Black teenage pregnancy* in Port Elizabeth. Occasional paper No. 26, Institute for Planning Research, University of Port Elizabeth.
- Boult, B.E. & Cunningham, P.W. (1992a). Black teenage pregnancy: an African perspective. *International Journal of Adolescence and Youth*, **3**, 303–309.
- Boult, B.E. & Cunningham, P.W. (1992b). Black teenage pregnancy: a socio-medical approach. *Medicine and Law*, **11**, 159–165.
- Boult, B.E. & Cunningham, P.W. (1993). *Some aspects of obstetrics in black teenage pregnancy: a comparative study of three age groups*. Research Paper C28, University of Port Elizabeth.
- Brindis, C. (1993). Antecedents and consequences: The need for diverse strategies in adolescent pregnancy prevention. In A. Lawson & D.L. Rhode (Eds), *The politics of pregnancy: adolescent sexuality and public policy* (pp. 257–283). New Haven & London: Yale University Press.
- Buchholz, E.S. & Korn-Bursztyn, C. (1993). Children of adolescent mothers: are they at risk for abuse? *Adolescence*, **28**, 361–382.
- Burman, S. (1992). The category of the illegitimate in South Africa. In S. Burman & E. Preston-Whyte (Eds), *Questionable issue: illegitimacy in South Africa* (pp. 21–35). Cape Town: Oxford University Press.
- Cameron, N., Richter, L., McIntyre, J., Dhlamini, N. & Garstang, L. (1996). Progress report: Teenage Pregnancy and Birth Outcome in Soweto. Unpublished report: University of the Witwatersrand.
- Carolissen, R.L. (1993). The social context of adolescent pregnancy: The case of Mamre. Unpublished master's thesis, University of Cape Town.
- Davis, A.A. & Rhodes, J.E. (1994). African-American teenage mothers and their mothers: an analysis of supportive and problematic interactions. *Journal of Community Psychology*, **22**, 12–20.
- De la Rey, S.M., Parekh, A., Naidu, T. & Shembe, A. (1995). Community-based peer groups as an intervention programme for teenage mothers. Unpublished paper, Department of Psychology, University of Cape Town.
- De Villiers, V.P. & Clift, H.E. (1979). Tienderjarige swangerskappe – 'n sosio-ekonomiese probleem met bese kringloop gevolg. *Social Work/Maatskaplike Werk*, **15**, 195–199.
- De Villiers, V.P. (1985). Tienderjarige swangerskap in die Paarl-Hospitaal. *South African Medical Journal*, **67**, 301–302.
- De Villiers, V.P. (1991). Seksonderig onder tieners in die Paarl. *South African Medical Journal*, **80**, 231–232.
- Dlamini, T. & Mackenzie, A. (1991). Attitudes to teenage pregnancy. *Nursing RSA*, **6**, 28.
- Dunston, P.J., Hall, G.W. & Thorne-Henderson, C. (1987). Black adolescent mothers and their families: extending services. In S.F. Battle (Ed.), *The black adolescent parent* (pp. 95–109). New York: Haworth Press.
- Erasmus, D.G.J. (1990). Tienderjarige moeders se kennis oor ouerskap. Unpublished master's thesis, Rand Afrikaans University.
- Fouché, M. (1992). Die sielkundige behoeftes van swanger adolessente te Pelonomi-Hospitaal. Unpublished master's thesis, University of the Free State.
- Furstenberg, F.F., Brooks-Gunn, J. & Morgan, S.P. (1987). *Adolescent mothers in later life*. New York: Cambridge University Press.
- Geronimus, A.T. (1991). Teenage child-bearing and social and reproductive disadvantage: The evolution of complex questions and demise of simple answers. *Family Relations*, **40**, 463–371.
- Goldberg, G.L. & Craig, C.J.T. (1983). Obstetric complications in adolescent pregnancies. *South African Medical Journal*, **64**, 863–864.
- Greathead, E. (1988). The dilemma of the pregnant teenager. *Nursing RSA*, **3**, 20–26.

- Gunston, K.D. (1986). Age of menarche, standard of education and early adolescent pregnancy. *South African Medical Journal*, **69**, 539.
- Klerman, L.V. (1993). The relationship between adolescent parenthood and inadequate parenting. *Children and Youth Services Review*, **15**, 309–320.
- Lloyd, C.B. (1994). Adolescent fertility in sub-Saharan Africa. *Population Dynamics of Sub-Saharan Africa*, **20**, 194–199.
- Loening, W. (1992). Adolescent pregnancy: a medical perspective on the consequences for mother and child. In S. Burman & E. Preston-Whyte (Eds), *Questionable issue: illegitimacy in South Africa* (pp. 77–91). Cape Town: Oxford University Press.
- Macintyre, S. & Cunningham-Burley, S. (1993). Teenage pregnancy as a social problem: a perspective from the United Kingdom. In A. Lawson & D.L. Rhode (Eds), *The politics of pregnancy: adolescent sexuality and public policy* (pp. 59–73). New Haven & London: Yale University Press.
- Mahomed, K., Ismail, A. & Masona, D. (1989). The young pregnant teenager – why the poor outcome? *Central African Journal of Medicine*, **35**, 403–406.
- Makhetha, T.E. (1996). Adolescent pregnancy and its birth outcome among adolescents aged 13 to 16 in Soweto, Gauteng region. Unpublished master's thesis, University of the Witwatersrand.
- Malivha, M.I. (1993). Social support and adjustment with planned and unplanned pregnancy. Unpublished master's thesis, Medical University of South Africa.
- Mkhize, Z.M. (1995). Social needs of teenage mothers in the rural communities of Ongoye and Enseleni districts. Unpublished master's thesis, University of Zululand.
- Mosidi, E.D. (1992). Sexuality in pregnant primigravida adolescents attending a clinic south-west of Johannesburg. Unpublished master's thesis, University of Natal.
- Mukasa, F.M. (1992). Comparison of pregnancy and labour in teenagers and primigravidas aged 21–25 years in Transkei. *South African Medical Journal*, **81**, 421–423.
- Nash, E.S. (1990). Teenage pregnancy – need a child bear a child? *South African Outlook*, **120**, 307–312.
- Nath, P.S., Borkowski, J.G., Whitman, T.L. & Schellenbach, C.J. (1991). Understanding adolescent parenting: The dimensions and functions of social support. *Family Relations*, **10**, 411–420.
- Ncayiyana, D.J. & Ter Haar, G. (1989). Pregnant adolescents in rural Transkei. *South African Medical Journal*, **75**, 231–232.
- Ntombela, B.B. (1992). The perception of pregnancy of the black primigravida in the Umlazi area of KwaZulu. Unpublished master's thesis, University of South Africa.
- O'Mahoney, D. (1987). Schoolgirl pregnancies in Libode, Transkei. *South African Medical Journal*, **71**, 771–773.
- Osofsky, J.D., Eberhart-Wright, A., Ware, L.M. & Hann, D.M. (1992). Children of adolescent mothers: group at risk for psychopathology. *Infant Mental Health Journal*, **13**, 119–131.
- Passino, A.W., Whitman, T.L., Borkowski, J.G., Schellenbach, C.J., Maxwell, S.E., Keogh, D. & Reliinger, E. (1993). Personal adjustment during pregnancy and adolescent parenting. *Adolescence*, **28**, 97–122.
- Pond, T.S. (1987). A psychodynamic approach to the adolescent unmarried mother. Unpublished master's thesis, University of Pretoria.
- Preston-Whyte, E. & Allen, J. (1992). Teenage pregnancy in the coloured community. In S. Burman & E. Preston-Whyte (Eds), *Questionable issue: illegitimacy in South Africa* (pp. 208–225). Cape Town: Oxford University Press.
- Preston-Whyte, E. & Louw, J. (1986). The end of childhood: an anthropological vignette. In S. Burman & P. Reynolds (Eds), *Growing up in a divided society: the contexts of childhood in South Africa*. Evanston: Northwestern University Press.
- Preston-Whyte, E. & Zondi, M. (1989). To control their own reproduction: the agenda of black teenage mothers in Durban. *Agenda*, **4**, 47–68.
- Prinsloo, F.R. (1984). Trends in adolescent pregnancies at Tygerberg Hospital, 1976–1980. *South African Medical Journal*, **65**, 695–699.
- Richter, L.M. (1996). A survey of reproductive health issues among urban black youth in South Africa. Unpublished report: Medical Research Council, Pretoria.
- Rubinsztein, D. (1992). Birth outside marriage among whites in Cape Town. In S. Burman & E. Preston-Whyte (Eds), *Questionable issue: illegitimacy in South Africa* (pp. 185–207). Cape Town: Oxford University Press.
- Tanga, T.T. (1991). The health support systems of the unmarried pregnancy adolescents with particular reference to parents. Unpublished master's thesis, University of Natal, Durban.
- Tanga, T.T. & Uys, L.R. (1996). The social support system of unmarried pregnant adolescents in the Transkei with particular reference to parents. *Curationis*, **19**, 50–54.
- Testa, M.F. (1992). Racial and ethnic variation in the early life course of adolescent welfare mothers. In M.K. Rosenheim & M.F. Testa (Eds), *Early parenthood and coming of age in the 1990s* (pp. 89–111). New Brunswick, New Jersey: Rutgers University Press.
- Van Coeverden de Groot, H.A. (1991). Adolescent pregnancy. *South African Journal of Continuing Medical Education*, **9**, 1379–1381.
- Van Regenmortel, P.J. (1975). The reproductive behaviour of young coloured mothers. Unpublished master's thesis, University of Stellenbosch.
- Vinovkis, M.A. (1988). *An 'epidemic' of adolescent pregnancy: some historical and policy considerations*. New York: Oxford University Press.
- Vinovkis, M.A. (1992). Historical perspectives on adolescent pregnancy. In M.K. Rosenheim & M.F. Testa (Eds), *Early parenthood and coming of age in the 1990s* (pp. 136–149). New Brunswick, New Jersey: Rutgers University Press.
- Walkerline, V. & Lucey, H. (1989). *Democracy in the kitchen: regulating mothers and socialising daughters*. London: Virago Press.
- Wilson, F. & Ramphela, M. (1989). *Uprooting poverty – the South African challenge*. Cape Town: David Philip.
- Woertman, L. (1993). Mothering in context: Female subjectivities and intervening practices. In J. Van Mens-Verhilst, K. Schruers, K. & L. Woertman (Eds), *Daughtering and mothering: female subjectivity reanalysed* (pp. 57–61). London & New York: Routledge.
- Zama, N. (1991). Attitudes of parents towards teenage pregnancy. Unpublished honours thesis, University of Zululand.