

Reintegration into Mainstream Education: Exploring the Lived Experiences of Teenage Mothers in Chiredzi District, Zimbabwe

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Abstract

Teenage motherhood disrupts education, perpetuating cycles of poverty and disadvantage. Reintegration into mainstream education is crucial for improving socio-economic outcomes for the teenage mothers. This study explored the experiences of teenage mothers in reintegrating into mainstream education, highlighting the psychosocial and socio-economic challenges they encounter, as well as the coping strategies they employ to overcome the challenges. A qualitative phenomenological design was adopted, and eight (8) in-depth interviews were conducted with purposively selected teenage mothers who had reintegrated into the mainstream education in rural Chiredzi District. Four key informant interviews (KIIs) were also conducted with officials drawn from relevant government departments and a local non-governmental organisation. Data was thematically analysed using interpretive phenomenological analysis (IPA) and organised into key themes. Findings revealed that teenage mothers faced significant challenges including stigma, self-doubt, low self-esteem, financial constraints, and child care difficulties. Support from peers, government and non-governmental organisations as well as family facilitated coping and reintegration. The study concluded that teenage mothers' reintegration into main stream education requires comprehensive support addressing psychological, socio-economic, and practical needs. Educators, policy makers and communities must collaborate to create an inclusive and conducive environment that promotes academic success and empowerment. The study proposes the empowerment and reintegration support model as a framework to support teenage mothers to successfully reintegrate into the mainstream education.

Keywords: teenage motherhood, lived experience, education.

Introduction

Teenage pregnancy and motherhood are a significant public health concern globally. Recent estimates indicate that approximately 21 million girls aged 15–19 in low- and middle-income

countries experience pregnancy each year, with around 12 million of them delivering infants (WHO, 2019). Teenage motherhood, defined as childbirth within the age range of 13 to 19 years, poses significant social and economic challenges (Anima et al., 2022). Notably, a substantial majority, about 95%, of these births originate from developing regions, particularly sub-Saharan Africa (WHO, 2024). Within Africa, the prevalence of teenage pregnancy stands at 18%, with the East African region reporting rates as high as 20.5% (Kassa et al., 2018).

In Zimbabwe, data from the Zimbabwe National Statistics Agency (2019) revealed that approximately one in five girls aged 15–19 became pregnant, resulting in high dropout rates from the formal education systems. Zimbabwe's teenage pregnancy rate is among the highest in sub-Saharan Africa, with approximately 22% of girls aged 15–19 having begun child-rearing (UNFPA, 2020). This situation has profound implications for the education sector, as many teenage mothers are compelled to abandon their studies due to societal stigma and social exclusion. Despite ongoing efforts to facilitate the reintegration of teenage mothers into mainstream education, many face considerable barriers, including societal stigma, discrimination, and inadequate support mechanisms (Laurenzi et al., 2020). The lived realities of these young women often include feelings of unpreparedness, poverty, child malnutrition, and experiences of mockery and rejection by family and community members. Such challenges engender emotional distress, psychological trauma, depression, discrimination, and a pervasive sense of hopelessness (Yakubu & Salisa, 2019). Reintegration into formal education is vital for enhancing the prospects of teenage mothers, as it boosts employability, promotes economic independence, and serves as a strategy to break the cycle of poverty. Nonetheless, the lived experiences, challenges, and outcomes associated with educational reintegration among Zimbabwean teenage mothers remain insufficiently explored.

The interruption of educational pursuits has long-term repercussions, contributing to persistent poverty, social marginalisation, and adverse health outcomes for both mothers and their children. While Zimbabwe has enacted policies to uphold the rights of parenting students to continue their education, the practical implementation of such policies and the support structures available are limited, especially for vulnerable populations such as teenage mothers. Education, recognised as a fundamental human right, is central to breaking the intergenerational cycle of poverty and gender inequality. However, teenage mothers in Zimbabwe continue to encounter systemic barriers to accessing and completing education. The country's policy framework advocates for inclusive education; nevertheless, gaps in

implementation and the availability of support services hinder the realisation of these goals, particularly for marginalised groups (Ministry of Primary and Secondary Education, 2019).

Socio-cultural norms also significantly influence the experiences of teenage mothers, often reinforcing gender stereotypes and societal expectations that hinder their educational endeavours. Traditional roles and cultural attitudes frequently perpetuate stigma, discrimination, and social exclusion, making reintegration into mainstream education exceedingly difficult (Chiguvare, 2017). In recent years, there has been growing recognition at both national and international levels of the importance of supporting teenage mothers to access and remain in mainstream education. Frameworks such as the Sustainable Development Goals (SDGs) and the Convention on the Rights of the Child highlight the necessity of inclusive education and support systems for vulnerable groups, including teenage mothers (United Nations, 2015). Nonetheless, there remains a critical gap in research focused on understanding the specific experiences and challenges faced by teenage mothers in Zimbabwe, as well as the development of effective strategies to facilitate their successful reintegration into mainstream education. Addressing this knowledge gap is essential for informing policy and practice aimed at empowering young women and reducing disparities in educational access and attainment.

The Constitution of Zimbabwe, Amendment No. 20 of 2013, explicitly guarantees every child's right to free and compulsory basic education. Moreover, Zimbabwe is a signatory to global and regional commitments such as the United Nations Sustainable Development Goals (SDGs) 2030 and the African Union Agenda 2063, both of which emphasise the importance of ensuring equitable access to quality education for all children. The African Union's Agenda 2063 specifically advocates for universal access to high-quality early childhood, primary, and secondary education, with the aim of ensuring that no child is left behind and that the potential of each child is nurtured. In addition, Zimbabwe's National Development Strategy 1 (2021–2025) underscores education as a critical tool for poverty alleviation and socio-economic transformation. The strategy prioritises the delivery of affordable and quality education for all citizens. The Education Act (Chapter 25:04) further codifies children's fundamental rights to education and mandates compulsory schooling (Section 5).

At the international level, the United Nations Convention on the Rights of the Child (1989) obligates governments to take all appropriate measures to respect, protect, and fulfil the rights of children, while also recognising the roles and responsibilities of families in guiding their children's development. Despite these policy commitments, Zimbabwe faces persistent

challenges related to unplanned teenage pregnancies, which are reportedly more prevalent in rural areas than in urban centres. Findings from a Zimbabwe National Statistics Agency (ZIMSTAT) survey from 2014 indicate that 28.7% of rural adolescent girls had begun childbearing, compared to 14.2% in urban areas (ZIMSTAT, 2015). Chiredzi district contributes significantly to these rural statistics.

Teenage pregnancy has far-reaching implications, especially concerning education. Many young mothers are compelled to drop out of school, perpetuating cycles of poverty and inequality while limiting future opportunities (Muzingili et al., 2024; Thelma et al., 2024). Resilience, defined as the capacity to adapt, recover, and thrive amidst adversity and stress (Echezarraga et al., 2024), is a critical factor in understanding how teenage mothers cope with these challenges. Resilience involves a complex interplay of emotional, psychological, and social resources that empower individuals to navigate setbacks while maintaining their well-being and functionality (Folkman, 2020). It is influenced by both external support systems and internal coping strategies.

Coping, meanwhile, refers to the specific actions or strategies that individuals employ to manage stress and difficult circumstances (Echezarraga et al., 2024; Folkman, 2020). In the context of school reintegration, resilience encompasses the ability of young mothers to manage unique challenges such as societal stigma, balancing motherhood with academic responsibilities, financial constraints, and emotional stress (Muzingili et al., 2024). Research from South Africa, for instance by Chigona and Chetty (2008), indicates that many teenage mothers encounter social isolation and emotional distress due to discrimination by peers and teachers. Similarly, a study in Brazil found that teenage mothers with strong time management skills were more likely to remain in school (Oliveira et al., 2021).

Although there is considerable literature on teenage pregnancy in Zimbabwe, particularly in rural areas like Chiredzi, little scholarly attention has been paid to the influence of traditional cultural practices — specifically, the Khomba initiation ceremony — on the rising rates of teenage pregnancies. A review of existing studies reveals a notable empirical gap, as the role of these cultural rites in perpetuating early pregnancies has yet to receive sustained academic focus. This study emerges as a timely and relevant contribution, particularly given data from the 2022 census indicating that Chiredzi district remains among the six districts in Masvingo Province most affected by high teenage pregnancy rates. The research focus on Khomba initiation customs is motivated by this statistical evidence and the recognition that most existing

national studies tend to analyse teenage pregnancy from a macro perspective, overlooking localised and micro-level factors. This study aims to fill that gap by providing a detailed, case-specific analysis of how cultural practices in Chiredzi influence teenage pregnancy rates, thereby advancing nuanced insights into the local context.

The rationale for this research aligns with efforts to develop more effective policies, programmes, and interventions aimed at improving educational access and outcomes for teenage mothers, ultimately fostering their empowerment and employment opportunities. Notably, Hosie (2003) noted that with adequate support, disaffected adolescents can re-engage with education after pregnancy, highlighting the importance of targeted interventions. This study sought to explore the lived experiences of teenage mothers during their reintegration into mainstream education in rural Zimbabwe, with a particular focus on students in Chiredzi secondary schools. It aims to identify the challenges they face, the support structures available to them, and the strategies they employ to overcome difficulties. By examining these factors, the research aspires to contribute to the development of more effective policies, programmes, and interventions that facilitate successful educational reintegration and improve prospects for young mothers.

Objectives of the study

- i) To explore the psychosocial struggles experienced by teenage mothers.
- ii) To identify the socio-economic challenges faced by teenage mothers.
- iii) To establish coping strategies adopted by teenage mothers.

Methodology

Design

This qualitative study employed a phenomenological research design. It is the strategy of choice when exploring people's life experiences on sensitive or socially complex phenomena (Creswell & Creswell, 2018; Moustakas, 1994). Phenomenologists describe what all participants have in common as they experience a particular phenomenon, and the meaning of these experiences, both in terms of what is experienced, and how it was experienced (Neubauer, Witkop & Varpio, 2019). This study explored the experiences of teenage mothers in reintegrating into mainstream education, with special attention to the psychosocial and socio-economic challenges they encounter, as well as the coping strategies they employ to overcome these challenges. This design allowed the participants to describe their lived experiences in

their own words and helped the researchers attain rich information to make meaning of the reality of the teenage mothers' perspectives.

Participants

Participants for this study were eight (8) teenage mothers, and four (4) key informants (KIs) from Chiredzi District. Eight adolescent girls between the ages of 14 and 19, who became pregnant and had babies whilst attending high school, and who had successfully reintegrated into the mainstream education, were purposively selected for this study. Purposive sampling was utilised given its utility in identifying participants with the specific and requisite experiences of teenage motherhood and subsequent reintegration into mainstream education. Four key informants were also recruited through purposive sampling as the researchers used personal judgement to identify the most informative officials from relevant government departments and local non-governmental organisations (NGOs). Officials from the Ministry of Primary and Secondary Education (MoPSE) and CAMFED, a local NGO into education programming, were engaged as key informants.

Data collection

Data were collected through in-depth interviews and key informant interviews (KIIs). In-depth interviews allowed for deeper insight into the participants' thoughts, feelings, and emotions about motherhood and subsequent reintegration into the secondary education system. These interviews were complemented with key informant interviews. Methodological and theoretical triangulation were employed to enhance data trustworthiness and credibility.

Data analysis

In line with the phenomenological research design, data from this study were analysed through interpretive phenomenological analysis (IPA). IPA provides an opportunity to get nuanced details of how people make sense of their major life experiences (Smith, Flowers & Larkin, 2022). It delves deeper to understand how individuals make sense of their personal, lived experiences, perceptions, interpretations, and the meanings they attach to significant events. Audio recorded interviews with teenage mothers and key informants were transcribed to enable expeditious data analysis. Broader themes were then developed from the meaning units, noting the similarities and differences in the experiences of teenage mothers.

Ethical considerations

When conducting research on the reintegration of teenage mothers into mainstream education, ethical considerations are of paramount importance due to the sensitivity and vulnerability associated with the participants' experiences. Teenage mothers often face social stigma, emotional challenges, and systemic barriers that must be carefully navigated to ensure that research is both respectful and ethically sound. The researchers were careful to obtain express informed consent and assent to ensure voluntary participation. Pseudonyms were used to guarantee confidentiality and anonymity, and efforts were taken to minimise emotional distress and harm. This article is derived from a broader academic study which received ethical clearance from the Julius Nyerere School of Social Sciences at Great Zimbabwe University and permissions from the Ministry of Primary and Secondary Education.

Findings and discussion

This section presents and discusses the findings of the study. A brief overview of participants' sociodemographic characteristics is presented first.

Table 1: Demographic Characteristics of Teenage Mothers

Participant (<i>n</i> = 8)	Age at conception (<i>in years</i>)	Age at interview (<i>in years</i>)	Period out of school (<i>in months</i>)	Marital status of participant	Status of parents
PPT1	16	18	12	Single	Deceased
PPT2	15	17	8	Single	Single mother
PPT3	17	18	5	Single	Separated
PPT4	17	18	7	Divorced	Married
PPT5	17	18	9	Single	Deceased
PPT6	15	17	18	Single	Deceased
PPT7	16	18	11	Single	Separated
PPT8	16	18	16	Divorced	Single mother

Table 2: Demographic Characteristics of Key Informants

Participant (<i>n</i> = 4)	Gender	Organisation	Experience (<i>in years</i>)
KI 1	Male	MoPSE	32
KI 2	Female	CAMFED	6
KI 3	Female	CAMFED	3
KI 4	Female	MoPSE	24

Note: MoPSE is the Ministry of Primary and Secondary Education, while CAMFED is a non-governmental organisation (NGO).

Psychosocial struggles faced by teenage mothers

Reintegration into main stream education can be challenging for teenage mothers who face unique psychosocial struggles. In the study participants showed signs of emotional distress. PPT 4, in the following statement, gives a clear description of what she went through when she discovered that she was pregnant.

“It was a shock to me. A big challenge, I had not anticipated that. Being pregnant at this kind of age while in school. I have disappointed my parents. I felt that I have been suffering and now I bring a child to suffer more. I felt that it was a crime I did, I tried many things, and I tried to terminate the pregnancy. I tried many things... [Home remedies], taking herbs. After missing my periods for two months I concluded was pregnant and went to the clinic and they told me that I was three months pregnant. That time I did not have money could have paid for an abortion. I struggled to balance emotions, school, and motherhood.” (Participant 5).

All the 8 participants reported that their sense of who they are had changed since being pregnant and their current status of being teen mothers. They described this change as ‘not feeling or being the same’ person that they were before. They had an identity crisis as described below:

PP7: “I am not who I was at the beginning, I do not think I can achieve.”

Later she added, “*My life has changed in many ways I am no longer happy as I was.*”

PPT 7 experienced herself as an alien as she struggled with conceptualising who she really was. Pregnancy evoked anxiety and confusion about her own identity. She described her feelings about herself in these following words:

“Sometimes I saw myself as a loser in life and I don’t have any more chances. Which means I am a mother that’s all. There is nothing I can do in life. Before I fell pregnant I had goals that when I grow up I want to do one, two and three. Everything is ruined. I am nothing. I am just somebody from nowhere. I did not know myself at all, I mean who I am. I mean, what do I want in life.”

Early teenage motherhood thus forces the adolescent girls to assume a maternal identity instantly without prior preparation for the role. They consequently suffer the various social acts borne out of stigma when they decide to go back to school (Okwany, 2016).

“I lost my sense of self; I was no longer just a student.” (PPT1)

Key informant 3: “We have support groups known as CAMA, which offers educational lessons to teenage mothers as well as other students. We also counsel them and offer emotional support “

Key Informant 2: “Through guidance and counselling which is now mandatory in school, teachers also receive training and are able to offer help to the affected learners and even offer psychological support”

Self-doubt and low self-esteem emerged as a significant challenge in this study and the findings seem to suggest that teenage mothers reintegrated into the main stream education were struggling with deep seated self-doubt and low self-esteem. One of the interviewed participant and this to say:

"I doubted my ability to succeed as a mother and student when I got back to school. I had fear of failing to complete school when I got back. An unemployed mother with no idea where I would get a cent let alone think of the baby at home "(PPT4).

This concurred with participant 6 who had this to say:

"I felt like I'd failed myself and my child. To me I had no hope I would make it in school, I felt pity for my child whom I left at home. She missed my love." (PPT 6)

Key informant 4 had this to say:

"We engage the teen mothers in what we call CAMA groups which is a group of teenage mothers who once were teenage mothers at school and now are coming back to offer psychosocial support and encourage them to be resilient and improve their self-efficacy."

Participants reported feeling shy at school. There was a general feeling of being self-conscious about their status and they found it difficult to be with their peers who were not mothers. Shyness was associated with the perception that their peers gossiped about them, and that people were judgemental and critical of them. Scholars like Malahlela (2012) concurs with this argument by stating that mothering girls usually suffer from inferiority complex , low self-esteem and lack of confidence based on the thought others are laughing at them.

PPT8: "At school I was scared that other kids were going to gossip about me of being a loose somebody with bad morals and that teachers will start complaining."

PPT 6: "It was a bit difficult to come to school being a teen mother while others are not. Like now I am a mother and some are just students you know, while I am thinking, oh! I'm a mother."

It appears that even though there are no direct negative repercussions at school for becoming or being a teenage mother, learners subjectively perceive the motherhood status as having negative connotations. Thus, they may exclude or isolate themselves from other learners. None of the participants reported any direct reproach, exclusion or isolation by their peers or teachers when the interviewer probed. Participants reported that they were disappointed in themselves and that they had a feeling of regret and self-blame.

Key Informant 1: “We often have school programmes for whole students at an institution where bad mouthing and offensive language is discouraged as we preach tolerance and accepting people with various disabilities and conditions”

Key Informant 3 “ It’s difficulty to completely do away with stigma ‘cause even teachers as well as other community members believe that the teenage mothers shouldn’t be allowed at school”.

All eight participants regretted having a child, they felt that it had brought negative changes in their lives. For example, they felt that they were not happy about their lives anymore.

PPT 1: “Teenage motherhood has taught me a lot; ... wishes of abandon the child are inevitable. Not to say that I do not love my child, but I would like to change not to have had sex at all, not to have a baby. I have been through a lot of things because of this pregnancy and most of the time it was not nice.”

There was also a sense of loss of a good opportunity to try and improve their standard of living. Participants had a wish to establish careers, but saw parenting responsibilities as an obstacle to achieving better grades and pursuing further education.

PPT 1: “I still do (wanting to be an accountant, but there is a problem because I can’t do things the way I did before. You know like I can’t cope. I can’t concentrate like before because I’ve got many things to do and school work. Like I have to look after the child and care for her.”

Socio-economic challenges faced by teenage mothers

Teenage mothers who have been reintegrated into the main stream education face significant socio-economic challenges that impact their academic success and well-being. The success of teenage mother reintegration therefore requires a holistic approach. The findings on the question how participant managed financially when the child was born, most of them indicated that they faced economic hardships.

PPT 2: “I often contemplate to quit school because am struggling to keep myself and meet the demands of my child while pursuing education. I’m forced to do part time jobs during weekends to buy sugar and pampers for my child let alone fees.”

PPT7 voiced the same concern when she said:

“... it’s difficulty as a teen mother. I rely on friends and relatives to give me some money, which in turn I use to buy my child his needs. As for myself, I got my uniforms from CAMFED.”

PPT 8: “The father of my child doesn’t support me; so, I have to look for part time jobs to provide for my child”

Key Informant 4: “Most of the teenage mothers, even if they have their spouses, it would be these teenagers who are not employed ... and you know with these boys ... they are always on mutoriro”

Poverty is a pervasive socio-economic challenge faced by reintegrated teenage mothers, exacerbating their struggles in main stream education. In a study in Masaiti District in Zambia, Mafalo and Kabeta (2019) revealed that learner mothers lacked material support and lacked financial support.

PPT 1: “It’s hard to come to school without taking any food. The little that is there I just feel I should leave for the baby minder who takes care of my child when am at school.”

PPT 8: “I was put under BEAM for me to be able to meet the demands of school fees, and you know BEAM doesn’t provide other necessities which I am falling short off.”

Poverty leads to diminished self-esteem among teenage mothers. Failure to put food on the table for herself and her child leads to diminished interests in academic pursuing. Various studies (Zuilkowski et al., 2019) have shown that poverty is a vital component as a contributor to early pregnancies and inhibitor to school re-entry for young mothers. Similarly, in a study on the mental health of adolescent parents in the USA, Leplatte, et al. (2012), show that teenage mothers experienced post-traumatic stress because of various factors such as serious money problems.

Teenage fathers, like teenage mothers, are often not ready for parenthood. They are often teenagers themselves on conception, are from low-income communities, have low educational attainment, tend to be poor, and often come from single parent families headed by a mother or a grandmother. Adolescent fathers often refuse to accept financial and social obligations of parenthood. There is a tendency to deny paternity to avoid financial responsibility. A majority of participants reported that fathers of babies did not provide financial support. They too, like adolescent mothers, were from impoverished backgrounds. Only one father of a baby in the sample was reported to have passed his Ordinary Level. In a case study conducted in South Africa, Chigona and Chetty (2008) revealed that many teenage mothers experience social isolation and emotional distress due to discrimination from peers and teachers.

PPT 6: “I do not know what he is up to, whether he wants to deny the child or not. He doesn’t do anything for the child and I only got to school through my parents who are paying fees. So, I ended up going back to my parents’ home.”

Key informant 2L “As an organisation, we have tried to assist teenage mothers by offering grants, which is money we deposit in school accounts for teenage mother

to start income generating projects of their choice as determined by the school authorities.”

Coping strategies of teenage mothers

Teenage mothers employ various coping strategies to manage stress, stigma and socio-economic challenges. Effective strategies include seeking social support from family, friends and support groups. Participants were asked if they received any kind of support from their families, friends and community. They were also asked if they thought that the support was adequate. Four mothers or grandmothers of the teenage mother were assisted by their mothers to look after their children when the participants were at school. The mothers also assisted with buying a few basic necessities. However, participants felt that such help was not enough and was inconsistent. Often when there was a conflict between the parent and the daughter, the parent would withdraw help in order to punish the adolescent mother. As a result, participants had to miss school in order to look after the child.

PPT 5: “Like a few things, like if I came late at home, things like that, and she would be angry for a week or two. When she is angry with me, she won’t look after my child; she won’t buy anything for her. When she is angry with me, she says that I should look after my child; she won’t buy anything for her.”

In these circumstances, the teenage mother has to seek alternative day-care arrangements. Very often they take their children to supportive family members or find someone to baby sit the child for a fee. It was also found that, in those families that had existing interpersonal relationship problems, tension intensified. Sometimes parents just refuse to help the teenage mothers, as in the cases of PPT 5 .

PPT 8’s father, the only parent in the sample who happened to be in a decent full-time employment, totally refused to assist his daughter in any possible manner. When she was pregnant, her father chased her away from home and only allowed her to return on condition that she left the baby with the paternal family. She stated that she was forced to separate with her child after eight months so that she could finish school. She came home so that she could go back to school. At the time of the interview, she was still separated from her baby and this was a source of grievous distress. She only saw her baby once or twice a month for a few hours a day. The baby’s paternal grandmother was entirely responsible for the childcare.

According to Angley et al. (2015), teen mothers can draw support from several resources, including parents, partners, relatives and friends, which is necessary for improving teen mothers’ well-being. Bunting and McAuley (2004) supported this notion, commenting that the

majority of teenage mothers live with their mothers for up to five years after giving birth. Grandmothers are the prime source of housing, as well as financial and childcare assistance. This study found that parental support and perspectives are central to re-entry, as either facilitators or inhibitors. The young teen mothers' reintegration to school is mainly their mothers' responsibility despite many fathers willingly supporting the re-entry policy. Knowledge of these possibilities influenced parental decisions to support their daughters' re-entry, with ignorance playing a pivotal role as an inhibiting factor. Therefore, parental viewpoints and perspectives determine the failure or success of school re-entry and is directly linked to the likelihood of offering socio-economic support to the teenage mothers.

Participants spoke about their motivation to work hard and the importance of achieving a good education. There was a sense that participants attributed their self-drive and determination to teachers who reinforced aspirations and actively supporting them by trying to meet their needs. Their personal attitude towards others had changed and that helped a lot.

When asked how they coped with stigma and stereotyping participants had this to say:

“When I returned, I felt like the school wanted me to come back ... and have a fresh start”. (PPT3)

“I still have time and I still need to learn because [...] I have to be the best I can be. I learned to ignore negative comments and focus on my goals” (PPT 7)

Participants appeared to associate self-determination and the aspiration to qualifications such as ‘O’ levels with doing well and opening opportunities for the future. This increased their motivations to utilise their academic potential. The role of formal supports has been associated with positive results in the adjustment of adolescent mothers. In the current study, five of the participants received formal support from CAMFED. The five participants indicated having contact with organisations or professional people, other than the nursing staff at the antenatal and postnatal clinics. Furthermore, the five participants indicated receiving emotional support from formal structures. The school appeared to play a role in fertility education and was supportive to the teenage mothers.

Additionally, the five participants reported that their friends were more accepting of their parent status. It also appeared that early parenting tended to isolate the teenage mothers because they lack the confidence to make new friends and lack the time to maintain existing friendships. It was found that teenage mothers no longer spent time with friends because of the increased responsibility. It also appeared that they carried feelings of guilt when they spent time with

their friends, as they perceived this as child neglect. The difficulty to make friends was also linked to the fear of rejection by the non-parenting peers. Participants perceived themselves as 'different' from other learners and judged teenage pregnancy as 'bad behaviour'.

PPT 2: "Sometimes you don't want to mix with other people because you have a child and they don't. So, sometimes you think twice before you make friendship with someone else. You wonder if they are going to accept you. Even though I may go to them, I wonder if their parents would be worried that I am going to influence their children."

"I made friends with other teen moms in school. We supported each other. We are in the same situation and can understand each other well, knowing that this was a mistake and not a choice." (PPT 8)

Another participant had to add:

"My classmates were understanding and helpful." (PPT 5)

"I remind myself why I want to finish school. My child is a source of inspiration and I wish to get a better paying job and be able to take care of my child on my own and compensate what I failed to offer her." (PPT 1)

Key informant 3: "we believe teenage mothers are best understood by one who was once in the same situation hence we have various people from the CAMA as business guide or learner guide who offer help in a specialised area"

Key informant 1: "As the Ministry of Primary and Secondary Education, in instances where we feel we are not qualified to help, we refer issues to our partners like the Ministry of Health or Ministry of Social Welfare, for assistance, as they are more trained and specialist in those areas.

These relations can be foundations of strength and support for teen mothers. Therefore, in this study, the school can be seen as a tremendously valuable resource providing care and support for teen mothers to boost their resilience and improve their well-being as they may be valuable in offering referrals. In a study in Brazil, teenage mothers with strong time management skills were likelier to remain in school (Oliveira et al., 2021). The meaningful life experiences of adolescent mothers influence them to have a more positive outlook that can serve as springboard for self-improvement (Gama Ibiapina et al., 2016).

Conclusion

The study concluded that the reintegrated teen mothers face multiple challenges at school and in societies they come from. The challenges were psychosocial and socio-economic due to lack of financial capabilities since they were still in school. Despite the established challenges in the study, resilience and determination as coping mechanisms allowed the teenage mothers to remain in school and complete their education. Based on the findings, the study recommends

that communities be sensitised on challenges facing teen mothers. In addition, guidance and counselling should be strengthened in schools to offer psychosocial support to the teen mothers.

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