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Case study of the out of school Teenage Mothers' lived experiences and perceptions on education in Rusororo sector, Rwanda: A back to school framework

Patrick Gatsinzi

Department of Educational Administration, School of Education, Humanities and Social Sciences, University of Eastern Africa, Baraton-Kenya.

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This study purposed to investigate the lived experiences of out of school teenage mothers during pregnancy, and post-delivery in Rusororo Sector, Gasabo district, Kigali City. It is a qualitative study that used case study design to investigate the school teenage mothers (participants) on their perceived school experience with fellow students, teachers and school leaders, study courses, and parents; the psychological and socio economic effects, and their future education perceptions. Purposive sampling was used to select the sample size participants and the area of study. Convenience sampling and snowball sampling were used to reach the available participants. Semi-structured interviews were used to collect data. Thus, using interviews, data was collected through note taking and voice/audiorecording. In data analysis, data was analyzed through manual comparative and thematic analyses. Results showed that teenage mothers view of further education is attainable through vocational training; pregnancy had psychological effects of depression, loneliness, self-denial on them; pregnancy had social effects of parental denial and expulsion and economic effects of hard living and doing manual work for survival; its educational effects include dropout and study retardation; teenage mothers lived a sorrowful experience of single living without support and most attempt suicide while pregnant. Solutions to curb pregnancy among teenage girls include forum discussions, sex temptation identification, parent-daughter discussion, counseling services and offender punishment. It was concluded that teenage mothers lived a sorrowful and unsupported life that make them academic dropouts. The study provided broad insights and a framework on the teenage mothers' lived experience and their education.

Key words: Teenage pregnancy, teenage mothers, out of school teenage mothers, education, sector.

INTRODUCTION

Teenage pregnancy is a challenge that is affecting teenage girls whether in or outside school, in all countries across the globe, including Rwanda. The World Health

Organisation (WHO) defines teenage pregnancy as the pregnancy in women aged between 10-19 years. It is one of the recent global emerging challenges affecting girls'

Email: gatsinzipatrick@yahoo.com.

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education, health and future life (WHO, 2018; CLADHO, 2016; Mang'atu and Kisimbii, 2019; Koklukaya, 2019). In most rural developing countries, 95% of births are accounted to teenage mothers. Besides, 2 million girls give birth and become young mothers before reaching the age of 15 (CLADHO, 2016; Vaz et al., 2016 Koklukaya, 2019; WHO, 2018). Studies also reveal that Africa has 18.8% prevalence rate of teenage pregnancy, while East African region where Rwanda is located emerged the highest with 20.5% (Kassa et al., 2018). In Ethiopia, teenage girls are becoming victims of unwanted pregnancy due to their vulnerability and exposure to the influence of the media, role modeling, and poor guidance (Abebe, 2020). Such vulnerability and exposure has led Kenya' Narok county to have 40% of teens bearing children, which stands higher than the national average of 18% (Obwoge et al., 2019).

For the case of Rwanda, statistics indicate an increase in the rate of teenage pregnancy. For example, 19,832 pregnancy cases were reported country wide in 2018 compared to 17,557 in 2017 (Mutanganshuro, 2019). It also increased from 6.1% in 2010 to 7.3% in 2015, signifying an alarming situation regardless of strict legal measures to combat it (NISR, 2016; Reseau des Femmes, 2018).

The causes of this teenage pregnancy issue is highlighted in various studies (Stoner et al., 2019; Abebe, 2020; CLADHO, 2016; Yakubu and Salisa, 2018; Patino and Gordon, 2019; Ochiaka and Ani, 2019; Endale and Fenta, 2020; Kauts et al., 2020; Reseau des Femmes, 2018; Safari, 2016). Its effects and lived experiences include: school dropout, abortion, death, becoming young mothers un-prepared. post-delivery complications. poverty, malnutrition of their children, get mocked or rejected by their families and friends, hence they experience emotional, physical and psychological torture, depression, discrimination, and live a hopeless life (CLADHO, 2016; Yakubu and Salisa, 2019). These affect the psychosocial and emotional feelings and cause the teenage mothers to feel viewed as incompetent mothers who are unworthy for support. Out of 37 female teenagers with age 15-19 surveyed, 8.5% had experienced physical violence while pregnant (NISR, 2016).

Psychological experience-stress, and negative thoughts (Stavropoulou and Gupta-archer, 2017), discrimination, stigma, and blame (Laurenzi et al., 2020), depression and conduct disorders (Corcoran, 2016), social isolation, poor education attainment, school dropout, repeated pregnancy, drug abuse, poverty, limited job opportunities, and underperformance (Potgieter and Zuma, 2019). Xu et al. (2014) categorized teen mothers' lived experience as social (stigma and discrimination, low self-efficacy and financial difficulties); emotional (guiltiness and sadness, ashamed, angry, confused and hopeless); and physical (sleeping difficulties and self-care problem).

Early girls' marriage was attributed to lack of girls'

education prioritization in the households' investments in Indonesia (Susanti, 2019). Parents' reactions towards school teenage pregnant girls had significant psychosocial problems that had negative repercussions on the pregnant teenagers' educational aspirations in Cameroun (Peter and Emade, 2020). Education was found as relevant to the female children' future welfare, economic independence and security in Za'atari camp-Jordan (Mrayan and Saleh, 2020). Oparah et al. (2019) found guidance and counselling services not sufficiently provided to the girls in Imo state, Nigeria. Child labour, socio-cultural barriers and parents' economic status were found as the main factors demotivating school girls in the slums of Karachi (Sultana, 2019).

Such experiences have caught attention from the government and other stakeholders to concert their efforts for raising the awareness and preventive measures that ensure the girl child attain education for future well-being as well as punish their victimizers (Mang'atu and Kisimbii, 2019; MIGEPROF, 2018). Such efforts are embedded in empowerment theorieseducation empowerment theories. economic empowerment theories, community empowerment theories and policy empowerment theories. These theories have been found to be effective in reducing teenage pregnancies and supporting education attainment (Avis, 2016; Enricho et al., 2020). Education empowerment theories view education in two-fold: the formal schooling where girls attend the normal classes and learn through the designed curricular, and the sex education that is designed in both curriculum and excurricular activities where teenage girls are taught reproductive health. The resultant impact is the reduced pregnancy rate among the teenage girls (Kaphagawani and Kalipeni, 2017).

Economic empowerment theories believe that teenage girls need economic support so as to attend to their basic needs. Studies reveal low socio-economic status as linked to adolescents' first child birth, while risky sex behaviors linked to poverty (CLADHO, 2016). Community empowerment theories assert that the community is made of the parents, relatives, and neighbors and peers (Enricho et al., 2020). The ways adolescents interact with the community greatly affect their education and reproductive health (Biney and Nyarko, 2017). A supportive community helps girls to grow up with morals and values that lead them to mature adults without causing shame and embarrassment to the community (Eweniyi and Omotere, 2019; Raj, 2010; Viner et al., 2012). On the other side, Patino and Gordon (2019) found that communities react to these teenage pregnancy challenges in a manner that denunciate and castigate them (teenagers) in what they view as their failure rather than in the manner that responds to their needs.

Policy empowerment theories advocate for compulsory formal education, sex education with emphasis to contraceptive use, legal instruments that protect child and

girls' human rights, economic policies that aim at boosting the incomes of poor families (Enricho et al., 2020; Chandra-Mouli et al., 2017). Education is a universal right to children of all genders. Specifically, it helps the girl child to develop their potential as well as raise awareness on all life domains (Sultana, 2019), benefits the society in that family health improves due to increased family earnings (Coleman, 2017), responds to individual and society needs, assist people to alter the conditions of their lives and the society as well as make individuals aware of their rights and equip them with informed choices (UNICEF, 2018). The UNFPA (2014) asserts that the education sector has a responsibility to protect the rights of girls, to support their retention in school and to educate parents and communities about the health risks and rights violations. Ridgeway et al. (2020) found some girls changing behavior after the intervention measures had boosted household economic status and family financial support.

Despite the strength of these empowerment theories, each cannot stand out to work alone to be successful in mitigating girls' education. This is because each theory has its own limitations. For example, adolescent girls pregnancy rate is on high increase among teenage school girls who attend both formal education, receive sex education, get education about moral values from school, as well as from the community. Various governments are channeling their budgets to establish developmental/economic activities so as to eradicate poverty. Even some girls from the high economic status families are seen also to have unintended pregnancies the same way girls from the impoverished families. Again, policy measures like punitive laws have been established in all countries but still defilers are impregnating the teenage girls (Enricho et al., 2020)

Despite education being a human right, it is not accessed by the majority of children, especially girls the same way boys do, based on the social disparities (UNICEF, 2018). Those who struggle with the chance to attain education, become victimized through various violence means; hence a disastrous brow to their future wellbeing (Therese, 2018). Obwoge et al. (2019) advise that in order to save the education and the welfare of the teenage girls, educators, care providers, parents, public health officials, and communities have to collaborate so as to create health and education environments for these teenagers for future better living. Lack of concerted efforts by all the stakeholders to promote girls' education strongly contributes to the education imbalances (CLADHO, 2016; Atieno, 2019; Mutanganshuro, 2019; Stavropoulou and Gupta-archer, 2017 Nsengiyumva, 2019, Janviere, 2019). Pillow (cited in Maria, 2013) asserts that until teen pregnancy is addressed as an education issue, teenage school pregnant/mothers will not obtain the education they deserve. Reseau de Fammes (2018) proposed more comprehensive research that analyses the situation and needs of teenage mothers

for appropriate response to their education. This signifies that little is highlighted about the out of school teenage mothers' life experience and their perceived views on their future education. Thus this study aimed to fill that void by analyzing how teenage mothers in Rusororo Sector Rwanda viewed their education; how are they and their education viewed by the fellow students, teachers, school principals, and parents; what effect does pregnancy have on their education, psychological, social and economic well-being; their lived experience with pregnancy and motherhood; what can be done to help them continue with their education; as well as their views on pregnancy prevention among school teenagers.

METHODOLOGY

The study area was Rusororo Sector (one of the local government administration entities) found in Gasabo District, Kigali City. It is a semi urban area with communities living varying urban and rural life economic status. It is located at 20 km from Kigali City Center. Like other regions in Rwanda, the area faces the challenge of girls who drop out of school due to varying reasons, including pregnancy and mothering. The area was also selected because it was within the researcher's accessibility and financial capacity, as the study was self-sponsored. In scope, the study explored the life experiences of the out of school teenage mothers and the perceived view of their education.

The research used case study design to collect and analyse data from the participants. The case study design provides deeper understanding of the lived experience of the participant as the experience is individually felt (Guetterman, 2015). The study population was all the out of school teenage mothers in the Rusororo Sector, Gasabo district, Kigali City. Purposive sampling technique was used to select a sample size of 5 participants. This sample size was selected based on Creswell (Guetterman, 2015) who advises a smaller sample of 4-5 in a case study qualitative research while Morse (Guetterman, 2015) advises a sample of 6. Also, Patton (2015) stipulates that purposively selecting a smaller sample depends on the limited resources. Both convenience and snow ball sampling techniques were employed to reach the 5 participants.

In-depth interview guide was designed to solicit responses. In order to achieve that, semi-structured interview instrument was used to collect data. Its items were objectively formulated based on the study questions and were designed in semi-structured manner. Its design also allowed room for collecting unstructured responses. The tool's items collected data on the respondents' background information, their lived experience with pregnancy, nursing the baby, as well as their perceived future education. An observation checklist was developed to record the body language of the participants as they narrated their lived experience. To ensure the tool solicits the needed information from the participants, it was subjected to validity test. In this case, the researcher designed the items based on each research question, then submitted it to two experts (lecturers at the University of Eastern Africa, Baraton) for examining its accuracy. Therefore, both content and face validity were used to test the accuracy of the tool. A data collection authorization permit from the research supervisor from the department of Education Administration was obtained. Two research assistants were hired and trained to facilitate in the data collection exercise. Then, researchers presented themselves to the AEE authorities (an NGO supporting vulnerable people working in Rusororo Sector, Gasabo District, Rwanda) so as help trace the out

| Table 1. | Participants' | demographic inf | ormation (| (1) |). |
|----------|---------------|-----------------|------------|-----|----|
| | | | | | |

| No. | Current age | Age at pregnancy | Duration outside school | Education level | Current education status | Current status |
|-----|-------------|------------------|-------------------------|--------------------|--|----------------------------------|
| 1 | 23 | 18 | 5 years | Primary level/P.4 | Dropout | Hawker |
| 2 | 23 | 16 | 6 years | Ordinary level/Sec | Dropout, completed month vocation training | Manual Jobs |
| 3 | 20 | 18 | 2 years | Ordinary level/sec | Dropout | Hawker |
| 4 | 21 | 20 | 1 year | Ordinary level/sec | Dropout | Manual jobs |
| 5 | 18 | 16 | <3 months | Ordinary level/sec | In school | Schooling while nursing the baby |

Source: Primary data.

of school teenage mothers/participants. Luckily, one participant was found among the beneficiaries of the AEE project. She then helped to identify other participants through snowballing. After identifying all participants, an interview schedule was set with each participant on a different day. Each participant was told the purpose of the study and requested to participate voluntarily. The researcher himself conducted and modulated the interview, while the two research assistants took field notes as well as audio-recording of what was being said so as to not miss any data. Observation analysis was performed so as to measure the physical and emotion state of the participant. After their consent to volunteer to participate in the study, participants were requested to sign the consent forms (for those who were 16-20). They were assured that the data they provide would be kept confidential by the researcher and nobody would access them.

During data analysis, ethics was also considered. That is, every word recorded was coded and analysed to establish its relationship with other words and reported objectively. It was also ensured that no word would be altered and meanings would be provided as they were collected. Thus, the collected data was transcribed verbatim, coded, categorized and analysed using thematic analysis. Therefore, in order to get more understanding of the content, the researcher familiarized with data through reading it and developing codes several times (constant comparative data analysis), while transcribing every word recorded and developing meanings from codes, categories from which themes emerged (thematic analysis). The analysed data was then presented in tables thematically and narratively as shown in the following sections.

RESULTS AND DISCUSSION

This section presents the study results in tables and in narrative form on the participants' demographics, perceived views on their future education, as well as the psychological, socio-economic and physical lived experiences. The obtained results are then corroborated with the existing literature for validation purposes.

Demographic information

This section presents findings on the participants' demography with regards to age, education, duration outside the school, family, religion, residency, and reason for pregnancy. Table 1 illustrates participants' demographic information on their current age, the age at the time of conception/ pregnancy, duration/time spent

outside school, education level, current education status and current occupation status. It is evident from the table that majority of the participants became pregnant while teenagers (age black) and this forced them to drop out of school and get engaged in both manual jobs (washing clothes, field cultivation, mopping/ cleaning houses) and hawking (mobile selling of fruits and vegetables) to sustain their babies. On the education issue, most participants became pregnant while in the lower secondary/ordinary level, despite having only one participant in form four (p.4) in the primary level.

Table 2 indicates the participants' demographic information on the family status, religion, reason for pregnancy, justice obtained from punishing the offender, and the satisfaction of the punishment offered by justice. As illustrated in the table, most participants lived in a family of single parent especially single mother. In regard to religion, all participants belonged to well-known religious institutions-protestants, Adventists, Islam, etc. On the reason for pregnancy, almost all participants conceived due to coerced sex, meaning that they had sex without their consent. Only one participant, however, became pregnant voluntarily. On whether their offenders were punished justly, all participants indicated that justice was not given as their offenders went unpunished, some escaped while others still loam around in the neighborhoods. However, only one participant noted that her offender was not probed for justice because she willingly had sex with him thus no intention of getting him punished. Her parents wanted to seek justice for her but she blocked them to do so. On whether they got satisfied with justice provided, most participants indicated that they were not satisfied at all. This is because, some never knew where to get justice from, others highlighted no efforts by the parents/ local administrators and concerned authorities to prosecute the offenders.

Out of school teenage mothers' views of their education

Under this study question, participants' view of their education was analysed and their views were organized

Table 2. Participants' demographic information (2).

| No. | Family status | Religion | Reason for pregnancy | Justice obtained | Satisfaction with justice provided |
|-----|----------------------|-----------------|----------------------|--|------------------------------------|
| 1 | Both parents | SDA | Job enticement | Victimizer escaped without punishment | Not at all satisfied |
| 2 | Single parent/mother | Redeemed church | Coerced sex/rape | No justice, victimizer not punished/did not know where to report him | Not at all satisfied |
| 3 | Both parents | ADEPR | Voluntary sex | None/ I did not want him to be punished | Satisfied |
| 4 | Single parent/mother | Protestant | Coerced sex | NO justice, victimizer escaped | Not satisfied at all |
| 5 | Single parent/mother | Islam | Coerced sex | No justice, victimizer not punished | Not satisfied at all |

Source: Primary Data.

in the following themes.

Vocation education

Assessing how participants viewed their education, all of them concurred that before pregnancy, they were supported by their parents in terms of scholastic material provision and tuition payment. In terms of performance, some were performing well while others were not. After conception, most participants' living worsened as they were tortured and did not get support from their parents. Those who were supported and not tortured lost motivation for studying. The only education they felt they could attain was vocational. Vocational education is the best because it takes little time to complete as well as few hours of study. This helps me to get self-employment where I can sustain my child. One participant retorted. Relatedly, other participants indicated that vocational education was the best because it enables them to get time to do manual jobs where they get food and rent fee since they are self -accommodating without support compared to formal education. "I cannot get a person to stay with my child if I go for formal education." Another participant noted. From observation analysis, participants opted for vocational education even if they got sponsorship for formal education. This is because the majority was living singly with their babies with no other helper to stay with the baby. Again they do not feel their baby would be in safe hands of a helper if they stayed long hours in formal schooling.

Shameful education

One participant who had chance to continue studying while pregnant and after delivery viewed her education as "shameful." She felt ashamed to leave her school mates during break hour to go nurse the baby and come back. She sometimes felt like dropping out of school. She noted: "When I finish the Ordinary level, I will resort to

vocational education because my child needs to be supported." From the observation analysis, the participant was deeply ashamed with studying while as a young mother. She could not fit in with her school mates, especially telling them that she is going to breast feed and come back. Again, she was concerned with leaving her baby behind without enough support and care until she returns back from school. Such experience is what led other partipants to abandon school, despite parents' support for education.

Other people's view of the out of school teenage mothers' education

On the question that assessed other peoples' (parents, students, school leaders, teachers, community) views on the teenage mothers' education, convergent and divergent opinions were collected. For example, some fellow students sympathized and motivated them to carry on studies while pregnant or come back for studies after delivery. On the other side, other students could boo them: "wooooo you are a young mother and wife who cannot complete school." On the side for parents, the majority saw their daughter's education has come to an end. One participant asserted that "My parents though annoyed with my pregnancy, wanted me to continue even after delivery. When I refused, they gave up and told me to "establish my own life." When the researcher probed for vocational training support, she said it is expensive and cannot afford it compared to formal education." Other experiences indicate that some parents never wanted their daughter to continue education before she got pregnant. "When the school sent me back home to bring school fees, my mother said I should go and graze the cows of my father or cultivate and drop out of school." Despite the commitment to continue with studies, there was no tuition support" (noted one participant). Observational analysis show that the mother refused to pay tuition not because she had no capacity but did not value her girl's education.

For the community, some community members were sympathetic and provided courage for continuing education after delivery. However, not all had the same view. Some had other intentions under the cover of sympathy. One participant who noted above that her mother did not want her to continue, a man from the neighborhood volunteered to sponsor and with the acknowledgement of her mother. However, before giving her tuition to return back to school after she had been chased home by her mother, he brought her soda (soft drink) and mixed it with sleeping tablets so as to make her unconscious and have sex with her. The result was pregnancy which made her completely drop out of school. Other narrations from her story indicate that the man never provided the promised tuition fee. On the side of the teachers and school directors, they motivate the teenage mothers to complete schooling. participants noted that when the school authorities knew they were pregnant, they approached and counseled them and advised to stay in school until delivery, or stay home and come back after delivery so that they can complete school. "When the school chased students to go and bring school fees, I was among them while pregnant. My parents said they cannot sponsor me when I am pregnant. The school director advised me to stay home until delivery, maybe my parents' anger will have subsided and allow my return to school after delivery". On another experience, one participant indicated that the school director told her to continue studying even without paying tuition but she refused due to hardship. This means that the school authorities and teachers understand the relevance of education but the home environment circumstances force the pregnant teenagers to abandon school. The responses on how education is viewed are summarized in Table 3.

Out of school teenage mothers' lived experience

The lived pregnancy experience of teenage mothers was assessed based on the parents, school leadership, teachers' and students reaction. Findings indicate differences and similarities in each participants" lived experience. These experiences are highlighted in the following emerged themes.

Self-accommodation

According to the findings, the majority of participants share similar experience like being chased away by their parents to wander and live a single life by accommodating themselves without support. "After parents acknowledged that I was pregnant, they chased me away. I went to rent a house with hope of support from the offender (the man who impregnated me). He did not provide support. I failed to pay rent, landlord chased

me away. I begged to work for him as a maid and he accepted." Accounted by one participant.

Hard living

Hard living was realised when the majority participants decided to leave where they were staying with families to accommodate themselves and do manual work for survival. Doing manual work while pregnant like cultivating fields, washing clothes, fetching water, etc. without proper feeding drastically affected their lives. "Some people in the neighborhoods sympathized and offered manual work so that I get food. Some days I could feel hunger pains with nowhere to get support." One participant noted.

Depression

Depression in all participants arose from the feeling of shame, hard living, lack of parental support, hurting words spoken to them, spitting while with friends at school, lack of accommodation, etc. One participant revealed that "Some of my school mates someday uttered "you are stupid. You should know how to value yourself. Never do it again." She perceived this assertion as being condemned guilty by her mates. She became deeply depressed. In another situation, a participant who was verbally tortured by her mother stressed that "I was highly depressed and stressed when my mother wanted me to abort. When I refused, she went to the doctor and wanted to bribe him and forcefully make me abort. The doctor refused." From such experience, it is evident that teenagers with unintended pregnancies live a really depressing life.

Suicide commitment

"I decided to commit suicide but never implemented it." A participant retorted, explaining that the decision came up due to harassing words from her mother. Another participant after knowing she was pregnant attempted suicide by taking acid but was rescued by the old woman who had accepted to accommodate her when the mother had chased her away to stay with a man who impregnated her. When mother disowned me based on false tells of my step mother, I felt rejected. Exacerbated by the man who accommodated me and made me semiconscious for sex purpose impregnated me, life became meaningless other than death. Hence decision for suicide.

Contempt

Contempt emerged as a theme from all participants due

Table 3. Other People's View of Teenage Mothers' Education.

| Code | Before pregnancy | During pregnancy | After pregnancy | Role/views of parents | Role/views of school | Views from friends/community |
|------|--|---|--|---|--|--|
| 1 | Poorly performing | Wished to continue while pregnant | Wished vocational education so as to have time for baby caring | Parents halted sponsorship after knowing I am pregnant and chased me out of home | Chased out of school for tuition payment, school director and teachers advised me to stay home and come back after delivery may be parents' anger will have subsided | Sympathized, encouraged me to return back to school, some begged parents to pardon me but in vain |
| 2 | Good performance, enjoyed studying, parent not willing to pay tuition | Struggled with life seeking where to reside | Wish vocational education | Parent's lack of interest in my education, halt sponsorship | School director and teachers advised me to return back to school. The school director even offered to sponsor me but I rejected due to stressing life situation | They advised me to return to school but rejected |
| 3 | Performing was not good, well supported by parents | Wished to continue while pregnant, felt ashamed studying with pregnancy | Vocation education. Cannot go back to formal education | Parents refused and forced me to stop, sister advised to return to school but I refused | teachers, school director encouraged me to return to school | Friends saw me with contempt |
| 4 | Well supported and performing well | Continued studies up to 3 months, forced myself to stop | Vocation education | Parents encouraged me to return but I refused | School leadership and teachers encouraged me to return to school but I refused | Some sympathized, others not |
| 5 | Well supported by the Organization, performance good | Continued studies while concealing pregnancy | Still studying formal education but wish to switch to vocation after ordinary level completion | Mother tortured me, Organization continued funding | Mother harasses me | Friends at school could sympathize and give me fruits, others could laugh and scom me |

Source: Primary data.

to experience they passed through. One participant noted that "my mother gives me food with contempt accompanied by hurting words. I feel sad since my pregnancy was forced." Asserted one participant. Similarly, a narration from another participant indicates that then she was forced to be married by the offender, the offender started bringing three prostitutes every night and they could, together with her, sleep on the same bed. "He did this as a sign of hurting me and showing that I have no say."

Irresponsible parents

Throughout the interviews conducted, it was found that majority of the parents were irresponsible and less concerned on what befell their daughters. In one account, a participant narrated that "my mother continued to interact with my offender yet he did not provide any support throughout pregnancy and after delivery. She cannot even prosecute him."

Domestic violence

Domestic violence as an emerged theme is one of the

factors teenage girls face and its results include pregnancy, rape and physical harm. This is evidenced in the following recounted in the following narration by a participant. She narrates that they lived happily with father and mother and all education support was provided. However, when her mother started misbehaving, father peacefully went away to live in another place so as to avoid confrontation with mother. Mother then brought another husband and they lived together. When she was chased from school due lack of school fees, her mother told her go to tend cows or till the garden and forget about school. When the mother went to the market, she peeled potatoes to cook; subsequently, the step father came and asked her to go to their bed. She refused. With shame, he came out and beat her. "The knife I was using cut my thigh and I bled." With shame, he called my mother to hurry back home. On arrival, he explained what happened. Her mother fumed and rebuked her without listening to her explanation. The step father immediately retorted that "I should leave and go or mother leaves and goes to another place." Her mother said "go and leave us alone." "Where should I go?" She asked. Her mother replied that she should go to the man in the neighborhood who had previously indicated interest of volunteering to pay for her tuition. Worried about where to go and thinking about

mother's irresponsible decision, she got out of the gate and stood aside weeping without understanding what befell her.

Coincidently, the man who had promised to pay for her tuition was passing by and saw her and asked why she was sad. He went and enquired from her mother. A couple of minutes later, he came back and requested her to go to his home for accommodation as it was already "I suspected his intention of sleeping with me. Since I had no alternative but developed an idea of going with him, but will not enter his house but stay and sleep at the veranda." She said. Reaching his house, she sat at the veranda. The man opened the door and welcomed her in. She refused to enter. Acknowledging her psychological status, he prepared supper and asked her to enter and eat. "I will eat at the veranda." She said. He got annoyed and brought the food to the veranda. Seeing that his intention of having sex with her was failing, he decided to go and buy soda and mix it with sleep tablets/ medicine without her notice. He brought it and gave it to her in a glass.

Immediately after drinking it, she fell asleep and semiconscious for a period of two days. He carried and laid her inside on his bed and quenched his sexual lust. Her mother never made follow-up of her daughter's whereabouts. When she regained her conscious after two days, she never understood the place she was in and whether mother had come to check on her. The man recounted what he did to her. "I got shocked, and run away weeping back to our home. She narrated. When mother saw me, she rebuked me and said go back to where you have been. It was a shocking experience." Puzzled with what to do, she decided to beg for accommodation from an old woman in the neighborhood. It was granted. She managed also to return to school for a while. After one month, she started feeling stomach pain. The old woman took her to a nearby hospital for pregnancy test. Results showed she was pregnant. To her life became meaningless and hopeless. "I decided to commit suicide by drinking some acid." She narrated. Immediately she felt serious pain. The old woman brought her milk to neutralize the consumed acid. She then took her to hospital for treatment. After getting healed. She was forced to get married to the man who molested and sexually abused her. "Whenever I call my father to intervene, he could say I should be patient with the life circumstances." After her husband saw that she was helpless, he started torturing her through beatings. He could even bring prostitutes home and share the same bed with her. Such a humiliating experience made her to leave and accommodate and sustain herself through manual jobs. At delivery she never received assistance from parents or the father of the baby. This narrative indicates serious domestic violence and irresponsibility on the side of parents. It also shows the teenage girls' ignorance of seeking help from the local authorities.

Torture

Both verbal and physical torture were experienced by the participants. In the above narrative, for example, it is highlighted how the participant was tortured by the man who impregnated her. Another participant accounted that when she conceived, she hid the pregnancy for four months without her mother's awareness. When her mother came to know about it, she resorted to verbal torture with abusive, hurting words. She quotes her mother as saying:-"I never sent you to bring children. Support yourself when you deliver. I shall not support you." Such words constantly uttered made the participant decide to leave home and abandon school for two weeks and do house maid work.

Pregnancy concealment

Under this theme, two participants indicated that they lived by concealing the pregnancy before it was known to their parents and at school. For example, one participant narrated that when she knew she was pregnant, she continued studies without revealing it to her mother and school leadership. Her Mother came to know it after four months. She stressed that "when you are in public and pregnancy is visible while a school teenager, you fill unfit. In order to fit in public, you have to hide it. However, when it grows to the advanced stages, you become uncomfortable physically and mentally finally it becomes publicly known.

Legal rights ignorance

Concerning legal rights, all partipants except one were ignorant of their right to justice. Their offenders went unpunished. They did not' understand the legal process of how to file petition against their defilers. In a probing question that asked whether their offenders were legally punished and justice obtained, one participant highlighted that "my offender is living without a problem and I do not know how to start the petition process. Even my parents have done nothing to prosecute him. I wish he can be prosecuted at least for four years." This means that teenagers succumb to sexual victimization and remain silent with adverse effects. Furthermore, parents are not doing enough to help their daughters obtain justice.

Measures to help the out of school teenage mothers continue with their education

Participants' views on what measures can be put in place to help them continue their education was also analysed. Their views are indicated in the following themes: education sponsorship, vocation training, start-up capital,

sponsorship for the baby day care centres to allow room for further studies. The theme of education sponsorship emerged because, majority of participants, conceiving, lost sponsorship from their parents. Through the manual work they did to sustain themselves and their children, they thought the only attainable education was vocational training which takes short time when financially sponsored. In case they obtain sponsorship, the prefered vocational training allows them time to easily get employed as well as attend to their children. Startup capital was also highlighted because they believed that after finishing vocation, they can establish their own business like tailoring where they need to buy a tailoring machine. One participant asserted that "I completed a vocation course tailoring under the African Evangelistic Enterprise sponsorship. But after completion, I do not have capital to buy the tailoring machine."

The above results reveal how the out of school teenage mothers' education is perceived at family, community, school and individual levels. They also show the physical, social, economic and psychological lived experiences, and what can be done to help them attain education. Such results concur with the existing literature. For example, majority of the pregnancies (*demographic information table 2*) were coerced sex, sexual acts from family members and from neighborhoods due to parental neglect, which is in line with findings by Stoner et al. (2019), CLADHO (2016) and Yakubu and Salisa (2018). Similarly, scornful words experienced by the teen mothers such as stupid girl, the girl who did not value herself, etc., support the findings of Kelly (2000).

Furthermore, the findings on lack of counselling and guidance on how to avoid sexual temptations, on counselling after conception and delivery, as well as getting harsh treatment complements Oparah et al. (2019) and Patino and Gordon (2019). The results however, provide unique insights on individual perceived participants' lived experience which is rarely covered in the existing literature as highlighted in the above narratives in the analysis sections above.

Conclusion

This study investigated the teenage mothers' lived experience, view of education, perceived effects of pregnancy, perceived solution to attain further education and the perceived measures to curb pregnancy among teenagers. Using the qualitative method of the case study design with in-depth interviews collected on 5 participants and analyzing data thematically, findings were summarized in the following ways. Teenage mothers viewed their further education as only attainable through vocational sponsored education. Vocational training was viewed as achievable if start-up capital was provided. Formal education was viewed as not achievable because it did not provide time to attend and support their children.

Psychological effects included, depression, loneliness, self-denial, shame, and feeling hated. Social effects included family/parental denial, living a single life (selfaccommodation), loneliness, contempt, scorn, loss of parental affection. Economic effects included manual work for survival, house maid chores, hawking business. Education effects included school dropout, lack of sponsorship for vocational training. The teenage mothers' lived experience was sorrowful and constituted domestic violence, torture, pregnancy concealment, irresponsible parents, legal rights ignorance, contempt, suicide commitment, hard living, and self-accommodation. Education sponsorship, vocation training, start-up capital, sponsorship for the baby in the day care centres were the viewed perceptions that could ensure teenage mothers further their education. Parents should discuss with children. Parents need to know their daughters' needs, advice on men's temptation/tricks, counselling services. Girls' forum discussions. temptation identification, poverty eradication, and punishment of the offenders. Based on the above findings, the study concluded that teenage mothers' further education was attainable through vocational training; pregnancy had psychological effects of depression, loneliness, selfdenial; pregnancy had social effects of parental denial and expulsion; pregnancy had economic effects of hard living and doing manual work for survival; pregnancy had education effects of dropout and study retardation; teenage mothers lived a sorrowful experience of single living without support and suicide attempt while pregnant; solutions to curb pregnancy among teenagers include girls forum discussions, sex temptation identification, parent-daughter discussion, counselling services and offender punishment. Thus, teenage mothers live a sorrowful and unsupported experience that make them academic dropouts.

Implications

This study on teenage mothers' lived experience has provided broad insights into their lived life during pregnancy and after delivery as young mothers. The study has shown how these teenage mothers are affected without concern and attention from their families/parents and the community. Despite the government efforts to return them to school, the life challenges especially single living, cannot allow them to be back in formal schools. This therefore, calls for high attention to make them have brighter future. The study, however, was limited to the case study design and qualitative methods of gathering, analyzing presenting data. Hence a small sample data and area of study, which implies that the findings cannot be generalized. Based on those implications, the following recommendations serve as a back to school framework that ensure teenage mothers fully attain the aspired

education for their bright future.

Recommendations

This study recommends that the government and other funding organizations should identify the vocational study needs of the teenage mothers and sponsor them. Startup capital should be provided by the government, funding organizations and parents to teenage mothers who opt for vocation training so that they get the required equipment to establish their own business. Parents should not expel their daughters because of pregnancy. Instead, they should counsel them and support them with love throughout pregnancy and after delivery. Parents who expel their daughters due to pregnancy should be punished by the law enforcers. Also, parents and the community should help the law enforcement to punish the offenders. Parent-daughter discussions prioritized so as to help girls avoid falling into sex temptations. Girls' forum discussions should established in schools and at community levels and be educated on the reproductive health as well sex temptations. This would help them to be aware of their offenders' sex traps. Law enforcement agencies (RIB, Police, and Prosecution Authority, Community Leaders) should be effective in implementing the prosecution of the offenders. Future studies should use mixed methods to cover a large population of teenage mothers on the same topic in other regions.

CONFLICT OF INTERESTS

The author has not declared any conflict of interests.

REFERENCES

- Abebe A (2020). The key challenges of youth in Ethiopia. Journal of Agricultural Economics and Rural Development 6(11):684-688.
- Atieno L (2019). Adolescents and contraception. What is the way forward? The New Times.
- Avis RW (2016). Methods and approaches to understanding behavior change (Helpdesk report 1389). Birmingham, UK: GSDRC, University of Birmingham.
- Biney A, Nyarko P (2017). Is a woman's first pregnancy outcome related to her years of schooling? An assessment of women's adolescent pregnancy outcomes and subsequent educational attainment in Ghana. Reproductive Health14 (1):1-15.
- Chandra-Mouli V, Camacho AV, Michaud AP (2017). WHO guidelines on preventing early pregnancy and poor reproductive outcomes among adolescents in developing countries. Journal of Adolescent Health 52(5):517-522.
- CLADHO (2016). Report of the rapid assessment on teenage pregnancy. Kigali.
- Coleman R (2017). Gender and Education in Guinea: Increasing Accessibility and Maintaining Girls in School. Journal of International Women's Studies 18(4):266-277. https://vc.bridgew.edu/jiws/vol18/iss4/19.
- Corcoran J (2016). Teenage pregnancy and mental health. Societies 6(3):21.
- Endale GS, Fenta BT (2020). Survival analysis on age at teenage

- pregnancies using parametric frailty models. Asian Research Journal of Gynaecology and Obstetrics 3(1):1-11.
- Enricho DN, Lin C, Latumer HK, Jenya CS, Estinfort W, Wang Y, Juan S, Jian W, Iqbal U (2020). Girls' empowerment and adolescent pregnancy: A systematic review. International Journal of Environmental Research and Public Health 17(1664):1-14.
- Eweniyi IT, Omotere AH (2019). Home environments and preschooler's bullying behaviour. KIU Journal of Social Sciences 5(4):151-158
- Guetterman T (2015). Descriptions of sampling practices within five approaches to qualitative research in education and the health sciences. Lincoln: University of Nebraska.
- Janviere N (2019). Ababyeyi basabwe gucika ku muco woguhishira abatera inda abangavu. Igihe.com.
- Kaphagawani NC, Kalipeni E (2017). Sociocultural factors contributing to teenage pregnancy in Zomba district, Malawi. Global public health, 12(6):694-710.
- Kassa GM, Arowojulu AO, Odukogbe AA, Yalew A (2018). Prevalence and determinants of adolescent pregnancy in Africa: a systematic review and meta-analysis. Reproductive Health 5(195).
- Kauts A, Kaur A, Kaur S (2020). A study of perceptions of psychological and economic determinants of dropouts in the border areas of Amritsar. Studies in Indian Place Names 40(3):3810-3816.
- Koklukaya E (2019). Bride: comes with a price. A visual narrative of Bride exchange and child marriage. A master's thesis. Sabanci University.
- Kelly DM (2000). Pregnant with meaning: Teen mothers and the politics of inclusive schooling. New York: Peter Lang Publishing.
- Laurenzi AC, Gordon S, Abrahams N, Du Toit S, Bradshaw M, Brand A, Melendez-Torres GJ, Tomlson M, Ross AD, Servili C, Carvajal-Aguirre L, Lai J, Dua T, Fleischmann A, Skeen S (2020). Psychosocial interventions targeting mental health in pregnant adolescents and adolescent parents: A systematic review. Reproductive Health 17(65).
- Mang'atu, Kisimbii JB (2019). Factors influencing teenage pregnancies in Kenyan primary schools: A case of Kitui County Kenya. Journal of Entrepreneurship and Project Management 3(4):11-26.
- MIGEPROF (2018). Promotion of girls' education campaign. Kigali: MIGEPROF.
- Mutanganshuro L (2019 October 26). Civil society discusses surging teenage pregnancies. The New Times.
- Mrayan S, Saleh A (2020). Female refugees' perception of children education at Za'atari camp-Jordan. RISE-International Journal of Sociology of Education 8(2):192-212.
- National Institute of Statistics Rwanda (NISR) (2016). Rwanda Demographic and house hold survey 2014-2015 final report. Republic of Rwanda.
- Nsengiyumva E (2019). Umuntu utinyuka Kurebesha umwana amaso mpuzabitsina akwiye kubona amapingu n'imageragere. Igihe.Com.
- Obwoge OR, Okere A, Ndiku C, Koech H, Muruthi C, Kyalo N, Wanjala K, Lulu R (2019). Health related challenges among pregnant teenagers attending Narok County hospital, Narok County. International Journal of Gastroenterology 3(2):35-40.
- Ochiaka RE, Ani NR (2019). Sexual risk behavior among secondary school adolescents in Enugu State, Nigeria. International Journal of Gender and Development Issues 1(8):308-317.
- Oparah CZ, Ukoha CA, Ugonna CE (2019). Assessment of guidance and counselling services in secondary schools for sustainable girl-child education and empowerment in Imo State, Nigeria. Nigeria. International Journal of Gender and Development Issues 1(8):79-86.
- Patino LV, Gordon V (2019). Status of girls' well-being in Florida. Florida: Delores bar weaver policy center.
- Patton MQ (2015). Qualitative research and evaluation methods: Integrating theory and practice (4th Ed.). Thousand Oaks, CA: Sage.
- Peter AT, Emade EM (2020). The effects of parents' reactions towards teenage pregnancy on pregnant teenagers' educational aspirations in secondary schools in Buea Subdivision, South West Region of Cameroun. Asian Journal of Education and Social Studies 7(4):26-40. Doi: 10.9734/AJESS/2020/v7i430207.
- Potgieter C, Zuma N (2019). Female leadership, parental non-involvement, teenage pregnancy and poverty impact on underperformance of learners in the further education and training. HTS Teologiese Studies/Theological Studies 75(4):1-8.

- Raj A (2010). When the mother is a child: the impact of child marriage on the health and human rights of girls. Archives of disease in childhood 95(11):931-935.
- Reseau des Femmes (2018). Rapid assessment baseline on the status and needs of teen mothers in Rwamagana and Burera districts. Final report. Kigali.
- Ridgeway K, Lenzi R, Parker C, Gonzalez-Calvo L, Moon DT, Green AF, Burke HM (2020). 'I married when I was 16... due to poverty, I had no other way': multi-level factors influencing HIV-related sexual risk behaviours among adolescent girls in Zambézia, Mozambique. Culture, Health and Sexuality pp. 1-17.
- Safari JP (2016). Institutional causes of school dropout in Rwanda: Perspectives of community education workers .CEC Journal, issue 2:1-16. https://scalar.usc.edu/works/cec-journal-issue-2/institutional-causes-of-school-dropout-in-rwanda-perspectives-of-community-education-workers?path=index.
- Stavropoulou M, Gupta-archer N (2017). Adolescent girls' capabilities in Rwanda: The state of the evidence. GAGE digest.
- Stoner CDM, Rucinski BK, Edwards JK (2019). The relationship between school dropout and pregnancy among adolescent girls and young women in South Africa: A HPTN analysis. Health, Education and Behavior 46(4):2019.
- Sultana I (2019). Social factors causing low motivation for primary education among girls in the slums of Karachi. Bulletin of Education Research 41(3):61-72.
- Susanti E (2019). Women's knowledge and the role of local female leaders in ending the practice of the early marriage of girls in rural communities of Indonesia. Journal of International women's studies 20(9):13-28.

- Therese MR (2018). Gender-based violence in Rwanda: getting everyone on board. World Bank Blog.
- UNICEF (2018). Girls' education is improving, but not for all girls how can we accelerate change? Geneva: UNICEF.
- UNFPA (2014). Operational Guidance for Comprehensive Sexuality Education: A Focus on Human Rights and Gender. New York: UNFPA.
- Vaz RF, Monterio DLM, Rodriguez NCP (2016). Trends of teenage pregnancy in Brazil, 2000-2011. Revista da Associação Médica Brasileira 62:330-335.
- Viner MR, Ozer EM, Denny S, Marmot M, Resnick M, Fatusi A, Currie C (2012). Adolescence and Social determinants of health. Lancet 379(9826):1641-1652.
- World Health Organization (WHO) (2018). Adolescent pregnancy. Geneva: World Health Organization.
- Xu SV, Azimah MN, Pei ST, Tan KMT, Tohid H, Omar K (2014). Physical and psychological impacts of pregnancy on adolescents and their coping strategies. A descriptive study in Kuala Lumper, Malaysia. Malaysian Journal of Public Health Medicine 14(3):71-80.
- Yakubu I, Salisa WJ (2018). Determinants of adolescent pregnancy in Sub-Saharan Africa: A systematic review. Reproductive Health 15(1):15-22.