

# Peer Influence And Teenage Pregnancy Among Adolescents In Secondary Schools. A Case Study of Mbarara Municipality, Uganda.

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## Abstract



### Background:

Peer influence is said to be stronger during adolescence and teenage pregnancy is on the rise in secondary school teenagers.

### Methodology:

The research questions were answered through self-administered questionnaires, focused group discussions, and interviews. The population was 200 respondents and the sample size was 132 including; 105 teenagers, 15 teachers, and 12 parents. The samples were randomly, conveniently, and purposively selected from randomly identified 5 secondary schools. The study adopted a cross-sectional design and focused on 5 selected schools in Mbarara Municipality. The collected data were analyzed through descriptive statistics and content analysis.

### Results:

The findings of the study demonstrated that negative peer interactions, the timing of sexual intercourse, and unhealthy teen friendships increase the likelihood of teenage pregnancy while positive peer interactions, delayed sexual intercourse and healthy teen friendships decrease teenage pregnancy. The study thus concludes that peer influence impacts teenage pregnancy rates among teenagers.

### Recommendations:<sup>a</sup>

Teenagers monitor and evaluate the suggestions and pieces of advice received from their peers, as well as utilize good peers for positive support; and that teachers, parents, counselors, social workers, and all who work with adolescents, understand and contextualize adolescents' needs and behavior and guide them adequately to benefit from their developmental stage

### Conclusion:

The study examined sexual intercourse among teenagers and the results included sexual history (62.9%), exposure (81%), behavior (92.4%) attitude and beliefs (55.2%), and perception (84.8%).

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## 1 Background:

The study was to evaluate how peer influence relates to teenage pregnancy in secondary school

teenagers in Mbarara Municipality. According to the UBOS (2017) report on Mbarara district, one in every 16 (6%) of girls aged 12 to 17 had already given birth and one in every 15 (6.5%) of girls aged 12 to 17 had ever been in a marriage union. Peer influence is said to be stronger during adolescence, as Ennett and Bauman, (1994) explain how bad company could ruin chances of success, increase chances of depression and fear, and lead to wrong choices in life. Current knowledge on teenage pregnancy has not adequately brought out preceding experiences of growing adolescents.

### Historical Perspective

Teenage pregnancy records vary in geographical, ethnic, national, and other disparities. Rates of teenage pregnancy vary by country, and because of reporting differences, international comparisons can be difficult. However, most teenage pregnancies and childbirths take place in west and central Africa, east and southern Africa, South Asia, Latin America, and the Caribbeans.

In the United States, rates of teenage pregnancy fell steadily between 1990 and 2005, but there was a slight rise between 2006 and 2007, then fell again in 2011 according to Lindberg, Santelli, Desai, (2012). Still, Martin, Hamilton, Osterman, *et al.*, (2015) confirm that in 2015, a total of 229,715 babies were born to women aged 15–19 years, for a birth rate of 22.3 per 1,000 women in this age group, which is another record low for U.S. teens and a drop of 8% from 2014. Jelili, Akindele, and Ojo, (2013) quoted the National Campaign To Prevent Teen Pregnancy (2002) in the USA which reported that “although the following describes the situation in the United States, it reflects some of the realities, faced by pregnant teenagers all over the world” especially the facts that: About 40 percent of teen mothers are under 18 years of age, Children of teen parents suffer higher rates of abuse and neglect than children of older parents, Only 4 out of 10 mothers under the age of 18 finish high school, Nearly 80 percent of fathers do not marry the teen mothers of their children, that only 30 percent of teen mothers who marry after their child is born remain in those marriages, and that Teen marriages are twice as likely to fail as marriage in which the woman is at least 25 years. This raises contention. The same report also confirms that children of teen mothers are more likely to be born prematurely and at low birth weight, raising the probability of infant deaths, blindness, deafness,

chronic respiratory problems, mental retardation, mental illness, cerebral palsy, dyslexia, and hyperactivity (Jelili *et al.*, 2013).

In the Asia Pacific regions, teen pregnancies range up to 43% in Bangladesh, and from 11.1% to 47.3% in Nepal (Jelili, *et al.*, 2013). In 2002, Canada had a pregnancy rate of 33.9 per 1000 females aged 15–19, much lower than the rate that year in England and Wales and the United States. (Langille 2007) records that from 1994 to 2002, the rate of teenage pregnancy declined substantially in both Canada and the United States, but it increased slightly in England and Wales as reflected in the table below. From this, one can conclude, therefore, that Canadian teenagers become pregnant less often than those in England and Wales and the United States but more often choose to terminate the pregnancy (Langille, 2007).

According to (Ayuba, 2012), the prevalence of teenage pregnancy also varies in Africa, for instance in Nigeria, it ranges from 6.2%, in Niger Delta state, to 49%, in South Africa, East Africa (Kenya), Ethiopia, and Sudan, it ranges from 2.3 to 19.2%, 31%, 20.4%, and 31%, respectively (Yohannes, Anteneh&Taleke, 2018). In the 2012 World Health Organization (WHO) fact sheet on adolescent pregnancy, it was estimated that 16 million girls gave birth every year, especially in low- and middle-income countries. Consequently, in these countries, Godding (2008) identifies that complications from childbirth are the leading cause of death among girls between 15-19.

In Uganda however, teenage pregnancy continues to occur unlike in the past, especially following adjustment in the past stringent practices that kept it low. According to a study by the African Network for the Prevention and Protection Against Child Abuse and Neglect (ANPPCAN)'s survey in Orom sub-county, Kitgum district, 25% of households were headed by child mothers following sexual exploitation, as the leading cause of the increase in teenage pregnancies (ANPPCAN report, 2014). Another survey conducted in Mukono Municipality by Child Care and Youth Empowerment Foundation revealed an increase in the number of teenagers delivering in health centers, who were mostly orphans or came from broken families. Thus, with a 25% rate of child mothers, Uganda is among the countries with the highest teenage pregnancies in Africa. This study, therefore, was done following

Table 1. Rates of pregnancy

Rates of pregnancy and abortion per 1000 females aged 15-19 years in Canada, England and Wales, and the United States			
Country	1994	2002	2002 (Abortion rate)
Canada	49.2	33.9	18.4
England and Wales	58.7	60.3	24.1
United States	106.1	76.4	21.7

Source: Adapted from Langille (2007)

these records and unrecorded instances of teenage pregnancy in Mbarara Municipality.

### Conceptual Perspective

#### Adolescence

Adolescence is a developmental period of substantial changes in a social context and social behavior, with the emergence of romantic and sexual relationships, the development of intimate friendships, and the enhanced salience of status among peers (Choukas-Bradley, Giletta, Cohen, & Prinstein, 2017). Adolescence is an enjoyable period (Fleming, 2004), a transition characterized by energy-in-motion, much confidence, and ambition to do whatever, interest in everything (sports, nature, people, music, and books) with less burden, courageousness, competence, and irreverence, with ability to act adaptively in any situation regardless of gender role constraints, resilience, very active/inquisitive and enthusiastic (Brown & Larson, 2009).

However, adolescents are faced with much to explore including soft and hardware pornography everywhere, increased sexualization and objectification of women's bodies, increased availability of drugs and alcohol, more sexual and physical assaults, more vulnerability and fear of being traumatized/rampant rapes, and less freedom to move about alone with limited protected space (Pipher, 1994) as well as adjusting to the growing media demands and other electronic gadgets among others.

Conceptual models of adolescent development emphasize that a central force influencing changes in behavior, affect and physiology is social orientation with prioritization of peer relationships, such that friendships, sexual relationships, and romantic relationships become increasingly salient (Blakemore & Robbins, 2012). With a spike in interest in opposite-sex relationships, adolescents spend more time than children or adults interacting with peers and report the highest degree of happiness

when in peer contexts as well as assign greatest priority to peer norms for behavior (Brown & Larson, 2009). According to (Albert, 2013), this developmental peak in affiliation motivation appears highly conserved across species: adolescent rats also spend more time than younger or older rats interacting with peers, while showing evidence that such interactions are highly rewarding (Doremus-Fitzwater, Varlinskaya, & Spear, 2010).

#### Peer influence

Peer influence describes adolescents' likelihood to behave differently while in the presence or company of their peers than when alone. Thus, peer social context is a key factor in adolescents' risk-taking (Albert, Chein, Steinberg, 2013). For this study, the definition of peer influence was derived from Ambrosia, *et al.*, (2018) who explain that adolescents are notorious for engaging in risky, reward-motivated behavior, that occurs most often in response to social reward, typically in the form of peer contexts involving intense positive affect Ambrosia, *et al.*, (2018). And these include engaging in normative thrill-seeking behaviors like dangerous driving, sexual intercourse without condom use, and drug use as well as foregoing more preventive behaviors that could promote health and safety such as the use of seat belts or bicycle helmets.

This study thus adapted a definition of peer influence as adolescents' tendency to affect each other's choices and decisions, positively or negatively, directly or indirectly. Not surprisingly, peer influence, especially for daring behaviors, becomes a more prominent motivator than parental influence or personal decision-making at this age according to Liao, *et al.*, (2013). This explains adolescents' intense sensitivity to rewarding peer contexts.

Pijl, Frostad & Mjaavatt (2011), identify that before adolescence, a child's friends and access to them are controlled by parents, but in adolescence,

teens begin to select their friends, to spend considerable time with them, and do so without parental supervision. This confirms that in adolescence, teens begin to share more intimate bonds with friends, share personal secrets and feelings, and connect to those with similar problems or situations for acceptance. Nevertheless, while many writers agree that teens look out for peers with whom they share common interests, activities, cultural background, or just attitude towards life, Erikson (1968), adds that oftentimes as they experiment, teens may be attracted to peer groups with very divergent interests.

Peer pressure is often associated with negative outcomes like dodging school, wearing indecent clothes, alcohol, and drug use, however, it can also have a positive influence. Prinstein & Dodge (2008), identify that teens encourage each other to make wise decisions and discourage harmful choices, as well as help adolescents, learn, clarify, practice, and maintain norms for social behaviors, promote socio-emotional competence, inspire hobbies, and guide them in their identity formation as well as establishing autonomy from parents, among others.

Steinberg & Monahan (2007), suggest that peer influence is one of the major contextual factors contributing to adolescent risky behavior. Neuroimaging evidence confirms that peer presence alone leads to greater activation in brain regions concerned with reward processing. In this study, peer influence was viewed in terms of interactions among teenagers, the sexual experiences that become central in their relationships, and the friendship patterns teens establish.

### **Teenage pregnancy**

Teen-age refers to young individuals between thirteen (13) and nineteen (19) years. In this study, this category was described as Teenagers, adolescents, and teens. Teenage pregnancy is when young teenage/adolescent/teen girls conceive after vaginal sex with a man, at any age between twelve and twenty after puberty, and experiencing monthly periods (Carey, 2012). The term in everyday speech usually refers to girls who have not reached legal adulthood, which varies across the world, who become pregnant. The study agreed with both these definitions of teenage pregnancy.

Teenage pregnancies are often termed as unintended (75 percent) and so end in abortion (Guttmacher, 2012). In 2011, approximately 38 percent of unintended pregnancies to teens, ages 15-

19, ended in abortion, and most of the remainder ended with live birth (Ventura, Curtin, Abma, Henshaw, 2012). Nevertheless, the effects extend further than the pregnancy term and birth. Teen pregnancy is a health issue and is associated with negative consequences for both adolescents, and, when pregnancy is carried to term, their children (Curtin, Abma, Ventura, Henshaw, 2013). Pruitt identifies that most teenage mothers drop out of school, live below the poverty level, rarely receive support from teenage fathers, are at a high risk of serious medical complications at birth, and are more likely to have a second child within two years (Pruitt, 1999). Unwanted pregnancy limits their choices on the threshold of adulthood and interferes with their ability to pursue certain career paths.

By early adolescence, most teens are sexually active (emotionally ready to engage in heterosexual intercourse), though they are not ready to become parents (Pruitt, 1999). For many parents, the subject of sex is difficult to discuss; yet sexual feelings are a relatively new experience for the adolescent, and so who needs help understanding and dealing with these feelings. The reluctance and/or inadequacy of parents to equip their children with necessary and factual information leaves a gap for adolescents today to search for inconsistencies.

Eventually, Pruitt concludes that the age-old consequence of teenage sex, unplanned pregnancy, continues to be a risk, as teenagers search for things that enhance their independence from their parents and allow them to be responsible for their behavior (Pruitt, 1999). Their need to belong to a group may substitute for family ties (Pipher, 1994) given that now time with peers seems to be more important than time with family. Thus, successful parenting requires not just instinct, familiarity, and reflexes, but a thoughtful reflection, learning, and nurturing parents' understanding to be able to facilitate their adolescent's development.

This study recognizes that teenage pregnancy is a symptom resulting from the struggle of an adolescent. This is built on Pruitt's explanation that peer approval and acceptance during these teen years are important to the adolescent on which she relies for everything from companionship to understanding. He narrates that social life for adolescents progresses through steps, from a few close friends, of the same sex, gradually to cliques, to include opposite sex, then too nervous affairs (for instance

shy encounters and calls), to experimentation of sex and attraction (Pruitt, 1999).

Thus, Pipher (1994) adds that to adolescents, peers validate their decisions and support their new independent selves, with constant experimenting and checking the important question "Am I okay?". It is a time of deep searching for the self in relationships, and so, cutting teens off from their friends is incredibly punishing. However, while peers can be satisfying and growth-producing, they can also be growth-destroying. A study showed that girls reported how radically their relationships led them to tell lies, sneak around, drink, smoke, have sex, yell and disobey. These choices can be self-destructive but again they feel they are in terrible binds and so only 'nerds' stay close to their parents (Pipher 1994). From this, therefore, early pregnancies can result from trying to experiment and have fun with friends.

Heywood, *et al.*, (2015) advance that adolescence is marked by the full establishment of secondary sexual characteristics and growth slowing, as well as feelings of omnipotence and invincibility, some of which make them vulnerable. The study agrees that during this stage, teens are forming a sexual orientation and identity through concern on attractiveness and peer group approval. Meanwhile, Prinstein & Dodge (2008) continue that as teens want to be autonomous, they stand a risk of making mistakes because abstract thinking and other executive functions are developing but not yet formed. Thus, the study identifies the need to understand adolescents in their physical, emotional, and cognitive stages.

### Theoretical perspective

This section explains the theoretical perspective that explains the context of peer influence in which teenagers live and relate.

### Social learning theory

This theory was posited by Albert Bandura, a living psychologist, born in 1925. According to Bandura (1977), people learn from their observations of individuals or models. He belongs to the school of behaviorism sharing the perspective that observable behavior is a function of one's environment. However, Bandura adds the idea of reciprocal determinism, that the environment and one's behavior cause each other, irrespective of reinforcement or having to perform the behavior. Subsequently, social learning theory explains that norms, attitudes expectations, and beliefs arise from an in-

teraction with the cultural or social environment around an individual. For this study, the theory was used to explain how the social setting of teenagers influences them to get or not get pregnant through their peers, especially that every teen behaves according to the model they have, and the meaning they draw from the observed behavior.

### Psychosocial theory

The theory was proposed by Erick Homburger Erikson (1902-1994), a German-American developmental psychologist and psychoanalyst. In the theory, he explains the psychological development of human beings known as the Psychosocial theory. He proposed eight sequential stages of psychosocial development, with developmental tasks at each and psychosocial crises for the individual. The proposed eight stages of psychosocial development are infancy (from birth to 1.5-year old), toddlerhood (1.5 - 3), a preschooler (3 - 6), schooler (6 - 12), adolescence, young adulthood, middle adulthood, and late adulthood (Erikson & Erikson, 1998).

According to Erikson's psychosocial development, the ego develops through eight stages, each characterized by a basic psychosocial crisis, such as trust versus distrust and intimacy versus isolation. The acquisition of basic virtues, such as hope and love, results from the successful completion of each stage. Basic virtues can be used by the ego to resolve subsequent crises (Erikson, 1964).

Table 1: Stages of psychosocial development

Age	0 - 1.5	1.5 - 3	3 - 5	5 - 12	12 - 18	18 - 40	40 - 65	65
Stage	Infancy	Toddlerhood	Preschooler age	Schooler age	Adolescence	Young adulthood	Middle adulthood	Late adulthood
Ego	Trust	Autonomy	Initiative	Industry	Identity	Intimacy	Generativity	Ego
Crisis	Vs. Mistrust	Vs. Shame	Vs. Guilt	Vs. inferiority	Vs. Role confusion	Vs. Isolation	Vs. Stagnation	Vs. Despair
Basic virtue	Hope	Will	Purpose	Competence	Fidelity	Love	Care	Wisdom

Adapted from Erikson & Erikson (1998)

This study focused on the fifth stage of adolescence which starts at puberty, and the major activity is to search for identity. The onset of puberty is the hallmark of the stage of adolescence to bring about various physical, psychological, and behavioral changes. Hormones are the driving forces behind these events, with testosterone peaking in males and estrogen rising in females. The hormones and the brain structure during adolescence provide the drive for risk-taking to move out of

the boundary of family and to find a new identity (Erikson, 1964).

According to Erikson, the psychosocial crisis of identity versus role confusion results from basic identity versus the lack of basic identity. The virtue is fidelity to the basic identity which can be changed later in life. Adolescents usually reach full physical development at about 18. Puberty and adolescence come with tasks of physical maturation, emotional development, memberships in peer groups, sexual relationships, autonomy about parents, sex-role identity, and internalized morality. Thus, the crises involved include group identity versus alienation, and later individual identity versus identity confusion which involves peer pressure and role experimentation (Erikson, 1968).

This theory represents human development as a product of the interaction between the individual (psycho) needs and abilities and societal (social) expectations and demands. To Erikson, the development of identity involves finding out who we are, what we value, and where we are headed in life. In their search for identity, adolescents experiment with different roles, and when they establish an integrated image of themselves as unique individuals, they establish a sense of identity (Erikson & Erikson, 1998). If not, role confusion results and can be expressed by individuals withdrawing and isolating themselves from family and friends or by losing themselves in the crowd.

Thus, adolescents enter what Erikson called the psychosocial moratorium, which relates to the gap between the security of childhood and the autonomy of adulthood, where a person is free from responsibilities and can experiment with different roles. However, Erikson emphasizes that events of late adolescence trigger an identity crisis, a struggle to create an integrated and unique self-image, through which they try out various behaviors to help resolve questions about sexuality, self-worth, industriousness, and independence (Erikson, 1968). Consequently, those who fail to resolve identity issues, carry the inner conflicts ahead. The challenges of the process of identity formation are considerable for the teen but can be further influenced by the social environment of the adolescent. Identity formation is more likely to prosper in an environment that offers support and security while at the same time encouraging the teen to form independent opinions. This perspective has supported and guided the study to explain and assess the

relationship between peer influence and teenage pregnancy.

### **Contextual Perspective**

Uganda is located in the east of Africa, crossed by the equator, bordering Congo in the west, Kenya in the east, Rwanda in the southwest, Tanzania in the south, and Sudan in the north, making her a land-locked country. According to the 2017 revision of the world population prospects, the total population was 41,487,965 in 2016, compared to only 5,158,000 in 1950. The proportion of children below the age of 15 in 2015 was 48.1 percent, 49.4 percent was between 15 and 65 years of age, while 2.5 percent was 65 years or older. The leading causes of death and disability among Ugandan female adolescents aged 15 to 19 years are pregnancy complications, unsafe abortions, and childbirth. The number of adolescent girls in Uganda, who get pregnant before attaining the age of consent is reported to have slightly increased to 25 percent in the last seven years according to the Daily Monitor of 22nd March 2017. This was attributed to low education attainment among girls of 15 to 19 years, with at least three in every 10 of them having no education and three having only a primary level of education.

In 2011, teenage pregnancy was at 24 percent as confirmed by data from the Uganda Demographic and Health Survey (UDHS) that conducted the 2016 study through the Uganda Bureau of Statistics (UBOS) between June 12 and December 18, 2016. Results continued to identify that adolescent childbearing is more common in rural areas, and that childbearing reduces with the level of advancement in education. The report also confirms that 35% of girls drop out of school because of early marriage and 23% do so because of early pregnancy. In particular, Uganda reports the highest proportion of women giving birth before the age of 20 (63%) and the highest total fertility rate (6.2) in East Africa (UBOS, 2014; UBOS & ICF International, 2012).

According to Rukundoet al. (2015), a study on antenatal services for pregnant teenagers in Mbarara municipality revealed a high risk of teenage pregnancies, limited skills of reproductive health workers to address adolescent-specific needs as well as lack of adolescent-friendly services in Mbarara municipality. Another study on the relationship between peer group influence, alcohol consumption, and secondary school students' attitudes towards school by Mukama (2010) confirmed evidence of

peer influence in secondary school students in the Mbarara district and that students' decisions are largely predicted by their company.

These and other studies conducted on peer influence and teenage pregnancy have shown the prevalence and factors involved in teenage pregnancy although most studies used secondary data (health-facility-based studies). Following the above observations, this study was done in the context of the increasing alterations in teenage relationships and the consequent teenage pregnancies, especially in Mbarara Municipality.

## RESEARCH METHODOLOGY

### Research Design

The study specifically adopted a cross-sectional design in selected secondary schools Mbarara Municipality, because it allowed focusing on a cross-section of respondents in a developmental study at some point, it allowed involvement of a variety of respondents scattered over a wide geographical area, who vary in age, group, tribe, nationality or religion, among others. A cross-sectional survey also allowed the study to be conducted over a specified and limited period, with a focus on one sample selected from a pre-determined population. The study used both qualitative and quantitative research designs, in acquiring and analyzing data. Qualitative methods were used to acquire and explain data for each research instrument used and quantitative methods helped with data for questionnaires.

### Study Area

The study was carried out in 5 randomly selected secondary schools in Mbarara Municipality, located in the southwest of Uganda. Mbarara Municipality is the biggest business town in the western region. It is surrounded by Kiruhuura and Lyantonde districts in the north, Ntungamo district in the south, Sheema, Buhweju, and Ibanda districts in the west, and Isingiro on the east.

Mbarara Municipality is made up of six divisions; Kamukuzi, Kakoba, Nyamitanga, Biharwe, Kakiika and Nyakayojo. The study was conducted in selected secondary schools from each division that were selected randomly to include single-sex and mixed, government and private institutions. According to UBOS (2017) report, and as captured in Rukundo, et al. (2015), Mbarara Municipality has an increased rate of teenage pregnancies with no adequate services. Being a fast-developing area, teenagers are faced with various influences and

lifestyles that differ in attitude, behavior, interpretation, discipline modes, and other aspects that greatly influence the relationships they make and the models they choose.

### Study Population

The term population refers to a group of people that a researcher has in mind from whom information can be obtained (Enon, 1998). Mbarara Municipality consists of Kamukuzi, Kakoba, Nyamitanga, Nyakayojo and Biharwe divisions. At least 40 members were chosen from each. The study population comprised of teenagers, teachers, and parents. These were both males and females, residents in the given area/division. In all, a total of 200 respondents participated in the study with respondents distributed in 25 teenagers, 10 teachers, and 5 parents per division.

## 2 Sample size

The study sample size was determined through the following formula.

$$S = \frac{NP(P)(1-P)}{(NP-1)(B/C)^2 + (P)(1-P)}$$

Where;

S = Sample size

NP = Population

P = Population Proportion Magnitude yielding the maximum possible sample size (50%) = 0.5

B = Sampling error at 5% = 0.05

C = Level of confidence at 1.960

Given the population of 200

$$S = \frac{NP(P)(1-P)}{(NP-1)(B/C)^2 + (P)(1-P)}$$

$$S = \frac{200(0.5)(1-0.5)}{(200-1)(0.005/1.960)^2 + 0.5(1-0.5)}$$

$$S = 200(0.5)(1-0.5)$$

$$= \frac{100}{(199)(0.0006507751) + 0.25}$$

$$S = 200 \times 0.5 \times 0.5$$

$$= 100$$

$$S = 132$$

$$= 132$$

$$S = 132$$

Therefore, the study sample size was 132 respondents.

## 3 Sampling Techniques

The study used both probability and non-probability sampling techniques at different stages depending on the purpose they serve. For Probability sampling, simple random sampling was used so that each one had a chance to be chosen which led to unbiased, objective findings, was cheaper and

time saving. For the teenagers, random sampling allows for many respondents. Non-probability sampling, especially purposive sampling was adopted to identify potential respondents to include, while convenient sampling helped to make use of parents who were near and who could easily be contacted.

The above samples were obtained through the following process

Total population of sample size of a given category X sample

Overall total of sample size of all categories

For teenagers                      For Teachers                      For Parents

$$\frac{159}{200} \times 132 = 104.9 \sim 105 \quad \frac{22}{200} \times 132 = 14.5$$

$$\sim 15 \quad \frac{19}{200} \times 132 = 12$$

## 4 Data Sources

Secondary data was obtained from the available and accessible written content from the library books, journals, online articles, newspapers, and other written publications, which indicated the history of the aspects under study and how much was already known about them. On the other hand, Primary data was obtained from respondents, who included teenagers, teachers, and parents. These gave original and raw data based on experience and reality.

### Research instruments

The study used interviews, focused group discussions, and questionnaires to collect data.

#### Interviews

The data collection process involved personal interviews with teenagers and parents through the use of an interview guide, administered up to saturation level (interviewing until no new information was expected). This tool helped to tap the parents' and teenagers' opinions on the topic under study as well as those parents who would notably read and write or interpret written questions for themselves. This instrument catered more for objective two.

#### Focused Group Discussions

Small focused group discussions were conducted for teachers, to help in observing members' emotions, the reality of the problem under study and to allow free sharing and learning. This helped to reach out to more participants ago and to collect more information from personal experiences. This

was also done up to saturation level, especially for objectives one and three.

### Questionnaires

A Questionnaire is a carefully designed instrument based on the research objectives and questions. To measure the peer group influence, questions were developed from different questionnaires on peer influence and others on teenage pregnancy including the Peer Pressure Inventory (PPI) by Clasen and Brown (Clasen, & Brown, 1985), Interview Questions by Judy Noble (2013), Mukama (2010) and some by Diley Brady especially those that related to how peers influence one another.

### Data quality control

**Validity:** This focuses on the truthfulness of the content and the level upon which the test items used, measure the intended content area (Amin, 2005). According to this study, validity was ascertained through calculating the Content Validity Index (CVI) to ensure that the methods of data collection used were authentic, accurate, and appropriate to measure teenage lifestyles and teenage pregnancy, the areas under study. The validity of the items was based on a score of 0.7 and above. The questionnaires were first given to two experts of Ph.D. level who ascertained validity and the results obtained were computed for each of the questionnaire items. This was done using the following formula:

$$CVI = \frac{\text{Number of items declared valid}}{\text{Total number of items}} \times 100$$

**For Questionnaire for Peer Interactions (QPI)**  
**Questionnaire for Sexual Intercourse (QSI)**  
**Questionnaire for Teen Friendships (QTF)**

$$CVI = \frac{11}{14} \times 100 = 78.6 \quad CVI = \frac{4}{5} \times 100 = 80 \quad CVI = \frac{11}{16} \times 100 = 68.7$$

$$CVI = 0.78 \quad CVI = 0.8 \quad CVI = 0.68$$

The CVI for QPI was 0.78 which means the index was within accepted range. The CVI obtained for QSI was 0.8 which means the index was good. The CVI for QTF was 0.68 which is slightly below average but within close range.

**Reliability:** This refers to the degree to which an instrument used, produces the same results whenever it is repeatedly applied to measure a concept from the same group (Amin, 2005). It involves the accuracy or precision of the measuring instrument. To ensure that the instruments give reliable results for the study with clarity and dependability, the questionnaires were first administered to 20 students from two independent schools (where re-

Category of respondents	Population	Sample	Sampling techniques
Teenagers	159	105	Simple random sampling
Teachers	22	15	Convenient sampling
Parents	19	12	Purposive sampling
<b>Total</b>	<b>200</b>	<b>132</b>	

Sampling frame  
Source: Primary data (2018)

Questionnaire	No. of items	Content Validity Index (CVI)
QPI	14	0.78
QSI	5	0.80
QTF	16	0.68

Source: Constructed by researcher

search was not targeting) and the results were as follows;

The reliability index for Questionnaire for Peer Interactions (QPI) was 0.85 and the reliability for Questionnaire for Sexual Intercourse (QSI) was 0.78 which means good reliability, while the reliability value obtained for Questionnaire for Teen Friendships (QTF) was 0.70 indicating moderate and acceptable reliability.

## 5 Data analysis procedure

Data were analyzed according to the instrument used in the data collection. Data for questionnaires included all the objectives and was analyzed using descriptive statistics of frequencies, percentages, charts, and graphs as well as content analysis. Data from focused group discussions on all objectives were analyzed using generated themes and central responses. Data from interviews was also analyzed using generated themes and central responses. The descriptive statistics were generated using Statistical Package for Social Scientists Software (SPSS) and Microsoft Excel.

### Research procedure

After designing a research proposal in coordination with the Supervisors, the researcher acquired an introductory letter from the School of Graduate Studies and Research, which was presented to the chosen schools in Mbarara Municipality, targeting teens, their teachers, and representatives of parents on the school's Board or Parents' Committee. After acquiring informed consent, the researcher was permitted to access the teens and their teachers, as well as parents to engage. Interviews were

carried out and focused group discussions as the researcher observed the participants. After several discussions and interviews, collected data was analyzed, and interpreted as well as discussed in a research report for all the findings.

### Research ethical considerations

This relates to the protection and sensitivity according to the respondents including their rights, responsibilities, and privileges in their participation in the study. The study ensured confidentiality through sensitivity in handling obtained data, maintaining the anonymity of the respondents, disclosing the intentions and methods of the study, remaining honest and open to learning from the participants' opinions, and encouraging participants to consent voluntarily.

The researcher was mindful of the topic of peer influence as well as teenage pregnancy and how some aspects could be sensitive for individuals and ensured that respect for individuals' privacy was upheld. The Informed consent form and assent form for minors are appended.

Respondents were informed about their rights and responsibilities in participating, for example, to participate voluntarily, to answer without being forced or coerced, to disclose only what they are comfortable disclosing, to remain anonymous, to leave any time, among others. Other ethical considerations included; fidelity (faithfulness), veracity (truthfulness), beneficence (duty of doing good), and non-maleficence (duty to not harm).

### Limitations of the study

The limitations of the study and possible solutions include;

### Reliability Statistics

Questionnaire	Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	No. of Items
QPI	.849	.85	14
QSI	.781	.78	5
QTF	.690	.70	16

Source: Constructed by the researcher

Sensitivity of information – given the nature of the topic, respondents would feel judged, evaluated, blamed, or focused on especially on sexual matters. This was not the intention of the study and so the researcher endeavored to respect the individual opinions and personal space/privacy of respondents. However, some benefits could be the provision of counseling services or making referrals.

Determining reliability for each objective was difficult until the researcher consulted many experts to come up with an acceptable average.

Using descriptive statistics allowed detailed exploration of items but makes it hard to draw conclusive findings.

Questionnaires – although these are very good for data collection, they do not allow probing, clarification, and prompting yet these help explore the topic maximally. However, verbal interviews were used especially on those with lengthy information on the aspects of the study for instance those who experienced teenage motherhood themselves.

The results apply to teenagers who were in school and so may not necessarily be representative of all teenagers in this age group.

### Conclusion

This chapter discussed the methodology of this study including the research design, study area, and population, sample size, selection, and techniques as well as data collection methods and instruments. The data control, research procedure, and limitations are also indicated plus ethical considerations.

### PRESENTATION, ANALYSIS, AND INTERPRETATION OF DATA

The findings however were presented according to the tools and the respondents. Descriptive statistics of frequencies and percentages, tables, charts, and graphs were used to present and interpret the data. Section one presents quantitative responses from teenagers, and section two presents qualita-

tive responses from teachers and parents. In a population of 200, a sample of 132 respondents, 105 were teenagers selected randomly from 5 schools, 15 were teachers obtained conveniently from the 5 schools and 12 were parents approached purposively by the researcher.

### Responses from Teenagers

The study obtained information from 105 teenagers through self-administered questionnaires and the responses were organized to answer the study questions including; “What is the role of peer interactions in teenage pregnancy in Mbarara Municipality?”, “What is the effect of sexual intercourse on teenage pregnancy in Mbarara Municipality?” and “How do teen friendships influence teenage pregnancy in Mbarara Municipality?” as follows;

### Demographic data

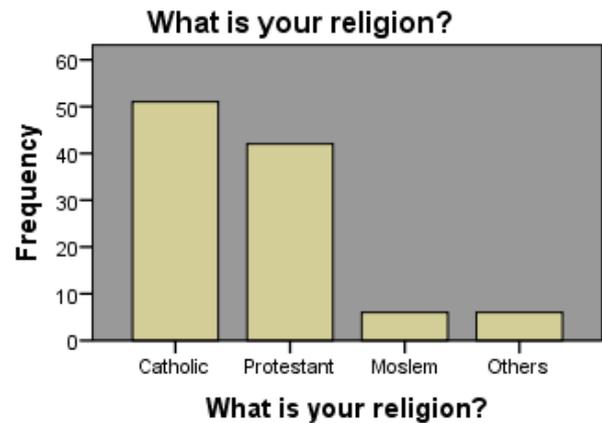
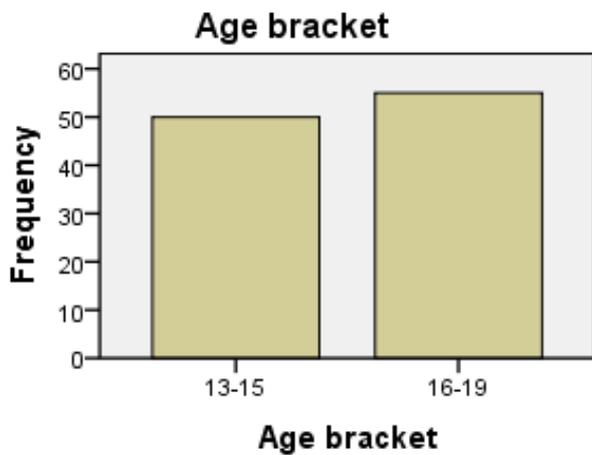
The study focused on only female teenagers especially since they are the ones most affected by teenage pregnancy. Areas assessed included age bracket, religion, class, location of the school, nature of the school in terms of Government-aided or Private, Girls only or mixed-sex in the school as well as whether the school is run by a particular religious group or religion. Each of these areas informs the study in its capacity and gives a background to the information from other parts of the questionnaire. More so, some of these aspects helped to control the moderator variables so that study results are better explained and understood. The table below presents demographic data on teenagers.

## 5.1 Age

The study focused on adolescents in the ages between 13 and 19 and for easy categorization, they were separated into two halves of 13 to 15 for the younger adolescents and 16 to 19 for older adolescents.

Variable		Frequency	Percentage
Age	13-15 16-19	50 55	47.6 52.4
Religion	Catholic Protestant Moslem Others	51 42 6 6	48.6 40.0 5.7 5.7
Class	S.1 S.2 S.3 S.4 S.5 S.6	20 26 30 19 4 6	19.0 24.8 28.6 18.1 3.8 5.7
Location of school	Rural Urban	0 105	0 100
Nature of School	Government-aided Private	55 50	52.4 47.6
	Girls' school Mixed	32 73	30.5 69.5
Foundation	Yes No	67 38	63.8 36.2

Demographic data of teenage respondents  
Source: Primary data, 2019



shows that,(N=50, 47.6%)of the respondents were in the age bracket of 13-15 and N= 55,52.4% were in 16-19. The bar chart clarifies that more respondents were in the age bracket of 16-19. The reason for this is because respondents were chosen randomly and so more from 16-19 age bracket chose to participate than 13-15.

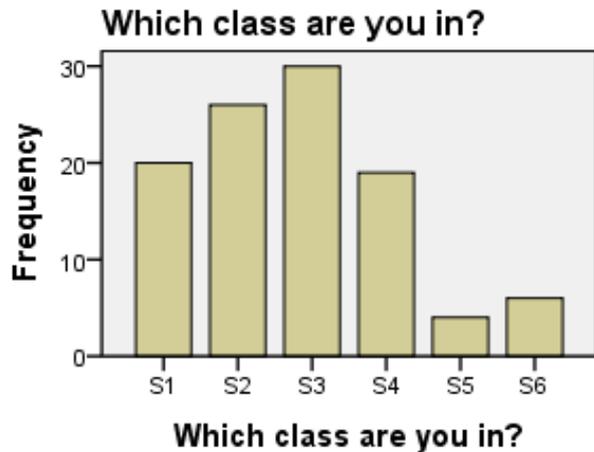
## 5.2 Religion

The study had no specific religion targeted so that responses could be obtained from any religious background. This area was to find out if one's religious background has any power over their choices and behavior especially as amoderator aspect in teenage pregnancy.

From the above presentations in Table 4.1 and in the bar chart above, most (N=51,48.6%) of the respondents were Catholics, some (N=42,40%)Protestants, a few (N=6,5.7%) were Moslemsand others (N=6, 5.7%) from Other religions.These frequencies confirm that more Catholic teenagers participated in the study than did teenagers from Moslem and Other religions. The reason for this was because more schools in Mbarara Municipality are either Church founded or public, and the few Moslem founded schools were inaccessible to the researcher despite various attempts. However, it was realized that in adolescents religion instills morals and provides a way of living that could influence how the individual understands and reacts to peer relationships and to teenage pregnancy.

## 5.3 Class

All secondary level classes were considered and teenagers came from all class levels as shown below.



the chart indicates that many (N=30, 28.6%) teenagers were in Senior three, some (N=26, 24.8%) in Senior two, others (N=20, 19%) senior one, then (N=19, 18.1%) Senior four, while few (N=6, 5.7%) were in Senior six and fewer (N=4, 3.8%) were in Senior five. Using the bar chart above, most of the respondents were in senior three. This can be explained by the study arrangements whereby senior one and two students are in lessons more time, senior three have some reduced subjects and are sometimes outside class while senior four and six are candidate classes who concentrate more on academic exercises and senior five also have a short time to fit in before becoming candidates again. Thus, chances of meeting a senior three student in the compound are higher than in other classes.

#### 5.4 Location of school

This was targeted to compare responses of teenagers in a rural setting and those in an urban setting given the different environments that stimulate them or expose them to various things. However, for this study, Mbarara Municipality provides more of an urban environment and all schools were in the municipality and qualified to be urban. The responses in Table 4.1 above show that all the 105 teenagers were from urban schools.

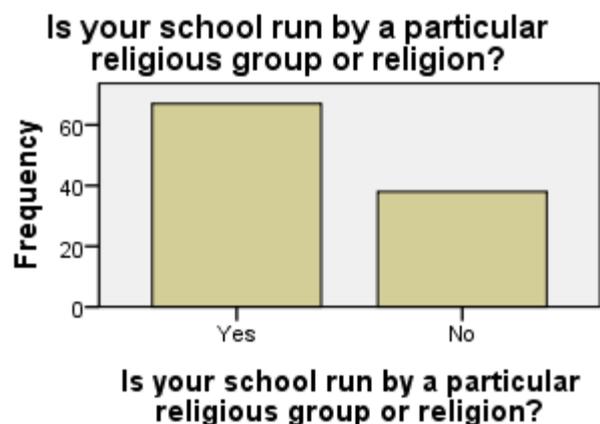
#### 5.5 Nature of the school

This element comprises two categories including the school's governing system (whether Government or Private) and the sex of the student population (if the students are all girls or both girls and boys). Table 4.1 above shows that most (N=55,

52.4%) of the teenagers were from Government-aided schools as others (N=50, 47.6%) were from Private schools. In the other section, more (N=73, 69.5%) were in both sex/mixed schools and others (N=32, 30.5%) in Girls' schools. This is because each divide provides a setting in which teenagers relate, study, grow, and are monitored. For instance, government-aided schools tend to handle students differently than private schools as single-sex schools also differ from both sex schools. In this study, these differences were acknowledged.

#### 5.6 Foundation

This targeted to include all schools despite being church-founded, or those public ones. For example, some are run by religious women and others by laymen and women. This can sometimes determine the student environment and motivation for relationships.



The results in table 4.1 above show that many (N=67, 63.8%) teenagers were from schools that paid attention to a particular religion while few (N=38, 36.2%) were from schools that were public without a particular religious affiliation. The selection was random and so, the researcher intended to include all, however, more religious-affiliated schools had strict entry policies that limited access to the students than public ones.

Considering the results from the demographic data of the respondents, the sampled population truly represents the targeted population given that the characteristics are generalizable to other areas, other teenagers, and other schools. This gives the results strength, adds validity and reliability. The following section of the teenagers assesses responses

according to each study objective to answer the research questions. Major finding per objective is also presented.

Role of Peer interactions in teenage pregnancy in secondary schools in Mbarara Municipality.

In this study, Peer interactions were characterized by mood differences of individuals when in the group, activities that tend to draw peers' attention, choices, and decision-making, as well as attitudes and beliefs. Questions were formulated to assess how teenagers understand and present in real life. The major finding on this objective was that teenagers react differently to their peers despite being around them. The findings were as follows;

The table in 2 above shows that teens respond differently in mood when around their peers presenting that most (N=44, 41.9%) of them feel Very good, many (N=35, 33.3%) feel low, some (N=11, 10.5%) feel high, others (N=9, 8.6%) feel Very bad, and a few (N=6, 5.7%) remain in-check. This means that many feel very good while with their peers while some feel low. This can be related to the individual's perception of others. For this study, it can be taken to imply that the way a teenager feels while around other peers both increases and decreases chances for teenage pregnancy through others' influence.

### 5.7 Choices and decisions

In the table 3 and above, teenagers were asked about standing alone against going by a group's decision and in the findings acquired, (N=49, 46.7%) teens would choose to follow group suggestions and (N=56, 53.3%) would rather stand-alone than follow friends' suggestions. This is related to an individual's tendency to give in to peer pressure. The results imply that on standing alone or with others, it would depend on the issue, as some would choose to stand with others while others equally prefer standing alone.

### 5.8 Decision making

The findings in table 4 and bar chart above indicate how much influence others have on an individual in terms of decisions. It explains how much one would be willing to involve others in their decisions and to let others determine what they do. For this study, many (N= 57, 54.3%) teenagers find that the effect of others on their decisions is Average, some (N=28, 26.7%) find others' effect Very strong, and

the rest (N=20, 19%) find others' effect on their decisions Strong. This could explain why teenagers would choose to do what others are doing yet also want to stand out to be different from others at the same time. The high average results could be used to explain how teenagers relatively go for consultation and also make their own decisions.

## 5.9 Perceptions

The table 5 above presents findings on how teenagers describe adults which explains how they perceive them and how they approach them in time of need or other interactions. In the study, most (N=55, 52.4%) of the teenagers perceive adults as Comforting, some (N=20, 19%) see them as Flexible, some (N=18, 17.1%) describe adults as Disturbing, while few (N=9, 8.6%) describe them as Intruding and others (N=3, 2.9%) as Demanding. In all this, when many adolescents view adults as comforting, it is anticipative of support, guidance, consultations, collaboration and exploration which teenagers need for their experiences and in addressing teenage pregnancy.

## 5.10 Activities

Identifies various activities that teenagers tend to engage in as part of their interactions together. The findings reveal that (N=96, 91.4%) of the teenagers never spend their time exploring alcohol, drugs or smoking. This 91.4 percentage result could be explained by the school environment these teenagers live in and their religious attitudes which tend to preach how bad the practices are on teenagers. However, (N=5, 4.8%) sometimes do, (N= 3, 2.9%) do always while (N=1, 1%) explores them most of the time. The pie chart below further explains these results on exploring alcohol, drugs or smoking among teenagers.

In the findings also, (N=50, 47.6%) of the teenagers confirm that they sometimes talk about movies, songs, novels and other entertainment, as (N=26, 24.8%) always talk about them while (N=18, 17.1%) and (N=11, 10.5%) talk about movies songs, novels and other entertainment most of the time and never respectively. This implies that the activity is sometimes an alternative in teenagers' interactions. The histogram below illustrates the findings on the activity in teenagers talking about movies, songs, novels and other entertainment.

Mood descriptor	Frequency	Percent
High	11	10.5
Very good	44	41.9
In-check	6	5.7
Very bad	9	8.6
Low TOTAL	35 105	33.3 100

Table 2:  
**Mood** of the teenagers when around peers  
 Source: Primary data, 2019

	Frequency	Percent
Yes	49	46.7
No TOTAL	56 105	53.3 100

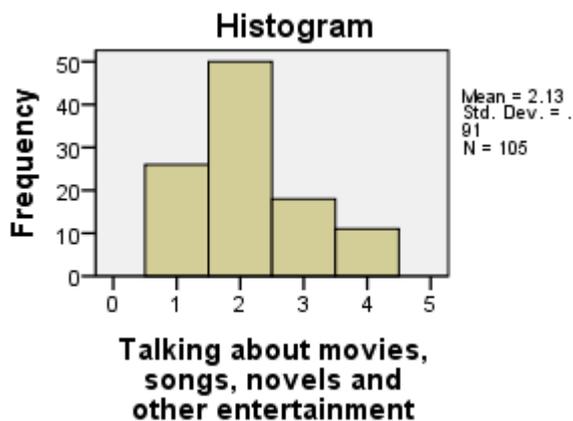
Table 3: Choices and decisions among teenagers  
 Source: Primary data, 2019

Effects of peers on decision making	Frequency	Percent
Very Strong	28	26.7
Strong	20	19.0
Average	57	54.3
TOTAL	105	100.0

Table 4: Effects of peers on decision-making  
 Source: Primary data, 2019

	Frequency	Percent
Disturbing	18	17.1
Intruding	9	8.6
Demanding	3	2.9
Comforting	55	52.4
Flexible	20	19.0
TOTAL	105	100.0

The table 5 Perceptions of teenagers on adults  
 Source: Primary data, 2019



On cracking jokes, findings reveal that (N=52, 49.5%), (N=22, 21%), (N=17, 16.2%) and (N=11, 10.5%), sometimes, most of the time, always, and never crack jokes with each other respectively. This confirms that teenagers’ interactions do not necessarily have to have a structure, but part of the time is spent joking on various topics of their context.

On sharing about boyfriends and having free sex talk, the findings indicate that (N=59,56.2%) never share about their boyfriends, (N=36, 34.3%) do so sometimes, while(N=6, 5.7%) always share about boyfriends, and (N=4, 3.8%) do so most of the time.

	Always	Sometimes	Most of the time	Never
Exploring alcohol, drugs or smoking	3(2.9%)	5(4.8%)	1(1.0%)	96(91.4%)
Talking about movies, songs, novels and other entertainment	26(24.8%)	50(47.6%)	18(17.1%)	11(10.5%)
Cracking jokes	17(16.2%)	52(49.5%)	22(21.0%)	14(13.3%)
Sharing about a 'new catch' (boyfriend)	6(5.7%)	36(34.3%)	4(3.8%)	59(56.2%)
Having free sex talk	6(5.7%)	15(14.3%)	2(1.9%)	82(78.1%)
Discussing academic work (calculations, assignments, past papers)	38(36.2%)	20(19.0%)	45(42.9%)	2(1.9%)
Learning a new skill (like riding, swimming, driving)	17(16.2%)	57(54.3%)	18(17.1%)	13(12.4%)
Playing games (football, cards, chess, hide-and-peek, Spiderman)	17(16.2%)	57(54.3%)	18(17.1%)	13(12.4%)
Adventure	15(14.3%)	50(47.6%)	14(13.3%)	26(24.8%)
Watching Television	48(45.7%)	30(28.6%)	24(22.9%)	3(2.9%)

Table 6 Activities of teenagers  
Source: Primary data, 2019

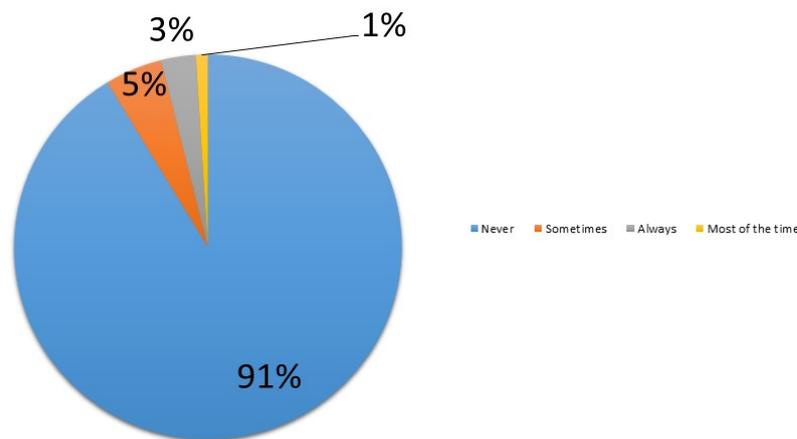
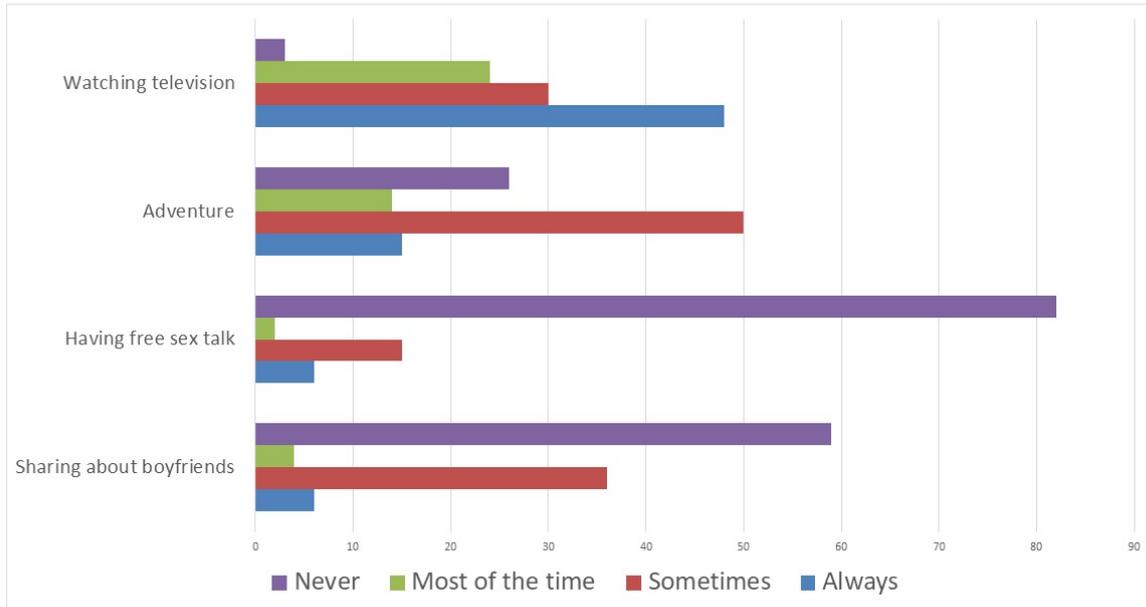


Figure 1. The pie chart explains these results on exploring alcohol, drugs or smoking among teenagers.

This could be because different classes have different ways of relating. For example, being the second term of senior one student to be in secondary school, there could be areas in which they have not explored especially to talk about boyfriends which looked a secret for many.

More so, sex talk findings present that (N=82, 78.1%) respondents had never had free sex talk with peers, (N=15, 14.3%) sometimes do, while

(N=6, 5.7%) respondents always do and (N=2, 1.9%) have free sex talk most of the time. These findings indicate that sex talk is less entertained among teenagers especially openly or freely. Some looked shy about the topic and hesitant to express themselves even in the research process. This was the same across all the different schools. The bar graph below shows the findings on sharing about boyfriends and sex.



**Figure 2.** The bar graph below shows the findings on sharing about boyfriends and sex.

In the graph above also, findings on watching television and adventure are presented. (N=50, 47.6%), sometimes go on adventures, (N=26, 24.8%) have Never, while (N=15, 14.3%) always enjoy adventures and (N=14, 13.3%) do so most of the time. These findings suggest that more teenagers love and engage in adventurous activities which could result from their natural experimentation need and energy-in-motion.

However, findings on watching television indicate that (N=48, 45.7%) always watch television, (N=30, 28.6%) sometimes watch television, (N=24, 22.9%) watch television most of the time and (N=3, 2.9%) never watch. These results suggest that this is an enjoyed activity among teenagers. Details of what they watch however could give rise to unhealthy peer interactions and then teenage pregnancy.

Other findings on academics show that most (N=45, 42.9%) teenagers discuss most of the time, some (N=38, 36.2%) discuss always, others (N=20, 19.0%) discuss academic work sometimes and a few (N=2, 1.9%) never. As students in schools, teenagers attend to school programs for longer hours than other activities. However, the 2 who never, could be using personal study than discussions with peers.

(N=57, 54.3%) enjoy learning a new skill sometimes, (N=18, 17.1%) opt to learn a new skill most of the time, while (N=17, 16.2%) always want to learn a new skill, and (N=13, 12.4%) never enjoy learning a new skill outside academic work like riding a bicycle or a motorcycle, swimming or driving among others. This implies that teenagers pay attention to learning new skills to use in other aspects of life.

In other findings, (N=57, 54.3%) sometimes go for playing games, (N=18, 17.1%) play most of the time, (N=17, 16.2%) play always and (N=13, 12.4%) never engage in playing games. These could be extracurricular games or socially generated games which shape how teenagers relate, follow rules, observe boundaries and respect each other among others. The bar graph below presents findings on academic discussions, learning new skills and playing games.

In all these activities, the findings reveal that whether at school or at home, teenagers have their own issues which are important to them and which they spend time engaging in irrespective of other cultural or societal expectations of them. It was observed during the administration of the research instrument that the respondents had a similar approach to questions despite coming from different backgrounds or schools.

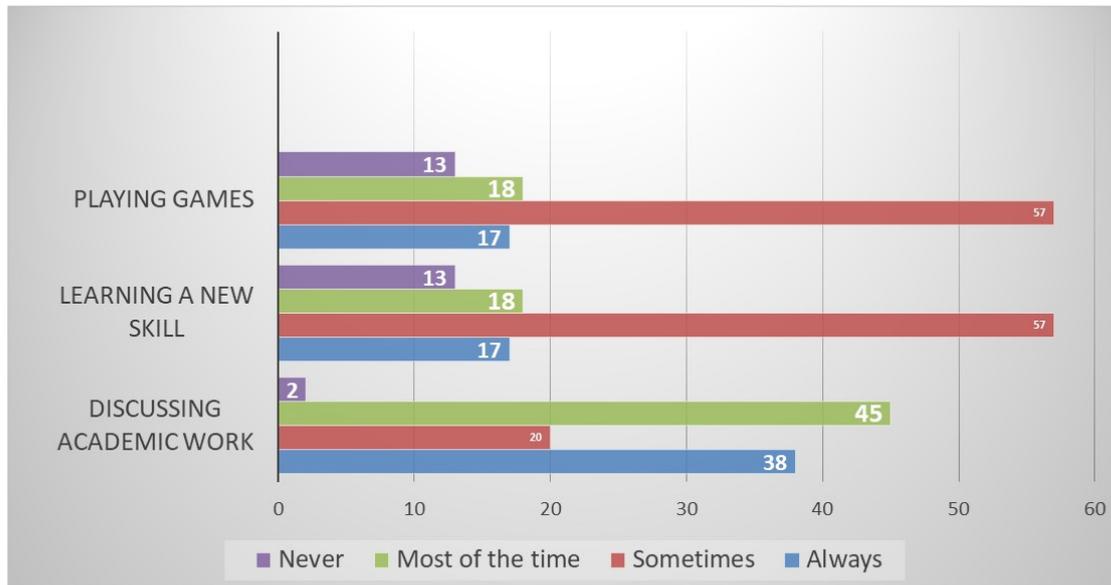


Chart 1. a bar graph below presents findings on academic discussions, learning new skills and playing games.

**Effect of Sexual intercourse on teenage pregnancy in secondary schools in Mbarara Municipality.**

For this study, one’s sexual history was believed to contribute to their attitude, beliefs and behavior which either increase or decrease possibilities of teenage pregnancy. Thus, in this objective, the individual respondent’s own perspective was targeted, and also since the study was on peer influence, one’s friends were involved. The major finding was that not many teenagers are engaging in early sexual activities as it is often concluded basing on their involvement with opposite sex friends, however, those who have had sex below 19 years, and those who have been exposed to sex talks and other exposure to friends, confirm that early sexual involvement among teenagers increases teenage pregnancy. The findings are presented below;

**5.11 Peer sexual history**

The findings in table 7 and the subsequent bar chart show that (N=66,62.9%) of the respondents had none of their friends who ever had sexual intercourse, (N=32, 30.5%) had just a few, (N=4,3.8%) had most of them and (N=3,2.9%) had more than a few who had sexual intercourse. This means many of the respondents’ friends had not had sexual intercourse in the past.

**5.12 Sex talk**

The findings in table 8 illustrated in the bar chart present that most (N=85, 81%) of the respondents have not shared with their peers about sex while some(N=20, 19.0%)respondents have shared about sex. These results mean that a few of the teenagers talk about sex with their friends and many do not, which could result from shyness and treating the topic as a personal matter, thus ending up trying it alone in secret.

**5.13 Sexual history**

As the topic tended to cause respondents to shy away, responses on the individual’s own sex history often led to giggles and side talks during the questionnaire administration process. However, the table below shows responses on own sexual history.

The table 9 shows that more (N=97, 92.4%) teenagers had not had sexual intercourse while only a few (N=8, 7.6%) had had sexual intercourse. This item was to assess the rate of sexual practices among adolescents today and the findings show a low rate.

**5.14 Attitude towards sex**

On attitude towards sex, individuals were asked to rate how they view or think about sex. This would inform the study on teenagers’ understanding of

	Frequency	Percent
None of them	66	62.9
Just a few	32	30.5
More than a few	3	2.9
Most of them	4	3.8
TOTAL	105	100.0

Table 7: Peer sexual history in teenage pregnancy.  
Source: Primary data, 2019

	Frequency	Percent
Yes	20	19.0
No	85	81.0
Total	105	100.0

Table 8: Sex talk among teenagers  
Source: Primary data, 2019

	Frequency	Percent
Yes	8	7.6
No	97	92.4
TOTAL	105	100.0

Table 9: Rate of sexual intercourse among teenagers. Source: Primary data, 2019

sex and evaluate their motivation to participate in it. The table below shows the findings on attitude.

The findings in table 10 indicate that most (N=58, 55.2%) of the teenagers view sex as very bad, while some (N=31, 29.5%) view sex as bad, others (N=9, 8.6%) view it as good and the rest (N=7, 6.7%) view sex as very good. The high results of 'very bad' and low results of 'very good' stem from the strong religious values and morals emphasized by some of the schools and culture.

### 5.15 Others' opinion

Given that teenagers have their own view of elders, this item on parents' opinion of their daughters' actions was to evaluate how the daughters interpret or perceive their parents which could bring out the environment in which the teenager is being raised and her relationship with her parents.

The findings in the table 11 indicate that very many (N=89, 84.8%) parents would strongly disagree with their teenagers having sex, some (N=6, 5.7%) would be neutral if their teenagers had sex, others (N=5, 4.8%) would somewhat disagree, while

only (N=3, 2.9%) would Strongly agree and (N=2, 1.9%) parents would somewhat agree with their teenagers having sex. These results bring out differing parental attitudes towards their children having sex and could represent the parenting styles that their daughters have been exposed to. However, as it appears, many parents would strongly disagree with the idea of their daughters having sex in teenage.

### Influence of Teen friendships on teenage pregnancy in secondary schools in Mbarara Municipality.

In this objective, teen friendships represented friendship patterns, risky behaviors and other health issues that come along with friends. The major findings were that teenage pregnancy is real and many teenagers have seen their friends become victims, and many teenagers agree that the need to show love to a partner is stronger than the fear for pregnancy. These and other findings continue to explain the context in which teens become pregnant through the friendships they make.

10: Attitude towards sex among teenagers	Frequency	Percent
Very good	7	6.7
Good	9	8.6
Bad	31	29.5
Very bad	58	55.2
TOTAL	105	100.0

Table 10: Attitude towards sex among teenagers. Source: Primary data, 2019

**Table 2. 11: Others' opinion of teenage sex**

	Frequency	Percent
Strongly disagree	89	84.8
Somewhat disagree	5	4.8
Neutral	6	5.7
Somewhat agree	2	1.9
Strongly agree	3	2.9
TOTAL	105	100.0

Table 11: Others' opinion of teenage sex Primary data, 2019

	Frequency	Percent
Yes	55	52.4
No	50	47.6
Total	105	100.0

Table 12: Friends who got pregnant below 19 years Source: Primary data, 2019

The table 12 above shows that most(N=55, 52.4%) of the respondents have had friends who got pregnant below 19 years and others (N=50, 47.6%) have not had friends below 19 years get pregnant. This means that more have seen teenage pregnancy happen to their own friends which could have left various lessons for them, good or bad. One could get scared to fear becoming the same, another may have been in the same footsteps, while another may have taken interest, yet another may have hated the whole experience among others.

Other findings were on some of the common risks that teens take with their friends and how they come to explain or defend themselves often. The section was intended to evaluate what teens know about teenage pregnancy, measures they consider and how relevant friendships are to them. A list of statements was given and the respondent was required to evaluate how they feel about it, whether one would have it as an option for themselves or

not. 'Very applicable' meant the statement had more meaning for the respondent, while 'neutral' meant the statement can come later, and 'applicable' meant the statement is above average but moderate. The responses are presented in the table below.

### 13: Risks among teens

Key: 1 – Very applicable 2 – Applicable 3 – Neutral

#### Access to contraception

The field findings obtained indicated that many (N=44, 41.9%) respondents are neutral to accessing contraception, some (N=41,39.0%) felt that having no access to contraception was a Very applicable statement and others (N=20, 19.0%) felt that having no access to contraception which may include condoms and other means was applicable. These results could imply that while some know about contraception but could not access them, others may not know about any contraception and so no access. However, the results could mean that as adolescents in school, access to contraception, though

	1	2	3
Had no access to contraception (including condoms)	41(39.0%)	20(19.0%)	44(41.9%)
I didn't know about contraception (including morning after pill)	23(21.9%)	37(35.2%)	45(42.9%)
Contraceptive failure	24(22.9%)	29(27.6%)	52(49.5%)
Felt too embarrassed/awkward to ask partner to use protection means	32(30.5%)	32(30.5%)	41(39.0%)
Wanted to show I love my partner	53(50.5%)	22(21.0%)	30(28.6%)
Wasn't too bothered about getting pregnant	24(22.9%)	31(29.5%)	50(47.6%)
Thought I couldn't get pregnant at this age	25(23.8%)	28(26.7%)	52(49.5%)
I was in a stable relationship and wanted to start a family	29(27.6%)	10(9.5%)	66(62.9%)
I was in an unstable relationship but I wanted to start a family	16(15.2%)	23(21.9%)	66(62.9%)
Wanted a baby	26(24.8%)	17(16.2%)	62(59.0%)
I wasn't thinking	26(24.8%)	33(31.4%)	46(43.8%)
Felt pressured into having unprotected sex	41(39.0%)	22(21.0%)	42(40.0%)
I wanted benefits (like money, care, house)	45(42.9%)	31(29.5%)	29(27.6%)
I was drunk	33(31.4%)	30(28.6%)	42(40.0%)
We agreed as friends	36(34.3%)	38(36.2%)	31(29.5%)

table 13: Source: Primary data, 2019

a necessary requirement for protection, could be limited physically. The pie chart below illustrates the findings further.

## 6 Not know about contraception

In the table 13, findings on respondents who did not know about contraception (N=45,42.9%), for Neutral, (N=37,35.2%) for Applicable and (N=23, 21.9%) for Very applicable. These results imply that some know about contraception but others do not. Those who selected very applicable and applicable confirm that they do not know about contraception while those selected neutral know about contraception. This can have an influence on pregnancy rates. The bar chart below demonstrates these findings in figure form.

### Contraceptive failure

The results on contraceptive failure in table 13 above show that many (N=52,49.5%) respondents were neutral, some (N=29,27.6%) found it applicable while others (N=24, 22.9%) felt contraceptive failure was very applicable. These findings could be interpreted that the 22.9% think it is very possible for a pregnancy prevention method to fail to work while 27.6% think it is likely. However, 49.5% are in the middle, not sure whether it could fail or not. This knowledge of contraceptive and teenagers' reactions to them is often passed on by friends and peers and this informs the study on peers' knowl-

edge and teenage pregnancy. The Pie chart below illustrates the findings on contraceptives failure.

### Feeling embarrassed to ask partner to use protection means

The respondents in table 13 present with more (N=41, 39%) teenagers feeling neutral about asking their partner to use contraceptive means, others(N=32, 30.5%) feeling that asking their partner to use protection means is very applicable, and others (N=32, 30.5%) also finding it applicable. This can be interpreted that 32 respondents feel asking their partner to use any contraceptive means would be embarrassing as well as the other 32 respondents. However, 41 are undecided whether they could try it or not.

### Wanting to show partner love

The findings for this item in the table 13 present many(N=53, 50.5%) respondents who find the statement 'wanting to show their partner love' very applicable while some (N=30, 28.6%) are neutral and others (N=22,21%) find it applicable. These results mean that many respondents would want to show their partners love before considering other things while some are indifferent. This shows that to show the boyfriend through having sex with him is important for the teenage girl. The bar chart below demonstrates these findings in pictorial form.

### Was not too bothered about getting pregnant

Responses to this item in table 13 are more (N=50, 47.6%) teenagers neutral towards not being bothered about getting pregnant, while oth-

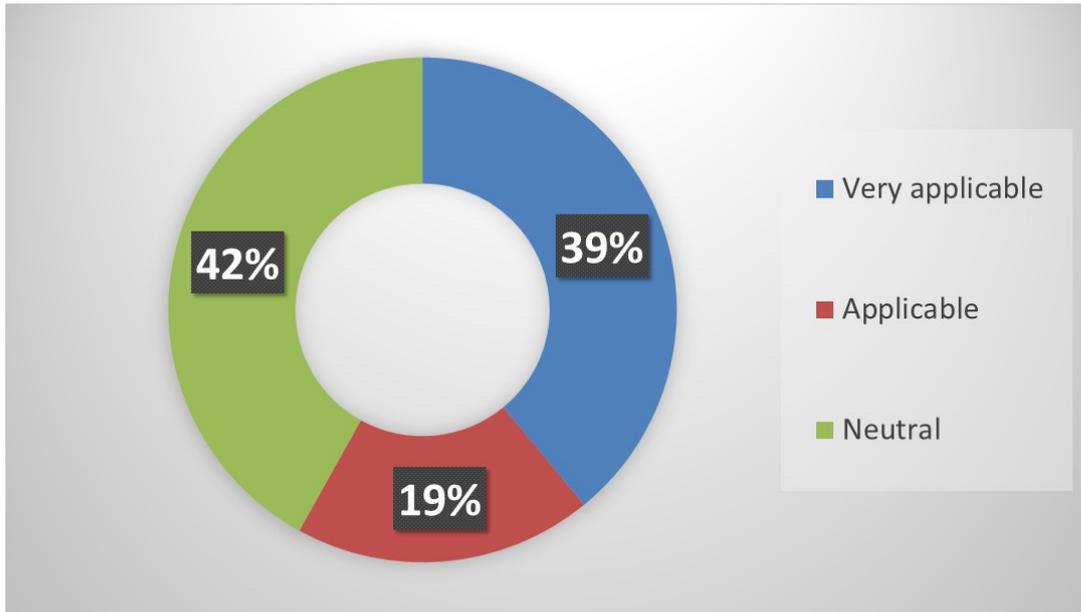


Chart 2. Shows Access to contraception

### Didn't know about contraception including morning after pill

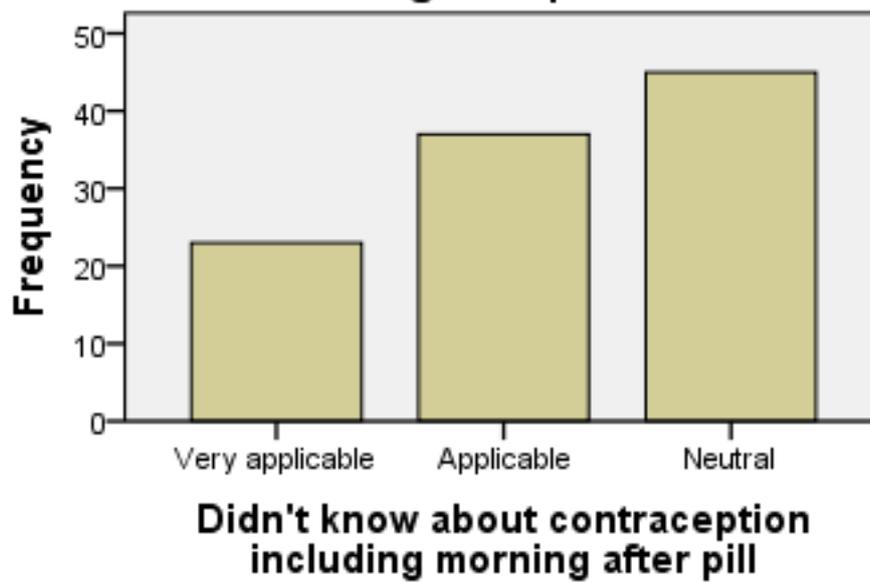
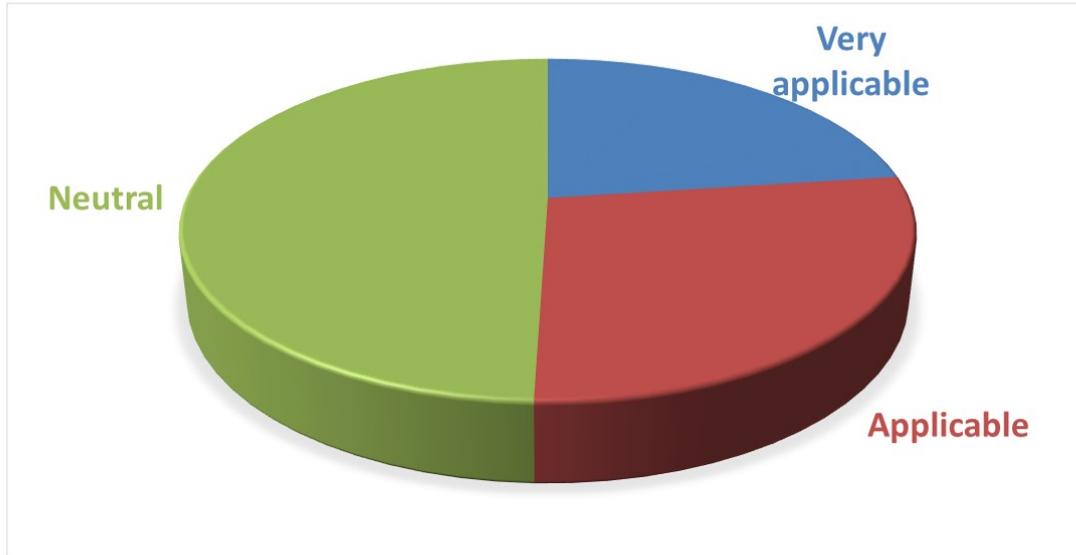
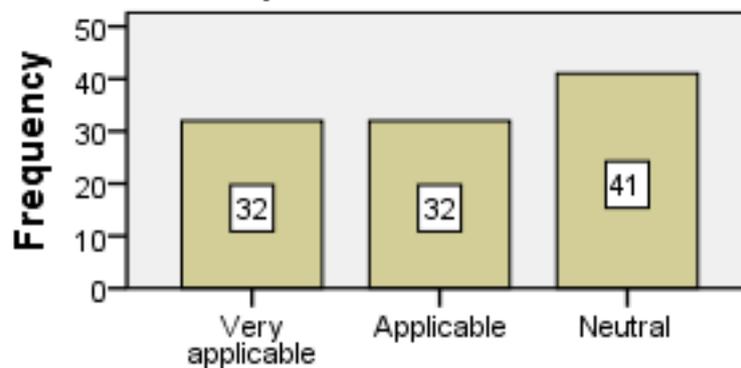


Figure 3. The bar chart below demonstrates these findings in figure form.



**Chart 3.** The Pie chart illustrates the findings on contraceptives failure.

### Felt too embarrassed to ask partner to use protection means



### Felt too embarrassed to ask partner to use protection ...

**Figure 4.** Feeling embarrassed to ask partner to use protection means

ers (N=31,29.5%) chose applicable and the rest (N=24, 22.9%) think the statement not being bothered about getting pregnant was very applicable. This means that 24 would not consider getting pregnant a hindrance to enjoying with a friend, as 31 find it somehow applicable and 50 are undecided, to bother or not to is equal. The bar chart below presents findings on not being bothered about getting pregnant.

### Thought I could not get pregnant at this age

The responses for this statement in table 13 indicate that (N=28, 26.7%) and (N=25,23.8%) think that the statement that they could not get pregnant at their age (between 13 and 19) was applicable and very applicable respectively. However, (N=52,49.5%) are neutral. This implies that many respondents think they are young to be pregnant between ages 13 and 19. In the neutral, it could

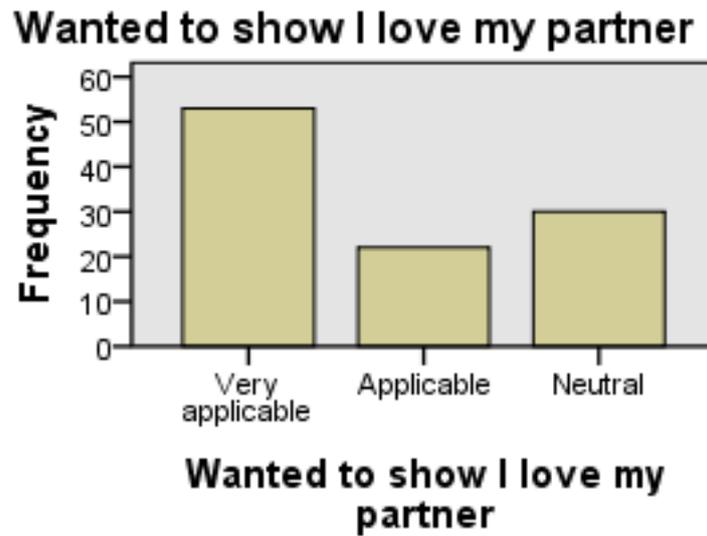


Figure 5. The bar chart below demonstrates these findings in pictorial form.

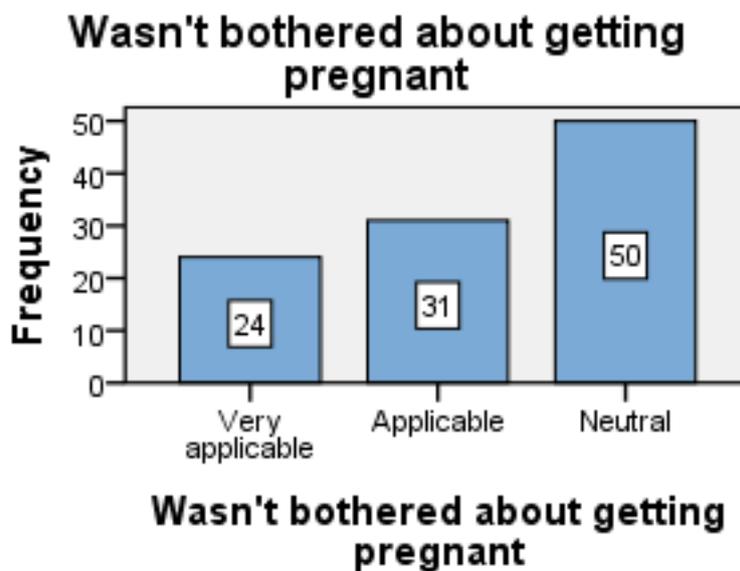


Figure 6. The bar chart presents findings on not being bothered about getting pregnant.

be those who know that it is possible to become pregnant and those who do not know anything. The bar chart below shows the findings on those who thought they could or could not get pregnant between the ages of 13 and 19.

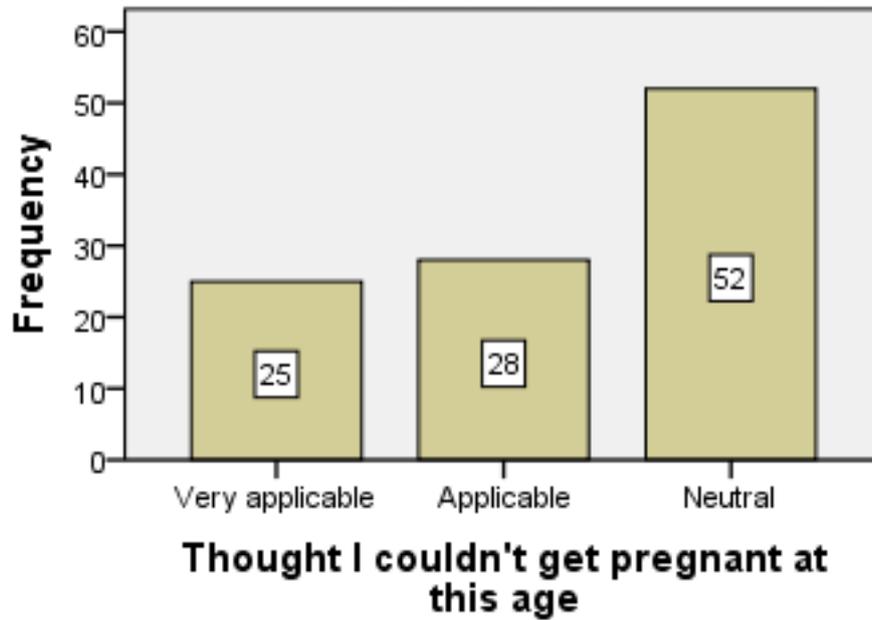
**Was in a stable relationship and wanted to start a family**

The findings on this item as indicated in table 13 show that many (N=66, 62.9%) respondents are neutral, while others (N=29, 27.6%) find the statement very applicable, and the rest (N=10, 9.5%) find

it applicable. This means that more respondents either do not understand the statement or do not find an alternative fitting for them. Some however, think it is possible for them to choose to be pregnant because they feel they are enjoying a stable relationship with their boyfriends and would not mind starting a family immediately. The histogram below demonstrates these findings further.

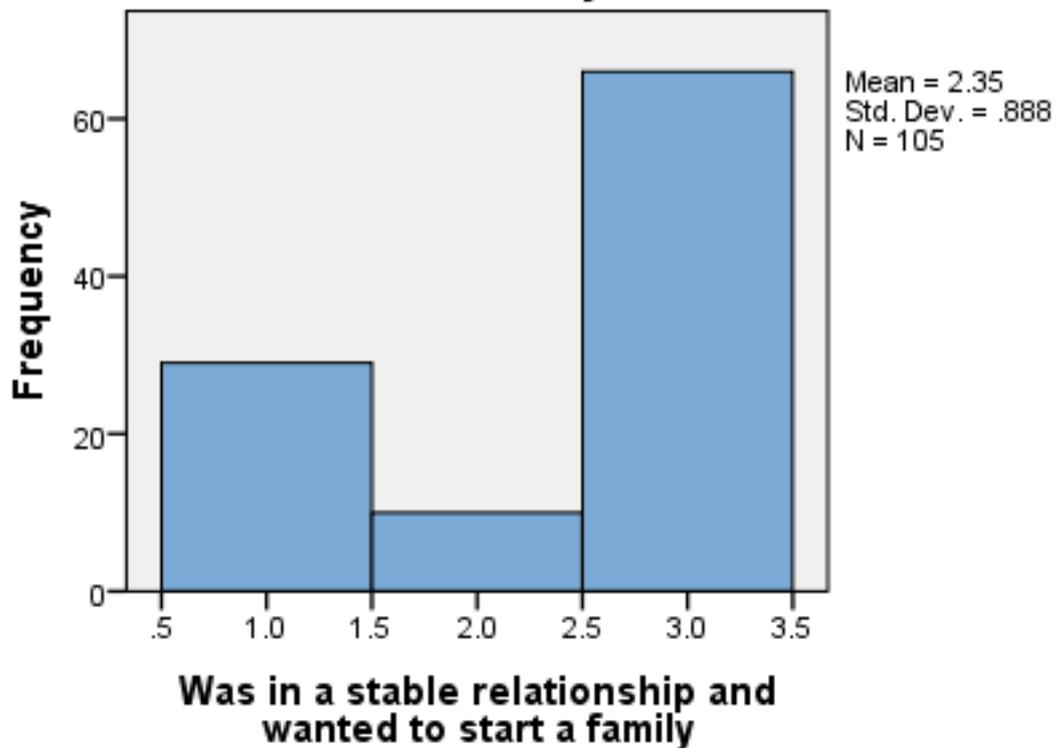
**Was in an unstable relationship but wanted to start a family**

### Thought I couldn't get pregnant at this age



**Figure 7.** The bar chart shows the findings on those who thought they could or could not get pregnant between the ages of 13 and 19.

### Was in a stable relationship and wanted to start a family



**Figure 8.** The histogram demonstrates these findings further.

The findings on this statement show that the majority (N=66, 62.9%) of the respondents were neutral, while some (N=23, 21.9%) found the statement applicable and others (N=16, 15.2%) think the statement was very applicable. These results indicate that some would be willing to start a family with a boyfriend even if they are experiencing an unstable relationship. The neutral ones imply that they opt for a stable relationship or may not understand any better side. The pie chart below elucidates the findings.

#### **Wanted a baby**

The results for the statement above in table 13 indicate that (N=26, 24.8%) feel wanting a baby is very applicable, (N=17, 16.2%) feel it is applicable, and (N=62, 59%) are neutral. This can be interpreted to mean that the 26 and 17 would find it easy to have a baby while 62 are neutral which could be, they would not choose to have a baby or may have other reasons. The pie chart below shows the findings on the statement of wanting a baby.

#### **Was not thinking**

The findings in this item indicate that (N=26, 24.8%) of the respondents would consider this very applicable as a reason, (N=33, 31.4%) respondents find it applicable, while (N=46, 43.8%) are neutral. These findings mean that the 26 and 33 respondents agree that it is possible to become pregnant because at the time they were not thinking well, while 46 are indifferent to mean either it is possible, impossible or they do not know. The histogram below illustrates these results more.

#### **Felt pressured into having unprotected sex**

In the table 13, responses indicate that (N=41, 39%) teenagers feel it is very possible to be pressured into unprotected sex, (N=22, 21%) feel the statement is applicable while (N=42, 40%) are neutral. These findings can be interpreted that the 41 and 22 respondents confirm that one could be influenced by another to have unprotected sex as a result of their friendship or other setting in which they are. However, the 42 are in the middle. The bar chart below shows these responses in figure form.

#### **Wanted benefits**

As shown in table 13 above, (N=45, 42.9%), (N=31, 29.5%) and (N=29, 27.6%) respondents selected very applicable, applicable and neutral respectively. These responses mean that many respondents find it applicable to choose benefits. Some of these benefits could be money, gifts, housing among others.

As it appears, many teenagers would choose benefits. The pie chart below presents these findings further.

#### **Was drunk**

On this item, responses included; (N=33, 31.4%) chose very applicable, (N=30, 28.6%) selected applicable and (N=42, 40%) were neutral. These responses mean that the 33 and 30 agree that one could end up pregnant because they were drunk at the time of sexual intercourse and could not make another decision. However, the 42 either do not agree with the reason or do not know what it means for them. The graph below illustrates these findings.

#### **We agreed as friends**

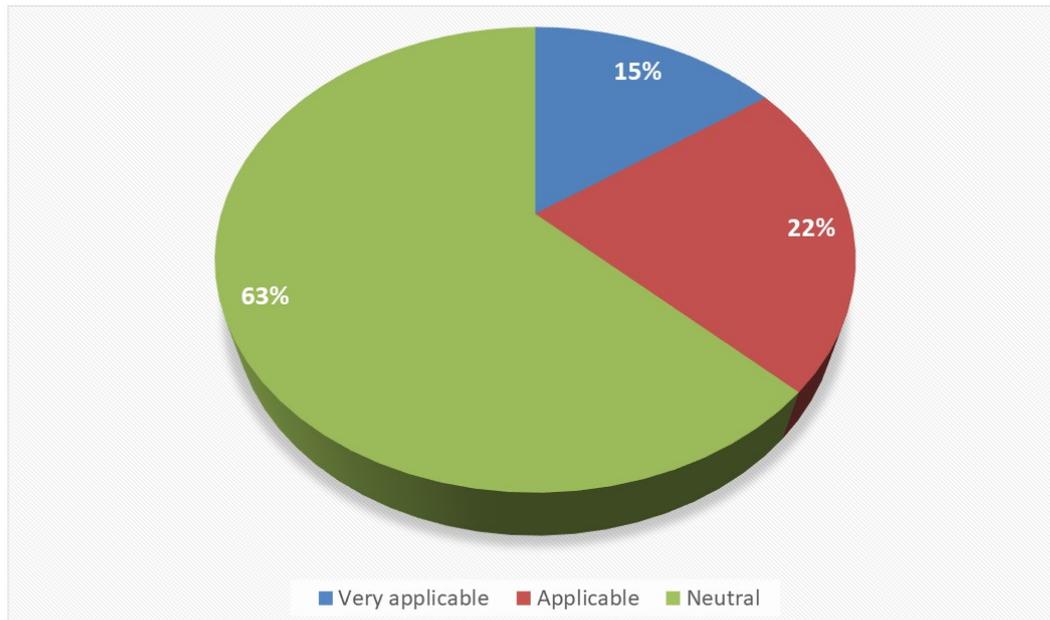
In the table 13, responses for this item showed that (N=36, 34.3%) for very applicable, (N=38, 36.2%) for applicable and (N=31, 29.5%) were neutral. These responses imply that 36 and 38 respondents agree that one could end up having sexual intercourse because they agreed as a group. 31 remained neutral neither agreeing nor disagreeing. The bar chart below shows these results.

Teenagers were also asked whether peers contribute to teenage pregnancy or not and to explain reasons for each. Major responses identified for 'Yes' and for 'no' include;

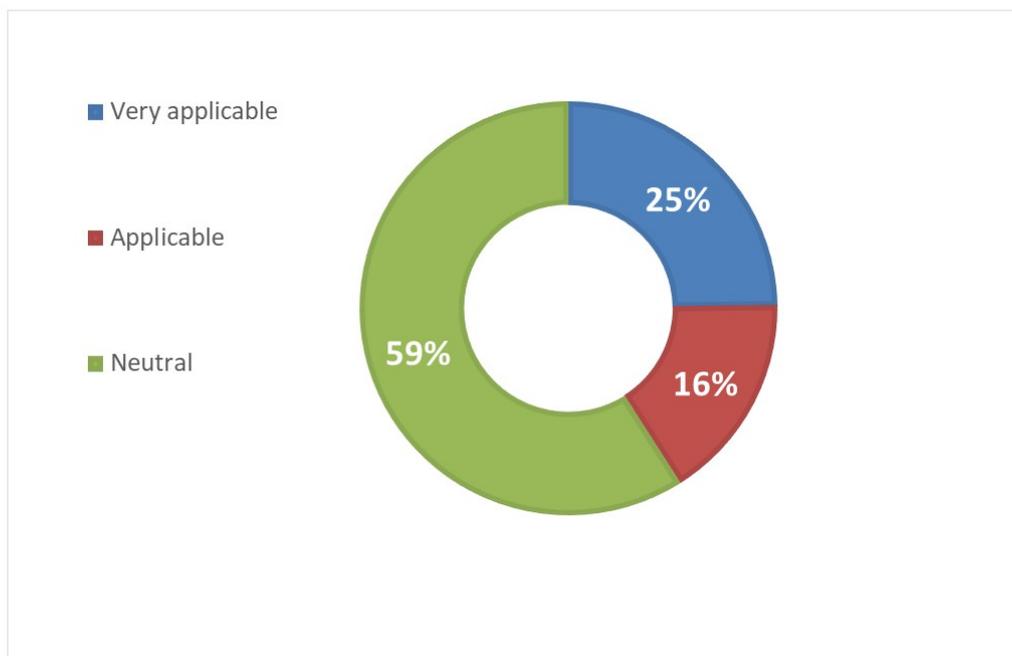
The above table shows responses from teenagers on either side, those who think peers influence teenage pregnancy and those who think peers do not. The responses that were most cited by the respondents are indicated in the table and others which were identified by a few respondents but informing the study include 'teens fear to share with parents for advice', 'some teens come from bad/unhelpful family backgrounds which do not emphasize morals', and that 'some find it hard to control oneself in group settings' among others.

However, the above responses emphasize that many peers give false advice (29.5%), that teenagers are influenced by their peers' pressure (14.3%), others believe peers show example (11.4%) and others that having bad friends increases the chance of teenage pregnancy (10.5%). These responses imply that one's peers can lead to teenage pregnancy.

On the other hand, 11.4% of the respondents share the reason that peers also fear the consequences of pregnancy and so do not contribute for another to get pregnant, 2.9% think that peers are ignorant and end up having sex unknowingly



**Chart 4.** The pie chart elucidates the findings.



**Chart 5.** The pie chart shows the findings on the statement of wanting a baby.

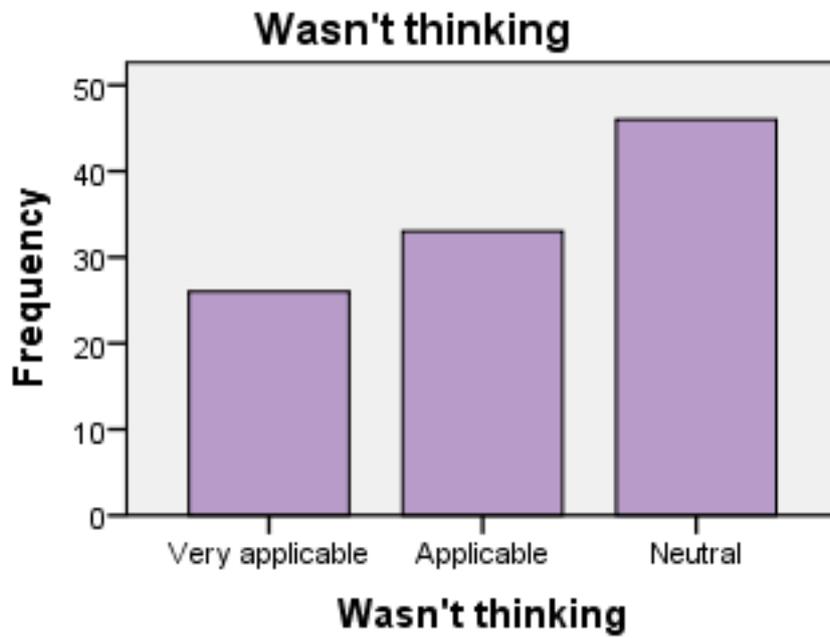


Figure 9. The histogram illustrates these results more.

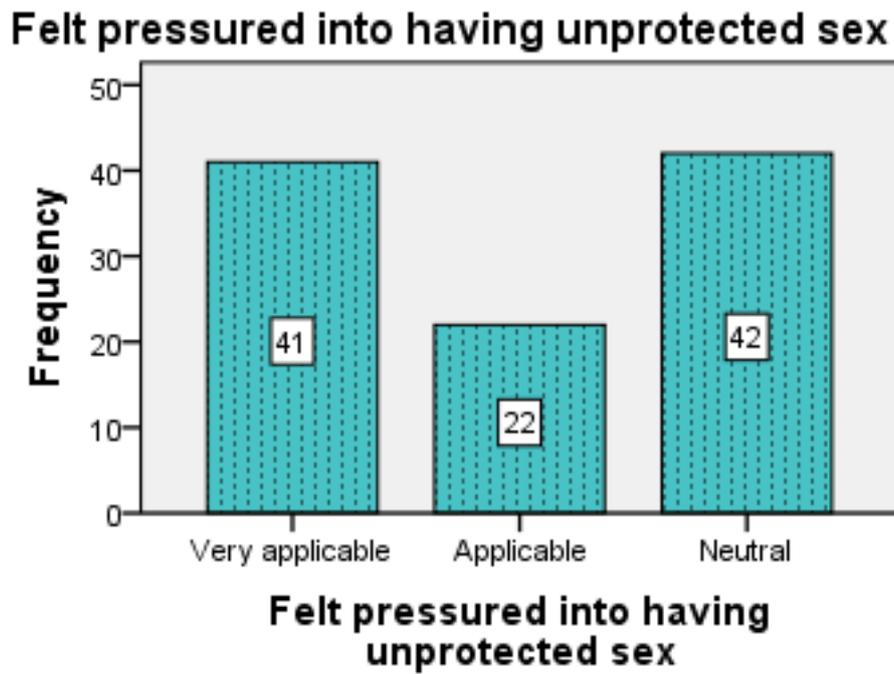
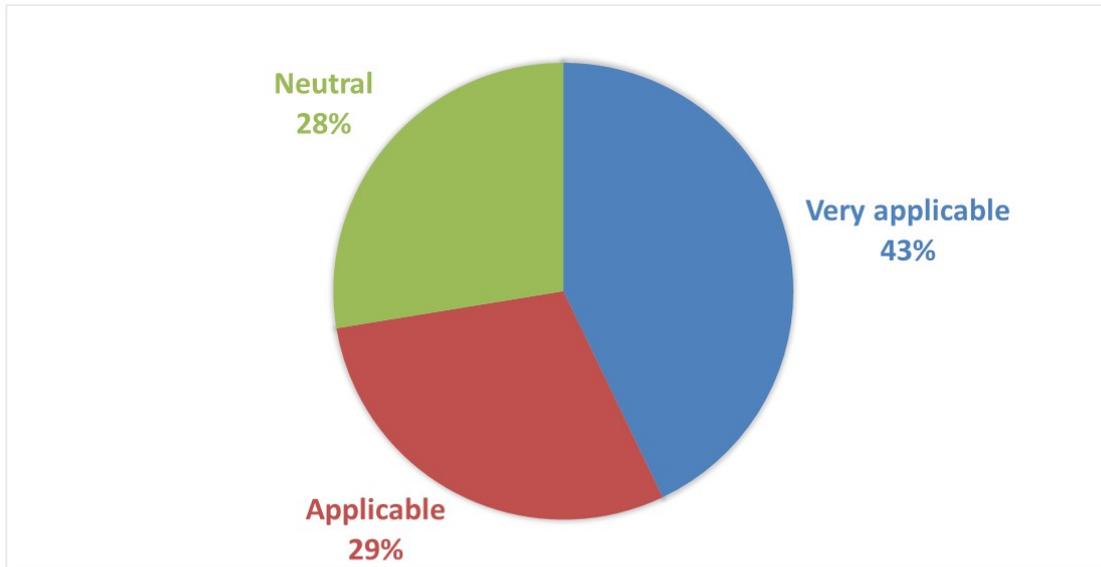
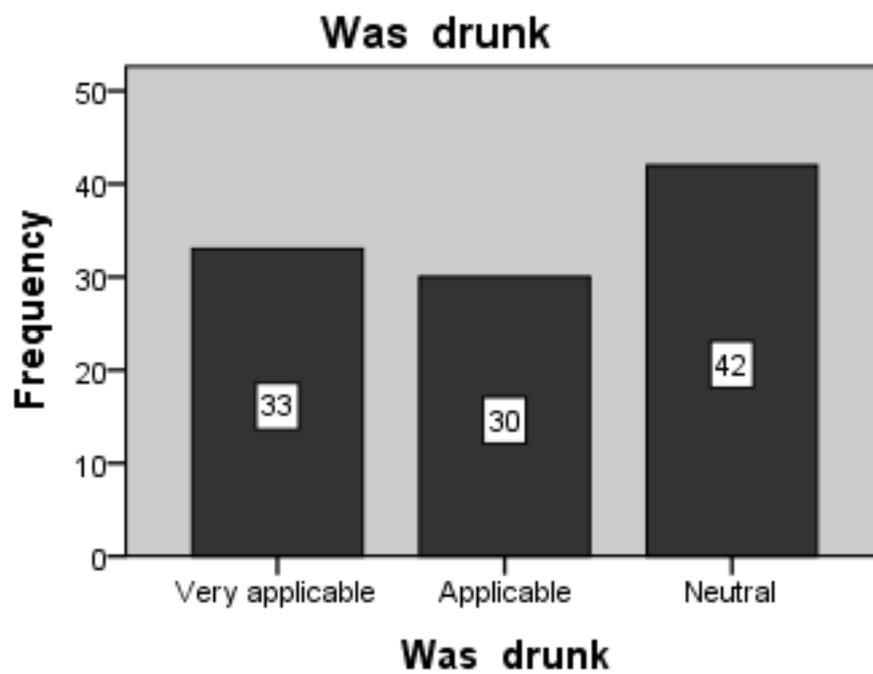


Figure 10. The bar chart shows these responses in figure form.



**Chart 6.** The pie chart presents these findings further.



**Figure 11.** The graph illustrates these findings.

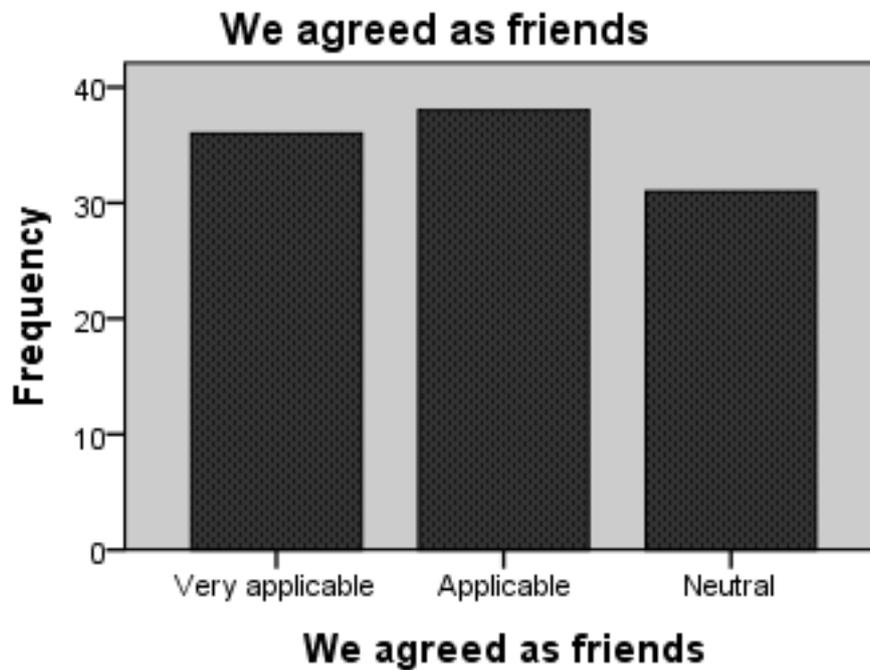


Figure 12. The bar chart shows these results.

**Statement: Peers contribute to teenage pregnancy**

Yes Reason	Frequency	No Reason	Frequency
Teenagers give false advice	31(29.5%)	Peers also fear the consequences	12(11.4%)
Peer pressure	15(14.3%)	Ignorance – peers have sex unknowingly	3(2.9%)
Peers show an example	12(11.4%)	Some teens have learnt pregnancy control means	2(1.9%)
Bad friends increase chances of early pregnancy	11(10.5%)	Everyone has their own decision so peers do not decide for me	2(1.9%)
Lack of money/teens go for money	9(8.6%)	Peers influence but do not force	2(1.9%)
Many peers are uneducated on sex	9(8.6%)	Because of effects like STDs, bad behavior and diseases	1(0.9%)
Peers tell convincing stories	8(7.6%)	I believe it is my life after all	1(0.9%)
Peers give encouragement to have unprotected sex	7(6.6%)	Some teens lack money to meet their needs	1(0.9%)
One fears to be hated and abandoned by friends	5(4.8%)		
Many peers are ignorant of pregnancy control means	4(3.8%)		
Alcohol influence	4(3.8%)		

Table 14: Peers and teenage pregnancy: Source: Primary data, 2019

therefore; it is not their peers' fault. Others (1.9%) suggest that today many teenagers have learnt pregnancy control means and do not need peers to guide them. These responses indicate that peers do not necessarily contribute to teenage pregnancy.

However, basing on the high percentages of peers who say peers contribute to teenage pregnancy, the study concludes that peers play an important role in teenage pregnancy through a guidance, modeling, and expert role for their friends.

At the end, each participant was asked to suggest a measure that could be used to address teenage pregnancy. Some of the suggested included;

The respondents suggested possible measures that could be used to decrease the rate of teenage pregnancy among teens and 35.2% support abstinence from sex, 28.6% support use of condoms, while 23.8% suggest that guidance and counseling be given to teenagers and 20,0% suggest that teenagers avoid bad peer groups among other suggestions. These were more suggested and confirm that teenagers know about dangers of peers and disadvantages of teenage pregnancy.

However, as a researcher some other measures were a shocking revelation and others introduced in new aspects that the study had not foreseen. For example, a few teenagers suggested that 'boys should be given condoms', 'girls should have sex during menstruation periods' that 'schools should expel and punish teenage mothers for others to fear' 'teenagers should be kept at school and at home only' and that 'parents should provide more security to girls especially during puberty'. These and other suggestions portray mature understanding and knowledge of teenage pregnancy, and they bring out the role of peers as the study suggests.

At the end of the questionnaire administration, a few teenagers were interviewed from each school randomly about teenage pregnancy and how it affects an individual. Below are some of the responses obtained from the interviews with teenagers.

In the table above, 10.5% say teenage pregnancy leads to dropping out of school, 9.5% thinks teenage pregnancy affects their body shape, 9.5% think teenage pregnancy would reduce their self-esteem, and other 9.5% teenage pregnancy leads to alcohol and drug use, among others. The responses above describe how teenage pregnancy

has far-reaching effects on the teenager's health, education and behavior.

## 7 Responses from Teachers

Teachers are people who shape, mold, guide and support teenagers especially for the long time that teenagers have at school before holidays. During this time, the researcher believed they could have much positive influence on the teenagers. Thus, the researcher reached out to 15 teachers conveniently selected from the schools where the teenagers attend. At least 3 teachers were selected randomly per school and engaged in focused group discussions. Questions that guided the discussion were addressed to each respondent and responses categorized according to their relatedness to each other. Their responses are reflected below per question, per objective;

### Demographic data of Teachers

The above table shows the demographic data of the teachers interviewed. (N=8, 53.3%) were between 40-50 years, while (N=7, 46.7%) were in the age bracket of 30-40 years. Thus, many were in the age bracket of 40-50 who could have been longer in the profession and so have more experience with teenagers.

Most(N=09, 60%) of the teachers were female while others (N=06, 40%) were male. In addition, most (N=9, 60%) of the teachers were Catholics, some (N=03, 20%) were Protestants, others (N=2, 13.3%) were Moslems and the rest (N=01, 6.7%) were from other religions. The higher number of Catholics is linked to the nature of schools they teach in which are more liberal but occupied by more Christians even in the student body. However, no school among the chosen emphasized only one religion.

### 7.1 What is peer influence?

Members defined peer influence as they understood it, below is the response rate on definition and interpretation of peer influence. Very good was given when the respondent included descriptive words that show peer characteristics, examples and effects. Good includes definitions that lacked backing explanations of peers and influence.

Many (60%) of the teachers explained peer influence adequately. For example, one described it as "the way people who share some quality (like age, class, hobby, interest, school among others)

Suggested measures	Frequency
Abstain from sex	37(35.2%)
Use of condoms	30(28.6%)
Introduce guidance and counseling for teenagers	25(23.8%)
Avoid bad peer groups	21(20.0%)
Teach teenagers about the dangers of unprotected sex and of pregnancy	14(13.3%)
Teenagers should use family planning	12(11.4%)
Use of pills	10(9.5%)
Avoid being alone with a boy in lonely places	9(8.6%)
Sensitizing youth on dangers of early pregnancy	9(8.6%)
Teens should join good clubs like girl guides, netball, music (keep busy always)	7(6.6%)
Sex education should be taught in schools	6(5.7%)
Government should include sex education in the curriculum	5(4.8%)
Avoid opposite sex relationships	5(4.8%)
Parents should give children time and teach advise them	5(4.8%)
Avoid gifts from sugar daddies	4(3.8%)
Adhere to PIASCY messages	3(2.9%)
Teach them to control their feelings and to have self-drive	3(2.9%)
Teens should avoid alcohol use	3(2.9%)
Government should set strict laws against under age sex	2(1.9%)
Parents should give enough needs to their daughters	2(1.9%)

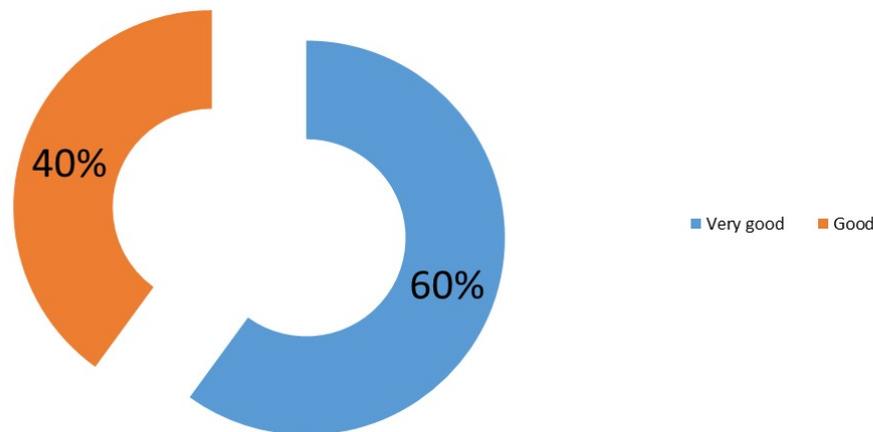
Table 15: shows suggested measures: Source: Primary data, 2019

Teenagers' health	Respondents
Teenage pregnancy affects my body shape	10(9.5%)
It leads to abortion	09(8.6%)
It causes diseases like STDs and infections	08(7.6%)
It leads to fistula and other birth complications	06(5.7%)
It affects body energy and growth	04(3.8%)
When chased from home, it leads to poverty and lack of care	03(2.9%)
<b>Teenagers' Education</b>	
It leads to dropping out of school/expulsion	11(10.5%)
One fails to achieve their career goals	09(8.6%)
It leads to failing exams/bad performance	08(7.6%)
It leads to poor concentration	05(4.8%)
It causes shame among classmates	05(4.8%)
<b>Teenagers' behavior</b>	
It leads to low self-esteem/reduced confidence in public	10(9.5%)
It leads to alcohol and drug use	10(9.5%)
It causes loneliness and lack of friends	07(6.6%)
It leads to shyness	03(2.9%)
It leads to disobeying parents and others elders	02(1.9%)

Table 16: Effects of Teenage pregnancy

		Frequency	Percentage
Age bracket	30-40 40-50	07 08	46.7 53.3
Sex	Male Female	06 09	40 60
Religion	Catholic Protestant Moslem Others	09 03 02 01	60 20 13.3 6.7

Table 17: Demographic data of teachers: Source: Primary data



**Chart 7.** The response rate on definition and interpretation of peer influence.

cause the individual to adjust in their choices, decisions, plans, thoughts among others". Some added that the individual may no longer follow their own ways but consider the group or others' prompts. These explanations were commonly agreed on to represent peer influence.

#### **How do teenagers behave while with peers?**

Teachers identified some of the qualities that describe peer interactions including;

The responses above indicate that (N=13, 86.7%) of the teachers identify peer interactions to include teenagers sitting too close and forming cliques, other (N=13, 86.7%) identified that teenagers talk too much, and (N=12, 80.0%) identified walking together often. Others identified that teenagers visit each other (N=11, 73.3%), share property (N=10, 66.7%) and pay more attention to themselves (N=08, 53.3%) among others. From the above responses, common themes that were derived include observable behaviors of sitting too close and forming cliques, talking too much and walking together. A teacher commented that;

*"Teenagers know how to coordinate in their cliques and take on each other's problems (when one is angry with someone, her friends also become angry on her behalf), they develop strong cohesion and shared emotions, and do almost the same things often, among others. (Interview: Teacher: 27/5/2019).*

These responses continued to expound on qualities of peer interactions which are visible, and which commonly increase or decrease teenage pregnancy.

#### **How goes having sexual intercourse relate to teenage pregnancy?**

In responding about sexual intercourse, findings were;

The above responses show that all the teachers admit that because of sexual intercourse, girls escape from school and dress-to-impress men. 93.3% say girls disrespect older women and have no fear for anything, 86.7% say girls have started walking at night often, while 73.3% say girls have developed negative boldness on sexual issues and use alcohol and drugs more among others. A few teachers think it is very hard to stop girls today from having sex because girls have become too sharp to even approach the male teachers on their own. Some of this, they say, has led to the increase of lesbianism in single-sex schools because of the awakened sexual energy in adolescents. However, the central themes arising from the responses are dropping out of school, dressing as well as disrespect, and having no fear. Generally, teachers concluded that sexual intercourse is growing fast among teenagers and seems hard to control which threatens the future generation in education, their health, and behaviors and puts them at risk of pregnancy.

Response	Frequency
Sitting too close and forming cliques	13(86.7%)
Talking too much	13(86.7%)
Walking together often	12(80.0%)
Visiting each other often	11(73.3%)
Sharing each other's property (like clothes)	10(66.7%)
Limited attention to the environment (focusing on themselves)	08(53.3%)
Sleeping together	07(46.7%)
Advising each other	05(33.3%)
Hugging each other	05(33.3%)

Table 18: Teachers' responses on the role of Peer interactions: Source: Primary data, 2019

Response	Frequency
Girls escape from school	15(100%)
Girls dress-to-impress men	15(100%)
Girls disrespect elders especially fellow women	14(93.3%)
Girls have started walking at night	13(86.7%)
Sexual intercourse has exposed girls to no fear of anything	13(86.7%)
Girls have developed negative boldness on sexual issues (in extreme cases)	11(73.3%)
Girls have resorted to alcohol and drug use	11(73.3%)
Male teachers feel insecure while teaching girls only	9(60%)

table 19: Teachers' responses on sexual intercourse and teenage pregnancy Source: Primary data, 2019

These responses from teachers on sexual intercourse were expressed with much emphasis from the researcher's observation of the participants. However, they introduce the adult interpretation of teenage relationships which tends to generalize most teen relationships with having sexual intercourse. This perspective eliminates the possibility of teenagers being together but not having sexual intercourse. The study findings from the teenagers suggest a low percentage of teenagers who have had sexual intercourse nevertheless.

**What challenges do adolescents find in their friendships?**

Teachers identified challenges which teenagers find in teen friendships. This item was to explore circumstances under which teenage pregnancy starts in teen friendships. The positive elements were discussed but were not targeted since the research was more on teenage pregnancy and the environment in which it comes. Findings on this item included;

Outstanding themes arising from the responses above are that teenagers learn bad behaviors(100%), watch pornography(100%), play addic-

tive games(100%), as well as engage in inappropriate words and touches (93.3%) in their teen friendships. From these, teachers confirm that teenagers drop out of school, conflict with their parents and guardians, take unhealthy decisions, communicate inappropriately and of course become pregnant. These responses continue to explain how teen friendships could contribute to teenage pregnancy.

**How best can this developmental stage be overcome by both teens and teachers?**

The responses indicate that all the teachers advocate for counseling, senior women and men providing girls with time and guidance, occupying students full time, and teachers guiding students all the time on teen relationships while others advocate for strict laws to keep girls from sexual activities (86.7%), and others suggest that teachers keep close to teenagers for them to build trust and to be able to help them in time of need (80%) among others. The responses portray a gap in the way teachers support teenagers outside academic requirements which they too believe contributes to some of the negative consequences teenagers have including teenage pregnancies.

Responses	Frequency
Learning bad behaviors like drinking alcohol, theft, deception and disrespect.	15(100%)
Watching pornography	15(100%)
Playing addictive games	15(100%)
Inappropriate words and touches	14(93.3%)

Table 20: Teachers' responses on teen friendships and teenage pregnancy. Source: Primary data, 2019

Responses	Frequency
Each school should have a counselor	15(100%)
Senior women and senior men should invest more time in supporting the girls to make healthy choices	15(100%)
Schools should occupy the students often to leave them little room to think about unhealthy ideas	15(100%)
Teachers should guide students at all times to keep them from misusing their teen relationships	15(100%)
Each school should set strict measures to monitor girls to not engage in sexual activities	13(86.7%)
Teachers should keep close to teenagers to get them to trust them and to seek for help anytime	12(80%)
Positive aspects of teen relationships should be encouraged (like discussing academic work)	10(66.7%)

Table 21: Measures to support teenagers: Source: Primary data, 2019.

## 8 Responses from Parents

The study interviewed at least 12 parents selected purposely from each school with the guidance of the head teacher or School administrator. The parents did not necessarily have their daughter also as a respondent but were just parents of teens as a primary requirement.

### Demographic data of Parents

The responses indicate a high (58.3%) number of parents aged 40-50, the researcher found these more experienced in parenting teenagers. The study also had more (66.7%) female parents who were chosen because they had more time and passion for teenagers. The findings continue to indicate more (41.7%) Catholics, many (33.3%) Protestants, as well as, others (25%). This is also based on the setting of the parents, like leaving near religious schools, churches and traditional morals.

### How do peer interactions relate to teenage pregnancy?

The results above show that all the parents describe peer interactions as characterized by tendency of the teens to withdraw from the parents and to act quiet (100%), as well as to give more time to their age-mates (100%). 91.7% of the parents also say teens demand for more freedom from the

parents directly or indirectly, and mind about small things which they did not have before like tidiness, smartness, applying makeup among others. 83.3% add that teens begin to see themselves as old and their parents as aging and call them names like 'mukade' (meaning very old).

*One mother expressed how her first daughter started to seek out her friends, to bring them home and to feel bad when the mother tried to come between them. She narrated that the experience hurt her and she always felt like she was losing the previous daughter who was playful, inquisitive, active, loving and open to her mother. However, she came to understand the pattern when the other two daughters acted the same way when they were in their teen years. Today, she reconnected with her first daughter through her marriage arrangements but now the mother is no longer bitter about the daughter's withdrawal from her. (Interview: Parent: 13/5/2019)*

Other parents shared their experiences of their teenage daughters too including one whose daughter had ended up pregnant.

*She explained that the main characteristics she remembers before the daughter became pregnant are; wanting to be left free, wanting to choose on her own, to act in-charge of herself, disregarding family regulations, paying much attention to her looks, dressing-to-*

		Frequency	Percentage
Age bracket	30-40 40-50	05 07	41.7 58.3
Sex	Male Female	04 08	33.3 66.7
Religion	Catholic Protestant Moslem Others	05 04 00 03	41.7 33.3 00 25

Table 22: Demographic data of parents. Source: Primary data, 2019.

Response	Fre- quency
Teens develop a tendency to withdraw from the previous way of relating to the parent and act quiet	12(100%)
Teens give more time to their age-mates	12(100%)
They demand more freedom from the parent	11(91.7%)
They mind about small things like dressing, make-up, tidiness and smartness	11(91.7%)
They describe themselves as old and begin to call the parents 'elderly' (mukade)	10(83.3%)

Table 23: Peer interactions and teenage pregnancy according to parents: Source: Primary data, 2019

*impress, shying away from adult company and opting to walk with peers (for example when going to church or for shopping) among others. (Interview: Parent: 14/5/2019)*

The responses and experiences from the parents report negative peer interactions which have led to teenage pregnancy, stemming from withdrawal of the teenager from the parent to age-mates.

#### **How does sexual intercourse in teenagers affect teenage pregnancy?**

Like teachers, all the parents expressed uneasiness with the ways teenagers are engaging in sexual activities starting from indecent dressing, exaggerated make-up, classy fashions like ('damage' trousers), body presentation and other physical behaviors that teens display around the opposite sex. The outstanding feature from these was problem behavior (in terms of girls exposing themselves for sex behaviorally and indecent dressing. One parent commented that;

*"Children of these days are very different and spoilt. How can a girl of 14 know what sex is! In our days those were far stories but today, children are enjoying everything". (Interview: Parent: 13/5/2019)*

This brings out the pain the teachers expressed in how teenagers are behaving today which seemed worse for the parents on observation. Another parent commented that;

*"Today girls go around playing sex with every tom and dick, young and old, and end up with pregnancy. God knows why children are giving birth to*

*other children. Do they even understand 'love'..... "(Interview: Parent: 13/5/2019)*

These statements reflect a gap between children and their parents today that according to the researcher becomes gradually established and emphasized by the developmental reactions of adolescents, unfortunately this escalates teenage pregnancy. No wonder parents think they are doing enough yet teenagers also seem left in the middle. These gaps were confirmed even in teenagers' responses.

#### **How do teen friendships influence teenage pregnancy?**

All the parents (100%) acknowledge that friends of their teens can be helpful and relevant for support, stimulation and good company, however, all the parents (100%) again feel there are some friends of their teens who have been destructive through inappropriate talks and touches, initiating them into bad behaviors like alcohol and drug use, sexual intercourse, theft, rumor mongering, disrespecting elders among others. In these instances, some parents have taken visible steps to separate some friendships to save for the worst. One parent narrated;

*"I do not mind my daughter making friends with other teenagers, however, when my first daughter disappointed me by misusing the freedom, I gave her to go anywhere, to be with anyone provided she came back home, it hurt me. I let her do what she wanted but who is looking after the child she gave birth to while in S.3..... today if this second daugh-*

ter wants friends, I do not stop her but I have to know who they are and what they do together. (Interview: Parent: 16/5/2019)

The above experiences imply that some teen friendships are good when they lead to positive results over time, but they are also bad when they end in negative outcomes like teenage pregnancy.

#### **How can parents address teenage pregnancy in teenagers?**

The responses on this item present that all the parents realize the need to talk to the teenagers daily (100%), to protect and guard them against bad peers who might lead them into bad behaviors (100%), and each parent to show a good example to them (100%). Other 91.7% of the parents recommend following up on the teens even when it may feel uncomfortable for the parent and 75% suggest that parents should assure their children of love not only in good times but also in bad ones. A few parents suggested taking teenagers to single schools, separating boys' and girls' bedrooms at home, and regulating giving teenagers money (which makes them want to go out to spend it).

One of the parents who were on the Board of the school and highly educated advised that;

*"Parents should learn to prepare to raise children at every stage, parenting is a duty that requires a daily investment of time, resources, values, attitudes, morals, and wisdom. Raising teenagers was not easy for me especially while working because they first dodged me around until I discovered that they were not doing good things behind my back. I started to come back to them and later I do not regret, for I almost lost them to the wrong path".* (Interview: Parent: 14/5/2019)

Another parent weakly explains;

*"What can I do, I cannot lock this old girl in the house anymore, I cannot stop her from being with her friends. On coming home, I find the house full of friends that are discussing academic work, I like that bit but who knows how it ends. . . . . I pray every day that she does not tell me she is pregnant because again I may not bear it. . . . . I have tried talking to her about some friendships, but she does not seem to understand me".* (Interview: Parent: 14/5/2019)

Through participant observation, all the parents expressed worry about how teenage life has turned out today, presenting a helpless desire to see change and surrender to God based on their weak capacity to handle teenagers better to prevent teenage pregnancy.

## **9 Conclusion**

This chapter presented, analyzed, and interpreted study findings according to teenagers' responses (obtained through questionnaires and interviews), teachers' responses (obtained through focused group discussions), and parents' responses (obtained through interviews).

## **10 DISCUSSION, CONCLUSION AND RECOMMENDATIONS**

### **11 Discussion of findings**

#### **Demographic data**

To isolate the other effects of peer influence on teenage pregnancy, teenagers were categorized according to factors that could increase or decrease the risk. The factors included; age bracket, religion, class, location of the school, nature of the school, and foundation of the school. The age component was within the range expected; however, the researcher realized that the responses varied. More 13-15-year-old respondents tended to choose neutral answers and to show indifference. The 16-19-year-old respondents on the other hand had responses that were more thought through and tended to approach the questions maturely. This implies that even though writers emphasize teenagers, even teenagers themselves, differences exist in their understanding of concepts which could be attributed to their level of exposure and stimulation.

On religion, the data obtained corresponds with the nature of schools selected since they all allowed all religions. However, in the researcher's perspective, the schools contained more catholic and protestant teenagers because of their foundation although they were all liberal on religion. For the study, religion tended to intervene especially in shaping teenagers' attitudes towards pregnancy, relationships, and sex, which were important aspects of the study. Data obtained on class showed more senior three teenagers however, on the relevance of responses and approach to answering, senior four to six had more exploratory responses than Senior one and two.

#### **Role of Peer interactions in teenage pregnancy in secondary schools in Mbarara Municipality.**

The key finding in this objective is that teenagers are affected by the presence of others, but other

Response	Frequency
To talk to the children daily	12(100%)
To guard against bad peers who might teach them bad behaviors	12(100%)
To show good example to them	12(100%)
To follow them up even in uncomfortable times	11(91.7%)
To assure them of love in all experiences	09(75%)

Table 24: Parents on measures to address teenage pregnancy: Source: Primary data, 2019

factors play a role in how much the individual becomes engaged or involved with the group. Some of these include religious background (values), attitude, mood, level of relationship among others. To a large extent, adolescence has been depicted as a stage of development where a teenager has limited control over their behavior and outcomes, however, the findings of this study discovered that teens have the potential to determine how much influence they can exert from others if they mean to. This is encouraging in addressing teenage pregnancy through peer influence.

Responses on peer interactions reflected that many teenagers feel very good when around their peers (41.9%), have both capacities to stand alone and to stand in the group (53.3% and 46.7%), tend to experience the average effect from their peers (54.3%), and many of them view adults as comforting (52.4%). These findings confirm that adolescents spend more time than children or adults interacting with peers, and report the highest degree of happiness when in peer contexts as well as assign the greatest priority to peer norms for behavior (Brown & Larson, 2009). From the researcher's perspective, teenagers enjoy each other's company but the extent to which the individual is taken up by group suggestions and decisions stems from among other factors, the environment in the group and the amount of stimulation from others, based on the findings that some naturally will not yield to others' pressure.

The responses also concur with Reyna & Farley (2006) that adolescents possess the knowledge, values, and processing efficiency to evaluate risky decisions as completely as adults as evidenced by the high scores of average effects on individual decisions (54.3%), although group presence was acknowledged as powerful too.

The activities that respondents selected indicate that many teens spend much time watching television(45.7%), discussing academic work(42.9%), and

talking about movies, songs, novels, and other entertainment (47.6%). Others often spend time on jokes(49.5%), on learning new skills(54.3%), on playing games (54.3%)and on adventure(47.6%). All these are activities that happen more in groups or pairs than for an individual. The findings expound on the idea that teenagers want to be free, to be with each other, and not to be directed on what to do often as reflected also in the 91.7% of the parents who say teens demand more freedom from their parents. However, some activities are either not talked about openly or left to be addressed only with specific individuals, especially sex topics as seen in the high scores on no sex talk 78.1% and 81.0% teenagers respectively. According to Pipher (1994), peers validate their decisions and support their new independent selves, with constant experimenting and checking the important question "Am I okay?". Through peer activities, teenagers mirror themselves and adjust accordingly.

When teachers (53.3%) and parents (100%) complain of how teenagers withdraw to themselves, during their interactions, it explains Donelson's assertion that during the pubertal period, the time parents and children spend together, their emotional closeness and children's yielding to parental decisions all decrease (Donelson, 1999). However, the results on teenagers' attitudes towards adults suggest that teenagers view adults as comforting(52.4%). This can be a positive element that parents and teachers could utilize to guide teenagers' interactions.

The findings also confirm a relationship between peer interactions and teenage pregnancy gave indecisiveness(where those on whom others' effect was very strong 26.7%), and negative perception towards parents and other adults (those who viewed adults as disturbing, 17.1% and those who find them intruding 8.6%) who could help guide. Pruitt (1999) explains that teenagers, however articulate they may be in other areas, can be notoriously inar-

articulate when it comes to putting forth their perspective, needs, and purposes to their parents, yet they will find it easy to communicate them to their peers who may not necessarily give the productive interpretation. In such instances, the researcher predicts high chances of incorrect decisions and inappropriate judgment on issues that could lead to teenage pregnancy.

#### **Effect of sexual intercourse on teenage pregnancy in secondary schools in Mbarara Municipality.**

The major finding on this objective was that while adults view teenage relationships as basically sexual, the study discovered that many teens are relating with the opposite sex but not having sexual intercourse. Looking at the adolescent's behaviors around the opposite sex, one may quickly conclude that they are sexually active with their body makeup, dressing, stylish walking, and other visible gestures. On a lighter note, teenagers feel the energy but express it differently.

The study evaluated respondents' sexual history and the data obtained showed that very few teenagers had had sex themselves (7.6%) and their friends as well (62.9%). This contradicted what the teachers and parents reported. The latter think many adolescents have had sexual intercourse (for instance in the interview:13/5/2019, the parent commented that "Today girls go around playing sex with every tom and dick, young and old...") while self-reports from teenagers indicate quite a few have had sex. Nevertheless, the researcher acknowledges that this was a seemingly sensitive self-report on the side of teenagers especially since many expressed discomforts to share more about their status in terms of sex in the interview.

Nevertheless, the few who were willing to talk more about their status, who had had sex in the past (7.6%) confirm what Pruitt posited, that teens who have early sexual intercourse often report peer influence as a reason behind their decision (Pruitt, 1999). In the name of 'everyone else is doing it and that they did not want to be left out, indeed they say they were simply curious about sex and wanted to experience what everyone had been talking about to them. Some, however, had other reasons that led them to have sex including alcohol and defilement.

On the other hand, the low rate of engagement in sexual activity by the teens could result from increased exposure to preventive means (like con-

doms), to dangers (like pregnancy) involved, and to peer management (relating skills) all of which are encouraging for the study.

Responses on sex talk showed that very few teenagers (78.1% and 81.0% respectively) had spent time talking about sex. Pruitt (1999) clarifies that the subject of sex is difficult to discuss; yet sexual feelings are a relatively new experience for the adolescent, implying that teenagers tend to reserve the topic for themselves alone in the security of their company.

Many teenagers also reported negative attitudes toward sex (55.2%), which the researcher linked to the setting of their schools and the native culture where adults describe sex as bad. This is further derived from the parents' lamentations about girls having sex below 19 years, explaining that sex should be unheard-of among teenagers. However, Erikson (1964) identifies that the onset of puberty brings about various physical, psychological, and behavioral changes with hormones as the driving forces behind the adolescents' experiences (testosterone and estrogen). This attitude, according to the researcher, has only been built but the developmental components lead teenagers to want to experiment on something named 'bad'.

The findings from teenagers on parents' opinion of sex in teenagers showed strong disapproval (84.8%), as well as findings from the parents themselves and teachers. These explain the structure surrounding teenagers in which opposite-sex relationships are painted 'bad'. According to Pipher, adolescence is a time of deep searching for the self in relationships, and so, cutting teens off from their friends is incredibly punishing (Pipher, 1994). The researcher agrees with the parents and teachers only to the extent that sexual intercourse should be delayed but disagrees on the level of attitude and unmanaged sexual relationships. These findings however show that sexual intercourse directly leads to teenage pregnancy.

The findings from the interviews with teenagers also showed that early initiation of sexual activity is under reported because of the attitude which participants held towards the behavior.

#### **Teen friendships in teenage pregnancy in secondary schools in Mbarara Municipality.**

Key findings in this objective indicate that the level at which teenagers relate as friends determines how they conform and adapt to their friends' suggestions. The study confirms that on many occa-

sions, teenagers do not choose their certain behaviors, but are compelled by loyalty to their friends. Thus, the qualities of the friends have a bearing on what the individual chooses to do. This is informative of teenage pregnancy, especially how the individual would react differently to their own choice while alone, and how their attitude towards alternative changes while in the group setting.

Findings on friends of the respondents who had been pregnant below 19 years indicated that more teenagers had seen their friends become pregnant below 19 years (52.4%). This finding supports the study in confirming the prevalence and rise of teenage pregnancy among adolescents today. Each school had its own experience of pregnant students as well as reports from the teachers and parents. Indeed, teenage pregnancy is real among teenagers and is worth the effort, to prevent others from falling victims.

The study found out that many teenagers are driven by a strong need to show love to their partners (50.5%) through the friendships they form and care little about pregnancy. This shows the more loyalty they have towards friends than others. Pipher explained that adolescents are entering a new land, a dangerous place that parents can scarcely comprehend, turning away from their parents to befriend their peers, who are their fellow inhabitants in that strange land, who share a common language and a set of customs and embrace the junk values of mass culture (Pipher, 1994). This suggests that friends are more relevant for teenagers.

Findings on motivations for sexual intercourse leading to pregnancy showed that teenagers enjoy being given gifts, money, and other benefits(42.9%). According to the researcher, these breed competitions and set some standards among peers while strengthening some friendship ties. Albert, Chein, & Steinberg, (2013) describe that teenagers spend a remarkable amount of time in the company of other teenagers and this fundamentally alters their calculus of risk-taking as seen in peer context decision making on alcohol and drug use, unprotected sexual activity, violent and nonviolent crime, reckless driving among others.

In other items, the study findings explain that some teens suffer pregnancy as a result of drinking (31.4%), agreeing as friends(34.3%), of having unprotected sex(39.0%), of feeling embarrassed to ask their partners to use protection

means(30.5%)and being in a stable relationship with their friends(27.6%) to end up with pregnancy. These point to the level of influence teens exert from their friends and some patterns, attitudes, and risks that teenagers go through, which lead to teenage pregnancy.

The study findings also agree with the study theories in terms of expressing the characteristics of adolescence especially physiological changes (through hormones), attractions to the opposite sex, awakened sexual desires and thoughts, separation from parents, and establishment of peer relationships. Erikson describes adolescence as a time of great change: when the body and the sexual organs mature, new expectations for social and academic adjustments arise, and self-image is adjusted. Therefore, both of the study theories are valid in explaining adolescent experiences.

On contraceptives, the findings agree with Kirby, (2001) that peer norms tend to affect one's sexual and contraceptive behavior. This means that teens who supported contraceptive failure(22.9%), or no access (39.0%)or not knowing(21.9%), could have chosen any based on their peers' preference.

### **Conclusions**

Based on the study objectives, the study concludes with the following;

The study investigated characteristics of peer interactions as seen in mood adjustments (41.9%), choices (49%), decision-making (54.3%), perceptions (52.4%), as well as joint activities and concludes that these qualities play a significant role in teenage pregnancy depending on how the teenager engages with peers in positive or negative ways.

The study examined sexual intercourse among teenagers and the results included sexual history (62.9%), exposure (81%), behavior (92.4%) attitude and beliefs (55.2%), and perception (84.8%). Although the findings show low effect for teenagers who have not had sexual intercourse, the few responses for those who have had and whose attitude is positive show that sexual intercourse contributes to teenage pregnancy through gradual steps in conforming to peers.

On teen friendships, the study assessed friendship patterns and risky behavior especially decisions that teenagers take while in the group. The study concluded therefore that teen friendship patterns determine teens' choices which result in teenage pregnancy.

All said and done, the study demonstrated that negative peer interactions, the timing of sexual intercourse, and unhealthy teen friendships increase the likelihood of teenage pregnancy while positive peer interactions, delayed sexual intercourse and healthy teen friendships decrease teenage pregnancy. From these, the study confirms that peer influence contributes to teenage pregnancy among teenagers.

### **Recommendations**

Based on the above findings, the study makes the following recommendations;

Through various interactions with peers, the study found that peer influence operates at many levels and so teenagers should learn to appreciate a positive influence from others (that which yields positive effects) and to stay away from negative influence from others (that which ends in negative results). This involves associating with productive peers, evaluating peers' advice before acting, and focusing energy on growth-promoting aspects like education.

The study found out that exposure to early sexual intercourse increases pregnancy risk and so teenagers should abstain from sex as a sure way of controlling teenage pregnancy and devise positive ways of handling opposite-sex friendships that could lead to teenage pregnancy. In the teenage year's adolescents get lost in they are not guided and supported accordingly. Sex is not just an act of pleasure but requires one to embrace the responsibilities that come along with it. From the respondents, it was discovered that teenagers engage in sexual activities but do not entirely know what they mean. Sex education and basic relationship skills must be incorporated in the curriculum or extra-curricular content so that teenagers are prepared adequately on how to handle the pressures and issues that come with their age and with their environment to be able to make the right choices among peers and eliminate teenage pregnancy.

On teen friendships, schools should establish and implement strict monitoring strategies on teens' relationships to prevent unhealthy boundaries and misuse, but promote healthy partnerships and growth-promoting relationships for example through security cameras to keep teenagers in safe open places. The study recommends that teachers maintain an open, supportive and approachable stance with the teenagers so that in the long-time teenagers spend at school, they could

seek help in even outside-class issues or consult. Teenagers may benefit most from not being judged but being understood in their context.

For Psychologists, Counsellors, social workers, and other social science professions the study recommends organizing sensitization programs and strategies to educate communities about supportive parenting and adolescent development.

Parents should be empowered to understand the struggles the teenagers are undergoing through sensitization talks and learn the art of cooperating with adolescents in productive ways as well as adjust parenting strategies to accommodate teenage growth. Each parent could begin by giving quality time to the teenager and trying to understand the pressures at hand for both. Couples should also set a good example of relationship boundaries and teach their children the art of relating appropriately with each sex.

Suggestions for further research studies

This study has been based on peer influence and teenage pregnancy but targets teenage girls in school. The researcher recommends further research to continue on the experiences of girls outside school, teenage mothers, teenage fathers, and pregnant teens.

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