

**ATTACHMENT AND IDEALIZATION OF PREGNANCY AND
PARENTING, ATTITUDES TOWARDS PREGNANCY AND PARENTING
READINESS AMONG SCHOOL-GOING FEMALE TEENAGERS.**

By

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DECLARATION

I, Naureen Patience Mbhalati, declare that this mini-dissertation hereby submitted to the University of Limpopo for the degree Master of Arts in Clinical Psychology, has not been previously submitted by me for a degree at this or any other university; that it is my own in design and in execution, and that all material contained herein has been duly acknowledged.

MBHALATI N.P. (Ms.)

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DATE

DEDICATION

This dissertation is dedicated to my mother (Mhani), and my aunt (Mhani-ntsongo).

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ABSTRACT

Recent research has established that teenagers have the means to prevent pregnancy but many do not necessarily use them, because they are open to the idea of becoming pregnant, or have a desire to parent their own child. The aim of this study was to investigate whether there is a relationship between attachment and teenagers' desire of becoming pregnant and parenting a child. The sample of the study, selected through convenience sampling, comprised 455, 14 and 15 year old registered female learners from selected urban and rural high schools in Mopani District, Limpopo Province. Findings from structural equation modeling indicate that both mother and father attachment do not influence teenagers' idealization about pregnancy and parenting. Mother trust had a statistically significant relationship with attitudes towards pregnancy. Trust for both mother and father also had a significant relationship with parental readiness. Alienation to mother had a significant association with teenagers preparedness to become parents. Socio-economic status was found to be associated with teenagers' idealization of pregnancy and their report of being physically and emotionally ready to become parents. This study has found a relationship between the Trust and Alienation dimensions of attachment with attitudes towards pregnancy and parental readiness.

Key words: Attachment; socio-economic status; pregnancy; idealization; parental readiness

ABBREVIATIONS

IPPA-R	Inventory of Parent and Peer Attachment-Revised
IPPS	Idealization of Pregnancy and Parenting Scale
PAS	Pregnancy Attitude Scale
PRQ	Parental Readiness Questionnaire
SADHS	South Africa Demographic and Health Survey
SEM	Structural Equation Modeling
SES	Socio-economic Status
SPSS	Statistical Package for Social Sciences

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CHAPTER ONE

INTRODUCTION AND BACKGROUND

1.1 INTRODUCTION

Several reports from different parts of the world indicate that sexual activity is very common during adolescence. In the United States, 5%-10% of females have had sexual intercourse by the age of 13, and about 70%-80% have by age 19. In Northwest Tanzania, the average age at first coitus is 12 years for males and 13.5 for females. In New Zealand 27.5% of male and 31.7% of female learners reported first sexual intercourse before the age of 16 (Jie-shuang & Shtarkshall, 2004). This could be attributed to the fact that dating relationships typically emerge in early to middle adolescence, and are considered to be important learning experiences in the development of a sense of identity and the ability to establish meaningful intimate relationships for the future (Brown, 1999; Feiring, 1996). For many teenagers, relationships provide the primary context for experimenting with and expressing their developing sexuality. In learning to establish new relationships with peers, especially intimate partners, teenagers are also faced with the challenge of learning to negotiate healthy and consensual sexual relationships. Thus, the transition to dating also presents a time of heightened vulnerability for teenagers, as limited knowledge and relative lack of experience in negotiating healthy sexual relationships may lead to unwanted pregnancies (Davies, 2000).

According to Irin News (2007), figures released by the Gauteng Provincial Education Department in South Africa indicate that schoolgirl pregnancies have doubled, despite a decade of considerable spending on sex education. The majority of pregnancies among unmarried teenagers are unintended, although not all of them are opposed to becoming pregnant. Jaccard, Dodge and Dittus (2003) studied 350 African-American teenagers' attitudes toward teenage pregnancy and found that attitudes of unmarried females were predictive of the occurrence of a pregnancy in the ensuing year. A number of

explanations of why teenagers' attitudes toward pregnancy vary exist in the literature. However, less often considered is whether the attitudes are associated with pregnancy risk and contraceptive use (Kirby, 2001). Questions about the relevance of attitudes are important because attitudes may mediate the often observed association between socio-economic disadvantage and pregnancy risk (Jaccard et al., 2003). For example, poverty is associated with teenage initiation of sex, non-use of condoms at first intercourse, and accidental pregnancy. But pregnancy intervention programmes are not well suited to end poverty. They may, however, be well suited to shape attitudes (Kirby, 2001). The manner in which children establish emotional ties or the degree of attachment with caregivers influence their development during childhood, adolescence and eventually adulthood (Harvey & Byrd, 2000).

Teenagers with anxious/ambivalent attachment styles, or who lack parental bonding, express a desire for intense relationships and deep commitments (Harvey & Byrd, 2000). As a result of this lack of close relationship with their parents, teenagers may desire to have someone very close whom they can form this emotional bond with. This might include peers, intimate partners, or extend to desiring to have a child in order to compensate for the lack of attachment with their parents (Harvey & Byrd, 2000). Teenagers who have established a secure attachment style or a positive relationship with their parents, and whose parents are against teenage pregnancy, are more likely to internalize the general values of their parents which disapprove teenagers' engagement in risky sexual behaviours. Therefore, teenagers who have established a secure attachment style or a positive emotional bond may not feel the need to establish this emotional bond by becoming parents themselves in order to share this bond with their own child (Harvey & Byrd, 2000). This study puts this notion to the test.

1.2 STATEMENT OF THE PROBLEM

There is limited information or research available that clearly depicts the possible relationship between attachment and attitudes of teenagers towards

pregnancy. Teenage pregnancy has been studied extensively in the past decades, yet society has not managed to gain control of the problem (Leigh, Morrison, Trocki & Temple, 1994). Although several studies have examined the factors and motivations underlying teenagers' contraceptive behaviour, teenagers' attitudes toward pregnancy are still poorly understood. According to these studies, the majority of pregnancies among teenagers are unintended, although some are not opposed to becoming pregnant and others have ambivalent attitudes (Jaccard et al., 2003). A number of explanations of why teenagers' attitudes toward pregnancy vary exist in the literature. However, less often considered is whether these attitudes are associated with pregnancy risk, contraceptive use or desire to have a child.

1.3 BACKGROUND OF THE STUDY

It is a fact that since the beginning of human existence, humanity has been reproducing for different reasons, such as establishing relationships, and cultural ties. The reasons for having a child may differ from person to person. It is an unfortunate reality that some teenagers, due to the increasing practice of unprotected sexual intercourse, face the possibility of becoming pregnant and thus become parents. However, some teenagers seem to want the pregnancy. According to Brückner, Martin and Bearman (2004) teenagers do not want to become pregnant, although some are not opposed to becoming pregnant and others have ambivalent attitudes. Some would even say pregnancy during this developmental stage is a mistake, while some would say that they do not mind becoming pregnant. Other possible reasons are prior intentions of the young woman and her partner regarding becoming pregnant and having a child. According Condon, Donovan and Corkindale (2000) researchers like Le Masters (1970) identified highly idealized and romanticized beliefs about parenting among teenagers in the 1960s. According to Larson and Asmussen (1991) teenagers' emotional influences are tied in some way to real or fantasized romantic emotions. According to Harvey and Byrd (2000) teenagers exhibiting the insecure attachment style express a desire for an intense relationship and deep commitment with their

partners, and consider having a child with their partners as an ingredient of a strong relationship.

Many experts have concluded that teenagers have access to the means to avoid pregnancy but do not use them, or use them inadequately, because they do not appreciate the negative consequences of a pregnancy Brückner et al. (2004). The reduction of teenage conception rates has been prioritised by the South African government. But what is less considered is whether teenagers themselves want to prevent pregnancy. Critical factors associated with contraceptive use include family related characteristics such as closeness with parents. This study attempted to investigate whether teenagers' idealization of pregnancy and parenthood, and attitudes towards pregnancy and subsequently having a child, are influenced by attachment.

1.4 AIM OF THE STUDY

The primary aim of the study was to investigate whether there is a relationship between attachment and teenagers' desire of becoming pregnant and eventually parenting a child.

1.5 OBJECTIVES OF THE STUDY

- 1.5.1 To investigate whether attachment has an influence on teenagers' idealization of both pregnancy and parenting.
- 1.5.2 To investigate if teenagers' idealization of pregnancy and parenting will impact their attitudes and beliefs about pregnancy.
- 1.5.3 To determine if attitudes towards pregnancy and idealization of pregnancy will be associated with teenagers' parenting readiness, taking into account their socio-economic status (SES).

1.6 HYPOTHESES

The following are the Hypotheses under study:

- 1.6.1 Teenagers with high levels of attachment will have a minimal desire of becoming pregnant.
- 1.6.2 Teenagers with high levels of attachment will have a minimal desire towards parenting their own child.
- 1.6.3 Teenagers who idealize about pregnancy will have positive attitudes towards becoming pregnant.
- 1.6.4 Teenagers who idealize parenting will be more open to the idea of parenting, tending to report that they are ready to become parents.
- 1.6.5 The association between attitudes towards pregnancy, idealization of pregnancy and readiness to parent will depend on the teenagers' SES.

1.7 NEED FOR THE STUDY

There is little research investigating the association between teenage pregnancy attitudes and attachment. Pregnancy prevention programmes have, over the years, placed more emphasis on sex education and access to family planning information, and contraceptive devices for both females and males (Jaccard et al., 2003). A number of researchers and advocates have argued that teenage pregnancy prevention programmes should target attitudes toward pregnancy. One reason for the attention to pregnancy attitudes has been that interventions that increase the availability of contraceptives and sex education have experienced uneven success in reducing teenage pregnancy rates. Therefore, there is a need to study the influence of attitudes and attachment in the study of pregnancy.

1.8 SIGNIFICANCE OF THE STUDY

The current study is significant for health professionals and policy makers for pregnancy prevention programmes. The findings from this study will be useful for educators, programme planners and others involved in designing

interventions to help teenagers avoid early pregnancy and childbearing and in directing ongoing medical education towards young people who might be at risk for teenage pregnancy. This will bring awareness that focusing only on providing adolescents with contraceptives may not necessarily be enough to reduce the rate of pregnancies during adolescence. Their interventions should also focus on changing their attitudes towards initiating sex and having children at an early age and the consequences of doing so, thereby promoting the sexual health and well-being of adolescents.

1.9 DEFINITION OF CONCEPTS

1.9.1 Attachment: An affectionate bond or tie between an individual and an attachment figure which may be reciprocal between two adults. According to Bowlby (1969) attachment is rooted in the etiological notion that a newborn is biologically programmed to seek proximity with the caregivers. The mother-child relationship constitutes a haven of safety to which the child can return when she is afraid of fearful. As the young child develops and matures, this style of interaction becomes more static and less open to drastic change.

1.9.2 Pregnancy: refers to the state of being pregnant; the period from conception to birth when a woman carries a developing foetus in her uterus.

1.9.3 Attitudes: For the purposes of this study, attitudes refer to a perception or general feeling of teenage pregnancy. They are measured by the perceptions of shame and guilt with pregnancy subscale from the pregnancy attitudes scale (Cuffee, Hallfors & Waller, 2007).

1.9.4 Parenting: The process of raising and educating a child from birth until adulthood.

CHAPTER TWO

THEORETICAL FRAMEWORK AND LITERATURE REVIEW

2.1 THEORETICAL FRAMEWORK

There are complex changes in the child-parent relationship during adolescence. Although some studies have shown that self-reported attachment security to both parents decreases with pubertal maturity (Papini, Roggman & Anderson, 1991), recent investigations indicate that only certain components of the attachment relationship change while others remain stable (Doyle & Moretti, 2000). These findings indicate that the maintenance of physical proximity to parents and need for protection in times of threat or stress is less essential for older children due to increased mental and physical capacities, but that the availability of the attachment figure, that is, the belief that the attachment figure is open to communication and responsive if help is needed, remains important (Doyle & Moretti, 2000).

According to Miller, Benson and Galbraith (2001), the concepts of parental warmth, support, parental closeness, parent-to-child communication, and child attachment to parents have been used to study parental influences on adolescent pregnancy risk. Parent-to-child closeness was found to be associated with reduced teen pregnancy risk through teens remaining sexually abstinent, postponing intercourse, having fewer sexual partners, or using contraception more consistently (Miller et al., 2001). This variable appears to influence teenagers' attitudes about having sexual intercourse, their impulse control, their prosocial activities and association with sexually active peers, all of which were found to be related to adolescent sexual behaviour and pregnancy risk (Miller et al., 2001).

Miller et al. (2001) reported that a lack of parental support was related to depression for teenagers, but the association between depressive symptoms and sexual activity was much stronger for females than for males. Teenagers who viewed their parents as being unsupportive were likely to report

depressed moods and use of alcohol, where depression was found influenced sexual behaviour. The relationship of parental warmth/support and adolescents' depression was found to be linked with teenagers' sexually permissive attitudes and association with sexually active friends. The study concluded that teenagers might compensate for a lack of close relationships with their parents by becoming more involved in emotionally and sexually intimate peer relationships. Parent/teen connectedness was associated with a lower risk that teenagers had ever been pregnant (Miller et al., 2001).

Studies that have evaluated parent-to-child communication found a strong association between mothers' communication and teen pregnancy than fathers' communication (Miller et al., 2001). A common finding across these studies is that open, positive, and frequent parent/child communication about sex is associated with adolescents not having sexual intercourse, postponing their sexual debut, or having fewer sexual partners, thus lowering their risk of pregnancy (Miller et al., 2001). It is widely accepted that adult long-term romantic relationships are attachment relationships as well as sexual relationships. Individuals seek proximity to their romantic partners, desire to rely on them as a safe haven and secure base, feel an emotional tie to them, and mourn their loss. However, in early and mid-adolescence, romantic relationships are often quite transitory, and parents, especially mothers, remain the primary providers of security (Doyle & Moretti, 2000).

The present study used attachment theory to try to establish an understanding of the impact of the quality of an attachment bond between teenagers and their parents and how this bond subsequently influences their attitudes towards pregnancy and the desire to have a child of their own in order to compensate for the lack of a secure attachment bond with their parents.

2.3 LITERATURE REVIEW

Adolescence is a major transitional period from childhood to adulthood, where teenagers go through a developmental process preparing them for adulthood (Carlson, Catherine & Spradling, 1991). It brings new challenges as well as opportunities for understanding oneself within a social context. Parent-child relationships also undergo important transitions during adolescence. For example, the social world of a teenager changes to become more peer focused than before (Collins, 1990). As part of this transition, teenagers explore and assert independence from parents and spend more time with friends, learning to build peer relationships (Bahr, Marcos & Maughan, 1995). However, parents do not disappear from the daily life of a teenager. Although there is obvious physical distancing from parents, teenagers still show a desire for high levels of support from them (Furman & Buhrmester, 1992).

This period often expresses itself through the realignment of the parent-child relationship. Subsequently, successful management of interpersonal relations is crucial for a positive self-esteem and reduces the likelihood that adolescents will engage in high risk behaviours (Conger & Conger, 1997). Adolescence also introduces a period of transition in family and social role expectations, coupled with increases in the range and intimacy of social relationships (Buhrmester & Furman, 1987). This period offers the adolescent the opportunity to explore new personal and social roles and to engage and negotiate different and complex social relationships (Collins, 1990).

Teenage pregnancy is a significant public health problem that comes with the transition from childhood to adulthood and it is socially unacceptable even in today's society, but despite this awareness its rate is increasing every day. In 1996, the birthrate among adolescents aged 15–19 years in the United States was 56.8 live births/1000 girls or 1 in every 18 adolescent girls. Teenage birthrates are especially high among Hispanic and African-American adolescents. Although the teenage birthrate has declined over the past decade, there are approximately one million pregnancies and 500,000 live births to U.S. women aged 15–19 each year (Unger, Molina & Teran, 2000).

In South Africa, teenage pregnancy has been declining, however, at a slower pace. The 1998 SADHS reported almost double the fertility rate among teenagers in rural settings (99 per 1000) than among those in urban settings (56 per 1000). The 2003 SADHS showed that pregnancy amongst 15-19 year olds declined from 16.4% in 1998 to 12% by 2003 (Department of Health, Medical Research Council & OrcMacro, 2007). According to the above mentioned statistics, there was a decline teenage pregnancy rates from 1998 to 2003. The decline was, however at a slower pace and inconsistent. According to Irin News (2007) the number of pregnant schoolgirls jumped from 1,169 pregnancies in 2005 to 2,336 pregnancies in 2006 in Gauteng. High pregnancy rates are reported for provinces that are poor and mostly rural (Eastern Cape, KwaZulu-Natal and Limpopo), and a reverse is evident for the most affluent and urban provinces (Gauteng and Western Cape).

Most efforts to prevent or delay teenage pregnancy have been directed at providing birth control, and many researchers and service providers have assumed that all teenage pregnancies are accidental. Therefore, teenage pregnancy appears to be a teenage girl's failure to understand her risk, inability to obtain contraceptives to reduce that risk, or low self-efficacy to negotiate contraceptive use with her partner (DuPlessis, Bell & Richards, 1997). This framework makes the assumption that teenage girls are motivated to prevent pregnancy, and if they do become pregnant, it is because they lacked the knowledge, resources, or skills necessary to avoid it.

However, recent evidence suggests that many teenage girls may consciously want to become pregnant, or simply may not mind becoming pregnant (Gordon, 1996). These girls may see pregnancy as a means of achieving adulthood, finding a purpose in life, having someone to love, or strengthening the relationship with their sexual partners (Zabin, Astone & Emerson, 1993). Jaccard et al. (2003) examined the role of attitudes toward pregnancy prospectively with a representative sample of sexually experienced and inexperienced adolescent females, and found a robust association between positive attitudes and subsequent pregnancies.

In studies of pregnant and parenting teenagers, teenage mothers and mothers-to-be have reported that they became pregnant deliberately because they wanted to have children. One study of pregnant adolescents found that 42% had not used contraceptives because they were not really trying to avoid pregnancy (Stevens-Simon, Kelly, Singer & Cox, 1996). If teenage girls consciously want to become pregnant, or do not mind becoming pregnant, traditional pregnancy prevention programmes that teach adolescents how to obtain contraceptives and how to negotiate contraceptive use more assertively may not convince them to avoid sexual risk behaviours.

Although several studies have examined the factors and motivations underlying adolescent contraceptive behaviour, teen attitudes toward pregnancy are still poorly understood. Teenagers may not share the same negative view of their childbearing as do adults concerned with preventing it (Jaccard et al., 2003). Studies examining pregnant and parenting teenagers' attitudes toward childbearing suggest that the percentage of pregnancies that are truly unintended may be lower than commonly believed (Jaccard et al., 2003). These girls may see pregnancy as a means of finding someone to love, to try and fill emotional voids or quell loneliness, because they feel mothering is the only thing they might be good at, to get attention they want but are not currently getting (Rodriquez & Moore, 1995). A significant percentage of never-pregnant adolescents harbour either highly ambivalent or positive attitudes toward early childbearing. A better understanding of the factors associated with a desire for pregnancy among adolescents may help health care providers better predict the most at-risk adolescents (Rodriquez & Moore, 1995).

Young people's attitudes and beliefs about pregnancy and parenthood are also amongst those that have received much less attention. According to Medora, Goldstein and Van der Hellen (1994) the idealization of pregnancy and parenthood by young people was a significant factor in its occurrence. Teenagers' social cognition is subject to more emotional influences than adults, and up to one third of their strong feelings are tied in some way to real or fantasized romantic emotions (Larson & Asmussen, 1991). In addition

Larson and Asmussen (1991) asserted that when people experience positive emotions, they tend to underestimate the likelihood of negative consequences to their actions. Stevens-Simon et al. (1996) surveyed 200 pregnant teenagers aged between 13 and 18 years, and found that 17.5% wanted to become pregnant, and a further 20 per cent “wouldn’t mind” if they became pregnant. Forrest and Singh (1990) reported that 20 percent of pregnant women aged 15–19 years had intended to become pregnant. Rodriguez and Moore (1995) surveyed 341 teenage mothers and found that 31 percent reported intentionally becoming pregnant.

A high prevalence of positive, idealized attitudes towards immediate pregnancy has been found, with an even higher prevalence of ambivalent attitudes (Rainey, Stevens-Simon & Kaplan, 1993; Zabin et al., 1993). Such beliefs have been associated with both the occurrence of pregnancy (Medora et al., 1994) and ineffective contraceptive practices (Zabin, Hirsh, Smith, Streett & Hardy, 1986). If a teenager is ambivalent about pregnancy and perceives the negative and positive consequences as finely balanced, other factors, which would not normally determine whether contraception or abstinence is used, may determine the outcome (Zabin et al., 1993). In a sample of 78 pregnant teenagers, Paikoff (1990) found that positive attitudes to pregnancy, childbirth and parenthood were associated with rejection of termination. Idealized views of childbirth and parenthood may cause continuation of pregnancy (and hence parenthood) to be perceived as a “viable career choice” (Merrick, 1995).

Secure attachment and emotional connectedness with parents facilitates the transition to increased autonomy (Ryan & Lynch, 1989). For example, Grolnick and Ryan (1989) found that autonomous self-regulation in children was related to parental autonomy support, that is, parental encouragement and support of participation in decision making and independent problem solving. They contend that autonomy is facilitated when parents allow children to move toward independence in self-regulation within a secure and supportive relationship. Consistent with the attachment approach are findings that adolescent mothers also report more adverse childhood experiences,

including childhood abuse and neglect and father absence (Ellis, Bates, Dodge, Fergusson, Horwood & Pettit, 2003; Roberts, O'Connor, Dunn, Golding & the ALSPAC Study Team, 2004; Vikat, Rimpela, Kosunen & Rimpela, 2002).

According to a study conducted by Cater and Coleman (2006) a very commonly reported explanation for planning to become pregnant was having experienced an unsettled background. Almost all young women reported at least some degree of feeling unsettled while growing up, for various different reasons. Sometimes this unsettled background was due to life events, such as separation from their parents and a lack of closeness with parents (Cater & Coleman, 2006). At other times, the unsettled feeling was associated with not feeling secure in their family environment, perhaps due to bad family relationships and arguments. In some more serious cases, the situation made the young woman leave home. Leaving home early for these reasons seemed to make these teenagers more vulnerable to further disruption and involvement in risky health behaviours. In many cases, their lives were stabilized by meeting a partner, who would ultimately become the father of their child (Cater & Coleman, 2006). These distressing experiences were often drawn on when explaining their own choices for parenthood, as a desire for wanting a 'complete' family of their own. Pregnancy offered the young women an opportunity to correct these disruptive and unstable experiences, and enable them to focus their attention on ensuring this would not happen in their own parent-child dynamic.

In terms of specific insecure attachment styles, a dismissing style (that is to say, poor communication and trust, combined with feelings of alienation and disengagement from the attachment relationship) has been associated with externalizing problem behaviours, for example aggression and delinquency (Nada-Raja, McGee & Stanton, 1992), more experimentation with drugs, and riskier attitudes about safe-sex. Teenagers and young adults with a dismissing style are rated by their peers as more hostile than individuals in all other attachment groups (Bartholomew & Horowitz, 1991; Kobak & Sceery, 1988). Dismissing teenagers report less family support and more loneliness

than their peers (Kobak & Sceery, 1988). There is some indication that teenage mothers have a more insecure attachment style, particularly the avoidant type. Some used emotional attachments to explain their desire to be pregnant (Bifulco & Moran, 1998). Other teenage girls' attitude or desire to be pregnant is motivated by the belief that the boyfriends have a desire to have a baby too. As a result, such teenage girls become pregnant in order to satisfy the needs of the boyfriends. The girls are also hoping that the action will also help to secure the boyfriends' loyalty to them and avoid feelings of loneliness and rejection (Levine, Tuber, Slade & Ward, 1991; Ward & Carlson, 1995).

There are many explanations of why teenagers' attitudes towards pregnancy vary. Less often considered is whether these attitudes are associated with the pregnancy itself or a desire to be close to someone. From a psychoanalytic perspective, attitudes or desire towards teenage pregnancy has been frequently cited as the result of an intrapersonal problem reflecting poor impulse control, inadequate judgment, low self-esteem, and immaturity (Medora et al., 1994). These psychological difficulties have been further interpreted as resulting from neglectful or abusive parenting. As a by-product, the teen's pregnancy has been claimed to bring about closeness between mothers and pregnant daughters, smoothing over their previous hostile relationships (Blos, 1968). The findings from these case observations suggest that the teenage pregnancy reflects both intrapersonal and interpersonal problems and may also be an attempt at changing family dynamics.

A broad range of family variables affect adolescent pregnancy risk. Family influences range from hereditary or biological transmission of potentially important characteristics such as early age of menarche, levels of hormones, and genes to the contextual and structural features of families (e.g. parent's education, marital status, and sibling composition) to the everyday styles or practices of parenting such as parental support, control, or supervision of teenagers. Family-related predictors of attitudes towards teenage pregnancy include problems in parent-teen relationships. These problems impair the ability of some parents to maintain supportive environments that could foster the adolescent's transition into more adult roles (Carlo, Fabes, Laible &

Kupanoff, 1999). This is particularly relevant since tension in the parent-teenager relationship may foster the teenager's inclination toward seeking peer acceptance and distancing herself from the family network (Leitch, 1998). The relationship that the daughter has with her parents, particularly the mother is significant in determining the attitude that she will have towards pregnancy. Communications about sex, maternal attitude, and length of time alone in the home have been indicators of a teen's sexual behaviour. According to a study conducted by Henshaw (1998), 66% of girls said that the likelihood of becoming pregnant as a teen increased if one had parents who were inattentive, unloving, or failed to instill moral values. A majority of respondents attributed the occurrence of teenage pregnancy to a breakdown of communication between parents and child, and also to inadequate parental supervision.

Because many investigators in recent decades have used the concepts of parental support (connectedness), control (regulation), and parent/child communication to study parenting, these three constructs are used to organize research findings about parental influences on adolescent pregnancy risk. Early studies of parenting found that the dimensions of parental warmth (support) and control were related to various children's outcomes and behaviours. Authoritative parenting, defined as highly supportive with moderate control was found to be related to positive child outcomes (Miller et al., 2001). Authoritarian, high control and low warmth, or permissive parenting styles which is indulgent or neglectful, generally were found to be related to negative child and adolescent outcomes.

Studies indicate that parent/child closeness is associated with reduced adolescent pregnancy risk through teens remaining sexually abstinent, postponing intercourse, having fewer sexual partners, or using contraception more consistently. In some studies parent/teen closeness was found to be correlated with a lower frequency of intercourse or with a smaller number of sex partners (Jaccard et al., 2003). Investigators have, over the years, linked close parent/teen relationships with a later age of first intercourse. Several studies of parent/child closeness have focused exclusively on mother/child

relationships. About 20 years ago the theoretical position was developed that the mother/daughter relationship is a particularly salient sexual socialization structure. As expected, close mother/ daughter relationships were found to be related to daughters' postponement of sexual intercourse (Miller et al., 2001). Other investigators who focused on mother/teen relationships (Jaccard et al., 2003) reported a similar influence of mother/child closeness on the sexual behaviours of both daughters and sons.

Fewer studies have analyzed whether parent to child connectedness also might lower adolescent pregnancy risk by increasing use of contraception among sexually active adolescents. Jaccard et al. (2003) also reported that high quality mother/teen relationships were related to more consistent contraceptive use by sexually active teens. The studies of Feldman and Brown (1993) and Whitbeck, Conger and Kao (1993) share the conclusion that a lack of closeness in the parent/teen relationship increases the influence of peers on adolescent sexual activity.

CHAPTER THREE

RESEARCH METHODOLOGY

This chapter outlines the following aspects of the study: research design, description of the sample, sampling method, procedure, hypotheses, and measures.

3.1 RESEARCH DESIGN

The current study utilized a cross-sectional research design, and the participants responded to questionnaires at a single point. In cross-sectional studies, variables of interest in a sample of subjects are assayed once and the relationships between them are determined. Similarly, in this study participants responded to questionnaires at a single point only, and no follow-up data collection took place.

3.2 SAMPLING

3.2.1 SAMPLING METHOD

Non-probability sampling was utilized in this study. Non-probability techniques are cheaper than probability sampling. They are often used in exploratory studies for the purpose of generating hypotheses (Nachmias & Nachmias, 1981). In particular, a convenience sampling technique was used. De Vos, Strydom, Fouche and Delport (2002) describe convenience sampling as the use of readily accessible persons in a study. Any case that happens to cross the researcher's path and meets the inclusive criteria set for the study, gets included in a convenience sample. The researcher finds it easy to obtain participants, but the risk of bias is greater than in a random sample, because each member of the population does not get an equal chance of being included in the sample. The sample usually includes those who are nearest and most easily available.

It is also commonly believed that probability sampling methods are preferable when conducting quantitative research than non-probability sampling methods, and are considered more accurate and give each member of the population an equal chance to be included in the sample. Although probability sampling was not used, attempts were made to make the sample almost representative of the population where it was drawn. The sample comprised of 455 learners from grade 7 to 11.

3.2.2 DATA COLLECTION PROCEDURE

The proposal for this study was evaluated and approved by the University of Limpopo's ethics committee, following which the researcher applied for permission for data collection at the various schools in Limpopo from the Provincial Department of Education. The researcher then approached high school principals and teachers in order to make final arrangements for data collection. After that was done the researcher met the learners in their classrooms, where the credentials of the researcher and the purpose of the study were explained to them. Confidentiality and anonymity were assured. Informed consent was obtained from each teenager before the study was conducted. The questionnaire was compiled in English to accommodate all participants and was then distributed to each one of them to complete.

3.3. MEASURES

3.3.1 Socio-demographic Data

The study targeted female, school-going teenagers. Domicile was dichotomous and based on respondents' self-report of either living in a rural or urban area. Ethnic group was also based on teenagers' self-report of either being Tsonga, Sepedi or Venda, the ethnic groups that are dominant within the area of study, and an additional ethnic category of "other" to provide for those who do not fall within the main ethnic groups. The teenagers' chronological age was self-reported in years, and educational standard was the highest level of education. Family structure was based on household

roster information, and was categorized as two biological parents, blended family (one non-biological), single mother, and “other”. Family structure in the “other” category included living with a father, grandparent(s), and other relatives. Highest parental education was based on the teenager’s report of the highest education level attained by either the mother or father, with categories of less than high school, high school graduate, and university graduate.

3.3.2 Inventory of Parent and Peer Attachment-Revised (IPPA-R; Gullone & Robinson, 2005)

The 28-item IPPA-R, self-report questionnaire was used to measure teenage attachment to parents. The measure assesses both positive and negative affective and cognitive dimensions related to attachment. It is designed to measure adolescents’ parenting experiences on the dimensions of communication, trust and alienation. The trust scale measures the degree of mutual understanding and respect in the attachment relationship, while communication assesses the extent and quality of spoken communication. Alienation on the other hand, assesses feelings of anger and interpersonal alienation. The teenager is asked to complete each set of questions in relation to both her mother, and her father. Questions are answered on a 5-point Likert scale, ranging from “strongly disagree”, “disagree”, “neutral” agree”, “strongly agree.”

In their psychometric investigation, involving a sample of adolescents aged 14 and 15 years, Gullone and Robinson (2005) found a good internal reliability for the IPPA-R with the Cronbach’s alphas of $\alpha = 0.85$ for Trust, $\alpha = 0.79$ for Communication and $\alpha = 0.81$ for Alienation. Sternberg, Lamb, Guterman, Abbott and Dawud-Noursi (2005) found the Cronbach’s alphas of $\alpha = 0.88$ for mother attachment and $\alpha = 0.89$ for father attachment in a sample of adolescents aged between 12 and 15 years. For the subscales reliabilities, parental communication’s $\alpha = 0.77$, Trust $\alpha = 0.83$, and Alienation $\alpha = 0.76$.

Table 1 illustrates the internal reliabilities for the current study involving a sample of 14 and 15 year old teenagers.

Table 1: Cronbach's alpha levels for the IPPA-R subscales

Items	Mother Subscale	Alpha	Father Subscale	Alpha
11	Trust	0.237 (0.820)*	Trust	0.442 (0.825)*
8	Alienation	0.750	Alienation	0.718
9	Communication	0.689	Communication	0.788
28	Mother overall	0.74	Father overall	0.79

Note: * = values in brackets are the final reliability estimates.

In the current study the internal reliability of the IPPA-R was $\alpha = 0.74$ for the mother attachment subscale and $\alpha = 0.79$ for the father attachment subscale. Most subscales for both mother and father versions of the IPPA-R achieved good reliability levels, with Cronbach's alphas (α s) ranging from 0.689 to 0.788 after making corrections to the Trust subscale. Only the internal consistency levels of the Trust subscales (mother and father versions) were low. Four items (items 3, 7, 21 and 26) of the Trust mother-version subscale impacted the scale by reducing the reliability levels. Their removal resulted in an improvement of reliability to $\alpha = 0.761$ ($N = 7$). However, item 5 was also problematic in that, although its impact on the reliability level was negligible, it nevertheless had minimal correlation ($r = 0.054$) with the total scale. Its removal resulted in a further improvement of the subscale to $\alpha = 0.820$ (6 items). Four items (items 3, 5, 7, 21) of the Trust father-version were also problematic. Their removal improved the reliability to $\alpha = 0.825$ (7 items). The item-total correlations of most of the problematic items were negative, and most of them were the items that were reverse scored.

3.3.3 Parental Readiness Questionnaire (PRQ; Juda, Campbell & Crawford, 2004)

The PRQ is an eight-item scale that measures a woman's perceptions of her current physical, emotional, and instrumental readiness for pregnancy and childrearing. Items inquire about teenagers' belief that they can care for a new born at their age, and the belief that unprotected sex can result in pregnancy. Each item has two possible response options, namely "true" and "false". Using samples of undergraduate students with the mean age of 20.6 years, Juda, Campbell and Crawford (2004) found that the internal consistency for this scale is moderate (Cronbach's alpha $\alpha = 0.65$). The Cronbach's alpha for the current study was found to be $\alpha = 0.67$.

3.3.4 The Idealization of Pregnancy and Parenthood Scale (IPPS; Condon, Donovan & Corkindale, 2000)

The IPPS measures the idealization of pregnancy, childbirth, and parenthood. The scale comprised of two subscales, each measuring attitudes about pregnancy and parenting, respectively. Each item was measured using a Likert scale with five possible response options. The response choices were “strongly agree”, “agree”, “have no idea at all”, “disagree”, and “strongly disagree”.

Using data from a sample of 1546 adolescents, a formal item analysis of the IPPS was performed by Condon et al. (2000). The internal consistency (as measured by Cronbach’s alpha coefficient) for the pregnancy subscale was ($\alpha = 0.63$) and parenthood subscale was ($\alpha = 0.72$). The current study obtained Cronbach’s alphas of $\alpha = 0.75$ for pregnancy and $\alpha = 0.67$ for parenting subtests.

3.3.5 Pregnancy Attitude Scale (PAS; Cuffee, Hallfors & Waller, 2007)

The scale measures how adolescents will feel about having sex at this time in their lives and their thoughts on pregnancy. The scale consists of three factors, each being a subscale. For the purposes of this study the “perceptions of shame and guilt with pregnancy” subscale was used to measure attitudes towards pregnancy. To reduce ambiguity, the scale is henceforth referred to as the attitudes towards pregnancy scale in this study. Each item has five possible response options on a Likert scale, namely: “strongly agree”, “agree”, “neutral”, “disagree”, and “strongly disagree”.

The psychometric investigation of the entire scale involving a sample of 6652 adolescents aged 15 years and older attained an acceptable internal consistency of $\alpha = 0.77$ for the “perceptions of shame and guilt with pregnancy” subscale (Cuffee, Hallfors & Waller, 2007). In this study the subscale obtained an acceptable internal reliability of $\alpha = 0.62$.

3.3.6 SES (Myer, Stein, Grimsrud, Seedat & Williams, 2008)

SES was investigated using an asset index consisting of 17 items. The items were based on: household ownership of appliances (such as a refrigerator, vacuum cleaner, and a washing machine); other household resources (including running water in the home, a stove, a household servant, etc.), and financial activities which participants and their families engaged in, for instance, shopping at a supermarket, using financial services such as a bank account or credit card and having an account at a retail store. The measure of asset ownership was used to construct an aggregate asset score, which was used to classify teenagers into three levels of socio-economic status. The asset scores were classified into the following categories and their respective socio-economic statuses: 0—5 (low SES), 6—12 (middle SES) and 13—17 (upper SES) assets. The index demonstrates excellent reliability ($\alpha = 0.92$; Myer et al., 2008). In the present study it maintained its reliability by attaining a Cronbach's alpha of 0.87.

CHAPTER FOUR

RESULTS

4.1 INTRODUCTION TO DATA ANALYSIS

This chapter focuses on the manner in which data were analyzed including all the statistical methods used. All the data were “cleaned”, coded and analyzed using the Statistical Package for Social Sciences (SPSS) and EQS 6.1 for Windows programme (Bentler, 2005). Before any analysis could commence, all relevant scale items were reverse scored, and missing values were replaced with the mean. SPSS was used to determine the reliability of the scales, and EQS 6.1 was used to assess relationships between variables. For the hypothesised and latent relationships, all the items were entered into the confirmatory structural model, a procedure to account for the possible existence of multiple relationships and the causal relations of the constructs to one another. Structural equation modelling (SEM) was therefore used to assess for relationships between attachment, attitude towards pregnancy, idealization of pregnancy and parenting, parental readiness and socio-economic status.

4.2 PRELIMINARY DATA ANALYSIS

Table 2 below shows the participants’ socio-demographic information. The sample of the study consisted of 460 registered female learners from selected urban and rural high schools. The schools were predominantly Black African in their learner composition, and were located in the Mopani District, Limpopo Province. In choosing the sample, students who were non-Black African were excluded because they were limited in number in the targeted areas, and it was important to control for culture in the present study. The female learners were mostly single. Learners who were pregnant, have a child, or were married at the time of data collection were excluded from the study. Furthermore, questionnaires that had been completed by 13 year olds were excluded during the process of analysis due to the fact that the main focus of

this study was on 14 and 15 year old females. Therefore, the final sample size was 455 females, with the age range of the sample being 14 to 15 years, where a large number of teenagers (65.3%) were 15 years old.

According to table 2, most of the participating teenagers belonged to the Tsonga ethnic group (83.1%), had a biological mother only (18.7%) and resided in rural areas (73.8%). A substantial number (51.6%) of the teenagers were in grade 9, and had parents with a high school level education (75.8%). Family structure was categorized in terms of individuals who are heading the family. A high percentage of the participants reported that they came from families headed by both biological parents (39.3%), and the least percentage (0.4%) was reported for families headed by the father only. Although most fathers (57.4%) in the learners' families had little formal schooling, there were a large proportion of fathers who were graduates, and as a matter of fact more than 5% of them had post-graduate degrees. On the other hand, most mothers (75.8%) could only finish high school. All in all, the learners came from relatively affluent family backgrounds, since very few (15.6%) of them came from families with five or less assets according to the asset index.

Table 2: Description of participants' demographics (N= 455)

Demographic Characteristics	N	%
Age		
14	158	34.7%
15	297	65.3%
Domicile		
Urban	119	26.2%
Rural	336	73.8%
Ethnic Group		
Xitsonga	378	83.1%
Sepedi	65	14.3%
Tshivenda	6	1.3%
Other	6	1.3%
Highest level of education		
7	48	10.5%
8	129	28.4%
9	235	51.6%
10	38	8.4%
11	5	1.1%
Mother's level of education		
No formal education—Grade 5	53	11.6%
Grade 6—12	345	75.8%
Degree/Diploma	38	8.4%
Honours	4	0.9%
Masters & Higher	15	3.3%
Father's level of education		
No formal education—Grade 5	261	57.4%
Grade 6—12	5	1.1%
Degree/Diploma	157	34.5%
Honours-level degree	7	1.5%

Demographic Characteristics	N	%
Masters-level degree & Higher	25	5.5%
Family structure		
Mother only	85	18.7%
Father only	2	0.4%
Both parents	179	39.3%
Blended	17	3.7%
Child headed	7	1.5%
Grand-parents headed	20	4.4%
Extended family	141	31%
Custodian	4	0.9%
Assets owned by household		
0-5 (low SES*)	71	15.6%
6-12 (middle SES)	262	57.6%
13-17 (upper SES)	122	26.8%
Total	455	100%

Note: SES = socio-economic status.

The means, standard deviations and range for each scale and their subscales are presented in table 3. Sub scale scores for IPPA-R mother version ($\bar{X} = 88.21$, S.D. = 11.83) and father version ($\bar{X} = 89.70$, S.D. = 14.56), idealization of pregnancy ($\bar{X} = 29.42$, S.D. = 7.95) and idealization of parenthood ($\bar{X} = 30.78$, S.D. = 7.79), parental readiness ($\bar{X} = 3.77$, S.D. = 1.94), and attitudes towards pregnancy ($\bar{X} = 9.66$, S.D. = 3.18) were calculated by summing up of the relevant items. As each item was scored 1 to 5, the range of possible total IPPA-R scores was 41 to 121 the mother subscale and 40 to 128 for the father subscale with high scores indicating high levels of attachment. The range for idealization scores were 10 to 50 for pregnancy and 11 to 55 for parenting, with lower scores reflecting higher degrees of idealization. The items for parental readiness were scored 0 to 1; scores ranged from 0 to 10, with low scores indicating readiness to become a parent. The range of scores on the attitudes towards pregnancy scale was 4 to 16, with lower scores indicating higher positive attitudes towards pregnancy.

Table 3: Frequencies for IPPA-R (mother & father), IPPS, PRQ, and PAS

VARIABLE	\bar{X}	SD	Minimum	Maximum
Mother Trust	36.39	4.59	20	47
Alienation	22.46	6.57	8	40
Communication	33.02	5.80	9	45
Full IPPA-R scale total	88.21	11.83	41	121
Father Trust	36.06	5.69	20	50
Alienation	23.15	6.30	8	40
Communication	30.49	7.36	9	45
Full IPPA-R scale total	89.70	14.56	40	128
Idealization of pregnancy (IPPS)	29.42	7.95	10	50
Idealization of parenting (IPPS)	30.78	7.79	13	55
Parental readiness (PRQ)	3.77	1.94	00	10
Attitudes towards pregnancy (PAS)	9.66	3.18	4	16

4.3 MAIN ANALYSIS

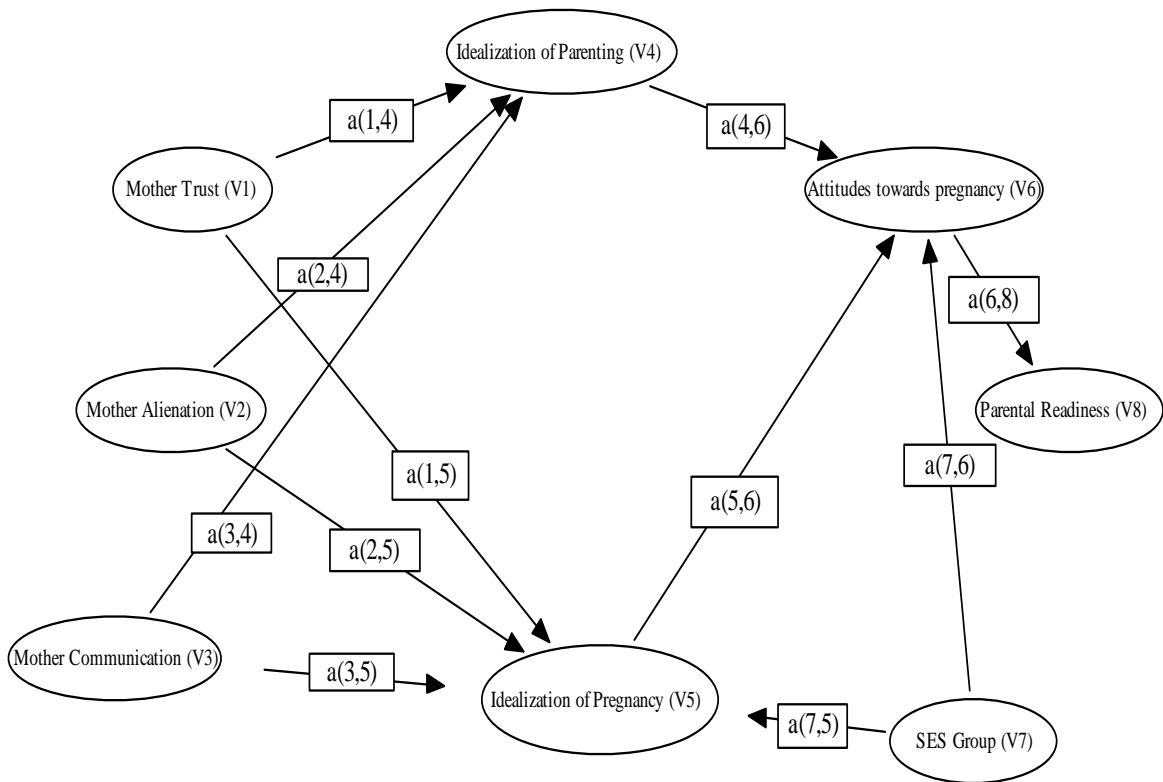
4.3.1 SEM analysis and results

SEM techniques are designed to evaluate how well a theoretical model represents the data. Models illustrated in figures 2 and 4 below, were used to test the theoretical path model, which is the model with the parameter estimates for the hypothesized relationships. The models represent mother and father attachment, respectively. The models hypothesized that attachment, measured as trust, alienation and communication, respectively, will have a significant positive relationship with idealization of both pregnancy and parenting, which will then lead to positive attitudes towards pregnancy. Those who have positive attitudes towards pregnancy are more likely to report being physically and emotionally ready to become parents. The initial models shown in figure 1 and 3 were first tested. The SEM testing was based on Robust Maximum Likelihood (ML) estimation using the EQS 6.1 for Windows programme (Bentler, 2005).

After evaluating the fit of the initial models, further analyses were conducted in an effort to improve the fit of the model according to several fit indices. To identify the most significant and meaningful model modifications the Lagrange Multiplier (LM) tests were conducted and more paths were added that would most likely improve the fit of the model and which made theoretical sense. To evaluate the fit of the models analysis focused on different types of fit indices including Bentler-Bonett Normed Fit Index (B-B NFI), Bentler-Bonett Non-Normed Fit Index (B-B NNFI), Comparative Fit Index (CFI) and Root Mean-Square Error of Approximation (RMSEA). According to convention, for example Byrne (2006), models with B-B NFI, B-B NNFI and CFI values greater than 0.90 and a RMSEA less than or equal to 0.10 are judged as providing a reasonable fit to the data. In this study, however, recommendations by Hu and Bentler (1999) were used, that is, to accept the model if the CFI > 0.95 and RMSEA < 0.06. The Satorra-Bentler scaled chi-square test (S-B χ^2) and its associated probability value were also examined.

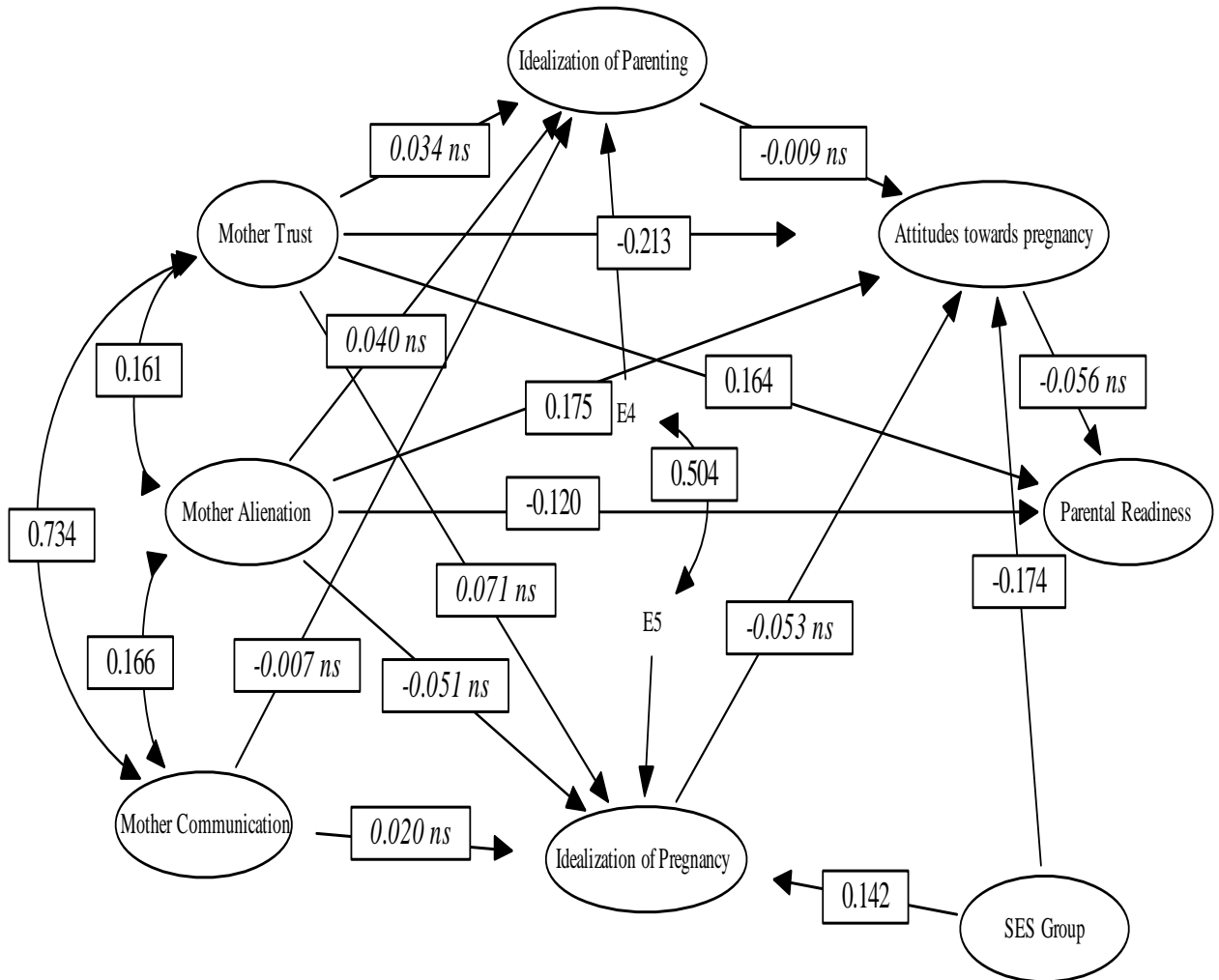
However, since the chi-square test is sensitive to large sample sizes, it is generally recommended that the model fitness should be focused on the fit indices. That is the advice followed in this study regarding the S-B χ^2 .

Figure 1: SEM: Mother attachment hypothesized model 1



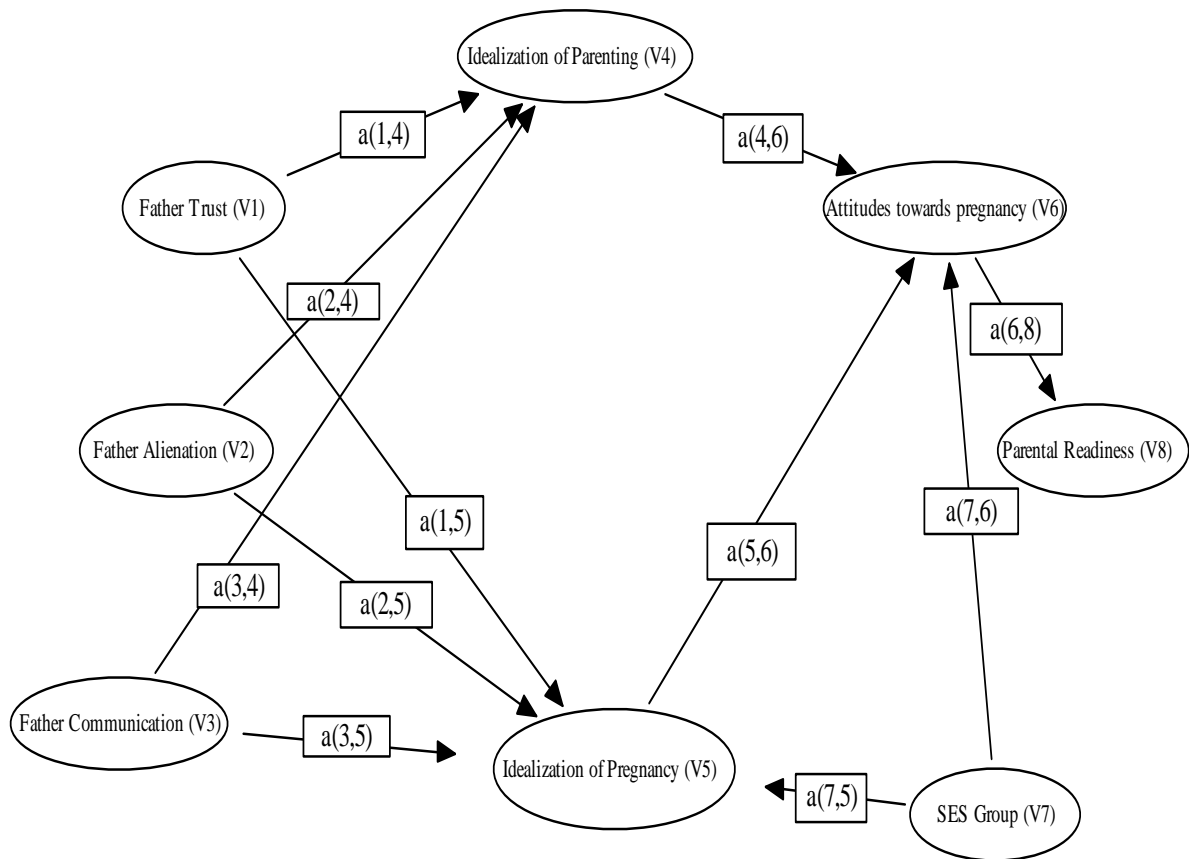
Note: In the path diagram $a(i,j)$ represents the path coefficients from variable i , V_i to variable j , V_j .
 IPPA-R = Attachment, IPPS = idealization of pregnancy and parenting,
 PAS = attitudes towards pregnancy, PRQ = parental readiness and SES =
 socio-economic status.

Figure 2: Path model for IPPA-R for mother subscale, IPPS, PAS, PRQ and SES



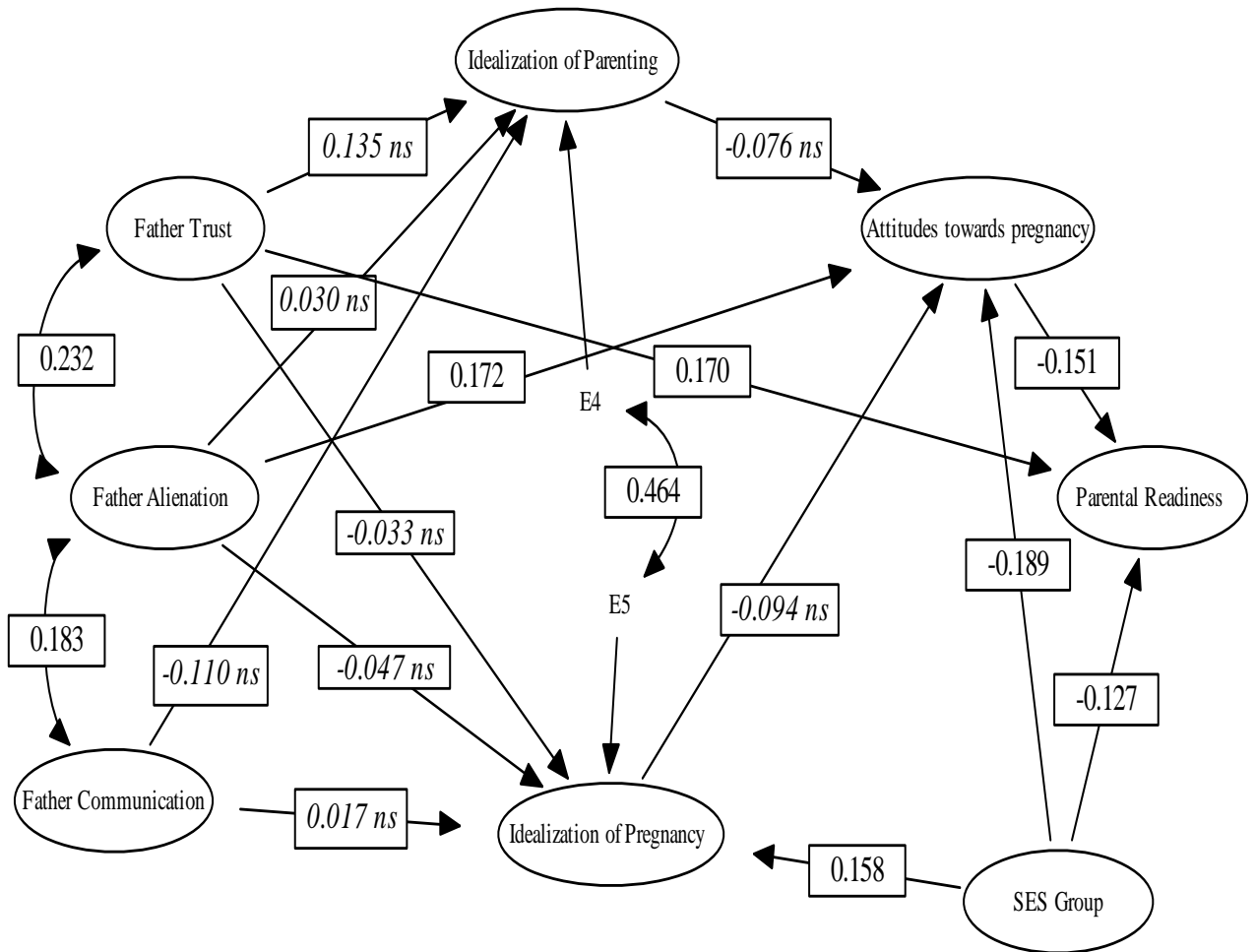
Note: IPPA-R = Attachment, IPPS = idealization of pregnancy and parenting, PAS = attitudes towards pregnancy, PRQ = parental readiness and SES = socio-economic status.

Figure 3: SEM: Father attachment hypothesized model 2



Note: In the path diagram $b(i,j)$ represents the path coefficients from variable i , V_i to variable j , V_j .
 IPPA-R = Attachment, IPPS = idealization of pregnancy and parenting,
 PAS = attitudes towards pregnancy, PRQ = parental readiness and SES = socio-economic status.

Figure 4: Path model for IPPA-R for father subscale, IPPS, PAS, PRQ and SES



Note: IPPA-R = Attachment, IPPS = idealization of pregnancy and parenting, PAS = attitudes towards pregnancy, PRQ = parental readiness and SES = socio-economic status.

Table 4 summarizes the results of the initial theoretical and final models involving the respondents' attachment to mothers and fathers. As can be seen in this table, the initial theoretical models did not fit the data well; fit indices did not reach the required cut-off values, for instance, CFI < 0.95 and RMSEAs > 0.05. Therefore, the initial models were modified by adding paths.

Table 4: Summary of fit indices for initial and final structural models

Fit measures	Mother attachment		Father attachment	
	Initial Model	Final Model	Initial Model	Final Model
B-B NFI	0.853	0.970	0.919	0.966
B-B NNFI	0.774	0.962	0.882	0.968
CFI	0.879	0.988	0.945	0.988
RMSEA	0.089	0.037	0.072	0.038
90% CI for RMSEA	(0.068, 0.111)	(0.000, 0.071)	(0.044, 0.100)	(0.000, 0.076)
P-value for S-B χ^2	< 0.001	0.110	0.008	0.141

What follows is a presentation of the results based on the standardized coefficients for the hypothesized paths as observed in figures 2 and 4.

4.3.2 Hypotheses 1 and 2: The relationship between attachment (IPPA-R) on teenagers' idealization of pregnancy and parenting (IPPS)

The first hypothesis predicted that teenagers with high levels of attachment will have a minimal desire of becoming pregnant, and the second hypothesis predicted that those with high levels of attachment will have a minimal desire towards parenting their own child. SEM indicates that both mother and father attachment, each consisting of the trust, alienation and communication dimensions, does not influence teenagers' idealization of pregnancy and parenting (see figures 2 and 4). The standardized coefficients for mother and father attachment respectively, and idealization of pregnancy and parenting were not statistically significant ($ps > 0.05$). Trust for both mother and father was not significantly related to idealization of pregnancy (coefficients = 0.071 & -0.033; $ps > 0.05$), while alienation for both mother and father (coefficients = -0.051 & -0.047; $ps > 0.05$) and communication for both mother and father (coefficients = 0.020 & 0.017; $ps > 0.05$) did not reach statistical significance with idealization of pregnancy. The trust dimension for both mother and father was not significantly related to idealization of parenting (coefficients = 0.034 & 0.135; $ps > 0.05$), while the association between both mother and father alienation and idealization of parenting did not reach statistical significance (coefficients = 0.040 & 0.030; $ps > 0.05$) and the relationship between both mother and father communication and idealization of parenting was not statistically significant (coefficients = -0.007 & 0.110; $ps > 0.05$).

Latent relationships between variables

The trust dimension for mother attachment had an inverse and significant relationship with attitudes towards pregnancy (coefficients = -0.213; $p < 0.05$). Trust for both mother and father also had a significant relationship with parental readiness (coefficients = 0.164, & 0.170; $ps < 0.05$) for the mother and father models, respectively. Alienation was significantly associated with

attitudes towards pregnancy (coefficients = 0.175, & 0.172; $ps < 0.05$) for both the mother and father models. The alienation dimension for mother attachment had inverse and statistically significant relationship with parental readiness (coefficients = -0.120; $p < 0.05$). The alienation dimension for the father model had a significant relationship with attitudes towards pregnancy (coefficient = 0.172; $p < 0.05$).

4.3.3 Hypothesis 3: The relationship between idealization of pregnancy (IPPS) and attitudes towards pregnancy (PAS)

The third hypothesis predicted that teenagers who idealize about a pregnancy will have positive attitudes towards becoming pregnant. Idealization of pregnancy did not have a statistically significant relationship with attitudes towards pregnancy (coefficients = 0.053 & 0.009; $ps > 0.05$).

4.3.4 Hypothesis 4: The relationship between idealization of parenting (IPPS) and parental readiness (PRQ)

The fourth hypothesis predicted that teenagers who idealize about parenting a child will be more open to the idea of parenting one, and will more likely report being physically and emotionally ready to become parents. SEM results from the hypothesized model for mother and father respectively did not point to a statistically significant relationship between idealization of parenting (coefficients = -0.009 & -0.076; $ps > 0.05$), attitudes towards pregnancy (coefficients = -0.009 & -0.076; $ps > 0.05$) and parental readiness (coefficients = -0.056; $p > 0.05$).

4.3.5 The association between attitudes towards pregnancy (PAS), idealization of pregnancy (IPPS) and readiness to parent (PRQ) will depend on the teenagers' SES

In both models (figures 2 & 4) socio-economic status had a significant relationship with the teenagers' idealization of pregnancy (coefficients = 0.142 & 0.158; $ps < 0.05$) and attitudes towards pregnancy (coefficients = -0.174 & -

0.189; $p < 0.05$). It also had an inverse and statistically significant relationship with parental readiness (coefficients = -0.127; $p < 0.05$).

CHAPTER FIVE

DISCUSSION

5.1 INTRODUCTION

This chapter discusses the results. The limitations of the study are also drawn and, finally, recommendations to assist for future research are outlined.

5.2 The influence of attachment on teenagers' desire for pregnancy and parenting

This study attempted to examine the influence of the parent-child relationship in shaping teenagers' attitudes towards the desire to become pregnant at this stage in their lives.

5.2.1 The influence of attachment (IPPA-R) on teenagers' idealization of pregnancy and parenting (IPPS)

It was predicted in this study that teenagers who are attached to their parents will have a minimal desire of becoming pregnant and to parent a child of their own. However, attachment to parents did not have a significant effect on teenagers' idealization of pregnancy and parenting. It is not clear from the results why there is no relationship between attachment and idealization of pregnancy and parenting. Nevertheless, a few studies that investigated the relationship between teenagers' sexual behaviour and attachment indicate that attachment to parents is associated with reduced teenage pregnancy risk through teenagers remaining sexually abstinent, postponing sexual intercourse or using contraception more consistently (Miller et al., 2001).

Further evidence in the literature is contrary to present results. In a study by Jaccard, Dittus and Gordon (1996) parent-to-teenager closeness was found to be correlated with a lower frequency of sexual intercourse. Jaccard et al. (1996) found that perceived maternal disapproval of an adolescent engaging

in sex and the quality of the relationship between the parent and adolescent are significant predictors of sexual risk behavior. It seems reasonable to assume that these parental variables may impact on teenagers' attitude toward pregnancy. Teenagers whose parents effectively convey strong disapproval of them engaging in sex may feel more negative towards getting pregnant because a pregnancy would reveal to the parent that the child had engaged in sexual risk behavior. Adolescents who have a positive relationship with their parents are more likely to internalize the general values of their parents which eventually will reduce the chances of adolescents engaging in sexual risk behaviors (Jaccard et al., 1996).

5.2.2 The relationship between attachment (IPPA-R), attitudes towards pregnancy (PAS) and parental readiness (PRQ)

SEM was used to assess the existence of multiple relationships from the hypothesized models on figures 1 & 3. SEM is a useful tool for modeling the relations among observed and latent variables. Therefore, during the process of analysis latent relationships emerged. The relationships were between two of the three dimensions (trust & alienation) of attachment, attitudes towards pregnancy and parental readiness scales. The results indicate that teenage girls who have established trust with their mothers are of the view that they will experience feelings of guilt and will feel ashamed if they were to become pregnant at this stage in their lives. This indicates that teenagers who have a close relationship with their mothers have negative attitudes towards pregnancy. The results are consistent with findings from a study by Jaccard et al. (2003) who postulated that perceived maternal disapproval of an adolescent engaging in sex and the quality of the relationship between the parent and adolescent are significant predictors of sexual risk behaviour and attitude toward pregnancy.

Teenagers who have a positive relationship with their parents are more likely to internalize the general values of their parents which mitigates against engaging in sexual risk behaviours. Parents may impact on the pregnancy attitudes of their children by forming a strong bond with their adolescent, by

conveying a clear message of disapproval of the child engaging in sex, and by discussing with their child the negative consequences of pregnancy. In their study, Jaccard et al. (2003) found that the topics of discussion that were most relevant in the reduction of attitudes towards pregnancy seemed to be those related to the embarrassment of getting pregnant, having to grow up too fast, and getting tied down by a child and being unable to finish school.

The trust dimension of attachment for both parents indicated that teenage girls were of the opinion that they were ready to become parents. Possible influences for such views about parenting could be teenage girls' observation of their interaction with their parents which could possibly lead to envy of the role that their parents are playing in their lives. On the other hand, findings indicate that alienation to mother had a significant association with teenagers' readiness to become parents. This is the one dimension that seems to depict the consequences of lack of close a relationship between teenage girls and their mothers. This is also supported by a study conducted by Harvey and Byrd (2000) who postulated that teenagers who have not established a secure attachment or a positive emotional bond with their parents may feel the need to establish this emotional bond by becoming parents themselves in order to share this bond with their own child. According to Zabin et al. (1993) these girls may see pregnancy as a means of finding a purpose in life, having someone to love, or strengthening the relationship with their sexual partner. This may be a mechanism used in an attempt to fill emotional voids or quell their loneliness, because they feel mothering is the only thing that might enable them to get the attention they want but are not currently getting.

A study by Cater and Coleman (2006) indicates that a very commonly reported explanation for planning to become pregnant was having experienced an unsettled background. Sometimes this unsettled background was due to life events, such as separation from their parents and a lack of closeness with parents (Cater & Coleman, 2006). At other times, the unsettled feeling was associated with not feeling secure in their family environment, perhaps due to bad family relationships and arguments. In some more serious cases, the situation made the young woman leave home. Leaving home early

for these reasons seemed to make these teenagers more vulnerable to further disruption and involvement in risky health behaviours. In many cases, their lives were stabilized by meeting a partner, who would ultimately become the father of their child (Cater & Coleman, 2006). These distressing experiences were often drawn on when explaining their own choices for parenthood, as a desire for wanting a 'complete' family of their own. Pregnancy offered the young women an opportunity to correct these disruptive and unstable experiences, and enable them to focus their attention on ensuring this would not happen in their own parent-child dynamic.

According to findings from this study, attachment appears to produce both positive and negative outcomes. On the one hand, teenage girls who have a close relationship with their parents can become oblivious to the consequences of parenting a child. This factor was established from a study by Condon et al. (2000) who indicated that the teenagers' strong feelings are tied in some way to real or fantasized romantic emotions. Condon et al. (2000) assert that due to this experience of positive emotions, teenagers tend to underestimate the likelihood of negative consequences to their actions. On the other hand, however teenagers who have poor relationships with their mothers may be of the view that their mothers are not doing a decent job of raising them. This ideology may thus result in idealized scenarios of how they would raise their child. If this view is pathological enough, coupled with immaturity and lack of experience, may result in a decision to have their own child. Further research is, however, needed to ascertain this assumption.

5.3 The relationship between idealization of pregnancy (IPPS) and attitudes towards pregnancy (PAS)

The third hypothesis predicted that teenagers who idealize pregnancy will have positive attitudes towards pregnancy. The results confirm this prediction and indicate that idealization of pregnancy is related to attitude towards pregnancy. The idealization of pregnancy scale was developed with the belief that the idealization of pregnancy amongst teenagers is a significant factor that is likely to result in pregnancy. According to Condon et al. (2000) this

could be due to the fact that adolescents' social cognition is subject to more emotional influences and most of their strong feelings are tied in some way to real or fantasised romantic emotions. Condon et al. further stated that when people experience positive emotions, they tend to underestimate the likelihood of negative consequences to their actions.

A study by Brückner et al. (2004) also supports the finding by Condon et al. (2000). The current study also indicates that adolescents have access to the means to avoid pregnancy but do not use them, or use them inefficiently because they do not appreciate the consequences of pregnancy. The findings from the current study are in accordance with results from previous studies, which suggest that a significant proportion of adolescent pregnancies arise, not by accident or as a result of negative attitudes to contraceptives use, but rather as a result of positive, idealised attitudes to pregnancy (Condon et al., 2000).

A significant association was not found between idealization of pregnancy and attitudes towards pregnancy which was meant to measure attitudes towards pregnancy. The lack of significance indicates teenagers' positive attitudes towards pregnancy. This finding is consistent with previous research. A study by Cuffee et al. (2007) reported that positive or ambivalent perceptions and attitudes towards pregnancy have been associated with an increased risk of getting pregnant. This is because attitudes may influence the initiation of sexual activities which eventually lead to unprotected sexual intercourse (Cuffee et al., 2007). In Zabin et al. (1993), the investigators reported that adolescent females they interviewed at the time of pregnancy testing stated that they wanted to be pregnant and that a substantial number of these young women expressed ambivalent feelings about postponing childbearing (reviewed by Stevens-Simon et al., 1996). Stevens-Simon et al. (1996) surveyed a sample of pregnant adolescents and found that they wanted to become pregnant, and some reported that they would not mind if they became pregnant.

Criticisms have been raised against studies that used samples of pregnant and parenting teenagers. It was said that results from these studies that suggest pregnancy intent (reviewed by Stevens-Simon et al., 1996) are to be interpreted cautiously since the attitudes of pregnant and parenting teenagers may not reflect those of never-pregnant teenagers. According to Condon et al. (2000) rationalization and unwillingness to acknowledge a mistake may influence teenagers to report that they wanted to become pregnant. These criticisms are annulled by recent studies of attitudes towards pregnancy that included non-pregnant teenagers as their sample and found that also teenage girls who are not pregnant have positive or ambivalent feelings about pregnancy (Stevens-Simon et al., 1996). Stevens-Simon et al. (1996) found that never-pregnant female teenagers stated that they wanted to get pregnant immediately, others stated that they would not mind being pregnant.

According to Steven-Simon et al. (1996) teenagers state that the primary reason that they had not been using contraceptives at the time of conception was that they wanted to get pregnant. The sample for the present study consisted of teenagers who had never been pregnant, and the results suggest that idealization of pregnancy is associated with positive attitudes towards pregnancy among never pregnant teenagers. This finding is consistent with findings by Stevens-Simon et al. (1996), and can be seen as adding to the body of research that provide answers to queries that have been raised about those studies that used pregnant and parenting teenagers as their sample.

5.4 The relationship between idealization of parenting (IPPS) and parental readiness (PRQ)

The relationship between idealization of parenting and parental readiness is one aspect that has been scantily explored in previous research. However, it seemed necessary for this relationship to be explored in this study. The main reason was to assess whether teenagers who idealize parenting will be open to the idea of parenting and if they perceive themselves as being physically and emotionally ready to carry the responsibility of parenting their own child. The findings from the current study indicate that idealization of parenting does

not influence teenagers' readiness to become parents. This finding is contrary to the findings reported in Condon et al. (2000), indicating that early researchers, such as Le Masters (1970) identified highly idealized and romanticized beliefs about parenthood amongst teenagers in the 1960s. However, the subsequent four decades have witnessed immense social change that has impacted considerably upon teenagers. According to Condon et al. (2000) some researchers argue that the idealism of the 1960s and 70s has, in the face of improved education, re-evaluation of the role of women, greater exposure to electronic media, and so on, given way to a more realistic worldview. More research is needed to explore this aspect further, since the results from the current study contradict existing research.

5.5 The association between attitudes towards pregnancy (PAS), idealization of pregnancy (IPPS) and readiness to parent (PRQ) will depend on the teenagers' SES

SES proved to be an important factor in the prediction of attitudes towards pregnancy, idealization of pregnancy, and parental preparedness. This is congruent with Brooks-Gunn, Duncan, Klebanov and Sealand (1993) who established a relationship between SES and teenage pregnancy. Parents' SES is usually established by some combination of their education, occupation or income. According to Miller et al. (2001) parents' SES is related to adolescent pregnancy. Adolescents whose parents have higher education and income are more likely both to postpone sexual intercourse and to use contraceptives.

A study by Kirby (2001) postulated that when community members are high achievers in terms of education, income and employment and they place a greater emphasis on higher education, pursuing career goals and avoiding teenage pregnancy, teenage pregnancy rates are likely to be low. Further research is required to ascertain these findings. Despite the fact that a substantial number of teenagers came from fairly affluent families, nothing is known about the socio-economic status of members of their communities. It is likely that teenage girls internalize subtle overt messages from the society

which shape different attitudes and beliefs about pregnancy and parenthood (Cuffee et al., 2007).

5.6 Conclusion

The current study examined the influence of parent-child attachment on teenagers' attitude towards pregnancy and parenting. The results indicate that attachment to parents does not influence idealization about pregnancy and parenting. Attachment appears to have both negative and positive outcomes on teenagers' perceptions about parenting their own child depending on the dimension that one focuses on. Both the trust and alienation dimensions of attachment indicated teenage girls can carry the responsibility of parenting a child. This means that teenagers who have a close relationship with their parents and those who do not have such a close bond have positive views about carrying the responsibility of parenting a child.

Finally, the present study found a relationship between socio-economic status, idealization of pregnancy and teenagers' report of being physically and emotionally ready to become a parent. The general conclusion is that teenagers who have established trust with their mothers may experience feelings of guilt and shame because pregnancy will be proof to their parents that they are sexually active. While those who are alienated from their parents may see parenting as a compensatory mechanism for the poor relationship they have with their parents. Further research is however needed to explore and understand these influences.

5.7 Limitations

The sample of the study was limited to African high school learners, which limits generalization of findings to other ethnic groups. It was also not representative of the whole sample of learners in the chosen geographical area. The sample was limited to teenagers aged 14 and 15 years in two schools, and therefore the findings can only be generalized to this group only.

5.8 Recommendations

The South African government is faced with a teenage pregnancy problem which cannot be combated only by providing teenagers with contraceptives. There is a need for intervention programmes to focus on changing teenagers attitudes. Intervention programmes can be structured in such a way that they enhance the parent to child relationship. A close parent-to-child relationship provides teenagers with the opportunity to form a strong bond with their parents and avoid feelings alienation. Teenagers who have a close relationship with their parents will be able learn and internalize their parents' attitudes and values about pregnancy and parenting and are more likely to develop a strong responsible behaviour. It is recommended that parents be encouraged to convey their disapproval of teenagers engaging in sexual activity and becoming pregnant at this stage in their lives. Teachers also need to be equipped with skills for identifying teenagers who have troubled relationships with their parents and make appropriate referrals.

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APPENDICES

APPENDIX ONE: COVERING LETTER

Department of Psychology
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Faculty of Humanities
University of Limpopo
(Turfloop campus)
Mankweng Township 0270



Dear participant,

My name is Naureen Patience Mbhalati. I am currently studying for a Masters degree in Clinical Psychology with the Department of Psychology at the University of Limpopo. The title of the research I am conducting is: **Attachment and idealization of pregnancy and parenting, attitudes towards pregnancy and parenting readiness among school-going female teenagers**. The research forms part of the requirements for the completion of my degree. Your participation in this study is voluntary. Before filling in the questionnaire, please read the instructions carefully. Where you do not understand do not hesitate to ask for assistance.

Regarding confidentiality, you are not expected to write your name in any of the questionnaire pages. I request you to kindly fill in this questionnaire as accurately and carefully as you possibly can.

Thank you in advance for your cooperation.

Are you willing to participate in this study?

YES	NO
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If you answered “NO” to the above question, please stop now and do not answer any further questions. I thank you for your time. If you answered “YES”, it means that you are willing to participate. Therefore, please continue.

APPENDIX 2

1.1 SOCIO-DEMOGRAPHIC DATA

1. Gender: Male Female

2. How old are you? _____ years old

3. Where is your home based?

Rural Area/ Village	
------------------------	--

Township/Suburb	
-----------------	--

4. Ethnic group:

Tsonga	
--------	--

Sepedi	
--------	--

Venda	
-------	--

Other	
-------	--

5. Highest level of education:

Grade	
-------	--

6. Marital status:

Single Cohabiting Married
 Separated Divorced Widowed

7. **Mother's highest educational level**

No formal Schooling	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Grade 8
Grade 8	Grade 9	Grade 10	Grade 11	Grade 12	Degree/ Diploma	Honours	Masters & Higher

8. **Father's highest educational level**

No Formal Schooling	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Grade 8
Grade 8	Grade 9	Grade 10	Grade 11	Grade 12	Degree/ Diploma	Honours	Masters & Higher

APPENDIX 3

2.1 FAMILY STRUCTURE:

(i) **How many people belong to your household?**
Number of persons in the household: _____ persons.

(ii) **Who are the people who live in your household for the better part of the year? Please mark with a cross all the individuals who live in your household for the better part of the year?**

- | | | | |
|--|--------------------------------------|---|---|
| <input type="checkbox"/> Biological mother | <input type="checkbox"/> Step-mother | <input type="checkbox"/> Maternal grandmother | <input type="checkbox"/> Paternal grandmother |
| <input type="checkbox"/> Biological father | <input type="checkbox"/> Step-father | <input type="checkbox"/> Maternal grandfather | <input type="checkbox"/> Paternal grandfather |
| <input type="checkbox"/> Sisters | <input type="checkbox"/> Brothers | <input type="checkbox"/> Uncles | <input type="checkbox"/> Aunts |
| <input type="checkbox"/> Lodgers | | | |

(iii) Number of sisters: _____

(iv) Number of brothers: _____

(v) Average age of grandparents: _____ years