

THE LIVED EXPERIENCES OF PREGNANT TWIN STUDENTS: A CASE STUDY

Dr. Norman Raotraot Galabo, FRIEdr

DepEdMintal Comprehensive High School Davao City, Philippines

Case Study

Corresponding Author

Name: Dr. Norman Raotraot Galabo,

Email: *****

Contact: *****

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ABSTRACT

The purpose of this qualitative case study was to explore the lived experiences of pregnant twin students in a certain public secondary school in Davao City, Philippines. Using purposive sampling technique, the study focused on the two informants who are identical twins and both in 10th Grade. In-depth interview, observations, and field notes were utilized in analysis of data. Narratives were carefully transcribed, translated, and underwent thematic analysis to generate essential themes. Results disclosed that pregnant twin students experienced the use of contraceptives, physical and emotional distress, anxiety about the future, shame and humiliation, changes and prohibitions, the use of contraceptives, love and support of significant others. Also, pregnant students tried to cope with the situation by means of apathy, tenacity and turning to support systems. Along with the realizations of pregnant twins, the study underscored that regrets and remorse are always in the end, early pregnancy is a momentary setback, teenage girls should know better about life, love and sex, and that love and acceptance prevail in the end. The study encouraged future researchers to conduct teenage pregnancy among twin students in secondary schools where the participants may be escalated into bigger number to generate substantive patterns, similarities, and differences.

KEYWORDS: - Basic education, pregnant twin students, public schools, case study, Philippines

I. INTRODUCTION

In today's generation, teenagers become more aggressive in everything that they do in different fads and fashions in the society. Mostly, they encounter a lot of problems as they struggle this stage of their lives. They may be too young to be misled and suffered by their immaturity of making wise decisions in life. One of the prevalent dilemmas today is about teenage pregnancy. Teen pregnancy continues to be a problem for families, educators, health care professionals, and the government (Brown, 2013).

Since 2001, the United States has not made much advancement in reducing the number of unintended pregnancies. These rates have been increasing and remain fairly high overall. Teen pregnancy also poses a concern since more than four out of five unintended pregnancies occurred in teens 19 years old and younger. The number of unplanned teen pregnancies ending in abortion also increased for teens 15 to 17 years old between 2001 and 2006 (Stacey, 2012).

In the Philippines, the 2013 National Demographic and Health Survey (NDHS) conducted by the Philippine Statistics Authority (PSA) revealed that one in ten young Filipino women age 15-19 has begun childbearing: eight percent are already mothers and another two percent are pregnant with their first child. Early pregnancy and motherhood varies by education, wealth quintile, and region. It is more common among young adult women age 15 to 24 with less education than among those with higher education. Additionally, one in five (19 percent) young adult Filipino women age 18 to 24 years had initiated

their sexual activity before age 18. Some of them would have had their first intimate sexual act before marriage. Initiation of sexual activity before age 18 is more common among young adult women with less education and those in poorer households (Recide, 2014).

In Davao Region, Commission on Population XI said that the numbers of teenage pregnancy are alarming. These findings can be attributed in part to the fact that 44 percent of female youth from Davao Region have sexual experience because the lack of education on sexuality among youth is the reason why there is a prevalence of teenage pregnancy. Some critics pointed out that the government has failed to provide the necessary assistance and most health centers lack support system from the government. Teenage mothers need these kinds of support, especially that their parents only earn a meager amount of money through selling goods in a public market (Clerigo, 2016).

There are previous studies about teenage pregnancy, for instance, the phenomenological study of Wamelda, Daclan and Gempes (2016) which focused on pregnant secondary school students who were descendants of unwed mothers and was conducted in the Division of Davao del Norte. However, this present inquiry is an in-depth qualitative case study wherein the informants are living with parents who are legally married and have enough capacity to provide an ideal picture of a family. Besides, this study is conducted in the Division of Davao City where there is no qualitative study yet conducted regarding teenage pregnancy

which deals on twin students, hence, this made the study unique and more interesting.

PURPOSE OF THE STUDY

The purpose of this qualitative case study was to explore the experiences of pregnant twin students in a certain public secondary school in Davao City, Philippines. Besides, this research presented the different lived experiences of the pregnant twins about their experiences, coping mechanisms, and realizations. Specifically, this study aimed to answer the following research questions:

1. What are the lived experiences of pregnant twin students about teenage pregnancy?
2. What coping mechanisms do pregnant twin students use to address adversities of pregnancy?
3. What realizations and insights do pregnant twin students learned?

THEORETICAL LENS

The social cognitive theory was espoused in this study. Social cognitive theory emphasizes behavior, environment, and cognition as the key factors in development. The social cognitive model is concerned with ways in which mental representations of social events, societal, and cultural norms, and personal characteristics influence behavior, reasoning, emotion, and motivation. Specifically, the

approach addresses acknowledgment, self and social goals, mental representations of self and others, and the role of social facilitation in decision-making, memory, and judgment (Bandura, 1986).

Social cognitive theory, complex cognitive functioning involved in coping, everyday problem-solving, and decision-making in health as well as in social situations depends on basic cognitive methods. Furthermore, it depends on the organization of existing knowledge structures and socially-derived emotional and motivational influences on performance. Martino, Collins, Kanouse, Elliott and Berry (2005) explained how cultural influences serve as behavioral models for young people: social-cognitive theory contends that people observe important role models, make inferences and attributions and acquire scripts, schemas and normative beliefs that then guide their subsequent behavior. This theoretical perspective would predict that adolescents learn sexual behaviors and their likely consequences by watching television. To the extent that adolescents acquire favorable beliefs about sex and confidence in their own sexual abilities as a result of viewing sexual content on television, they become more likely to attempt the modeled behaviors. In this study, other contributing factors could be also explored.

Furthermore, the social-cognitive analysis of pregnancy prevention would stress the importance of information concerning sexual activities, skills for managing behavior in relation to reducing pregnancy risk, feelings of self-efficacy in relation to pregnancy

prevention, and social influence factors as determinants of pregnancy preventive behavior. Hence, this study would suggest better preventive ideas based on deeper understanding about early pregnant students (Martino et al., 2005).

Self-efficacy is a frequently cited construct in social cognitive theory. Bandura's social cognitive theory assumes self-efficacy and outcome expectancies (related to situation and action) are central determinants of behavior. According to Bandura (1992), self-efficacy is confidence in one's own ability to carry out a particular behavior. In the present context, self-efficacy theory predicts that pregnancy- and STD prevention behaviors will be performed if the individual perceives they have control over the outcome, there are few external barriers, and they have confidence in their own ability to carry out the behaviors.

In this context the theory of planned behavior would apply in the present investigation as an extension of the theory of reasoned action. The theory of reasoned action proposes that an individual's sexual preventive behavior is a function of the individual's behavioral intention to perform a particular act. Behavioral intentions, in turn, are assumed to be a function of three factors. These include a person's attitude toward performance of a particular preventive behavior, the individual's subjective perception of what significant others wish the individual to do with respect to the behavior in question, or both (Fishbein&Ajzen, 1975).

SIGNIFICANCE OF THE STUDY

This paper expanded the real existence of early pregnancy among students particularly its reasons and consequences and how to handle its worst effects not only for the victims but as well as to other students who are also vulnerable in experiencing the same. The lived experiences of the informants may also serve as lessons to all the students and the entire community. Through this study, preventive measures could be possibly discovered which may address the present problem about teenage pregnancy.

Findings of the research could lead to a better understanding of pregnant students and be able to deal them with respect and proper care. School heads, teacher-advisers and guidance advocates may attain their goal of educating pregnant teenage girls about healthy relationships it may help reduce or prevent a second baby. A secondary benefit would be the reduction of dropout rates caused teenage pregnancy. As a result of teaching about appropriate relations, gaining self-respect and building self-esteem teenage girls will better understand the importance of practicing safer relationships. A third benefit would be a decrease in the number of children born out of wedlock. Thus, it is hoped the results of this study may be useful to counselors, educators, administrators and parents who are searching for a consistent means of effectively reducing unhealthy and inappropriate decisions and relationships among teenagers.

DELIMITATION AND LIMITATION OF THE STUDY

This qualitative research is delimited only to the identified pregnant twin students in a certain public secondary school of Davao City, Philippines. These informants experienced early pregnancy during the School Year 2016 - 2017 where they are officially enrolled. One of the weaknesses of this study, however, was that it utilized the qualitative method, which means that the results could not provide generalization. Another weakness was the small number of participants of the study. Despite safeguards as to the trustworthiness and credibility of the statements of the informants, their small number contributed to the probability that the statements of the informants may not be truly representative of the total population of the students who got pregnant.

II. REVIEW OF RELATED LITERATURE

This part deliberately showed the different views of authors regarding teenage pregnancy especially its positive and negative sides. Teenage pregnancy has been looked at as a controversial topic for decades. The trends and practices have indeed changed over time but one thing is still undebated: the young mothers and the babies born out of those pregnancies need optimal support to thrive and have the best chances in life.

In African countries more than 30 percent of all babies born each year are conceived by teenagers. Teenage

pregnancies are reaching alarming proportions. A national figure is not available, but some communities have reported that 30 percent of all births are attributed to teenage mothers. Some African teenagers believe that the use of contraceptives makes them sterile, and that plastic wrap make an effective condom. Some teenagers believe that they cannot get pregnant in the first time of sexual intercourse, if they are having their period, if the male withdraws in time, and they are having sex in a standing position (Charters, 2006; Genobaga, 2007; Kruger, 2008; & Mlambo, 2005).

Consequently, oftentimes scholars believed that social pressures push the teens toward falling pregnant. Some girls feel that they will only be accepted as girls once they have proved their fertility, and there are some mothers that want their daughters to become pregnant so that they could have a baby at home again. Some teenagers, pregnancy is not accidental and unwanted but having a baby is a planned and deliberate choice. For these teenagers the decision to become a mother is often influenced by social factors such as having a mother who had her own first child earlier than average, having friends who are themselves young mothers and having a stable relationship - which may or may not be marriage with a partner (Bull, 2011; Conger, 2005; Rice, 2005; & Van den, 2005).

In some societies, early marriage and traditional gender roles are important factors in the rate of teenage pregnancy. For an example, in some sub-Saharan

African countries, early pregnancy is often seen as a blessing because it is proof of the young women fertility. In the Indian subcontinent early marriage and pregnancy is more common in traditional rural communities compared to the rate in cities. Pregnancy in teenagers is sometimes the result of traditional roles and early marriage. Once more because of the change in time, the teenagers feel that having sex before the age of 20 is the normal thing, and thus they engage themselves to it without the provision of comprehensive information about sex. Due to the shortage of knowledge, eventually they fall pregnant (Morojele, Brook, & Kachieng'A, 2006; Panday, 2009; & Varga, 2008).

On the other hand, youth living in poverty have a teenage pregnancy rate which is five times the average. Socio-economic circumstances seem to play a major role in rates of teenage pregnancy. There may be a growing 'lost generation' of young people who see no reason not to get pregnant. For some disadvantage youth, particularly for girls whose self-esteem tends to drop as they mature, sexuality may be all they have to value. Lack of opportunity and hope for future, have been identified as a driving force behind high rates of teenage pregnancy (Moore, 2006; Rathus, 2008; & Seifert, 2007).

It was noted in some write ups that the major causes of teenage pregnancy are the educational level and the higher rate of poverty. Poverty is associated with the increased rate of teenage pregnancy. Economically poor countries have far more teenage mothers compared with economically

rich countries. Some girls fall pregnant just because they want social grant. The rate of pregnancy and childbirth is high among poorer adolescents. Other scholars found out that 83 percent of adolescents who have babies are from poor families (Newman, 2006; Nzama, 2008; & Van den, 2005).

Teenage pregnancy can be caused by adolescent sexual behavior. Some teenagers fall pregnant because they lack information or access to conventional method of preventing pregnancy. For example, inexperienced teenagers may use condoms incorrectly or forget to take oral contraceptives. Contraceptive failure rates are higher in teenagers, particularly girls from the poor social backgrounds (Dittus & Jaccard, 2000; Morojele et al., 2006; Naidoo, 2005; & Strasburger, 2009).

In the same vein, some experts stated that the teenager's sexual decisions may be influenced when one is suffering from boredom and wants to be fashionable, ignorant of the consequences of sex, carried away by passion, coerced by one's partner and wants to prove one's love, under pressure and cannot say no, believes that one is obligated because of the cost of the date, under the influence of drugs and alcohol, and part of the group that values sexuality (Panday, 2009; Teal, 2007; & Varga, 2008).

Similarly, teenagers may decide to become sexually active for the following reasons: rebellion against parental or religious restraints, seeking physical pleasures as an escape from loneliness,

boost poor body image, feelings of inadequacy or poor self-esteem, desire to make the partner responsible for her or fear of losing him, virginity perceived to be a 'burden' because of peer pressure, and desire for pregnancy by an emotionally deprived girl who needs to be a mother and wants to be a mother (Cox, 2007; Gerdes, 2009; & Panday, 2009).

In addition, teenage pregnancy is frequently associated with problems for the adolescent parents and their children as well as more widespread social and economic consequences. This research on teen pregnancy includes studies related to sex education, prevention and birth control, infant low birth weight, and educational options for teen moms, as well as groundbreaking research on the link between exposure to sexual content on television and teen pregnancy. Findings revealed that teenage women exposed to pornography in the internet are more curious to undergo sexual activity and more likely to experiment sexual intercourse (Naidoo, 2005; Rathus, 2008; & Seifert, 2007).

Women exposed to abuse, domestic violence and family strife in childhood are more likely than those without such experience to have a teenage pregnancy, and the risk increases with the number of adverse childhood experiences. Some European studies revealed that one-third of teenage pregnancies could be prevented by eliminating exposure to abuse, violence and family strife. Also, several articles explained that pregnancy rate is high because teenagers lack responsibility

(Cocca, 2006; Essau, 2004; & Teal, 2007).

In the same way, teenagers lack responsibility because teens get pregnancy because they usually do not practice safe sex and definitely do not practice abstinence. Teenagers also fell pregnant because they lack respect for themselves, do not care about themselves, and some are just lazy. In other words, it is hard for them to say no. Once the teenager engages herself in unprotected sex, it might happen that she is lazy, she does not want to go to the family planning where she will get contraceptives (Mlambo, 2005; Naidoo, 2005; & Strasburger, 2009).

There is a considerable misinformation about sexual health matters amongst young people. Sexual health education in the form of life skills have been introduced as a compulsory part of the school curriculum, but the way in which it is implemented is not successful. Most educators are not well equipped on how to implement it. School experiences, school achievements, and educational aspirations influence patterns of adolescent pregnancy and childbearing (Bissell, 2010; Coley, 2005; & Hanna, 2010).

Similarly, young women engaged in school activities are less likely to get pregnant. If the education system is discouraging, some adolescents drop out school early. Adolescents that attend large and overcrowded schools staffed by relatively inexperienced educators, and, in addition, have to face safety concerns problems with gangs, and language difficulties, are more likely to complete their high school education.

Poor-quality schools and social exclusion prepare young people for low-age and unstable employment offering and little incentive to stay in school (Hudson, 2006; Lanzi, Bert, & Jacobs, 2009; Murphy, 2014; & Stacey, 2012).

It was articulated by some researchers that pregnancy and birth are significant contributors to high school dropout rates among girls. The children of teenage mothers are more likely to have lower school achievement and drop out of high school, have more health problems, be incarcerated at some time during adolescence, give birth as a teenager, and face unemployment as a young adult (Babalola, 2004; Bezuidenhout, 2009; & Coley, 2005).

Sex education offered in schools, especially in the form of after-school programs, is another variable of influence impacting teen sexual practice and teenage pregnancy. It is the after-school programs that are the most influential because this is the time many teenagers are unsupervised and vulnerable to risky behaviors. Because the relationship between academic failure and teen pregnancy is so strong and because young people spend so much of their time in school, educational institutions should partner with the community to continue their mission during after-school hours. After-school programs are generally run by parks and recreation centers, which may not be governed by laws or policies prohibiting religious teachings in public schools. Research has shown that teens are more likely to postpone premarital relations, and thereby pregnancy, when they can envision a positive future (Mueller, Gavin, & Kulkarni, 2008).

Moreover, adolescents who participate in one or other form of risk behaviour often partake in other risk. The high rate of drug and alcohol abuse contributes a lot to teenage pregnancy. When a teenager is being intoxicated with drugs and/or alcohol she may find herself doing unprotected sex which may result in pregnancy. It is confirmed with some health experts that the psychoactive effects of alcohol and drugs used are taught to increase sexual arousal and desire, decrease inhibition and tenseness, diminish decision-making capacity, judgment and sense of responsibility, and generally disempowered women to resist sex. The studies have reported on the increased risk of forced sex and the decreased likelihood of using condoms when under the influence of alcohol. These effects are facilitated in a context of high unemployment, and in an environment where peer norms promote heavy drinking, alcohol and drugs are easily assessable and casual sex readily available (Sosibo, 2007; Turner, 2007; Weiss, 2012; & Ziyane, 2006).

Another problem facing teen mothers is the use of drugs and alcohol, including cigarette smoking. In fact, their use can complicate pregnancy even further increasing the likelihood of premature birth and other complications. Premature birth and low birth weight create a wealth of their own problems, including brain damage, physical disabilities and more. Many of the teen mothers who take active roles in their care do go on to have healthy babies, despite the other hardships that they will face in their lives (Dittus & Jaccard, 2000; Kruger, 2008; & Weiss, 2012).

The aforementioned literature and studies revealed a wide variety of possible causes of teenage pregnancy, ranging from the individually based factors such as risk-taking behaviours to social based factors. Rape, ignorance, not wanting to use contraceptives, proving womanhood, desire to hold on to a boyfriend, poverty- sex in exchange for security, money, roof over one's head, transport to school are all factors that contribute to the rise in the teenage pregnancy. Through urbanization, some traditions have been broken down. Most of the parents are working and do not have time to talk about sex to their teenager, and the teenagers ended up getting incorrect information from their peers or their boyfriends. These factors justify that there was a need to conduct a study on teenage pregnancy in Davao City employing qualitative design utilizing case study in order to understand the diversified stories of secondary school pregnant teenagers.

III. METHODOLOGY

This qualitative inquiry used a case study design in order to elicit in-depth information about the informants. According to Creswell (2007) that case study research involves the study of a case within real-life, contemporary context or setting. This type of qualitative study has various advantages which made the inquirer chose this design. A qualitative case study can be composed to illustrate a unique case that is unusual interest in and of itself and needs to be described and detailed. A hallmark of this design is

that it presents an in-depth understanding of the case. In order to accomplish this, the researcher collected the data from comprehensive interviews, observations, documents, and audiotaped materials. One source of information is not enough; hence, the inquirer selected twin informants who were pregnant students. Also, one of the greatest strengths of the case study design is its adaptability to different types of research question and to different research settings (Rose, Spinks&Canhoto, 2015).

This study used triangulation to validate its results. Yin (2003) emphasized that triangulation is considered as one of the most important features of case study. He defined that triangulation is consist of collecting data through different methods or even different kind of data for the same phenomenon. This process of triangulation will produce a more complete, holistic, and contextual picture of the object under study. It further helps reduce likelihood of misinterpretation and bias that might result from relying exclusively on any data collection method, analyst, theory, or source. In this study, observations and date results of in-depth interviews from five pregnant secondary students will be compared and corroborated in order to establish themes of their experiences.

Purposive sampling technique was used in identifying the informants of this research because it would be easier for the researcher to get adapted with the current predicament as the twin informants belong to the same school which can be easily accessed. Creswell (2007) also suggested this sampling

technique is appropriate for qualitative case studies.

I conducted an in-depth interview among the participants in order to obtain and elicit detailed and clear descriptions of the study that would include experiences, challenges, coping mechanisms and realizations. I employed semi-structured or focused interviews in which questions were contained in the interview guide with a focus on the issues about teenage pregnancy. The interview guide was validated by expert evaluators to ensure viability of the expected output.

Mack (2005) supported that in-depth interviews are optimal for collecting data on individuals' personal histories, experiences and perspectives, especially, when sensitive topics are explored. Likewise, Patton (2002) stated that interview is used to find out some things that one cannot directly observe. Feelings, intentions and thoughts are examples of those that one cannot directly observe. Behaviours that happened at some previous point in time; situations that preclude the presence of an observer; and how people organized the world and the meanings they gave to what goes on in the world - these are examples that we cannot observe. Thus, we have to ask questions to people about those things. The purpose of interviewing is to allow us to enter into other person's point of views and experiences.

ROLE OF THE RESEARCHER

My main role as the researcher of this study was being sensitive to the varied opinions, ideas, and interpretations of

the shared experiences of the research informants. It meant that I must have acute awareness of the subtleties of the meaning of the data that I was able to collect. Accordingly, Maxwell (2005) said that in qualitative research, the investigator is viewed as the instrument. The primary data for this case study are in-depth interviews that took place in the setting where the informant were convenient with. As the primary investigator, I personally gathered the data by visiting the informant's residence.

I believed that being inquisitive will lead us to create new knowledge and the appreciation of that knowledge. Doing qualitative research in particular, normally utilized in 'natural setting' as the main base of information. In here, it was the role of the researcher to act as an observer and listener, a story teller, and an interpreter of settings (Patton, 2002).

As a researcher, I maintained objectivity as I did the process; hence, I made sure that the interpretation of my data was closest to what and how the informants wanted to make known. In other words, the experiences cited by the informants were the bases in designing the interpretation of the report. To achieve the optimum objectivity in writing the experiences and insights, I allowed my informants to re-read and re-examine the lines and narrations.

RESEARCH PARTICIPANTS

The research informants were the two pregnant students who are identical twins and enrolled in the 10th Grade of

the School Year 2016 – 2017. They were identified by the class adviser, reported to the school statistician and counseled by the guidance advocates. These informants were under the Modular Program or Alternative Delivery Mode of learning wherein they have their own schedule of meetings and classes. The said programs are specially designed by DepED to address increasing rates of dropout and failure. The pregnant twin students were both 17 years old and lived in the rural area of Davao City, Philippines. Interestingly, the situation of the twin students who got pregnant in the same academic year made this study unusual. Likewise, informants of this study may withdraw anytime they wanted to especially whenever they feel discomforts physically or emotionally. It is emphasized that participation in this study is basically voluntary and no monetary compensation involved.

DATA COLLECTION

A semi-structured interview guide was used in collecting the data which underwent content analysis and expert validation. Before the conduct of study, I made sure that research protocols are strictly observed. Specifically, a letter of permission from the Office of the Schools Division Superintendent was secured. When the approval was granted, I coordinated with the school head and the guidance advocate of the school where the identified twin informants were officially enrolled. Parental consent and assent form were also secured. Then, the schedule of the interview was set in accordance to the convenience and availability of the informants. On the day of actual

interview, I set the mood first so that it would be comfortable for conversations. The informant was requested to read and sign interview protocol or assent form which clearly states their freedom to decide to participate and they can refuse or withdraw anytime during the interview process. The interview lasted an hour enough to achieve needed data.

DATA ANALYSIS

Appropriate qualitative descriptions were used in order to have a comprehensive analysis of data. The data gathered from the informants were properly transcribed. The researcher used triangulation in order to document a code or a theme from different sources of data and valid findings were provided. Patton (2002) describes it as “any qualitative data reduction and sense-making effort that takes a volume of qualitative material and attempts to identify core consistencies and meanings.

This study made use of thematic analysis in analyzing collected data. Boyatzis (1998) describes thematic analysis as a process of encoding qualitative information in a form of codes, words or phrases that serve as labels for sections of data. He explained that this set of codes may be a list of themes, a complex model with themes, indicators and qualifications that are causally related; or something in between these two forms.

After the interview with the informants, I transcribed and translated the data with the help of someone who was an expert in translation. The translated data were encoded to the trial version of computer

software for proper coding of themes and subthemes and finding the word frequencies. But it had its limitation in identifying patterns; so as a researcher it was my responsibility to identify more specific themes or codes known as “nodes” and for analyzing and drawing conclusions. A separate within-case analysis was made for each case was conducted to give detail and rich descriptions of the case. In the case analysis, the research questions were addressed by using all the data that were gathered from all the case studies and were summarized into major themes or core ideas.

Maxwell (2008) pointed out that data analysis should be conducted simultaneously with the data collection. This allowed me to progressively focus the interviews and observations, and to decide how to test the emerging conclusions. During the collection of data, I used field notes to write down preliminary analyses of the responses of the participants of the study and assessment and reflections were done right after each set of interview.

Furthermore ,the researcher followed Lincoln and Guba’s (1985) trustworthiness which consists of the four components namely: credibility, transferability, dependability and conformability. To ensure validity of the qualitative data, I consulted my mentors to do peer debriefing by listening, prompting, and recording my insights through the entire conduct of the study. I conducted persistent observations to the participants of the study through face-to-face interview. I checked my analyses and interpretation to ensure that all accurately reflected the documents and

recordings and interview notes. I provided each informant copies of the transcripts and translations for checking and giving feedback to avoid conflicts and contradictions. I ensured confidence in the ‘truth’ of the findings through prolonged engagement, persistent observation, and triangulation, peer debriefing and member-checking. I gathered sufficient details and rich description of the experiences of the participants by conducting an in-depth interview with the pregnant twin students in order to have similarities between situations to ensure that the result of the study could be transferred into another context or with other situation by reporting with sufficient detail and precision. Besides, I organized and kept in a large archival envelope all my field notes, transcripts, translations, and audiotapes of all the in-depth interviews conducted from each informant to ensure the data gathered were true and real. Each envelope was labelled properly and available in case of audit and retrieval. I, with the support of friends and adviser, examined the products to ensure that the data, findings, interpretations were coherent and supported with collected information.

IV. RESULTS

The informants of the study were given ample time to answer the questions that I asked to them. The in-depth interview lasted for about one hour which was enough to saturate the essentialities of pregnant twins. The data collected from them were recorded using tablet to assure the intact recording of their narratives. In ensuring confidentiality and anonymity of their narratives, I pledged my allegiance to them that their

real names will not be divulged to the public not even written in this manuscript.

Furthermore, to give premium on research ethics, the principle of confidentiality and anonymity were established in the study by using the assumed names particularly Charity and Love. They were coming from a certain public secondary school in Davao City, Philippines. The informants were identical twins who were both in Grade 10 level. Charity is 17 years old, eight months pregnant and under modular program. Her father is employed in the barangay as an auxiliary police while her mother is a plain housewife. The guy who impregnated Charity is her first boyfriend who is 24 years old and works in the construction as a casual mason. The parents of Charity got frustrated when they discovered that she is pregnant but later accepted the situation. Meanwhile, Love is the twin sister of Charity. She is 17 years old, three months pregnant to a 23-year old guy who is a “habal-habaldrayber” or a motorcycle driver who happens to be her neighbor for about two decades.

In addition, the twins lived in a family where freedom and practicality of life enshrine their upbringing. Despite that they lived in a rural area which is far from downtown proper of Davao City, their parents approach to life is practical and open to realities of life. They

believed that the future of their children will always linger with the hands of their children’s decision. They were supportive to their schooling in terms of providing their school needs, projects and requirements. Both their parents allowed them to have relationship or boyfriends.

The mother of Charity allowed her to experience romantic relationship and even gave her advice to use contraceptives during sexual activity with her boyfriend. The pronouncement of her mother made her comfortable to have sex with her boyfriend. There was an instance that she stayed and slept with his partner in the bunk house of the construction site just in the school area. After that incident, she was the “talk of the campus” and there were rumors that something happened that time. She ignored the situation and continued the love affair until she realized that the last time she gave into the request of her boyfriend she found out that she was fertile and she did not take pills or even her boyfriend did not use condom. Three weeks after their love making she noticed that there are hormonal changes she experienced. She went directly to the pharmacy and bought pregnancy test. She ran fast to the comfort room and did the process of testing where she discovered that she is pregnant. When she shared and opened the situation to her parents she was so scared because she thinks of negative responses. At the start of confession, her parents got frustrated but hours later she was

comforted by her parents and they accepted the situation.

Further, Love, the twin sister of Charity, shared that regardless of insufficient income of their parents they find means to support schooling like monetary needs, projects and requirements. Because expanded freedom is given to Love and her parents allowed her to have relationship or boyfriend, and with a mother who is very open-minded/practical in whatever possibilities, she also allowed her daughter to engage in a romantic relationship. Love and Charity were also advised to use contraceptives (pills) so that they will not be pregnant. Unexpectedly, the twins got pregnant. It was Charity who got pregnant first then after five months, Love followed.

The reaction of their parents cannot be painted for their faces are so cloudy about the situation because their twins got pregnant in the same year at a very early stage of their lives. Love felt the pain and sorrow of her parents considering that the two of them (Twins) are pregnant. In the face of trials in the family, the parents of the twins accepted the wrong decision they made. But, Love painstakingly contemplated that she is agonizing the emotional state of her parents. To date, the twins are still in the process of dispelling the frustrations and disappointments of their parents.

EXPERIENCES OF PREGNANT TWIN STUDENTS

As I started to conduct the interview to Charity, she felt uneasy to answer the first question I thrown to her. At the latter, she opened her mouth and words came out with regrets of why she decided to have sex with her boyfriend during her fertile period. Being pregnant she experienced unbearable daily sickness and she cannot tackle the feeling of dizziness and vomiting in the lavatory. She continued in saying: "I feel pain already because my due is already near. I cannot sleep well at night due to some discomforts and become uneasy. When my baby moves inside me, I felt uncomfortable with my tummy."

Even though the parents of Charity are open to realities and are not conservative in romantic relationship still she has the feeling of being terrified and petrified to tell the truth that she is pregnant. As time went by, the size of her tummy is getting bigger and cannot be hidden anymore. When she walked in the living room her mother noticed her physical formation and behavior. Without thinking twice her mother directly told her that she is pregnant. The face of Charity fainted and she was frightened of what to do. She had no choice but to agree to the statement of her mother. She shared the truth and her mother mumbled of why she did not take extra care during their sexual activity. After those exchange of words, the mother of Charity embraced her and

showed support. She continued in narrating: I am afraid because I thought my father and mother will not accept my situation. Besides, I thought also if I can finish my study. I am worried also about money to defray expenses of my birth delivery. Secondly, I thought of the people's comments about me and I felt the shame with my classmates.

The day after I interviewed the twins, I cannot imagine their amazing experiences of being pregnant at the early years of their adulthood in the same year. To move on from the situation of the twins, I came to realize that life is full of colors one can mix from different colors to beautify or nasty in painting the journey of life. Going back to the experiences of Love, she highlighted that being pregnant is not a joke because she felt too tired to wake up in the morning and laziness struck her most of the time for not going to school. There were times that she was absent from the class for about one week for reasons that she wanted to sleep the whole day of the week without taking food or even water. She continued in sharing: *"It's so difficult to get pregnant because you feel worried if the one who impregnated you will marry you or not. Then, I felt tired and sleepy always which resulted to my frequent absences in school. I do not like to eat or even drink water because I vomit afterwards"*

In the light of her association to her friends and the community where she belongs now, Love undeniably shared her story that being pregnant and the relationship of her boyfriend is the talk of the school because some of her

classmates and even the co-workers of her boyfriend are the living witnesses of where their relationship started and how they watered it to grow. Despite the negative comments of the people about her, she had no choice but to accept the product of her decision. During her first month of pregnancy, she mingled with her friends by sharing assignments and homework and talk about guys. When her friends and classmates noticed that there were changes in her physical attributes and she heard rumors around the school that she is pregnant, she felt so embarrassed and humiliated. She did not expect that her bestfriend and the most trusted person she ever had was the one leading in spreading the news about her. Love underscored in saying: *"When everyone knew that I am pregnant, my teachers and classmates treat me the same. But sometimes, backbiting and gossiping cannot be avoided especially when the incident that I was the one who went to my boyfriend at the construction site and caused me pregnant. My neighbours talked also about what had happened to my twin (Charity) who got pregnant also. As a result, I just stayed at home to avoid gossips and backbite."*

COPING MECHANISMS OF PREGNANT TWIN STUDENTS

The parental support and societal acceptance shown to Charity boosted her confidence to continue to fight with the obstacles and challenges of life. She went to school with the environment of caring. She studied the lessons and hoped to finish her studies. To fulfill her dreams to come true would be her priority. She told me with hopeful wish

that someday the sun of her life will shine bright like a diamond:

“With my family, I felt the love and despite my early pregnancy, they still accepted me. In school, they take care of me and my baby. The teachers advised me not to stop schooling. My classmates showed me concern to whatever I do that may endanger my pregnancy.”

In situation where one is coping and finding ways on how to handle the negative comments of the people is a very challenging task that one must survive. In the case of Charity, she heard many comments and experienced bullying from the people around her but despite those judgmental thoughts, she discounted the statements of the people. She just closed her eyes and pray to lighten the burden. She narrated without reservation in saying: *“I accepted my situation despite I am too young for this. Since I am already pregnant, I just don’t mind whatever people say though it hurts deep inside me. For instance, the gossips that I slept with my boyfriend in school particularly at the bank house of the construction workers of the building.”*

In the parlance of survival of the fittest, one should stand firm on the choice of decisions regardless of what is the effect of one’s choice being made. Everybody deserves a beautiful second chance. Hence, Love accepted that she made a wrong decision but she is now trying to fix the not too broken decision to be fixed. Most of the people around her everyday are the people who used to admire her for being industrious and helpful to her family. Suddenly, when she got pregnant those people

condoned her very person. She underlined in saying: *“I can do nothing whenever people ignore me because on my side, I also ignore them to avoid trouble. However, my mother gets mad due to rumors about my pregnancy. If ever I hear negative comments from my neighbors, I just pray for them that they may understand my situation. I told myself that I am still young and I still have the chance to pursue my dreams in life.”*

Despite of the negative comments and rumors that spread out in the community where Love is situated, the heart of understanding of her mother is widely expanded by taking care of them (Pregnant Twins) and preparing for what is best to their upcoming babies. When Love is alone and the environment is solemn with her mother deeply fall asleep, she thinks of thanking with incalculable gratitude and fortitude to her mother. How blessed she is for having a compassionate mother that forebears the trials and challenges of her beloved twins. As the sun is going to set which gives way for the moon to shine, I respectfully thank Love for her inevitable participation in this study. As I looked at the interview guide, there was one remaining question that I missed to ask. But Love insisted and said that she is very willing to answer it. How do you cope with your studies being pregnant? And the answer is: *“Honesty speaking, when I got pregnant, it cannot be avoided that many will criticize you and sadly, some of my relatives tried to destroy my family. I considered my pregnancy as an inspiration of my life. I still continue my study to prove to my parents that I still have hope to realize my dreams.”*

REALIZATIONS AND INSIGHTS OF PREGNANT TWIN STUDENTS

Motivation to engage in pre-marital sex is a risky decision to young women but because the definition of love is misinterpreted by Charity and her boyfriend that having sex without marriage is part of the relationship. Love for them is sex. There was a time that Charity rejected the request of her boyfriend to have sex and her boyfriend said that he is no longer loved by Charity because she did not visit him for sex in the construction site. One day, when Charity offered herself for the last time to have love making with her boyfriend, she thought of it to be the last, unfortunately she got pregnant. She realized in saying: *"I need to solve my problem with my own self. I am open-minded about that thing (sex), I was 16 then when I engage into it only with my partner, I did not expect this because I used to take pills. Next time, I need to take care and love myself through achieving my dreams."*

As I took a deep breath to cull out the opinion of Charity of what advice she could give to teenagers about early pregnancy, she answered that self-control is the best remedy. She continued in saying: *"For me, have self-control especially to their sexual urges with men. Have the presence of mind whenever their boyfriend asked for sex."*

Being pregnant in the wrong time is a tough experience, thus, nothing beats the advice enshrined from someone who was involved in the situation to her

fellow women teenagers. In this sense, Love accentuated that if one will be able to wait for the right age of marriage gains correct thinking of a married life. Maturity is important in married life for this stage of life necessitates high decision-making ability to cope with the encounter of trials and challenges. In the teenage outlook, Love draws attention that self-control will free teenagers from being tempted to sex. She related her pronouncement in saying: *"They should be aware that it is not easy to become pregnant in an earlier and unexpected time because it's so hard to deal gossips and even insults coming from the parents. Hopefully, one should have self-control so that she will not get into early pregnancy."*

Because Love considered herself as victim of circumstance, though she has the power of resilience, when memories struck and flash in her mind regarding the promises of the guy, she tends to generalize that men are sex maniac. I understand her feelings of why she presented negative impressions to men because for once she had a story of being cheated and this feeling cannot be mesmerized with the sweet fragrant flower called "lady of the night". She continued in saying: *"During the time of our relationship with my boyfriend who impregnated me, I heard so many promises that is why I gave myself to him. We do it more often because if I refuse, he will break with me. I am afraid that he will leave me because he might share to his co-workers in the construction site that he got me already. I felt ashamed to myself whenever I do sex with him. That's why I can say that boys are sex maniacs and they do not respect the girls."*

V. DISCUSSION

At the outset, this chapter introduced the key findings of my research study using qualitative design utilizing case study approach to explore the teenage pregnancy in the secondary schools. After discussions were presented, I provided valuable implications for practice, implications for future research and concluding remarks for consideration of the beneficiaries and recipients of the results of my study. The case analysis reported in this portion is built upon the lived experiences of the pregnant twin students regarding early pregnancy, strategies or coping mechanisms to address problems on pregnancy, and realizations of the pregnant students learned in the specific case analysis reports. In this study, case analysis refers to analysis and findings that relate to the prevalence of teenage pregnancy found in the two cases. When I first encountered the sheer volume of data found in the case analysis reports, I decided to create a classification structure to group similar thoughts, opinions and ideas came out from the shared emotions, feelings, and behaviours of the twin informants.

Besides the volume of data, I also realized that many of the lived experiences of students in terms of *physical and emotional distress, anxiety about the future, shame and humiliation, change and prohibitions, love and support of significant others, apathy, tenacity, turning to support systems, regret and remorse always come to fore, early pregnancy is a momentary setback, young girls should know better about life, love and sex, and love and*

acceptance prevail in the end as revealed by the pregnant twins. These were very identical situations to other pregnant women out of wedlock but of different circumstance.

EXPERIENCES OF PREGNANT TWIN STUDENTS

The shared experiences of pregnant twin students on early pregnancy are encapsulated into essential themes and thematic statements. At the outset, the first theme which is *physical and emotional distress* emerged because they felt exhausted, lousy, sleepy, too tired to go to school, occurrence of hot flashes; painful when the baby moves in the tummy, dizzy and nauseated, sensitive and easy to cry, short tempered and easily flares up over small things. These feelings are some of the most common physical and emotional changes during pregnancy which were experienced by the participants.

As the fetus grows in the abdomen, it creates physical changes in the interior of the body as well which made Charity felt pain when the baby moves in her tummy. Maternal stress during pregnancy can be of different types, Charity suffered from hot flashes and she cannot sleep during nighttime. While the hormonal changes in the body are often thought to be the cause of many emotional changes, Love and Charity, were agonized from being sensitive and easy to cry, being so pained and wounded and being short tempered and easily flares over small things. Nevertheless, causes of morning sickness, dizziness and nausea are not fully understood by Love as her pregnancy progresses, she regretfully

said on why she opted to become a reckless daughter by not listening to the words of her parents. The data supports the pronouncement of Adams (2008) which stated that women often experience a range of emotions during pregnancy, even if they are excited about the baby and planned it from the get-go. They might have mood swings. They might be worried about their babies' health, uncertain about the changes in their bodies, their relationships, their abilities to be mothers, the list goes on and on.

In the same manner, Tremblay (2008) enunciated that changing emotions are, for many women, one of the most common side effects during pregnancy. It can be frustrating and exhausting to shift from one emotion to another, and be unable to explain what emotion you are feeling and why. For those who were not very emotional prior to pregnancy, this onslaught of pregnancy emotions may be especially startling.

In addition, Govender (2006) emphasized that there are some women may experience more physical discomfort during their pregnancy than others. As the body changes for the baby inside the womb is growing one may experience many physical discomforts, from morning sickness to body aches. Body image issues may cause pregnant women to feel less physically attractive, as they look in the mirror and see some of the changes in their body. Any of these things can impact both mental and physical health, which adds to stress and can cause a disruption in normal emotions.

In the same token, *anxiety about the future* emerged as one of the major

themes on the experiences of pregnant twin students. Being anxious about the future brought them to being nervous on how to manage and take care of the kid, worrying if they can pull off being a mother, worrying on how to survive after giving birth and how to support the child, scared of giving birth or delivering the baby, and being afraid of what the future may bring to the baby.

Anxiety about the future for a pregnant teenager out of wedlock is one of the most dreadful feelings to experience. The terror of finding out of being pregnant or that gotten someone pregnant at early age is terrifying because there is no easy way out of the problem. In this sense, Charity acknowledged that she is nervous on how to take care of the baby. Nevertheless, Love shared the same feelings that she is worried on how to survive after giving birth. In addition, they added with compunction that they have made wrong decisions of which they suffer few consequences. The data are aligned to the viewpoint of Hanna (2010) who underscored that pregnancy is naturally accompanied by a whole lot of worries regarding factors that are directly or indirectly related to the present and future of the unborn child. If it is an unplanned one, the stress escalates to unprecedented levels. It is natural to get freaked out when one faced with an unplanned pregnancy who is not prepared or not in a position to bring up a child. But since this is a situation that cannot be undone, it is in the best interest for the mother as well as the child, if one decided to complete the term with free from anxiety.

On the other side of the coin, De Jong (2007) spelled out that the mother needs to be in a balanced state. The fact cannot be denied that it is the woman who is going to be most impacted by whether she terminates the pregnancy or goes ahead with it. Feeling scared or isolated due to an unplanned or early pregnancy is obvious, but it is equally important to make an informed decision. For this, pregnant teenagers need to look for ways that will help them cope up with the anxiety in thinking the future. The first step is to accept the fact and then seek unbiased and non-judgmental support. This can come from a professional counselor, a close family member or a friend. Whatever the choice she makes, it is necessary that she is totally committed to it otherwise, she might have to deal with an eternal lament or bitterness.

In the same breath, *shame and humiliation* surfaced during the thematic analysis from the transcript of the participants. This is being felt by them for the are foddering for gossip/rumors, people talked about their pregnancy, being the center of the talk of the neighborhood, wondering to what people think of being pregnant without a father, shamed and insecure to the decency of others, felt out of place in the company of friends, classmates keep on teasing and bullying the situation, and family and the people around were disappointed and father was frustrated. The data is congruent to the idea of Ehlers (2009) who underlined that impoverished pregnant teenager have always been a favorite soft target for critics of the welfare state. Although findings in various researches challenge

the stereotypes, it also looks at how heavily lone mothers have been stigmatized over the years. One of the reasons that more young women are giving birth out of wedlock and more young men are walking away from their paternal obligations is that there is no longer a stigma attached to this behavior, no reason to feel shame. Many of these young women and young men look around and see their friends engaged in the same irresponsible conduct. The parents and neighbors have become ineffective at attaching some sense of ridicule to this behavior. There was a time when neighbors and communities would frown on out of wedlock births and when public condemnation was enough of a stimulus to be careful.

In fact, Clemmens (2011) articulated that shame and humiliation is such a predominant narrative in teen pregnancy prevention campaigns that there is a movement to stop it. Early pregnant women strive to improve strategic messaging campaigns and conversations to a non-stigmatizing and non-shaming approach. Simply put, their goal is to change the narrative of shame and stigma to one of education and empowerment.

Moreover, Sosibo (2007) negated that if teen and young parents are telling that they are shamed and stigmatized, maybe people should believe them. But while shame is still the modern-day basis of teen pregnancy prevention, it doesn't actually act as any sort of real prevention tool. Studies show that it is access to affordable contraception that helped reduce the teen birth and abortion rates. When teens have access

to the full spectrum of sexual and reproductive health care, they are better equipped to make the best decision for themselves, whatever that may be.

In concomitant to this, *changes and prohibitions* came out as one of the essential themes with the following essential statements: life and routine was changed since they got pregnant. There are things that could not be done because of hormonal changes like doing physical activities, performing house chores and playing with siblings. They stay at home for bed rest and never went out. These changes and prohibitions made them uncomfortable because they cannot enjoy the usual daily activities in their adolescent stage. Primarily, Charity cried in stating that she missed the beautiful atmosphere of the school because she can no longer attend classes for she is about to deliver her baby in the next quarter of her pregnancy. Life is so unfair! This was stated by Love who got pregnant and suffered from hormonal changes which forbids her not to relish the usual activities she love to do. She concurred that her entire posture changes. Her breasts are larger, and her abdomen transforms from flat or concave to very convex, increasing the curvature of her back. The combined effect shifts the center of gravity forward and may lead to changes in her sense of balance that she opted to sit on the chair most of the time.

The data is parallel to the standpoint of Caldwell, Antonucci and Jackson (1998) who accentuated that maternal physiological changes in pregnancy are the normal adaptations that a woman undergoes during pregnancy. The body

must change its physiological and homeostatic mechanisms in pregnancy to ensure the fetus is provided for. Thus, it is necessary for pregnant women to take extra careful. The body changes that occur in a woman while she is pregnant may interfere with the ability to engage in some types of physical activity even doing house chores and carry heavy objects.

In the same way, Ziyane (2006) explicated that women can be greatly affected by hormone fluctuations. Sometimes it gets to the point of feeling totally overwhelmed - as if for a time they have lost control of their life. The ligaments and joints around the pelvic region will begin to loosen up as the pregnancy progresses in order to prepare the body for labor. Thus, activities being imposed are risk for injury in the area should be avoided. This is anything that requires quick changes of direction, jumping and jerky movements. Physiologically, the increase in resting heart rate associated with pregnancy necessitates that women do not over exert themselves.

In the context of *love and support of significant others*, aplomb the informants to continue to nurture with faith and devotion to God that being pregnant out of wedlock is considered a blessing and not an accident. The presence of good vibes and positive support from significant others despite of the unplanned pregnancy were evident. Their parents just talked and cried about the situation but never beat them up and they gave assurance to take care of their daughter and the incoming baby. Friends were supportive through showing their concern and giving

of encouraging words. Teachers gave them advice to be happy and not to worry about what classmates and schoolmates will say about their situation. These structured ideas uplift and boost the self-worth of the informants because Charity said that it comes at the time that she needs support, her parents talk so much with a high frequency voice but she never rejected caring and love abode the family environment after a few minutes of conversation about her pregnancy.

This conforms the research output of Hanna (2010) that her participants emphasized love and support as a factor that made some of them to cope better with the otherwise distressing experience. It was indicated that parents and other people should be supportive towards the pregnant teenagers, as support was perceived to minimize the distress. It is also revealed in the study of Barnette (2009) that most participants indicated that they found support to play a significant role in minimizing the distress that they experienced during pregnancy. Participants also tried to show how important it was for their families to be supportive towards them, as they see support to be directly related to less distress.

COPING MECHANISMS OF PREGNANT TWIN STUDENTS

It could be observed that the strategies and coping mechanisms of pregnant twin students surfaced with three essential themes: *apathy*, *tenacity* and *turning to support system*. Undeniably, the phenomenon of teenage pregnancy

has been critically and carefully examined which others have perceived as a social dilemma that needs further attention. Adolescence as they call the stages of these youth who are socially understood to be in the most difficult phase of their development face the challenges of coping with the mechanisms and strategies of life's survival from parental and societal vindication. On the other hand, making decisions can be really hard sometimes and really often, pregnant teenagers feel the need for somebody's support and a piece of advice. Being a pregnant teenager can be devastating. On this note, I assumed that coping is a skill needed by both parents and teens. There is a need to process this new reality within the family, that teenager pregnant students still need strategies and coping mechanism as they reconcile their choices with the consequences in their lives.

Apathy is the first major theme developed during thematic analysis for pregnant students discounting people as they did not exist, never mind what neighbors say, never care what people say they are judgmental, pass their comments in one ear and out in the other, people are right in what they are saying anyway, restraining oneself even if people called us flirt, and disregard the talks of the people about the situation.

Looking through the eyes of the informants, Love insisted that people judged her as if she broke the totality of morality. The moment she walks in the streets people are looking at her and started to whisper from person to another about her situation. What she did was to discount them as if they are

not around as she continues the expedition of life. In the same instance, Charity heard irritable comments from her neighbours and relatives. What she did was to pass their whispering negative vibes in one ear to the other. She highlighted with brevity that people are judgmental in nature but they are right anyway. In my thoughts, occurrence of indifferences to people because of unacceptable circumstance of life may hinder the social grace that envelops the human happiness. After the interview, I gave some fruitful ideas to them to settle down the intensity of their negative emotions in saying that the absence of societal care challenged them to engage the desire to be understood by means of finding and craving anything positive around them. When life hurts and dream fades, hope gain!

The data is congruent to the notion of Ehlers (2009) who elucidated that majority of today's youth has become extremely apathetic, completely careless about the things going on in the world that don't regard them. They've gotten so obsessed with what goes on in their own lives that they don't stop and take the time to listen or care about what anyone else is feeling. Hence, 30 percent of female teenagers indulged themselves in sexual activity and turned to a young mother out of wedlock.

On the other hand, Turner (2007) explained that apathetic attitude come out by ignoring those people around them to avoid hearing negative comments and hurting words. Apathy is a powerful emotion. It saps away happiness, causing negative thinking, negative emotions, fear, irritability, and

more. But Thomas (2006) demonstrated that even though apathy is such a powerful emotion, not all of the symptoms it causes are as filled with energy. In fact, one of the most common symptoms of extreme anxiety is apathy.

As I structured the shared thoughts and emotions of the informants, *tenacity* came into being as the second essential theme in strategies and coping mechanism of pregnant students. Tenacity is conjugated by the informants to continue to go to school by not wasting time despite of being pregnant, going to school even if one does not feel so good sometimes, making the experience an inspiration/motivation to oneself, since it happened already, then deal with it appropriately, endeavour to finish studies and study very well instead, attentive to pregnancy and taking care of the baby inside, continue to appreciate the beauty of life, avoid using social media to escape from bully friends, trying to tolerate the pain of people's judgment, and most importantly, rise above the problem situation.

When I looked back to stroll down the memory lanes of interviewing the informants of my study, I felt blessed that I was given an astounding opportunity to touch their lives with significance. The wisdom and innocent minds of pregnant students impregnated the idea "so please understand I'll be good for you". To twist the story, Charity infused her thinking that she is trying to tolerate the pain of people's judgment. Tolerance on the threshold of pain is coping the etch of problematic situation. In the face of reality, it is my ardent

desires that their temporary hurdles and obstacles will ward it off with powerful belief in the reality of change, not based on hope or faith but upon experience. The data is analogous to the conceptual analysis of Tremblay (2008) who connoted that when pregnant teenagers are determined to do things better and able to fix problems despite of the troublesome situation and with high expectation of positive results can be extremely prideful. Teenagers who got pregnant out of wedlock with tenacious attitude can easily survive the challenges of life and are more determined to continue to fight the battle of life until they taste the sweetness of success. Putting time and effort to continue to study regardless of being pregnant is a manifestation of consuming the remaining determination, aspiration and drive to make something work for the betterment of life.

Turning to support system as strategy to cope situational or personal problem emits the frequency of self-security. I presumed a strong family and social support network can be critical to help pregnant secondary students through the stress of tough times they are into it. In this scenario, turning to support systems came to light the body and soul of pregnant students out of wedlock for they are counting on the understanding and acceptance of their family, basking the love of parents who bought the craving foods, relishing the support and concern of classmates and friends, following the advice of friends to continue to study, and listening to teacher's counsel and encouragement. Since supportive family and friends are such an important part of their lives, it's never too soon to cultivate these

important relationships. As the song goes, "give me one moment in time" is a famous line that could speak the feeling of Precious that she is seeking for understanding and acceptance of the family to fix the broken thing which is not too broken to be fixed.

This finding lends support to previous studies that found a positive relationship between emotional support and good psychological well-being during teenage pregnancy. In an earlier study, Govender (2006) found that pregnant teenagers tend to display increased emotional problems if they receive little support from significant others. Some participants reported feeling stressed when they receive less support from their families and boyfriends. These reports are consistent with a study by Figueredo (2006) who reported that poor partner support resulted in depression for the pregnant teenagers. Another investigation conducted with teenage mothers and their mothers found that teenagers who perceived their mothers to be supportive were found to experience fewer symptoms that are associated with depression (Caldwell et al., 1998). On the other hand, Babalola (2004) reported that social support and socioeconomic status predicted psychological well-being of pregnant teenagers and teenage mothers. The same finding was also reported by Ritcher (2005) who found that family support, friend support and partner support were significant for the psychological well-being of pregnant teenagers. Previous studies and the findings of the current study seem to suggest that pregnant teenagers value the association that they have with supportive family members and friends

as they find this to be assisting them to cope better.

INSIGHTS AND REALIZATIONS OF PREGNANT TWIN STUDENTS

In the light of the insights and realizations of pregnant secondary students, there are four essential themes that emerged and they are as follows: *regret and remorse always come to fore, early pregnancy is a momentary setback, young girls should know better about life, love and sex, and love and acceptance prevail in the end.* The allegory of students' early pregnancy experienced emblem with beautiful insights and realizations that they could share to their friends, classmates and parents.

In my quest for truth behind the hardest struggle of pregnant students and what truly matters to them are tools for understanding to translate their regrets into a workable motivation to continue to fertilize the wonderful world of living. *Regret and remorse always come to fore* is the first of the major theme that occurred with the following core ideas: promise to oneself not to do it again, having many regrets of being entered the situation, *regret and remorse always come last*, not engaging romantic relationship maybe one's have finished studies first, too young to get pregnant, not easy to get into such a situation when one is not ready, and difficult to be pregnant out of wedlock.

As I opened my field notes, there is a beautiful narrative from Charity that

struck my attention stating that she is regretfully biased to herself and her family for engaging early romantic relationship. On the other hand, Love told me that she repented most of getting into a relationship that made her pregnant out of wedlock. It will be a bit of a roller coaster. There are a lot of emotions involved and heartbreaking for she is not prepared to deal with a whole spectrum of emotions in bearing and rearing a child. The finding embarked the idea of Black (2009) who indicated that there are pains associated with the end of a romantic relationship in pregnancy. Regrets and remorse will come out when sexual activities resulted to unplanned pregnancy specifically during teenage years. Regret is both a feeling and a pattern of thinking where one dwells on or constantly replays and thinks about an event, reactions or other actions that could have been taken. Regrets can become over painful burdens that interfere with one's present happiness. These may be different from pregnant teenagers, but feelings of regret include: sadness, remorse, anger, shame, and anxiety. This can leave them the feeling defeated and hopeless. The complex feeling of regrets and remorse in the midst of crisis will drain the life force. Most complexes want to be acknowledged and grieved. They desire closure and then freedom to rest. What they really need underneath is peace. Close the filing cabinet and integrate them into the usual journey of one's life.

Nevertheless, *early pregnancy is a momentary setback* emerged as a second major theme during the analysis of the narratives of the pregnant students with the following core ideas:

taking rest and will go back to school after giving birth, going back to school after this pregnancy, continue to study after delivering the baby, focus on taking care of the baby for now, being pliant and open, after all it is true that it is one's fault, and moving forward and no one to count on but oneself. However, it is so important to understand and believe that the worth of pregnant students is not determined by circumstance, it is constant, and cannot be shaken or changed by life's setback. It is a temporary hurdle's of life. Hence, Love emphasized that she will go back to school after she delivered her baby. On one hand, Precious narrated that she accepted the truth of the situation that is why she is now focused to take care of her baby while at the same time taking full responsibility for whatever role she played to gradually phase out setbacks in early pregnancy.

The result is allied to the viewpoint of Adams (2008) who indicated that in many cases, teenage pregnancy is not just a temporary inconvenience. It is a setback that can affect the lives of the parents and the child for many years to come. However, unplanned pregnancy has temporary setbacks that can be recovered through positive thinking of the situation. In like manner, Ehlers (2009) elucidated that teenage pregnancy is not the symbol of a broken society, as claimed by many politicians, but can be a positive force for good, numerous research found that many teenage mothers express positive attitudes to motherhood, describing how motherhood has made them feel stronger, more competent, more connected to family and society and more responsible.

Moreover, Ziyane (2006) stressed out that there are some teenagers make great parents for they are hopeful that someday they can move forward by means of full acceptance of the situation. Many others struggle with the staggering task of raising a child at such a young age. Trouble comes in many shapes: poverty and loneliness, health problems for the mother and baby, missed opportunities for a good education, and sadness and resentment at missing out on proms and other exciting teen activities, just to name a few.

The third major theme of insights and realizations of pregnant students stipulated that *young girls should know better about life, love and sex*. This theme consisted of the following clustered ideas: do not be fooled, many guys are good with words, guys are not sincere, some guys promise everything but they are actually after for sex, boys should get hold of their sexual desires or at least protect themselves, some boys are like "sex maniacs"; they keep asking for it, they should learn to respect women and girls; not put them in a situation, listen to advice and admonition of mother/parents, bear in mind what teacher says about waiting for the right time, prioritizing studies over having boyfriends, avoid intimate relationship at an early age; don't engage in premarital sex, girls should learn to control their emotions around their boyfriends, and do not be carried by emotions of one's partner.

In the middle of our talks, about the meaning of life, love and sex whether it can be chemically engineered and how it can be used to change the perspective

of teenagers, Charity shared her thoughts with husky voice that some boys are like “sex maniac” they keep on asking for sex and after all they will just disappear and will run away from their promises. On the other hand, Love insisted that if she can get love right in our individual lives, she might not have been engaged in premarital sex. As I thread out the fabric of pregnant students’ experiences, I realized that there is something miraculous about love, which allows them to care for someone to whom they are not genetically related which brought them agony and adversity and left them nothing except the memoir of yesterdays. Now I know, love is not some sentimental thing it is about recognizing this miracle for what it is, and learning from it for the rest of our lives.

The data is similar from the idea of Trivedi (2007) which indicated that love and sex are meant to be experienced mindfully so that every woman can honor herself and whole being. The more a young woman come to know about life, love and sex, she is aware of “self” and the more she can participate in conscious intimacy. If one still wondering why is life, love and sex are important in life, the answer is that it satisfies the spiritual, physical emotional needs of human beings. Careful and mindfulness of enjoying the coupled liberty life, sex and love needs precautionary measures to decision-making.

the next major theme is - *love, and acceptance prevails in the end* composed of the following core ideas: somehow still feel loved and cared for, being happy because of family accepted

the situation, family accepted what happened and said the baby is a gift from God, seeing that parents love one’s the yet-unborn baby, parents show deep concern about the situation, teachers show love and affection of the situation and never abandon, friends demonstrate the same treatment; nothing was changed, classmates love, care and shows support like a second family, and young people from the church were supportive and continue to inject encouragement. The finding is parallel to the pronouncement of Hanna (2010) which denoted that pregnant teenagers are longing for parental and societal acceptance. It is exactly what we will hear these exact words from our troubled pregnant teenagers out of wedlock. In fact, the words they speak and the behaviors they exhibit are paradoxical, cunningly leading us to believe that they don’t care about anything. But the truth of the matter is, they do care. They need caring and concerned parents, teachers and family in their lives, but also long for adults in the community who willingly make the effort to understand them and who believe in them. And, they do want to learn, contrary to what many people believe.

With so much appreciation, I glorified with honor the twin informants of my study who are brave, courageous and believers that there is sunshine after the rain. Fortunately, Love and Charity glowingly shared their feelings that they are happy for the acceptance of their family. I am happy to see them that they are accepted with a sense of belongingness to the family with a new path to enjoy life and positive identity. In the same breath, Charity

elucidated that her parents show deep concern about her situation. She is proud of her parents despite that she stained the name of her family. With family acceptance, I saw these pregnant students who are strong and resilient sense of self can be sustained through transitions into the wider world and through subsequent experiences that may be less affirming and inclusive.

IMPLICATIONS FOR PRACTICE

Through this study I have realizations and vivid reflections about the present condition of the twin pregnant students who were in the early stage of their adolescence. I learned from them that they are suffering from physical and emotional distress, anxiety about the future, shame and humiliation, changes and prohibitions. On the other side of the coin, though they were treated as outcasts and suffered outrage behavior of the society, the love and support of significant others hold them to become strong and firm to continue to nurture the gift of life. In this sense, parents may foster an environment in which the child is valued as a blessing. It encourages the father to take responsibility without fear. And it makes abortion a much less desirable option. If a family abandons their pregnant teen, even emotionally, she will be much more likely to make harmful decisions. She may think marrying the baby's father is the only option. She may not know how to take care of her health and that of the baby.

Besides, other pregnant teens may see the volatile relationship and keep their own condition secret. Conversely, the girl may be able to

make much wiser decisions about her and her baby's future if she can rest in her parents' acceptance and loving guidance. Wise parents may help their daughter walk through the options of keeping the child rightfully. It may also be beneficial to involve the father and his family; he needs to take as much ownership as the mother. After careful prayer, parents may be clear about the level of support they can give in raising the child (De Jong, 2007; Hudson, 2006; &Ritcher, 2005).

Further, adolescent mothers are characterized as having poor family structures, lack of social support and elevated rates of stress that each raises the risk of postpartum depression (Lanzi et al., 2009); however, mental health counselors, as well as other school and community resources, can help. Social support, including that from counselors and other professionals, can act as a stress-buffer, which can have a positive effect on the mental health and parental behaviors of the teen parent. As noted by Basch (2011), these behaviors may include staying in school or using more positive parenting practices. As a result, this has the potential to positively impact the developing mother-child relationship. Additionally, East (2012) suggested that it may be helpful for mental health practitioners to ask the teenage mother if the pregnancy was wanted and intended, since this information can be a predictor of favorable adjustment to parenting and not a harbinger of future difficulties.

Despite of the sad experiences of pregnant teenagers along with their agonies and miseries in life, they tried to escape the malignant sorrows and pains

through developing strategies as their comforting instrument to take away the judgmental attitude of the society. Apathy, tenacity and turning to support systems are their armor shield when the society will strike against them. In this view, public and private education provider may empower teenagers at developing responsible attitudes with regard to sexual behavior. This may reduce casual sex and repeated pregnancy, ensure contraceptive compliance, continuation of education. Sex education may be included in the school's programmatic activities. Sex education in schools and via other channels is a low-cost strategy for lowering the incidence of teenage pregnancy. All young people can be reached at an early age, before they become sexually active. According to Black (2009), sex education has to be integral to a young person's personal development and has to begin before or during puberty. It is recommended that sex education programs in schools be linked to the primary health care services to enhance accessibility. Sex education programs may also be offered at venues where teenagers congregate informally. Programs that promote abstinence should be developed. These programs may also aim at building skills and conveying information to all teenagers.

In the course of crisis, there are insights and realizations that pregnant teenagers wish to convey that they have regret and remorse come to fore, early pregnancy is a momentary setback, young girls should know better about life, love and sex, and love and acceptance prevail in the end. However, there are many factors can contribute to a teen's risk of

becoming pregnant. Family history and home life seem to have an impact on teenage girls. Ditsela and Van Dyk (2011) did an exploratory study on the risk and protective factors associated with adolescent pregnancy. Through their study, they found a correlation between the parenting style in the girl's home and teenage pregnancy. The findings indicated that adolescent pregnancy will be more common in young women who grow up with permissive parents. In contrast, adolescents who perceived their parents to be more responsive, communicative and all owing of them to develop were less likely to get pregnant as a teenager. In the same manner, Weiss (2012) emphasized the importance of parental relationships with their children as a protective factor against teen pregnancy. In their article, the authors encouraged parents to foster open communication in their home, especially around the topics of sex and sexuality.

Furthermore, there are preventive measures that can also be taken to decrease the likelihood of teenage pregnancy. In addition to encouraging parents to develop a strong relationship and have open communication about sex and contraceptives with their teenagers, as mentioned earlier, schools can do several things. Basch (2011) listed six factors that he suggested school consider including in their programs and policies that serve teens and their families: State-of-the-art, evidence-based sex education that gives students knowledge, attitudes, skills, and motivation to avoid teen pregnancy; youth development activities that build on student assets and enhance their self-identities and future aspirations; enhancement of school

connectedness; linking students to reproductive health services, either in school clinics or in community; linking students to mental health and social services; and providing parents education, helping them to develop skills to share their values with their children and teach them to avoid pregnancy.

To minimize the negative social impact of pregnant teenagers, communication with a solid support system is essential for them to live a normal life. Recent evidence, however, suggests that increasing social skills is an important step in helping pregnant teenagers to understand their new dimensions of social life. Furthermore, professional practitioners may adopt social skill model which represents an economical and portable training approach. Public schools, family practice outpatient clinics, public health agencies and family planning centers are particularly suited for this approach to augment the social skills of students who are pregnant in teenage years.

IMPLICATIONS FOR FUTURE RESEARCH

Future research into teenage pregnancy in secondary schools may have better results when the informants may be escalated into a bigger number to generate substantive patterns, similarities and differences. Profile of teenage pregnancy found that there is participating twin informants of this study. It would be a basis to study about twin teenagers who are pregnant and studying in public and private education in Region XI. More longitudinal study is recommended to strengthen the body of

knowledge and for the development of theoretical models of teenage pregnancy.

In addition, researcher may include not only schooling pregnant teenagers but also out of school youth teenagers who are pregnant. Moreover, based on the limited results of the computer literature search and the human complexities associated with teenage pregnancy and childbearing, further qualitative research is warranted. And finally, there is a need to conduct more in-depth comprehensive reviews and analysis of qualitative studies to avoid unnecessary repetition and to reveal areas that require additional exploration.

Moreover, teenage pregnancy poses significant social and health problems in the society and has implications for all teaching professionals. Given the complexity of this problem, teaching professionals working with teenagers may develop a wide range of practical and interpersonal skills. Furthermore, future research should build upon results of the present study and findings of other investigators, suggesting the efficacy of a personalized and peer-supported adolescent pregnancy prevention approach, using role-playing and peer assistance as educational techniques.

CONCLUDING REMARKS

Teenage pregnancy is a multifaceted issue that involves so many factors. As a teacher, understanding these teenagers as they try hard on making their decisions regarding sexuality and parenthood involves, keep in touch with their perceptions of themselves and their assessments of the opportunities that waiting them. Writing this epitaph to

contribute to the body of knowledge, I recognize I had considered too much about humanitarianism and fostering a healthy education to my students with much consideration to pregnant teenager, my valuable client who needs most the premium of my understanding. A teacher most concern is how to help the students to realize their maximum potentials, talents and skills but not to judge if they are right or wrong. I need to learn and practice more on believing in the students' ability to solve the problem and respect their choice. I will not pass judgment on the students who are confronting difficult decisions, they are doing the best they can. Teenagers perceive teenage pregnancy as something which is unintended. They associate it with individual characteristics such as knowledge, maturity, skill, and age at first intercourse. Misconceptions about sex and contraceptives are still evident in most teenagers.

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