

A Min Literature on the Determinants of Teenage Pregnancy: Intrapersonal and Interpersonal Factors

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ABSTRACT Teenage pregnancy, which is detrimental to the health of the mother and child is a common public health problem worldwide. This is a problem that affects nearly every society, developed and developing alike. This paper examines literature on the determinants of teenage pregnancy. The paper explores teenage pregnancy by looking into intrapersonal and interpersonal factors. Most of the reviewed researchers have shown amongst others the following determinants, that is, sexual behavior, families, school, communities, cultural background and religion.

INTRODUCTION

Teenage pregnancy is increasing rapidly these years at a pace of about ninety percent than ten years ago. This discourse reviews literature on the contributing factors that may determine teenage pregnancy and such literature was explored by looking into intrapersonal and interpersonal factors.

Intrapersonal Factors

Intrapersonal factors are, as discussed by Bronfenbrenner in Panday et al. (2009), the individual attributes that increases his/her likelihood of engaging in risky behavior by influencing how he/she interacts with the other contexts and the influence that those contexts bring to bear on him/her.

Sexual Behavior

Sexual behavior of adolescents has the potential to confer significant risk to adolescents' pregnancy (Panday et al. 2009). Early sexual initiation is more likely to be unprotected (Oladosa 1993) leading to early pregnancy and early childbearing (Oladosa 1993; Panday et al. 2009). Adolescents embark on sexual escapades without using any form of contraceptives (Oladosa 1993) and inconsistent condom use significantly increases the risk for unplanned pregnancy (Pan-

day et al. 2009). Negative perceptions about contraceptives play a significant role in whether adolescents will use them (Oladosa 1993).

Early sexual debut remains an area of intractability in adolescents' sexual behavior in SA (Panday et al. 2009). The government's decision to allow children to decide on matters of sexual health (Sections of the Children's Act No 38 of 2005) allow children to make life changing decisions about issues affecting them without their parents' consent (the new regulations allow a 12-year-old to have access to condoms, other contraceptives and an HIV test) has sparked reaction ranging from outright shock to support (Sookha and Cole 2007). Childline director Joan van Niekerk welcomed the changes reporting that the best interests of children were being taken into consideration (Sookha and Cole 2007). Although Childline supports the view to delay sexual activity for as long as possible, the reality is that children are getting sexually active at a much earlier age and denying them access is putting them at risk (Sookha and Cole 2007).

Multiple sexual partnerships are common among the youth and comprised another important sexual risk factor (Kaufman et al. 2007). References to sleeping around, hooking up with different partners at different parties, for girls who are pregnant, or a mother not knowing who the father is, are common references to multiple partnerships (Kaufman 2007). The more frequently the young women have sex, the more frequent-

ly they are at significantly increased risk of early pregnancy (Jewkes et al. 2001). Adolescents who struggle to meet material needs make tradeoffs between health and economic security (Ritcher and Mlambo 2005; Panday et al. 2009).

Sexual Intentions and Attitudes towards Teenage Pregnancy

There is a direct relationship between adolescents' sexual behavior and their sexual intentions (Lin 2006). Sexually experienced teenagers are more likely to express an intention to have sexual intercourse in the near future (intentions to engage in sexual behaviors are related to actually engaging in sexual behaviors) (Nahom 2001; Lin et al. 2006). Adolescents who express low intentions and desire for childbearing are less likely to experience teenage pregnancy (East et al. in Panday et al. 2009).

Ambivalent attitudes are common among teenagers from disadvantaged backgrounds and those who have low future aspirations (Panday et al. 2009). Jewkes and Christofides (2008) concluded that if the child is fathered by a man of some means, becoming pregnant might entail an expectation of some form of ongoing financial support. Men and women having long-term multiple partners, acknowledged pregnancies are often seen to strengthen bonds (Panday et al. 2009). Seeking love and attention and falling in love are viewed as reasons for pregnancy among teenagers (Archibald 2008). Harrison (2007) states that in the contemporary South Africa, the emphasis is no longer on proving fertility as Preston-White hypothesized a quarter century ago, but rather on securing a relationship. In this sense, pregnancy would help secure an attachment, simultaneously fulfilling expectations of love and romance and also economic security.

Growing up in residential areas where poverty is extreme (informal settlements and rural areas), early pregnancy may be viewed as a means of escape from an unhappy home (Archibald 2008). Research suggests that African men frequently view fathering as a matter of pride and evidence of masculinity (Jewkes and Christofides 2008). Teenage women often report that their partners encourage them to get pregnant to prove love (Wood and Jewkes 2006), but this does not necessarily mean that paternity would be accepted (Jewkes and Christofides 2008).

Substance Use

Within the context of substance use, teenagers are faced with sexually risky situations continually (Kaufman et al. 2007). International (Anderson and Mueller 2008) and local (Panday et al. 2009) research state that many youth are at dual risk from both substance use and sexual behaviors. Strong associations exist between sexual activity and alcohol and drug use (Dunn et al. 2008; Anderson and Mueller 2008). A study by UNICEF highlighted the connection between alcohol and risky behavior, and that almost twenty-seven percent of the participants had engaged in sexual activities while under the influence of alcohol (Hubbard et al. 2008).

Use of alcohol and other drugs in conjunction with sexual activity among adolescents represents a major concern for health professionals (Ramisetty-Mikler et al. 2004). A study examining whether drinking and drug constitute risk factors for unsafe sexual practices among Native Hawaiian adolescents (Ramisetty-Mikler et al. 2004) found that adolescents were more likely to initiate drinking by age 12, drinkers and drug-users were at risk to engage in sexual activity, have multiple partners and use alcohol and drugs during sex. Substance abuse may serve as an excuse to engage in behaviors that may be considered socially unacceptable such as using a condom (Dunn et al. 2008).

According to Hubbard et al. (2008), alcohol increases the probability of having taken one or more sexual risks, which could lead to HIV and pregnancy more than threefold. Adolescents who avoid such risky behavior as smoking cigarettes, drinking alcohol or using drugs are less likely to have sex, have fewer sexual partners and are also apt to use contraception more frequently than adolescents who do not avoid such risky behavior (Albert et al. 2005). Lin et al. (2006) found that teenagers who engage in alcohol use have higher degrees of intention to engage in sexual activities than those who do not engage in alcohol use.

Perceptions

Many adolescent girls are concerned with having and keeping a boyfriend and meeting social expectations, which may reinforce the message that having a boyfriend indicates that one is a desirable young woman (Heavey et al.

2008). Choosing to become pregnant is seen as a positive decision loitering a sense purpose and future direction (Panday et al. 2009). Teen pregnancy is also seen as meeting emotional needs (Panday et al. 2009). According to Davies (2003), early parenthood is perceived by some adolescents as an opportunity to heal childhood wounds, receive support from family members or obtain emotional closeness not found at home.

Such a path may be chosen to correct negative childhood experience characterized by dysfunctional family relationships, poor scholastic experience and growing up in homes and neighborhoods where teenage pregnancy was normative (Cater and Coleman in Panday et al. 2009). Male partners may impact adolescent girls' pregnancy desire and their perception of male partners' pregnancy desire is strongly associated with the pregnancy of adolescent girls (Heavey et al. 2008). Pregnancy can preserve family relationships and be a source of pride (Heavey et al. 2008). According to Etkin¹ in Khumalo (2011), many teenage girls give birth to prove womanhood and give meaning to life, especially after the end to the struggle against White-minority rule.

Dating Violence

Gender power inequities play a significant role in women's vulnerability to early and unprotected sex as well as early teen pregnancy (Panday et al. 2009). Sexual and physical violence have come to characterize relationships between men and women in some communities (Ritcher et al. 2004; Panday et al. 2009). Many school girls are coerced or pressured into pregnancy against their will (Hubbard et al. 2008). Women come to believe that they are beaten as a show of love and men take advantage of the initial sexual naivety of women by equating penetrative sex as a proof of love (Panday et al. 2009). The threat of violence is a significant deterrent to discussing contraceptive use (Panday et al. 2009). A multitude of studies have indicated that adolescent girls are often in abusive relationships at the time of their conceiving (Rosen 2004; Eaton et al. 2005; Quinlivan 2006; Ramisetty-Mikler et al. 2006).

Girls have also reported that knowledge of their pregnancy has often intensified violent and controlling behaviors on the part of their boy-

friends (Rosen 2004). In a study done by Eaton et al. (2006) in the USA, 9.2 percent of learners had been hit, slapped or physically hurt on purpose by their boyfriends or girlfriends. Similarly, a study done by Jewkes et al. (2001) in South Africa concluded physical violence, often in the form of beating, slapping, stabbing and pulling of the woman's hair may lead to rape, which may result in unplanned pregnancy. Even where there is no overt coercing, girls may still feel powerless to negotiate sexual behavior or contraceptive use if they do not feel they are equal partners in a sexual relationship (Hubbard et al. 2008).

Hubbard et al. (2008) state that the inequality is obvious in relationships with richer, older men or men in position of authority such as educators. It can also be present in relationships with boys their own ages because of the persisting gender inequalities in societies. Although both boys and girls can be victims of dating violence, gender differences exist in the type and rates of dating violence experienced (Ramisetty-Mikler et al. 2006). Ramisetty-Mikler et al. (2006) documented that girls are frequently victimized and experience more severe dating violence perpetrated by their boyfriends.

Pregnancy as a Result of Unwanted Sex

Although data is not available in South Africa on the link between child sexual abuse and pregnancy (Panday et al. 2009), many pregnancies are the result of forced sex rather than free of choice or risky sexual behavior (Hubbard et al. 2008). Traumatized adolescents turn to substance use, prostitution and running away from home, increasing their risk of early pregnancy (Pike and Wittstruck in Panday et al. 2009). A 2006 UNICEF study found that nineteen percent of girls aged 15-24 in that study had been pregnant and shockingly, forty percent of those pregnancies resulted from forced sexual intercourse (Hubbard et al. 2008).

According to Hubbard et al. (2008), many schoolgirls are coerced or pressured into risking pregnancies against their will. Educators are the major perpetrators of child sexual abuse (Maree and Erbersohn 2002). Many schoolgirls are raped in school toilets, many by their classmate and forty percent by educators (Scared in Schools in Mafhara 2010). Meier in Mafhara (2010) states that hostels are particularly unsafe and are reported to be places where educators

can prey on the young at will. Alcohol abuse by educators has also become problematic in that intoxicated educators not only neglected their teaching duties, but were also more prone to solicit sex from the female learners (Hubbard et al. 2008).

Interpersonal Factors

The day-to-day social interaction between the adolescent and his/her environment can have a profound effect on the behavior (Panday et al. 2009). Families together with partners, peers, school communities, cultural context (Albert et al. 2005; Panday et al. 2009), media and religiosity (Albert et al. 2005) play a significant role in identity formation and decision-making (NRC and IOM in Panday et al. 2009).

Peers

As children make the transition from childhood to adolescence and engage in the process of identity formation, their reliance on parents and siblings as the sole sources of influence and decision-making begins to change (Panday et al. 2009). According to Panday et al. (2009), peer attitudes, norms and behavior as well as perceptions of norms and behavior among peers have a significant and consistent impact on adolescent sexual behavior. Adolescents are sensitive to peer pressure and want to behave like their schoolmates (Zwang and Garenne 2008). Peers know about sex because they talk and educate each other, however their knowledge is deficient (Macleod and Tracy 2010).

The information teenagers obtain from peers and their boyfriends may be misleading (Kaphagawani 2006), thus male partners may take advantage of the information lapse and emphasis notion of female availability and male sexual entitlement (Jewkes et al. 2001). Perception of peers' sexual behaviors influences the adolescents' decisions to engage in sexual behavior (Nahom et al. 2009). When teenagers believe that their friends are having sex, they are more likely to have sex (Jewkes et al. 2001; Kirby 2001; Albert 2004; Maluleke 2007; Panday et al. 2009). Findings by Pristein et al. (2003) suggest that reports of sexual intercourse are associated with peer-perceived popularity among peers. According to Pristein et al. (2003), these results indicate that sexually active adolescents enjoy higher

status among peers and that popular adolescents feel more pressured or inclined to report that they are sexually active. Adolescents may believe that sexual activity best matches a prototype of popular, high-status adolescents (Pristein et al. 2003). While sexual activity is the norm and encouraged among friends, having an early pregnancy is regarded as poor female decorum and subject to severe stigma by family and friends (Panday et al. 2009). According to Panday et al. (2009), teenagers who have an early pregnancy are labeled as bad, ruined and a failure. Peer pressure extends much more beyond the desire to experiment sex with schoolmates and may lead to searching for relationships with higher status mates, with the aim of receiving gifts or various economic returns and ultimately might lead to prostitution (Zwang and Garenne 2008).

Families

During the adolescent stage, children are beginning to form their identity and are testing and developing the interpersonal and occupational role that they will assume as adults. Although adolescents look to peers and adults outside of the family for guidance and models for how to behave, parents remain influential in their development (Albert et al. 2005). Many aspects of family life play an important role in the influence of adolescents' sexual, attitudes, behavior and pregnancy (Albert 2004; Panday et al. 2009). Both family structure and family relationships are strongly associated with teen's attitudes and decisions regarding sex and contraception (Albert 2004; Holborn and Eddy 2011).

Family Structure

Family structural characteristics play a vital role in understanding and determining teenage sexual behavior including pregnancy (Panday et al. 2009).

According to Miller in Albert (2004), teens that grow up in families with both biological parents are more likely to begin having sex at an older age, use contraception more effectively, and avoid teen pregnancy than teens who grow up in other family structures. Teenagers living in a nontraditional family structure particularly those living with a single biological parent and a stepparent or partner or without parents, places

them at a high risk of early pregnancies (Markham et al. 2009; Panday et al. 2009 and Munthre 2009; Holborn and Eddy 2001). Previous studies indicate that family structure may affect the parents' ability to monitor teen behavior (Kirby et al. in Markham et al. 2009; Panday et al. 2009; Holborn and Eddy 2011) and disruptions in family structure may impact family connectedness both factors shown to be protective against early sexual initiation (Miller in Markham et al. 2009). The absence of a father figure in families led by mothers only may lead to less restrictive supervision, causing the breaking down of family structure (Markham et al. 2009). Teenagers in families with higher education and income levels are more likely to postpone sexual intercourse (Manlove et al. 2004). Adolescents from bigger families receive less attention from their households and may be more susceptible to pressure from outside the home especially peers (Vundule et al. 2001). Adolescents whose mothers were teen mothers (Manlove et al. 2004) and those with sexually experienced or pregnant siblings are more likely to have sex and a child at an early age (Manlove et al. 2004; Munthre 2009).

Family Relationships

Despite what parents may think, the quality of their relationship with their teenagers can make a real difference in their children's decision about sex (Albert 2004). Even in the culture that bombards young people with conflicting and often confusing messages about sex and pregnancy, parents remain powerful (Albert et al. 2005). When teenagers are emotionally connected to their parents and perceive them to be warm and supportive, teenagers are more likely to internalize parental values and follow their counsel because teenagers trust their parents and desire to please those (Miller et al. 2001). In close parent-child relationships, adolescents are more likely to exercise self-restraint and be involved in pro-social activities that lessen the risk of teenage pregnancy (Miller et al. 2001).

Teenagers who have close relationships with parents, characterized by strong emotional bonds, shared activities and open communication about sex and related issues are less likely to engage in risky sexual behavior (Albert 2004, 2005). Children whose parents are clear about the value of delaying sex are less likely to have

intercourse at an early age (Albert 2004). According to Albert (2004), parents who discuss contraception are also likely to have children who use contraception when they become sexually active. Teenagers whose parents supervise them and monitor their behavior are more likely to be older when they first have sex, to have fewer partners, to use contraception and to be less at-risk for pregnancy (Albert 2004, 2005; Sieverding et al. 2005). Sieverding et al. (2005) concluded that adolescents reporting successful parental monitoring (accurately knowing the adolescents' whereabouts and activities outside the home) significantly expressed cognitions less favorable of initiating intercourse, while adolescents reporting more unrestricted time were more likely to express cognitions that favored initiating intercourse. However, Miller et al. (2001) found that overly strict, authoritarian monitoring is actually associated with a greater risk of teenage pregnancy, suggesting that less intrusive supervision may be more effective. Low levels of parental supervision are associated with high levels of alcohol and drug use and with high-risk peer associations, which increases sexual behavior and decreases contraceptive use (Miller et al. 2001).

Parents' attitudes and values about teenage pregnancy are an important piece of the puzzle (Miller et al. 2004). According to Miller et al. (2004), the parents' sexual values influence whether teenagers have sexual intercourse, the timing of their sexual debut, their number of sexual partners, and their use of contraception and whether they have been pregnant. Other adults, especially in an extended family may also influence pregnancy risk for some adolescents (Miller et al. 2001).

School

There is a strong link between teenagers' decisions about sex and their connection to school (Albert 2005). Adolescents' academic performance and engagement, perception of school supportiveness and connectedness and involvement in afterschool activities are all related to the risk of early sexual activity, pregnancy and childbearing (Albert 2005; Quinlivan 2006). Learners' disengagement from school has also been associated with adolescents' perception that few opportunities follow school completion (Hallman and Grant 2006). According to

Hallman and Grant (2006), if adolescents believe that education offers low returns, they may feel little incentive to avoid early pregnancy. Young women who are more invested in their education (Hallman and Grant 2006), feel connected to their schools and report a high level of engagement with schools are less likely to have sex at early age and less likely to get pregnant (Manlove 1998). Discroll in Hallman and Grant (2006) found that young women with high educational aspirations are less likely to become pregnant while still in school even if they live in poor households and communities with few economic opportunities. There is a strong association between poor school achievement and pregnancy, as poor academic ability may influence the onset of sexual activity and early pregnancy (Quinlivan 2006).

Learners who attend schools with low rates of absenteeism are also more likely to delay sexual activity (Manlove 1998). Girls who become pregnant have experienced other types of delays in schools, such as delayed entry in grade one, grade repetition or a period of temporary school withdrawal at a younger age (Hallman and Grant 2006). The ways in which teenagers spend their afterschool time are also important (Albert 2004; Albert et al. 2005). Involvement in extracurricular activities seems to promote responsible sexual behavior (Albert et al. 2005).

COMMUNITIES

The socioeconomic status of communities, the sense of social cohesion of the community that allows for informal social control as well as the role modeling offered by adult members of the community can have a bearing on the sexual behavior of adolescents (Panday et al. 2009). There is ample empirical evidence to show that community involvement and community characteristics can influence the young people's sexual behavior (Kirby 2002; Albert et al. 2005; Panday et al. 2009), although individual and family characteristics play a major role (Albert et al. 2005). Young people who volunteer in their community and participate in community sponsored activities have a lower risk of teenage pregnancy and childbearing (Morrissey and Wilson in Albert et al. 2005). When young people are excluded from mainstreams such as education, they are at increased risk for higher risk behavior (Panday et al. 2009). High rates of poverty,

delinquency, and crime, and little neighborhood cohesion are risk factors for early pregnancy (Kirby 2001, 2002; Albert et al. 2005; Panday et al. 2009). Teenagers from economically disadvantaged communities, that is, teenagers from communities with low levels of education, income and employment tend to have sex more frequently, have more sexual partners, use contraceptive less and are at higher risk of teenage pregnancy (Kirby 2002; Albert et al. 2005; Panday et al. 2009).

The KZN Transitions study (Kaufman et al. in Panday et al. 2009) showed mixed effects of community levels of education of education, income and participation in organized activities for boys and girls. Higher levels of opportunity for education, income and participation in sport among girls decreased the likelihood of having sex in the past year. Each of these community attributes decreased the likelihood for condom use in boys. According to the study, these findings may be indicative of the gender differences in communities within a context of relative poverty, where access to privilege for men confers enticement not to use condoms and to engage in other high risk behaviors (Panday et al. 2009).

Change does not come easily (Hubbard et al. 2008). According to Hubbard et al. (2008), leaders support the expulsion of pregnant learners from schools citing the punitive action by the need to uphold a moral norm, which prohibits sex before marriage, "*pregnancy being considered as irrefutable proof that this norm was breached*". Pregnancy is a source of shame to the community (Khumalo 2011).

In a study by Runhare (2010) negative labels and hate language directed at pregnant and former pregnant learners were expressed at the community, family and the school. Furthermore, Runhare (2010) argued that once the girl child became pregnant, she might lose her childhood rights in the family as a punishment for bringing shame in the family.

CULTURAL BACKGROUND

African cultures play a significant role in the high incident of teenage pregnancy (Ritcher and Mlambo 2005). Culture may increase feelings of alienation and thereby increase risky behavior and young people experience pressures and expectations that are immensely challenging (Kaufman et al. 2007). According to Kaufman et al.

(2007), having a baby while still very young is part of the culture and also traditional. While virginity until marriage is valued (Kaufman et al. 2007), in families and the broader social environment, social reactions to teenage girls who become pregnant show diversity, particularly between racial groups, change at different points during the pregnancy and after birth depend on the circumstances of the pregnancy (Jewkes and Christofides 2008). The high-value placed on children together with support of family makes prospect of relatively early pregnancy and early childbearing desirable to many (Kaufman et al. 2007).

Some African teenagers report that their mothers or grandmothers are pleased when they get pregnant (Wood and Jewkes 2006). The social status of teenage girls who have given birth does change (Jewkes and Christofides 2008). Preton-Whyte and Zondi in Jewkes and Christofides (2008) state that childbirth, whether in or outside marriage, is traditionally regarded as the ultimate rite of passage to woman/manhood and thus elevates a girl's or boy's status. For the young African woman, pregnancy maybe important in self-evaluation of fertility (Jewkes and Christofides 2008) and is often accepted (Zwang and Garenne 2008; Jewkes and Christofides 2008). The socialization of young people has an impact on their expressions of sexuality, girls are not trusted and it negatively impacts their sexual expression (Maluleke 2007). According to Maluleke (2007), the societal expectation that a woman should play a passive role during sexual intercourse has robbed the women of their responsibility to make choices about their sexuality and sexual life. International (Kaufman et al. 2007) and SA research (Zwang and Garenne 2008) concluded that pregnancy is well tolerated when young lovers are already in a stable relationship and about to marry.

MASS MEDIA

In a study by Whitehead and Pearson (2006), it was argued that teenagers who were exposed to hyper sexualized culture early in their lives, they were also likely to get their first lessons about sex from the streets, the Internet and their peers long before they got information about sex and related topics from their teachers or even their parents. What teenagers are watching, reading and listening to may influence their sexual

attitudes and behavior (Albert et al. 2005). According to Albert et al. (2005), the media is an important source of information for teenagers for sex and contraception.

The media has been identified as one of the factors influencing adolescents' sexuality, because of the tendency among young people to believe that the type of behavior that is portrayed by the media is normal and they should not behave differently from the portrayed behavior (Maluleke 2007). According to Zwang and Garenne (2008), media is one of the reasons accounting for the increase in sexual activity among teenagers, who form a large media audience. Sexual behavior is strongly influenced by culture (Collins et al. 2004; Kaufman et al. 2007), and the television is an integral part of the teenagers' culture (Collins et al. 2004; Maluleke 2007). The high dose exposure of sex may affect adolescents' developing belief about cultural norms. The television may create the illusion that sex is more central to daily life than it truly is and may promote sexual initiation (Collins et al. 2007). According to Collins et al. (2004), exposure to the social models provided by the television also may alter beliefs about the likely outcome of engaging in sexual activity, teenagers who see characters having casual sex without experiencing consequences are more likely to adopt the behavior portrayed (Collins et al. 2004).

The American Pediatrics has suggested that portrayals of sex entertainment on television may contribute to precocious sex (Collins et al. 2004). A number of studies demonstrated links between watching sex on TV and early adolescents' sexual debut (Albert et al. 2005; Collins et al. 2007; Maluleke 2007), teenage pregnancy are more common among those who begin sexual activities earlier (Collins et al. 2004). Exposure to TV that included only talk about sex was associated with the same risks as exposure to TV that depicted sexual behavior (Collins et al. 2004). Teenagers who watch TV frequently are more likely to have more permissive attitudes about sex (Albert et al. 2005). According to Maluleke (2007), through pictures and images, young people learn about femininity, masculinity and relationships and verbal instructions no longer play a vital role in their learning.

Music also has an impact on young people's sexuality (Maluleke 2007). According to Maluleke (2007), certain songs and videos were seen as having an influence on violent sexual behav-

ior and lack of respect for women. Most teenagers listen to some kind of music that have obscenities and vulgarities, which cloud what is perceived by teenagers as normal and they may try to behave according to the lyrics of their favorite music (Maluleke 2007).

RELIGION

Research has constantly linked adolescents' religious belief and sexual behavior (Albert et al. 2005). Religiosity remains the strongest predictor of adolescents' sexual behavior (Musbau 2010). Religion can delay the individual's sex debut, but does not provide teenagers with necessary information and skills on how to make informed decisions about their sexuality and how to protect themselves against STI and unwanted pregnancy (Maluleke 2007). Religious attendance is significantly related with sexual attitudes and behaviors in different settings (Musbau 2010). Teenagers who regard religion as important and valuable in their lives and attend religious services regularly are more likely to postpone sexual activity (Albert et al. 2005; Musbau 2010), and are more conservative in their sexual attitudes (Musbau 2010) than teenagers who are less religious. According to Musbau (2010), frequent religious attendance may provide adolescents with a value system, which ostensibly encourage responsible behavior in the form of abstinence.

CONCLUSION

Although literature on the determinants of teenage pregnancy was not thoroughly conducted, the above literature suggests amongst others that teenagers who were exposed to hyper sexualized culture early in their lives, are also likely to get their first lessons about sex from the streets, the Internet and their peers long before they get information about sex and related topics from their teachers or even their parents. However, it was indicated that religiosity remains the strongest predictor of adolescents' sexual behavior.

NOTE

¹Esther Etkin is a spokesperson for Love life, a South African government-funded HIV prevention initiative.

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