Exploration of Traditional and Cultural Practices Contributing to Teenage Pregnancy from the Young Males Perspectives at the Free State School of Nursing

Siphiwe Themba Madlala
1. Department of Nursing Science, University of Zululand, Private Bag X 1001, KwaDlangezwa, 3886 South Africa
2. No 2583 Extension 1, 42nd Hill, Harrismith, 9880 South Africa

Abstract
Traditional and cultural practices forms part of humankind upbringing in most part of the countries. These practices has a great impact on the lives of teenagers’ especially young males regarding sexual practices that may lead to teenage pregnancies. This qualitative explorative study is aimed at exploring the traditional and cultural practices contributing to teenage pregnancy from young males perspectives at the Free State School of Nursing. A purposive sampling was employed for this study. The results revealed that traditional and cultural practices such as circumcision misinterpretations at the initiation schools, misconceptions about sexual abstinence and methods of contraceptive can be misleading to young males resulting in teenage pregnancies. Furthermore the study revealed a great need for the Department of Health to strengthen policies regarding sexual education that should be impacted to the initiates at the initiation schools.

Keywords: Circumcision, Initiation schools, Teenage pregnancy, Young males

1. Introduction
Over the past years family planning and reproductive health services have been female focused. Traditionally this focus made sense since most family planning and reproductive health are female dependent. The onset of the AIDS epidemic brought a paradigm shift as many health professionals have recognised the important part that can be played by males in family planning and maternal health care. Although young males are being involved in family planning currently, but major gaps still exist in many areas such as sex education, traditional and cultural practices and gender stereotypes. The Department of Education (2007:2) assures that learners are taught about sexual-related issues at schools through Life Orientation as a subject. However, despite being taught about sexual education at schools, teenage pregnancy still remains problematic in South Africa as most of the areas of concern such as males’ traditional and cultural practices as well as gender stereotypes are not dealt with adequately in Life Orientation subject.

When dealing with teenage pregnancy, the attention is often focused solely on girls and young males are being disregarded although they play a critical role in teenage pregnancies. Yet in most cases, young males are the initiators of sexual intercourse and influence the relationship in terms of having sex Adams and Holt (2011:5). This segregation in gender leads to young males’ to view family planning and reproductive health as solemnly females’ total responsibility. Teenage girls are more likely than their young male counterparts to talk to their parents about ‘how to say no to sex’ or about birth control Martinez, Abma and Casey (2010:30) This mother-daughter relationship encourages girls to turn to their mothers for nurturance but young males who lack father-son relationships cannot turn to their fathers for such communications. Byers (2011:20) states that even though parents see it as their responsibility to talk to their teenagers about sexuality. Most do not engage in an in-depth discussions with their teenagers about sex especially not with the boys as they depend on traditional and cultural practices such as initiation schools to impact knowledge, hence young males will turn to their peers for advice which might lead to risky behaviours and irresponsibility. Unfortunately their peers probably also lack knowledge and might actually encourage premature and irresponsible sexual decisions leading to teenage pregnancies.

Traditionally, various race and ethnic groups conform to different cultural values and traditional practice. Some of this practices and beliefs include that young males need to be sent to the traditional initiation schools to be circumcised and be taught about manhood. This is a respected traditional and cultural practice in which all men in their youth need to undergo in most ethnic groups. Young Xhosa males are sent to so-called ‘initiation schools’ where traditional circumcision takes place and presumably the circumcised boys are taught how to become men while they are recuperating from their circumcision wounds in the so-called ‘bush schools, initiation schools or mountain schools’. Despite these practices some boys do not acquire adequate information and knowledge regarding their roles in preventing teenage pregnancies. According to Rule (2004:4), young males might be more likely to engage in sexual activities at an early age because of socio-cultural conditions such as ‘miss-guided’ information provided by the traditional elders at the initiation schools. Some of the African cultures are at the transitional stage as they are changing gradually from traditional way of life to more
modern westernised culture such as young males being circumcised at the hospitals and by private medical Doctors. They are being given professional health education regarding sexual related issues including teenage pregnancy prevention unlike at the initiation schools.

According to Bezuidenhout (2013: 40) teenagers experience psychological and physiological changes and might often find it difficult to discuss these changes and experiences with their parents. The results of this changes increase the chances of young males to experiment with sexual encounters to satisfy their curiosity, which may lead to unwanted teenage pregnancies. Martinez et al. (2011:30) supports this by stating that young males believe that they are physically ready to engage in sexual intercourse due to this changes, but being physically ready does not always mean that they have enough knowledge about sexual activities and the consequences thereof. It was also established by Hoque (2011:157) that about 27.2% of young males had had multiple sexual partners and that those young males never used condoms. For them, this risky sexual behaviour has to do with proving manliness as having many sexual partners wins a young male status and admiration from his peers. These risky sexual practices put young males at risk of teenage pregnancies and contracting STIs. Involvement of young males and education about sexual issues at the initiations schools may yield positive interventions resulting in reduced numbers of teenage pregnancies.

The purpose of the study was to explore the cultural and traditional practices contributing to teenage pregnancy from young males perspectives in Free State School of Nursing. Interviews were conducted with young males.

2. Research design
A qualitative explorative design was used for this study. Brink, Van der Walt and Van Rensburg (2012: 120) stated that qualitative research is used when little is known about the phenomenon, or when the nature, context and boundaries of the phenomenon are poorly understood and defined. This is supported by Creswell (2003: 15) who describes qualitative research as an enquiry process of understanding based on distinct methodological traditions of enquiry that explore a social or human problem. In this study, the researcher explored the traditional and cultural practices contributing to teenage pregnancy from the young males in the Free State School of Nursing through face to face semi-structured individual interviews.

3. Population and sampling
The target population consisted of young males studying at the Free State School of Nursing at the time of conducting the study. A purposive sampling method was used to select the participants for the study. Polit and Beck (2012: 517) define purposive sampling as a sampling method whereby the researcher selects participants based on his/her personal judgments about which participants would provide the most relevant information for the study. The researcher selected young males aged 18-23 years who were studying at Free State School of Nursing during the data collection phase of the current study.

4. Data collection
Data were collected by means of face to face semi-structured interviews which were conducted in a private room to maintain strict confidentiality using field notes and audio-recorder. The semi-structured interviews consisted of closed and open ended questions to explore traditional and cultural practices contributing to teenage pregnancy from the young males’ perspectives. Data was collected until saturation was reached and field notes as well as audio-recorded data remained with the researcher until data was analysed.

A pilot study was conducted in one of the three Free State School of Nursing campuses on 3 young males. It was evident that the participants understood the questions, no restructuring of the questions were done before administering the instrument to the main study.

5. Ethical consideration
Approval for the study was granted by the Research Ethics Committee (number REC 53/14), and permission to conduct the study in two main campuses of the Free State School of Nursing was granted by the Free State Department of Health. All the participants were given the letter of information and a written consent to grant permission to partake in the study using voice recorder during the interviews.

6. Qualitative approach data analysis
Themes that were explored during data collection were analysed thematically, the researcher read the field notes in conjunction with listening to the recorded responses from the participants. According to Schmidt and Brown (2009:169) during thematic analysis, reasons, feelings and thoughts of the participants were explored. Each transcript was carefully read and field notes taken of any significant theme were correlated with specific interviews’ information. The researcher organised a list of data into themes and sub-themes in order to look for connections between them. The main aim was to end up with key themes that describe the essence of the study.
The below is the description of how data was analysed:

Table: 1 Traditional and cultural practices contributing to teenage pregnancy from young males perspectives in Free State School of Nursing

<table>
<thead>
<tr>
<th>Theme</th>
<th>Sub – themes</th>
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<tbody>
<tr>
<td>Traditional and cultural practices contributing to teenage pregnancy</td>
<td>1.1 Misinterpretations concerning circumcision</td>
</tr>
<tr>
<td></td>
<td>1.2 Cultural beliefs and misconceptions about sexual abstinence</td>
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<td></td>
<td>1.3 Traditional and cultural method of contraceptive</td>
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The researcher identified three major common sub-themes from the main theme of traditional and cultural practices contributing to teenage pregnancies. The sub-themes that emerged were misinterpretations concerning circumcision, cultural beliefs and misconceptions about sexual abstinence and poor traditional and cultural method of contraceptive.

7. Discussion of findings
The first sub-theme that emerged was misinterpretations concerning circumcision.

“...lack of information boys get from the initiation schools maybe misleading sometimes. The elders there they just say you are a man now, no education about sex and protection is given. Sometimes you fear that perhaps sex will be not the same as before circumcision, most boys engage in unprotected sex after initiation to test if everything is still ok. You know by doing that ... they put themselves at risk for HIV or teenage pregnancy”

A number of the participants were concerned that after being circumcised they are not being educated about sexual related issues. They have fear that sex will be different after circumcision that lead to them engaging in unprotected sexual intercourse resulting in contracting sexually transmitted diseases and causing teenage pregnancy. This was supported by Maluleke (2003: 64) who also found that during initiation, sexual education was limited to personal hygiene, self-control and social morals. The initiates are left with mixed feelings and questions such as to whether sexual intercourse would still be the same as before circumcision hence they indulge in unprotected sexual intercourse leading to teenage pregnancy.

The second sub-theme that emerged was Cultural beliefs and misconceptions about sexual abstinence.

“...you know ... eh... girls are being encouraged every time to preserve their virginity until they get married, but in the case of boys none is being said about how important to remain [it is to remain] a virgin until you get married. ... So boys tend to compete to have sex with the virgins as this is sort of male achievement..... That’s why most boys engage in sex especially with the virgin girls as this gives them pride mean while they are risking their lives with STIs and teenage pregnancy”

Sexual abstinence was perceived as a female cultural practices by the participants. They alluded that culturally it is believed that girls should not engage in sexual intercourse until they are married. Boys are allowed to engage in sexual intercourse as sexual abstinence was only emphasised to girls to remain virgins, hence having sexual intercourse with a virgin was seen as a male achievement while risking to cause teenage pregnancy and contracting sexually transmitted diseases. Pardue (2003: 1) maintains that ‘increased abstinence was the major cause of declining birth and teenage pregnancy among teenage girls. This decline in numbers of teenage pregnancies could be increased if abstinence was also filtrated to young males

The third sub-themes that emerged was traditional and cultural method of contraceptive.

“...some of the traditional and cultural contraceptives methods practiced by boys can be risky. Take for instance the withdrawal method as it is practiced by many boys, this method is extremely risky because one does not use any protection. You can contract sexually transmitted diseases and above all a girl can be pregnant as this method is not safe at all”

Participants also raised concerns regarding the traditional and cultural methods of contraception such as withdrawal method. They believed that many young males were believing that by practicing that method they cannot cause any pregnancy. Nduli (2012: 20) regarded abstinence as superstitious and a myth. This method is extremely risky as sexually transmitted diseases could be contracted despite causing teenage pregnancies.

8. Recommendations
• Elders at the initiation schools should give sex education to the initiates beside values and norms education that they give after circumcision.
• Health care providers should be invited by the elders to train them about contraceptives and their use after circumcision to prevent teenage pregnancies, HIV and STIs.
• Further research study to be conducted involving parents and the Department of Health regarding the phenomena

9. Conclusion
Traditional and cultural practices for males such as being circumcised at the initiation schools need to be
accompanied by in-depth knowledge impacted to young males regarding safe sexual intercourse. Furthermore a probe should be initiated to find out what are the initiates are being taught at the initiations schools by the elders to close a gap identified by the young males regarding traditional and cultural practices contributing to teenage pregnancies. This study will open an opportunity for the Department of Health to strengthen the policies and guidelines pertaining to the initiations schools on how to actively involve young males in Reproductive health.

References
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