

A Hermeneutic Phenomenological Exploration of the extent to which the lived experience of adolescent mothers has influenced their future educational and livelihood opportunities in Jamaica

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Abstract: The hermeneutic phenomenological explanation of the lived experiences of adolescent mothers within a 20-year span has been noted, and responded to via four research questions.

A qualitative approach was taken to conduct this research, which comprises 14 participants from urban and rural Jamaica: 10 former adolescent mothers who became pregnant while they were within the age cohort of 11-17 years, and 4 policy-makers.

Despite unfavourable cultural dictates (legislation, patriarchal practice and value-laden positionalities), the outcome of majority of the adolescent mothers were positive.

Keywords: Jamaica, adolescent motherhood, hermeneutic phenomenology, experience.

I. INTRODUCTION

This qualitative research (which represents excerpts from a >300-page dissertation), introduces a hermeneutic phenomenological exploration of the extent to which the lived experience of adolescent mothers has influenced future educational and livelihood opportunities in Jamaica. The discourse and conceptual underpinning of this research, note the difference between the hermeneutic and phenomenological perspectives, with the former being in relation to culture, perception, judgment, values (Heidegger, 1923), and the product deriving from actions (Tate, 1934); and the latter being representative of how things appear to people based on their experiences and what it means to them (Husserl, 1963).

Although scholars prefer quantitative studies because of its propensity to generalize, this research has taken a qualitative approach instead, owing to the likely benefits and anticipated outcome envisioned; some of which are being able to bring life and meaning to the lived experiences of the respondents; having provided scope for policy-research interface and robust programme-policy dialogue; and at the same time, enabled latitude for the possible strengthening of adolescent-related programme and policy interventions.

Objective:

The key objective of this research is to ascertain the extent to which the lived experience of adolescent mothers has influenced their future educational and livelihood opportunities in Jamaica.

II. THE PROBLEM

The matter of adolescent pregnancy has, for sometime now, been high on many countries' (including Jamaica) programme intervention and policy-legislative agendas, owing to ongoing concerns relating to its likely implications, such as unfavourable health, education and socio-economic outcomes. The latter is considered a cause and effect of adolescent

childbearing (The National Campaign to Prevent Teen Pregnancy, 2010), which often compounds high educational achievement, especially where there is limited or lack of support and absence of the father – thus resulting in the young mother “resorting to low-paying jobs, requiring her to work long, hard hours, and forcing her to leave her children in vulnerable situations...” (Leo-Rhynie, 1993, p. 13). It stands to reason, therefore, why when limited educational attainment or the lack thereof is combined with very limited skills, then employment opportunities become sparse, and strong earning power becomes unlikely (Maynard, 1996; Zill & Nord, 1994).

Unlike adolescents who delay fertility, the propensity for low or no education and employment tends to be high (Diaz & Fiel, 2016); and so, from an economic standpoint, the measurement of what an adolescent mother would likely earn over her lifetime, as against the lifetime opportunity cost of adolescent pregnancy has significant impact on a country’s annual gross domestic product because adolescents play a significant role in a country’s growth and development (Chaaban & Cunningham, 2011).

III. LITERATURE REVIEW

Hermeneutic Phenomenological approach provides the opportunities for lived experiences to be shared with a sense of willingness and openness (Polkinghorne; van Manen, cited in Laverty, 2003), and at the same time, adds the relevant interpretation and meaning from human action and text perspectives (Tate, 1934), being significant to cultural practice and policy-legislative framework.

Such interpretation resonate feelings of moral pollution, disorder (Murcott, 1980), lack of purity (Musgrove, as cited in Murcott, 1980, p. 7), and the disassembling of family structures (DeLamater & Hasday, 2007, p. 2) when it comes to adolescent pregnancy; yet the solo-abstinence approach is still being taken against the reality of teen pregnancy. Such approach is yet to curb the issue, and has demonstrated very little impact, if any (Furstenberg, 2008). However, access to contraceptive would likely prevent early teen pregnancy (Douglas-Durham, Blanchard & Higgins, 2015), and has proven to reduce same (Furstenberg, 2008); yet in Jamaican schools, access to condoms/contraceptives are not permitted (Dunkley-Willis, 2013; Lifesite News, 2013), and at the same time, were the girl to become pregnant, the Education Act (1980), made provision for her dismissal, despite the United Nations Convention on the Rights of the Child document which charged countries to ensure that the education of children does not encounter any deliberate interruption.

The abstinence only approach, and denial of access to contraceptive methods are obstacles which spells early teenage pregnancy and the absence of an education, social and economic support, which are disadvantageous to the future of both mother and child (Cornwall, 2013). It should be noted that when a girl’s education is being interrupted by virtue of being pregnant, this is not unique to Jamaica’s law and culture, but is common place in francophone and other African countries (Lloyd & Mensch, 2008).

The “Caribbean is seen as a patriarchal society in which power status and privilege are bestowed upon men, and where masculinity is valued more than femininity...males are allowed to engage in sexual activity at an earlier age than females” (Brown & Chevannes, 1998). The authors further intimated that “many parents help to foster this attitude by applying the child-rearing concept described in Guyana as ‘tie the heifer, loose the bull’, meaning that they closely monitor their daughters but allow their sons greater freedom and independence with regard to sexual activity” – a cultural reality which adds relevance to this research. Here, the boy was taught to be tough by roaming like a ‘bull’ – “to be strong even when wrong; and to hone his skills to be of service not to one, but to as many ‘heifers’ as his mating prowess will allow” (Nettleford, 2005). One scholar puts it another way: “toughen the boys and watch the girls” – a gender difference which depicts close monitoring of the girls than the boys (Le Franc et al, 2010, p. 116). The work of Kempadoo & Dunn, 2001 shows where the boys spoke of feeling pleasure of breeding a girl and have sex wid plenty gal¹.

In Jamaica, adolescent fertility rate stands at 61/1,000 population (in 2014), coming from 62/1,000 in 2013, 64/1,000 in 2012, and 66/1,000 in 2011 (The World Bank Group, 2016). Local survey reflected 72/1000 in 2008, 112/1,000 in 1997, 102/1,000 in 1989 and 137/1,000 in 1975 (National Family Planning Board, 2010). These are more than the global fertility rate of 49/1,000 (World Health Organization, 2014a).

Approximately forty percent (40%) adolescents became pregnant at least once, and with more than 80% being unplanned (McFarlane et al, as cited in McDonald-Levy, Hardee & Subaran, 2001); and so, high levels of adolescent fertility is challenging for various reasons – one of which is that there are greater health risk, whereby young mothers experience

¹ The phrase ‘breeding a girl and have sex wid plenty gal’ means in English Language, ‘impregnating a girl and having sex with plenty girls’.

highest probabilities of foetal death, infant mortality and morbidity, and obstetric problems in the postpartum period – mainly affecting those below 18 years old (Cornwall, 2013). This explains why worldwide, adolescent pregnancy and childbearing represent approximately 23% of disability-adjusted life years, thus contributing to the burden of diseases (World Health Organization, 2014b).

Increase in births among single-headed household families influenced large family size, and instability in cohabitating relationships, thus made the children susceptible to poverty, and could inhibit the incompleteness of their education (Cancian & Reid, 2009).

Of noteworthy too is that there are relationships regarding years of schooling, fertility and gross domestic product. Average direct cost per adolescent mother in the Caribbean was approximately US\$2,000 annually – that is 2.43% of Gross Domestic Product [GDP] (Caribbean Community & United Nations Population Fund, 2014). In view of opportunity cost relating to adolescent girls who were stunted in reaching their fullest potential, this was estimated at 12.3% GDP in the Caribbean region (Caribbean Community & United Nations Population Fund, 2014).

In determining the cost relations with adolescent pregnancy, Chaaban & Cunningham (2011), and United Nations Population Fund (2013), advised that eight factors ought to be taken into consideration in order to ascertain a true calculation. These are early interruption of formal education; unemployment and unskilled of the adolescent and for the child in the future; adolescent pregnancy; inactivity – not being a part of the job market; adolescent health; child health; social empowerment; and life expectancy.

With these eight considerations, “the cost of adolescent pregnancy as a share of gross domestic product could be as high as 30 percent or as low as 1 percent over a girl’s lifetime, depending on the assumptions used to calculate the losses,” and so the policy recommendation is for every government to invest in girls and track the returns; provide educational and health opportunities for children born to adolescent mothers so that they can have a chance at a productive future; and advocate for girls “by repealing laws that discriminate against girls in the workplace, schools, or family and ensure equality of access to health services, education, jobs and earnings...” (Chaaban & Cunningham, 2011, pp. i 24). Besides, investments in the education, health, employment and other well-being of young women and men could strengthen a country’s economic base and alleviate poverty (United Nations Population Fund, 2007). Such investment should also consider the fact that if all adolescents in Jamaica, for example, were to be completely enrolled in the formal secondary school system, then this would add a growth of 1.37% for the country’s economy, and 5.47% growth if there were to be at least 30% tertiary level enrolment (Caribbean Community Commission, as cited in Nelson, 2013). This goes to show one of the extents to which education does contribute to personal development (Mandella, 1994) and ought to be treated as a right, by virtue of being human (Aristotle, as cited in Hummel, 1999; United Nations Children’s Fund, 2008).

Ergo, in light of the foregoing perspectives, adolescent pregnancy ought not to be treated with frivolity, as it is considered unsuitable for educational, social and health choice. This is because of the likelihood of the adolescent mother becoming susceptible to being “socially disadvantaged, with higher unemployment level, lower incomes, and a marital status which lend themselves to limited or no security” (Rawlins, Dialsingh, Crawford, Rawlins & McGrowder, 2013, p. 131). If we were to put this within the context of Social Exchange theory, there are benefits to be derived from, if both the adolescent mother and her child are not disadvantaged (Pitso & Kheswa, 2014). Social Exchange theorists contended that if parents do not invest wisely in their children, from a human capital perspective, then the child and the succeeding generation could become successful (White, 2007; Social Exchange Theory, n.d.).

Now we understand why Black Feminists had paved the way for continued education, empowerment, social justice, equal opportunity, resilience, self-rule and sufficiency during and after pregnancy (Crenshaw, 1989; Cannon, n.d., Collins, 2000), especially considering the treatment of ‘outsidership’ (Collins, 2000), and the susceptibility to abuse and inequality regarding the Black woman (Crenshaw, 1991). When this happens in schools, this goes against the Jamaica Teachers’ Association Code of Ethics which makes provision for respect and non-discrimination (Jamaica Teachers’ Association, 1992).

IV. MATERIALS AND METHODOLOGY

Hermeneutic Phenomenological Approach:

A Hermeneutic Phenomenological exploration of the extent to which the lived experience of adolescent mothers has influenced their future educational and livelihood opportunities in Jamaica, is the discourse and conceptual underpinning of this research. It explores the real life lived experiences of the adolescent mothers about a decade ago, and looks at how those experiences influenced their educational and livelihood opportunities, and the relevant interpretations of their lives.

One of the benefits of using the hermeneutic phenomenological approach is that during the process of gathering information, “field researchers may recognize several nuances of attitude and behavior that might escape researchers using other methods” (Babbie 2001, p. 275).

Qualitative Approach:

Qualitative interviewing begins with the assumption that the perspective of others is meaningful, knowable, and able to be made explicit” (Patton, 1990, p. 278), with a view to the how, when, who, why, what, where, and by what means (Detel, 2011), while capturing an understanding and acceptance regarding the respondent’s explanations (Weber, 1922). It lends itself to the assumption that this research was effective in obtaining information regarding personal experiences, perspectives and interpretation of protocols, gleaned from information obtained from the field – directly from the sources via interviews/discussions. In other words, although it cannot generalize because of its small sample size, it provides in-depth detail from shared experiences that may be used for technocratic-type discussion. This goes to show that the small sample size does not take away from the fact that qualitative research possesses “the scope of understanding investigated phenomena” (Alshenqeeti, 2014, p. 40).

Sample:

The primary data collection entailed the use of non-probability sampling methods such as snowball and purposive, targeting 12 of the former adolescent mothers (now adults) from urban (4) and rural (8) areas, and five policy-makers. Two of the former and one of the latter had opted out.

One school of thought intimated that sample size and design should be akin to “...expected reasonable coverage of the phenomenon given the purpose of the study and stakeholder interests” (Patton, as cited in Marshall, Cardon, Poddar & Fontenot, 2013, p. 12), and that in the case of a qualitative research, it should be much smaller than quantitative – say approximately 10 cases (Sandelowski, 1995).

Instrument Design:

Two sets of semi-structured interview guides (open and close-ended) were designed - one for the former adolescent mothers, being a two-page, 22-item document which was used to capture information within a 45-minute period from women, 25-36 years old, who became pregnant during their adolescent years, while attending school. The other was for the policy-makers, being a one-page, 10-item document which was discussed within an approximate 90-minute period.

Research Questions:

The research questions rest on the three themes, which emanated from this research; namely: cultural response to adolescent pregnancy, education access and outcome, and programme-policy position. These help to inform the four research questions below:

- 1) What are the factors that influenced the educational and socio-economic outcomes of the adolescent mothers within an approximate 20-year span?
- 2) To what extent has social norms and cultural interpretations of adolescent pregnancy in the Caribbean influenced the lived experiences of the adolescent mothers in Jamaica?
- 3) What is the comparative outcome of those who participated in the WCJF Programme and was later re-integrated into the formal education system; those who did not participate, but were later reintegrated into another secondary school; as well as those who, despite having participated into the Programme, did not continue their education at the secondary level; those who neither participated into the Programme nor further their secondary school education.
- 4) Is there a need for a revision of the protocol-related documents and practices that govern the treatment of pregnant adolescent in secondary schools?

Data Collection and Analysis Procedures:

Data were collected from 10 participants of 25-36 years, who became pregnant when they were 11-17 year olds. At the time of the interview, they resided in the urban-rural geographic spaces of Kingston and St. Andrew (3), St. Ann (4), and Trelawny (3). Four policy personnel from selected sectors of Government were also interviewed, pertinent to the subject matter.

Another segment of the data collection process was the comprehensive desk review which was sectionalised by types, relevance, themes, and theories, according to the literature mapping strategy, encapsulating statistical reports, grey publications (legislations and policies), and a wide range of scholarly academic pieces, which involved journal articles, book chapters, and documents from the information superhighway.

Data were analysed via inductive reasoning and subdivision of information into major themes. The information collected was managed by manual counting of the transcripts and notations.

Ethics:

Information was captured from the participants via formal consent agreement. In addition, this research was approved by the Ethics Review Board of the International University of the Caribbean, Surrey Campus, prior to venturing out into the field to engage in data collection.

Reason for Research:

When I was a child, I noticed that adolescent mothers were subjected to ‘do as I say’ to every so-called moral ‘standards’. Should they fail to live up to such identity, then they would have been deemed negatively, being subjectively assigned an identity by their parents and communities (Church, school, elderly residents, social clubs), which sometimes ostracized them when they became pregnant, unlike their male counterpart.

As I looked on, in my then childhood opinion, the pregnant girls appeared like outsiders in their own communities, when instead, it should be that “...place where they feel a sense of belonging” (Dodman, 2010, p. 96); and so, embarking upon this research, gives me an opportunity to explore and better comprehend why things were the way they were.

Strengths of the Methodology:

The approach taken regarding interview involved shared experience and alignment with the research questions, and is deemed beneficial to the hermeneutic phenomenological ‘constitution’ (Rickert, 1929), as it allowed for interviews to “build a holistic snapshot, analyse words, and report detailed views of informants” (Alshenqeeti, 2014, p. 39), and at the same time, gave life and meaning to same, reflecting a 20-year time span.

Another strength is that this research captured information regarding former adolescents as young as 11 years old, unlike national reports which featured no less than age 15 years.

The research also compared the outcome of those who participated in the WCJF Programme and was later re-integrated into the formal education system; as against those who did not participate, but were later reintegrated into another secondary school; as well as those who, despite having participated into the Programme, did not continue their education at the secondary level; and those who neither participated into the Programme nor further their secondary school education.

Positionalities:

Positionality can be referred to as “... shifting networks of relationships which can be analyzed and changed” (Maher & Tetreault, as cited in Foote & Bartell, 2011), depending on the situation in which the researcher and the research may find itself. This is perhaps why “critical reflection upon the positionalities of the researcher and researched is now regarded as accepted practice...” (Hopkins, 2007, p. 387).

In the case of this research, my positionality during my contact with the two categories of respondents was two-fold. While an insider approach was considered prudent with the policy-makers (by virtue of my profession in policy work), had I endeavoured to take a similar approach with the former adolescent mothers, I would not have been well received. Nevertheless, I believe that there were times when my positions changed during my interview with the former adolescent mothers. By this I mean that at some points they related to me as an outsider, and at other times whenever they appeared comfortable during the conversation, an insider approach was taken; but Mullings (1999) posited that this is normal, as insider-outsider approach is not always static, but is usually dependent on the mood of the interview/discussion. Such mood could vary between questions. However, trust remained a constant for the most part – a phenomenological attribute which Freire (1970) encouraged as a form of dialogue which can garner success once evident.

V. RESULTS AND DISCUSSION

The 10 former adolescent respondents ranged between 25-36 years, half of whom were within the 34-36 age cohort, followed by those within the 25-27 age capacity. The 28-30 and 31-33 age groups comprised one respondent each. Of these 10 respondents, three became pregnant at age 14, three at 16 years, two at 17 years, one during the years of 15 and 17, and one at age 11. Their parents, at the time, held positions which ranged from domestic helper to farmer, to entrepreneur, to store clerk, to security guard. Some of the respondents were also products of adolescent mothers, save for two 14 year olds whose mothers had their first children at 23 years; a 17 year old whose mother bore her first child at 20 and a 16 year old, whose mother had her first child at age 30. One of the policy-maker respondents, who was also an adolescent mother, had one child at the time of the interview. Another, who was a product of adolescent parents, opted to beget no children.

Majority (8) of the respondents became pregnant via a consensual arrangement, while some (2) were coerced and did not lodge any form of complaint against their perpetrators. Six of the baby-fathers supported their children while five did not (note that one of the respondents had repeated pregnancy). One was as a result of not knowing of the existence of the child; another was denied opportunity to support, while the remaining three were because of negligence. In one instance of coercion, the baby-father and his parents showed interest in the child's welfare, while in the other instance, no maintenance was received.

In terms of achievement, six of the former adolescent respondents achieved tertiary level education as their highest level of education. This was followed by those who fell within the other category: having participated in other programmes such as the HEART Academy, and Dressmaking School. Only one respondent had attained secondary education as the highest level. Three of the participants who had attained tertiary education had participated in the WCJF Programme, while three did not. All the respondents, save for two, were employed on a full-time basis. As a matter of fact, one was employed both full-time and part-time, while another, full-time plus self-employed.

Despite majority of the respondents having been from households that were of non-financially viable status, the respondents turned out to be the opposite to their parents. This goes contrary to scholarly views that families which are of single-headed household features, large size in numbers, among other factors could make children susceptible to poverty, thus suffocate their educational opportunities (Pitso & Kheswa, 2014; Cancian & Reid, 2009; & Gyan, 2013). Half of the respondents had physically graduated and half did not. Those who had graduated were mainly because they were able to conceal their pregnancy and still maintain their position in the formal secondary school system. The majority of the respondents gave birth during the summer or during the period of graduation, but had mostly completed their formal schooling, up to the point of sitting their final examinations.

What was also incongruent was that although most of the respondents came from marital unions, they enjoyed having established single-parenthood for themselves. In essence, family size was not an issue in the findings, as most of the adolescent mothers were from households with more than two siblings, yet had only one child up to the time of the interview. In regards to single-headed households, majority (seven former adolescent mothers and one policy-maker) of the respondents who experienced adolescent motherhood were from households of marital unions. What was consistent, however, was that like the literature, this research shows that adolescent mothers were likely to be born to adolescent parents (United Nations Population Fund, 2014). This was the case regarding six out of 10 of the former adolescent mother respondents of this research, whereby their mother had experienced adolescent motherhood too.

Happiness and the feeling of accomplishment was a favourable emotional expression that was common place among the respondents, save for in few instances where one respondent felt both unachieved and unhappy, and another accomplished yet unhappy. These expressed feelings had to do with their status outcome. Seven (7) of the 10 former adolescent respondents declared to be independent, in that they were able to support themselves and their children. In the remaining three instances, a lack of independence was as a result of unemployment status, and low paying salary. These perspectives may be identified with Social Exchange and Psychology theories, which argued that the despair that accompanies adolescent pregnancy could lead to the girl feeling a sense of accomplishment later if her outcome were to be positive; of course after having exchanged that setback for something constructive, through the efforts of resilience, and/or with support (Sodi, 2009; Pitso & Kheswa, 2014). Such outlook also compliments the theme: education access and outcome.

Based on the expressed views of the respondents, there were instances when pregnancy could have been avoided if some of the respondents

(1) were armed with age-appropriate and life-skilled sex education; and

(2) had not been sexually coerced.

In regard to point number 1 above, this compliments the various schools of thought which posited that incidence of adolescent pregnancy would likely be reduced if they were armed with information concerning sexual and reproductive health, plus provided with contraceptives (Douglas-Durham, Blanchard & Higgins, 2015; Furstenburg, 2008).

Response to Research Question 1:

The answer to this research question reveals that education-related and other factors that influenced the educational and socio-economic outcomes of the adolescent mothers were mainly financial and moral support by family, professional and family counseling, and monitoring by the WCJF. The respondents received support from grandparents, step-father (mother's boyfriend), personal physician, Catholic Priest (the respondent was not Catholic affiliate, but rather of another religious denomination which turned her away), and the WCJF. This interlinks well with Social Exchange school of thought which argues that support in meeting the basic needs of the adolescent mothers, as well as parental investment in their children from a human capital perspective would likely garner a successful generation (Pitso & Kheswa, 2014; White, 2007; Social Exchange Theory, n.d.). The kind of jobs that the parents of the adolescent mothers held at the time, did not make a difference in terms of their outcome, because those who were from low and average income households, still managed to become productive members of society.

The matter of 'outsidership' (described by Collins, 2000), by virtue of being pregnant, also resulted in some of the respondents being dismissed from school, Church, and being discriminated against, yet in the case of this research, these unpleasant issues heightened resilience for positive outcome among the respondents. Such resilience was manifested in the following formats: motivation (as a form of revenge), capitalizing on opportunities such as financial, moral and counseling support, and physical restriction of their bulging abdomen (girding of the waist to hide the pregnancy).

The resilience/motivation by the respondents, coupled with the previously mentioned support, is evidence of what Heidegger and Merleau-Ponty (as cited in Applebaum, 2012) referred to as the individual's experiences being co-constituting – being able to be explained by other factors, of course, which may be intrinsic or extrinsic.

The respondents acquired job statuses such as entrepreneurship (cosmetologist, dressmaker, store-owner), administrative professional, nurse, finance executive, teacher, scientist. By virtue of these professions, they were considered productive members of society, which created the opportunity for them to be able to provide for themselves and their children.

Response to Research Question 2

The negative connotation that is culturally attached to adolescent pregnancy, has been an indictment on the female, far more than her male counterpart who had impregnated her. This often transcends into forms of stigma, discrimination and neglect by duty bearers such as Church leaders, teachers, and health care providers.

Eight of the 10 former adolescent mother respondents expressed that they encountered discrimination by their health care providers who attended to them during their pregnancy, and that this had resulted in some of them shying away from accessing the health service on a regular basis. This being a part of a cultural response to adolescent pregnancy, was not favourable to the health and well-being of the adolescent and her baby. In one case, the respondent reported, "discrimination and negligence by the health care providers during delivery had resulted in my baby being cognitively impaired". In another instance, the respondent said that similar actions which were meted to her by her medical attendees resulted in gynaecological damage; while another participant said, "I haemorrhaged because they didn't care enough for me". Notwithstanding, there were other instances where the respondents reported having encountered health care professionals who went beyond the call of duty to ensure proper care for them and their babies. The respondents said, some were "unbelievably empathetic and encouraging". Both the former adolescent mothers and policy-makers recommended that sanctions be taken against duty bearers of the health care and school systems, who act against the best interest of the adolescents and their children.

Some of the respondents said that they were forced by teachers to leave school. This was failure to recognize that “making accommodations for pregnant girls in our school system was not an endorsement of early sexual initiation and teenage pregnancy. It simply meant that we cared about what happened to the people around us” (Nelson, 2013). It was also failure to acknowledge “education as the greatest engine of personal development (Mandella, 1994); and a natural right by virtue of being born (Locke, n.d.; Aristotle, cited in Hummel, 1999). Moreso, it was also a form of disregard for the United Nations Convention on the Rights of the Child which made provision for access to education as a right (United Nations Children’s Fund, 2008).

The respondents reported that there were instances when teachers remarked to students that they were a disappointment, and “...a mussy har mumma breed har.”² Such disrespect and discrimination by teachers against students was a breach of the Jamaica Teachers’ Association Code of Ethics (Jamaica Teachers’ Association, 1992), which made provision for teachers to respect all students, and at the same time, refrain from discrimination. This reminds me of the sentiments shared by two of the respondents, who expressed having thought that the obligated duties of teachers, nurses and doctors were to provide protection and care without discrimination.

In the case of those who were not forced out of school, their reasons given for having left on their own were because of shame, fear, discomfort, being treated with disdain by peers and teachers, having no lunch money because of being forced to discontinue education by parents.

Cultural responses to adolescent pregnancy differed across communities. The respondents were of the view that regardless of where an individual resided, adolescent motherhood was seen as shameful and a final pronouncement on the girl’s future. The respondents reported that in the inner-city communities adolescent motherhood was treated as a regular thing, and in most cases, the girl never continues her education because of socio-economic challenges. Unlike her middle or upper-class counterpart, she is forced to find work in order to maintain her baby. Usually such work entails setting up a stall at her gate way and sell snackables to passerby; engaging in domestic work; ‘higglering’³; and/or transactional sex.

Unlike the middle-class community, the inner-city and rural adolescent mothers were teased by neighbours (for example, the men who frequently sat at the street corners) as they passed by to go to clinic or to run errands. The respondents reported that these men often harassed the pregnant adolescent by teasing and making sexual overtures at them.

The respondents further expressed that the people of their communities were not always sympathetic towards pregnant adolescents. They added that unfortunately, there were instances when pregnancy was as a result of the girl being ‘chain raped’⁴. One respondent said, “the girls are often so ‘beaten down’⁵ and ‘trodden upon’⁶ that they have no desire to self-actualise.” This was one of the phenomenological effects of classism, where powerlessness was more likely experienced by the rural and inner-city adolescent mother, unlike her more affluent counterpart, who would not have been exposed to such vulnerabilities by virtue of her area of residence and socio-economic affiliation. This goes to show that cultural responses toward adolescent pregnancy differed among classes too.

The pregnant girl of urban middle-class community did not walk to clinic, but was transported by a family member, hired driver or friend. It means therefore that no one would likely see her walking on the street, let alone to be teasing her. Neighbours often find out about her pregnancy because of the relationship they had regarding Church, clubs, the citizen’s association, or the pregnant girl might be friends with their children. Sometimes no one ever find out because the parents of the pregnant adolescent or the adolescent herself is able to procure safe abortion.

The foregoing class dichotomy runs within a structure of intersectionality – showing linkage with socioeconomic and other related factors which are contributors to the disempowerment of Black women, thus opens scope for inequality (Crenshaw, 1991).

All the respondents shared the view that adolescent pregnancy attracted a lot of tension in the homes: quarrels and fights among the parents and the siblings, especially with the pregnant adolescent. Here, everyone in the home appeared to have the answer to what should have been, and that which should be, thus created more mayhem and discomfort for the pregnant adolescent. This is usually as a result of the family having felt a sense of disappointment, especially where favourable achievements were anticipated from the adolescent.

² English Translation: It was probably her mother who got her pregnant.

³ This is in reference to buying goods and selling same.

⁴ This is in reference to where a girl acted upon a boy’s invitation to have sex, and he had his friends joined in the occasion without her knowledge and consent.

⁵ This means feeling demotivated

⁶ This means feeling demotivated

Response to Research Question 3

This research question bears pertinence to the theme, Education Access and Outcome. Of the 10 adolescent mother respondents, three participated in the WCJF Programme and were later reintegrated into the formal secondary school system; two of whom had participated into the WCJF Programme and did not continue their education into the formal secondary school system; one did not participate into the WCJF Programme, but was later reintegrated into the formal secondary system; while four neither participated into the WCJF Programme nor continued their education in the formal secondary school system. One of the respondents had two children during her adolescent years. The first child was born during the summer school break, and because most persons didn't know of her pregnancy (concealed by her obese physique), she returned to the same school. Later, she became pregnant again, and this time, quite known to many, hence she opted to participate into the WCJF Programme and then later, reintegrated into a formal secondary school elsewhere.

Her views of the WCJF Programme were positive. She postulated, "the programme taught us negotiation and advocacy skills, and how to make sound decisions regarding our lives. We were educated about values, sexuality, contraception, rights and responsibilities". Because the baby-fathers were allowed to be a part of the counselling sessions at the WCJF, the respondents who participated in the programme expressed the belief that this had contributed to their willingness to support their children. The respondents articulated that the delivery of sex education by the WCJF was helpful, even though they were already pregnant. They indicated that the information was much clearer to them than that of the formal secondary school system which took an abstinence-only approach. They said that even their off-springs (at the time of the interview) experienced the same kind of surreptitious delivery at their schools, and pointed out that this was recipe for pregnancy or repeated pregnancy. Research has shown that an abstinence-only approach has proven to have very "little impact on the level of sexual activity among teens" (Furstenberg, 2008, p. 4). Note that given the contribution of the WCJF to the positive outcome of the adolescent mothers, this may be deemed as one of the 21st Century achievements of the Black Feminist thought.

The WCJF, which operates across the island of Jamaica was founded by the Government of Jamaica in 1978. Its implementation model depicts "continuing education during pregnancy, reintegration into the formal school system, facilitation to offer support where needed, completion of secondary school" (Women's Centre of Jamaica Foundation, 2014, p. 3).

The respondents recommended that the Government of Jamaica change its position regarding the non-distribution of condoms in schools. They stated that such change could delay early pregnancy and prevent interruption of formal education. The fact that access to contraceptive prevents the adolescent from having to experience motherhood too early in her life (Douglas-Durham, Blanchard & Higgins, 2015), and that the period 1991-2005 saw a reduction of adolescent pregnancy because of contraceptive usage (Furstenberg, 2008), then it may be considered discriminatory to not have adolescents be made privy to devices (non-surgical) that would likely protect them.

Interestingly, one of the participants postulated that although she had participated in the WCJF Programme, she had not continued her education. She said, "its not that the Programme was bad or anything like that, but I am just not motived to go further. I did learn a lot though especially in the motivation sessions. I don't feel to apply them." In continuing, she added that some of the benefits were the mentoring, negotiation skills, coping strategies, sexuality education, and English Language. At the time of the interview, she was financially dependent on her parents, but that the child was supported by his father. She further expressed feeling like a failure and was unhappy because of her inability to forgive herself for getting pregnant. She said that as a brilliant and intelligent girl, she should have known better. She expressed being unable to feel the least bit of motivation to achieve a career.

Another respondent postulated feeling a sense of non-achievement because her peers had accomplished much more than she had. During and after the birth of her baby she was depressed, mainly as a result of the discrimination from her community. It took a few years for her to feel motivated to resume studying, hence the gap in years that would have resulted in her peers completing their tertiary education years ahead of her. Despite feeling unaccomplished, she was happy because of her parental support, her beautiful child, and the fact that she is the top student at her university to the tune of making the Dean's list in her first and second years. She said, with confidence, "my achievement at university makes me feel as though I am a big promise. Had it not been for my mother's boyfriend, I would not have reached this far because my mother had given upon me. She said that she felt disappointed in me, but her boyfriend encouraged her on my behalf. My mother is ok now. She loves her grand baby."

Response to Research Question 4

Being encompassed by the theme, Programme-Policy Position, the response to this research question reveals that the four policy personnel of this research shared the view that the section of the Education Act (1980) which leaves the adolescent at the mercy of the Minister's discretion to determine her return to the school system should be urgently amended, so that this may be consonant with the new National Policy on the Reintegration of School-Aged Mothers into the Formal School System. "If the Act is not fixed⁷, how then do they expect support of the policy?" said one of the policy-makers. They also intimated, "this was because the Act did not make provision for the pregnant girl to continue her education while pregnant, and instead, allowed the adolescent father 'a free pass'...an act of discrimination". A policy-maker pointed out, "if some picknie neva ban dung de belly so dat dem cuda do dem CXC, mi no know wha wuda happen to dem education⁸. Dem wuda jus drop out so, and di money fi di CXC subjec dem wuda just bun up;"⁹

They added, "just because the boy is not carrying a pregnant belly, he is allowed to get away with getting a girl pregnant. This was unfair. Her dismissal from school goes against dignity and respect". It was also posited that the boy should be allowed to continue his education so that he can prepare himself to help the girl and their baby later on. He could also find weekend jobs to shoulder his responsibility. They all said that the boy's parents should help with the responsibility. One of the policy-maker respondents made reference to a case where the father of an adolescent boy had his son worked on weekends to support his pregnant girlfriend.

According to the policy-maker respondents, "society needs to stop treating the adolescent mothers as though they had committed a crime, and instead, recognise the long-term effect that drop-out can have on a girl's future." It was also noted that "when the law allows for a girl to drop-out of school because she became pregnant, this will in no way support sustainable development of that country." Where governments signed unto conventions, there should be a monitoring system in place to ensure that this be upheld. There should also be sanctions against duty-bearers of the school and health system who do not act in the best interest of the adolescent and her child. Take for instance, where the respondents complained of being denied access to care because of value-laden positionalities of health care providers, this is not upholding the principles of the World Health Organization (2013) and Population Action International (2007) which made provision for safe pregnancy to be treated as a right and not a privilege.

The question as to the likely impact that the National Policy for the Reintegration of School-Aged Mothers in the Formal School System would have had then, had it existed years ago, was responded to accordingly: "Had it existed then, the Jamaican people would have, by now, transitioned into a culture of better tolerance and appreciation for the importance of education. Students who became pregnant would have enjoyed better opportunities for post-secondary education and employment. However, in this new policy climate, some of the schools' authorities continue to resist the reintegration policy when the education officers of the Ministry of Education attempted to reintegrate the adolescent mothers into the formal school system - even though they are aware that their actions go against continued educational opportunities". It means therefore, that the policy community also opined that the protocol approach had not yet resolved the notion of universal access to education. Despite, however, the robust principles of the policy to close the gaps in the Education Act, maybe considered as one of the 21st Century achievements of Black Feminism.

The marked difference in the legislation, and the policy arguments is that for the former, continued education of the adolescent mother rested on the decision of the Minister, while the latter acknowledged the mandatory entitlement of the adolescent mother to complete her formal secondary education after childbirth. This kind of incongruity opened scope for non-compliance and confusion of duty bearers, who were more inclined to complying with the legislation, as this was more akin to their value-laden positionalities and convenience; besides, the law takes priority over policy.

It is imperative to note too, that Section 31, subsection 3 of the Education Act (1980), made provision for the pregnant girl to be allowed to return for the sitting of examinations that were crucial to the completion of her education, yet this was ignored in the case of one of the respondents, whose mother had to aggressively advocate for her to sit her Caribbean Examination Council (CXC) Examination, I don't know what would have happened to their education. She physically accompanied her daughter to school to sit her exam while she was pregnant. Both mother and pregnant daughter met upon hostility by teachers and principals. Despite, however, the said respondent obtained favourable passes in her examinations. This kind of support had lent itself to her positive educational and socio-economic outcomes as a finance executive.

⁷ This means adjusted.

⁸ English Translation: If some of the children had not tied down their pregnant bellies (tightly gird their waists) in order to be able to sit their Caribbean Examination Council (CXC) Examination, I don't know what would have happened to their education.

⁹ English Translation: They would have dropped out, and the money for the CXC subjects would be paid in vain.

The policy-legislative and programme strategies that the policy-makers considered fitting for the Government and other key stakeholders to employ as investment into adolescent pregnancy prevention/intervention programmes, were “partnerships and greater synergies among the Government and the private sector, the relevant Non-Governmental Organisations, international donor partners, and the communities in which the adolescent mothers reside. In addition, other suggested strategies were to develop and implement a Sexual and Reproductive Health Legislation and/or Policy; enable adolescent-friendly systems strengthening through a whole of Government arrangement; create an enabling environment where there can be micro-macro monitoring of pregnant adolescent cases; use evidence-informed data to drive intervention strategies; and establish parenting schools to inculcate values and approaches to ‘good’ and effective parenting”.

VI. CONCLUSION

After having experienced adolescent motherhood, majority of the respondents saw positive outcome, courtesy of support and very strong resilience against unfavourable cultural dictates.

Being born to households of less financial viability and/or (non)marital unions did not have any bearing on the outcome of the adolescent mothers in terms of similarity in experience. However, complimentary to the literature, the findings of this research show that a number of the respondents who became adolescent mothers had parents who got pregnant while in their teen years too.

VII. RECOMMENDATIONS

While there are policy-legislative and cultural motives for the interruption of the education of adolescent mothers at the formal secondary school level, it is imperative that adolescents be age-appropriately informed about matters of sexual and reproductive health in order to make informed decisions about his/her education, health and other aspects of his/her life and well-being. Coupled with this intervention, adolescents should not be denied contraceptive service/advice, based on the evidence that this will likely inhibit early pregnancy and the contraction of sexually transmitted infections, otherwise, adolescent pregnancy will continue to be a social and public health issue.

In this 21st Century, where education becomes more and more akin to sustainable development, consideration should be taken for the revision of pertinent sections of the Education Act, 1980, which do not represent the best interest of the adolescent mother under the subject matter. The employment of the re-integration policy may have sought to cushion this anomaly, in that, it makes provision for her continued education after giving birth. However, the policy is not the law, and so this enables scope for continued resistance by duty-bearers who conveniently draw on the legislation without discretion or consideration regarding the best interest of the adolescent mother and her child.

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To my points of light: My Godparents, Drs. Barbara and Serge Paul-Emile; and my friend, Dr. Robert L. Adams.

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