

# Assessment of Psycho-Social Challenges that University Pregnant Girls Face: A Pilot Study in School of Education, MOI University, Kenya

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**Abstract:** *Both pregnant students and student mothers face many challenges in the Kenyan Universities while studying. Their problems are often intensified since women are expected to subordinate their interests, needs and desires to those of the young ones and the and family at large most cultures in Kenya. The objective of this pilot study was to determine the psycho-social challenges of pregnant students in school of Education, Moi University. The study also gives recommendations on the way forward to curb the challenges identified. Relevant literature was reviewed and an empirical study was conducted using questionnaires which were administered to the pregnant girls in the school Education, Moi University. A sample of ten randomly selected pregnant girls was selected in the school to determine the pregnancy challenges and their experiences. Results indicated that lack of support from parents, friends, teaching staff; inadequate resources and rejection were noted as the main challenges. The study also revealed that most of the teenage mothers drop out of school. Recommendations were formulated to assist pregnant students with the necessary support.*

**Keywords:** pregnant university girls, psycho-social challenges, School of Education, Moi University

## 1. Introduction

One major contemporary social problem confronting most learning institutions in most countries in the world is Teenage pregnancy. From the first world countries such as the United states to the third world countries, this problem has been a source of worry for policy makers, social workers and other human service providers due to its negative repercussions on the girl-child (Grunseit, 2007).

Most authors have linked poverty to teenage pregnancy and its subsequent motherhood. This situation is also in the African countries. The role of young fathers also raises concern to many. Mostly, teenage fathers do not become responsible (Peterson, 1987) and hence don't involve themselves very deeply in their new parental role, which may seem burdensome. The young man often leaves the child's mother to take care of the 'un expected' newborn. Various studies conducted in Kenya show that of those teenage girls who choose to continue their pregnancy, a large percentage are from a disadvantaged or dysfunctional socio-economic background (Berk, 1989).

Some myths about pregnancy, contraception and abortion could be contribution to early pregnancies (Schwartz & Johnson, 1985) in Moi University. The prevalence of these myths supports ignorance about the risks of pregnancy (Bonell *et al.*, 2004). The following are some of them: a lady cannot become pregnant the first time she has sex, there is no risk of girls pregnancy if the man withdraws before ejaculating and having sex standing up or with the woman on top could prevents pregnancy.

Promotion of safe and healthy sexual behavior among university girls and preventing any related pregnancy is key (Schwartz & Johnson, 1985) in fighting early girl pregnancy. This is applicable in schools and universities

since they are the main environments for socialization of young school girls. Although effective measures to prevent teenage pregnancy depend heavily on sex education in such institutions, many gaps still exists which leaves the girl child more vulnerable to earl pregnancy for lack of adequate knowledge.

The study had two objectives.

- 1) To identify psychological challenges the pregnant girls faces while pursuing Bachelor of Education in Moi University, Kenya
- 2) To identify sociological challenges the pregnant girls faces while pursuing Bachelor of Education in Moi University, Kenya
- 3) Moi University Main campus in Kenya is located in Rift Valley part of Kenya, 35 km South East of Eldoret town in Kenya. It is located at the longitude of 35.2372244 and latitude of 0.5356112.

## 2. Methodology

This is a pilot study done in school of education, Moi University to assess reliability of research tools. It is a purposive study hence focused on the school of education, Moi University in Kenya. The purposive sampling technique helped to purposefully select respondents who can really provide the needed information for the study. The study used a descriptive research design. Kasomo (2006) says that in descriptive research, data analysis answers questions concerning the current status of a programme, project or activity.

The study targeted second year pregnant girls in School of Education, Moi University. Second year was selected since other studies shows that most teenage pregnancies mostly occur in second year of the academic calendar. Kathuri and Pals (1993), and Borg and Gall (1996) states that a sample

should be large enough to represent the targeted population. However, Coolican (1994) states that the minimum, acceptable sample size will depend on the type of research. He says for causal-comparative research – 15 subjects per group are recommended. Since it is a purposive study (pilot study), only ten pregnant girls in the school of education, Moi University were involved. During the study, it was estimated that in the same school, 40 students were pregnant. The sample therefore constituted 25% of the targeted population.

Mugenda (2003) says that in purposive sampling, cases of subjects are handpicked because they are informative or they process the required characteristics. Both primary and secondary data were used for this study. Primary data was collected using questionnaires while secondary data involved books, journals, school website and related. Questionnaires were used in this research for purposes of objectivity during data analysis and conclusions.

**2.1 Data analysis**

After the data were collected, they were examined and analyzed to facilitate testing of the null hypotheses. Data analysis involved analysis of responses from filled in questionnaires. In this regard, the researcher checked the filled in questionnaires for completeness and relevance. The researcher used quantitative methods of data analysis to

tabulate the student’s responses into percentages to reflect their viewpoints and opinions about the object of study. Secondary data was used to support the findings of this study. Tables and graphs were used to graphically represent the results. Using correlation, the null hypotheses were tested at 0.05 level of significance. The results were presented descriptively.

**3. Results and Discussion**

From the findings, 9, (90%) of pregnant girls were not married and 7, (70%) were between 20-25 years of age. This study did not determine drug abuse and addiction as a major cause of early pregnancy in School of education, Moi University. Only 1, 10% admitted that she used cigarettes but it didn’t have any contribution to her pregnancy. Similarly, 2, (20%) of respondents used alcohol products. Form the findings, this study concludes that the use of cigarettes and alcohol do not greatly influence pregnancy in campus. Out of 9 girls who were not married, 6, 66.7% admitted that the cause of their pregnancy is peer influence. We therefore say that peer influence affects more second year students before proceeding to third year.

**3.1 Marital status \* what was the main cause of the pregnancy? Cross tabulation**

**Table 1:** The main causes of pregnancy in both married and unmarried.

			What was the main cause of the pregnancy?				Total
			Peer influence	lack of finances	curiosity about sex	family issues such as abuse and neglect	
Marital status	single	Count	6	1	1	1	9
		% within Marital status	66.7%	11.1%	11.1%	11.1%	100.0%
	married	Count	0	0	0	1	1
		% within Marital status	.0%	.0%	.0%	100.0%	100.0%
Total		Count	6	1	1	2	10
		% within Marital status	60.0%	10.0%	10.0%	20.0%	100.0%

**3.1 Psycho-Social Challenges**

Most of students who became pregnant either end their studies or start performing poorly in schools. This study looked at the psycho-social challenges pregnant girls goes through. The findings (Table 2) show that young (15-20 years) pregnant girls developed some degree of eating disorder behavior when they learnt that they are pregnant. This category comprised of 2, 66.7% who strongly agreed. For the older (20-25 years) pregnant girls, 5, 83.3% said that the pregnancy greatly affected parental financial support since they learnt of the girl’s situation. With other finding from Table 2, this study shows that pregnancy indeed has psycho-social challenges ranging from family neglect, lack of financial support and loss of friends. Lastly, the behavior of religious practices drastically changes according to the same findings.

immediate class friends was tested at 0.05. The null hypothesis was accepted Table 3.

**Table 3:** correlation analysis

		Age	Pregnancy has caused great loss of my immediate class friends.
Age	Pearson Correlation	1	.375
	Sig. (2-tailed)	.	.286
	N	10	10
Pregnancy has caused great loss of my immediate class friends.	Pearson Correlation	.375	1
	Sig. (2-tailed)	.286	.
	N	10	10

**3.2 Correlation analysis**

Null hypothesis that there is no significant relationship between age and pregnancy has caused great loss of my

**Table 2: Psycho-social challenges.**

				15 years to 20 years	20-25 years
Pregnancy has caused great loss of my immediate class friends.	Strongly agree	Age	Count	2	2
			%	50.0%	50.0%
	Agree	Age	Count	1	4
			%	20.0%	80.0%
	disagree	Age	Count		1
			%		100.0%
Pregnancy has greatly affected parental financial support since they learnt of my situation.	Strongly agree	Age	Count	1	5
			%	16.7%	83.3%
	Agree	Age	Count	2	2
			%	50.0%	50.0%
	disagree	Age	Count		
			%		
Pregnancy has greatly affected my daily or routine religious practices	Strongly agree	Age	Count	1	6
			%	14.3%	85.7%
	Agree	Age	Count	2	1
			%	66.7%	33.3%
	disagree	Age	Count		
			%		
Pregnancy has greatly affected my psychology like developing negative attitude towards men.	Strongly agree	Age	Count	3	4
			%	42.9%	57.1%
	Agree	Age	Count		3
			%		100.0%
	disagree	Age	Count		
			%		
Pregnancy has greatly affected my social life with family friends.	Strongly agree	Age	Count	1	5
			%	16.7%	83.3%
	Agree	Age	Count	2	2
			%	50.0%	50.0%
	disagree	Age	Count		
			%		
I developed some degree of eating disorder behavior when I learnt that I am pregnant.	Strongly agree	Age	Count	2	1
			%	66.7%	33.3%
	Agree	Age	Count	1	5
			%	16.7%	83.3%
	disagree	Age	Count		1
			%		100.0%

The School of Education at Moi University started in 1987 with a just one undergraduate degree programme, Bachelor of Education (Arts). Since then, the School has grown and now offers five programmes at undergraduate level, two postgraduate diploma, twenty masters and four doctorate degree programmes, spread over the Campuses of Moi University. This shows that the rate of student enrolment today is on the increase. In relation to increase in enrolment with time since 1987, cases of girls pregnancy and abortion have gone on the rise. More and more students need psycho-social support due to unplanned and early pregnancies.

According to the schools website (<http://www.mu.ac.ke>), the mandate of the school of education is to train effective teachers for the schools and tertiary institutions, achieving this has been hindered by cases of early pregnancy and abortion leading to university drop outs or poor performance.

According to Weissberg *et al.*, (1997), school-based prevention programs should embrace a broad conceptualization of health and positive youth development, addressing children's social, emotional, and physical health through coordinated programming.

This study identified a big gap in lack of support for the young families for optimum development of their university girls, lack of adequate mechanism for curbing or reducing social adjustment difficulties and developmental delays in children, lack of good structures for promoting family planning and safer sexual behaviors in Universities. Munene (1995) observes that the society is often guided by the truth often gotten from proverbs.

**3.3 Future scope of improvement**

This is a pilot study. The researcher intends to improve the data collection tools during the main study. The questionnaire administered to the pregnant student will be updated while the number of respondents will be more to make the study more representative. Additionally, structured interview schedules will be administered to key informants such as lecturers, parents, university administration and specifically to the university health officers for more information on this topic.

**4. Conclusion and Recommendations**

The findings of this study are consistent with findings of other studies that have shown that university pregnant girls undergo diverse psycho-social challenges during their pregnancy. For example young (15-20 years) pregnant girls developed some degree of eating disorder behavior when they learnt that they are pregnant.

There is therefore need for adequate support for the families for optimum development of their university girls, there is need for adequate mechanism for curbing or reducing social adjustment difficulties and developmental delays in children and there is need for good structures for promoting family planning and safer sexual behaviors in Universities and mostly for the girl child.

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