

**SOCIO-ECONOMIC FACTORS INFLUENCING TEEN
PREGNANCIES IN KWANZA SUB-COUNTY,
TRANS-NZOIA COUNTY, KENYA**

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**A Research Project submitted in Partial Fulfillment for the Requirements of the Award
of the degree of Master of Art in Project Planning and Management of the University of
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DECLARATION

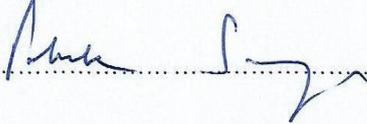
This Research Project Report is my original work and has not been presented to any other university

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This Research Project Report has been submitted for examination with my approval as university supervisor

Signature..........Date.....10/12/2019.....

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DEDICATION

This research project report is dedicated to my Dear husband Edward, my daughters Brenda, Favor, Gift, Esther, and Treasure who encouraged me to carry out this tedious but rewarding work.

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My thanks go to My Supervisor Dr. Cheben Patrick for his tireless guidance throughout the writing of this research project and very quick responses in addressing issues necessary for the successful completion of this work in good time. My thanks goes to the respondents of the study for their participation in the study.

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ABBREVIATIONS AND ACRONYMS

AIDS	-	Acquired Immune Deficiency Syndrome
CBO's	-	Community based organization
CIDA	-	Canadian International Development Agency (CIDA)
CSC	-	Consortium of Teen pregnancies
EFA	-	Education for All
H.I.V	-	Human Immune Virus
I L O	-	International Labor Organization.
N.G.Os	-	Non-Governmental Organizations
UNICEF	-	United Nations Children Education Fund

ABSTRACT

Globally teenage Pregnancy has become a worrying trend. Young girls drop out of school due to pregnancy and may not continue with their normal life. Teenage pregnancy refers to girls becoming pregnant below the age of 19 years. The purpose of this study was therefore to determine the socio-economic factors influencing teen pregnancies in Kwanza Sub-County, Tran-Nzoia County. The target population was 704 which included 700 pregnant teens and mothers and four officers from health facilities in Kwanza sub-county. After obtaining verbal consent, the teen mothers and teen pregnant girls were interviewed using a structured questionnaire to determine circumstances that led them into pregnancies. After assembling and organizing completed instruments, the study used descriptive statistics to analyze data. Quantitative data was analyzed using the descriptive statistical tools of average or mean, percentages and frequencies. This data was presented in terms of tables, graphs and charts. In analyzing general and demographic information the study computed percentages of the respondents who provided data. Qualitative data on the other hand was organized and summarized into themes opinions, reports and patterns relevant to the study. Chapter four presents, analyzes interprets and discusses data collected by the research using the methods described in chapter three. The purpose was to transform the raw data into information that is manageable, presented in an attractive, communicative manner. The interpretation aimed at drawing logical and sensible findings from the information gotten from the study. The study's main findings are that negative social models influence negatively the girl child hence increase teen pregnancies. The study recommends that positive role modeling strategies be provided in the family and school and by extension in the community.

CHAPTER ONE

INTRODUCTION

1.1. Background of the Study

Teen pregnancy is turning into a worldwide disaster and a global risk. As per the Canadian International Development Agency's (CIDA 1989), the normal worldwide figure for teens who conceive every year is more than 16 million and that number increases consistently. Young girls drop out of learning institutions because of pregnancy, which curtail their education for some time. Once the young girls drop out of school, the majority find it hard to continue with their studies because at a very young age, most of them cannot take care of the child and themselves, they are dependents who rely on parents or guardians.

Arai (2007:87-88) reports that this worldwide wonder is particularly prevalent in financially developed nations. Teen pregnancy has been an issue on the radar of numerous administration social projects for quite a long time. Studies have indicated that the dangers related with pregnancy for both mother and child are altogether higher than of the dangers of more established ladies and their kids. High school teen mothers are additionally bound to contract sexually transmitted illnesses (STIs). They are statistically less inclined to use contraception medication as well as condoms. While numerous projects have been executed in nations to try to battle young pregnancies, they regularly don't have the slightest idea where to coordinate their efforts.

Regardless of a 33% decline since the 90s, the United States still has the most noteworthy teenage pregnancy rate on the planet. While the U.S. rate is one-and-a-half times higher than that of the following most elevated nation, the United Kingdom, the issues related with adolescent pregnancies are not constrained to only a couple of select nations. In a world that is empowering progressively high school sexual movement including homosexuality and sex entertainment use, it's no genuine shock that young pregnancies are increasing (Wood and Jewkes, 2006).

As indicated by a report released by the World Health Organization, Niger has both the world's most noteworthy adolescent pregnancy rate in schools and the world's most noteworthy kid marriage rate. When they turn 18, 75 percent of young ladies are married and 51 percent have borne a kid. Scientists estimated a 70 percent decrease in the nation's maternal mortality rate if child marriages could decrease by 10 percent.

In Ethiopia, Habitu, Yalew & Bisetegn (2018) observed that failure to use contraceptives, and lack of sex education were two main reasons that contributed to an increased number of teenage pregnancies. Further, the authors indicated that girls from low income families were more vulnerable compared to girls from middle-income and low-income families because in the latter, parents failed to provide basic needs including feminine sensitive needs, which were provided by older men who thereafter took advantage of the innocent girls. High rates of drug and substance abuse were considered to influence the rate of teenage pregnancy. Ingested illicit substances usually impair decision making, hence influence the judgement a teenage girl makes thereby expose her to unprotected sexual intercourse with older men (Yakubu & Salisu, 2018). Considering that Ethiopia was the second most populous country in Africa, it therefore led among countries in Eastern Africa with the highest population of teen expectancy rates.

According to a report presented by UN Populations Fund (2014), teenage pregnancies are likely to rise in sub-Saharan Africa because of outdated cultural practices, peer pressure, socio-economic status, lack of parental care and guidance. Nigeria, Tanzania, DRC Congo, Uganda and Kenya are were rated top with 9.2, 3.7, 3.3, 2.5 and 2.3 million teenage pregnancy cases respectively. Statistical reports by UNFPA indicated that an estimate of 378,400 young girls aged between 10-19 became expectant however, Civil Rights groups advocating for the right of girls indicated that the statistics could be higher because the majority of Kenya's populace comprise of a young group. Transition rates from primary school to secondary schools are less than 50% with the rate expected to decline in the next two decades. (KDHS, 2014).

Based on the joint study conducted by SID and KNBS in exploring the level of inequalities in several counties and their constituencies in Kenya, the two organizations noted that, In Trans-Nzoia County, Kiminini leads the league of people with Secondary education followed by Saboti, Cherangany, Kwanza and finally Endebess. Kwanza Constituency has a large rural population characterized by many young and less old people who level of education and in deed socio-economic statuses are low. Teenage pregnancy according to KNBS socio economic report of 2017 indicated that Kwanza Constituency and Endebess Constituency lead other constituencies in Trans-Nzoia in high reported cases of teenage pregnancy

1.2.Statement of the Problem

Kenya's endeavors to care for the less capable individuals from our society and its poverty reduction projects have earned some profound respect both at home and abroad. All things considered, the issue of teen pregnancies still remains to be completely unsolved. As indicated by (Smith-Battle, 2000, p. 55) adolescent pregnancies have various impacts both to the mother and to the child, during pregnancy and after birth. Teen mothers regularly drop out of school. About 38% teen mothers complete their secondary school education by the age of 22. For this reason, most of them lack requisites for meaningful job opportunities.

The failure to ensure safety and management of the newly born child is usually enhanced by low living conditions teen mothers live. In such cases, young mothers defer and delay future plans because of taking care of children.

Pregnant adolescents often do not have the best healthy habits order to go through a successful child rearing process (Tripp and Viner, 2005). These teen mothers have increased health risks, which hinders healthy child development. These teen mothers can't completely build up a feeling of self-identity due to their new role as an expecting mother. Further, friend and social connections are strained or even ended and adolescent years are basically for creating associations with others and finding oneself. These side effects of depression increase chances of the adolescent mother committing suicide. The children drop out of high school and also succumb to the use of drugs and alcohol due to lack of parental involvement and monitoring. The cycle is likely to repeat itself over. That's why it's necessary to carry out a research to determine the socio-economic factors that influence teen pregnancies in Kwanza Sub County.

1.3.Purpose of Study

To investigate Socio-economic factors that influence teen pregnancies in Kwanza Sub County, Trans-Nzoia County.

1.4.Objectives of the Study

- i. To establish the influence of economic factors on teen pregnancies in Kwanza sub county.
- ii. To explore the influence of social factors on teen pregnancies in Kwanza sub county.
- iii. To examine the influence of political factors on teen pregnancies in Kwanza sub county.

- iv. To identify the influence of cultural factors on teen pregnancies in Kwanza Sub – County

1.5. Research Questions

- i. What is the influence of economic factors on teen pregnancies in Kwanza Sub-County?
- ii. How does Social factors influence teen pregnancies in Kwanza Sub-County?
- iii. How does political factors influence teen pregnancies in Kwanza Sub-County?
- iv. In what ways have Cultural factors influenced teen pregnancies in Kwanza Sub-County?

1.6. Significance of the Study

The civil right group advocating for the rights of girls will use findings from this study to devise ways through which they can offer sensitization and sex education programs to young girls. The children department and ministry of education can collaborate with in formulating policies aimed at regulating children and other staffs. Sub county director of education officer, and School had teacher should organize and teach sexual education to young girls to avoid increased cases especially rural schools school dropout and how that influences the life of the girl child in this particular region.

The information will bring out the causes of teenage pregnancy as well as the possible remedies that can be used to control the same. The ministry of education and the department of children will be beneficiaries of this study; findings will be used in the formulation and strengthening of policies that reduce teenage pregnancies. Parents will benefit with the information in that they will get knowledge on how to handle the teen girls to reduce the cases of teen pregnancies.

1.7. Limitations of the Study

Personal information may be provided only after assurance of confidentiality to the respondent which is time consuming considering the use of the snowball technique this challenge was mitigated by obtaining information on teen pregnancies from respective health facilities and children's office under the Ministry of social services.

1.8.Delimitations of the Study

The study was conducted at Kwanza sub-county Health facilities and children offices.

1.9.Basic Assumptions of the Study

In pursuing this study, the following were basic assumptions that the respondents will provide information that will facilitate the study. That most teen pregnancies are Unplanned and unintended and poverty at kwanza Sub County leads to high teenage pregnancy. Most teenage mothers do not understand the consequences of teenage pregnancy. Teen mothers are unlikely to transition to the next level of education and do not have adequate information about use of contraceptives.

1.10. Definition of Significant Terms As Used In the Study

Social-economic factors: These factors affect one's ability to make meaningful decisions, afford basic needs and manage stress.

Teenage pregnancy: A pregnancy occurring before the age of 19 years

Teen mother: A young girl who becomes a mother before the age of 19years

1.11. Organization of the Study

This study was divided into five Chapters.

Chapter one is composed of the introduction, the background of study, statement of the problem, the purpose of the study, the objectives of study, research questions, Significance of the study, limitations and the delimitation of the study.

Chapter two contains review of the literature either directly or indirectly related to the study. The literature review focus on what researchers, scholars and educationists have found out and said about teen pregnancies in developed countries, third world countries and Kenya in particular. The literature will examine how the social factors, family economic status, peer pressure, social media and conflicts influence the increase in the number of teen pregnancies. The conceptual and theoretical framework and recommendations by the authors aimed at addressing the problem of teen pregnancies is also addressed in this chapter

Chapter three focuses on how the study was carried out. It explains the research design, Target population-sample size, data collection instruments, data collection procedure, data analysis, reliability of study, validity and ethical considerations, sample size and sampling procedure and research Instruments used by the researcher to collect data. This chapter also shows Piloting of the instruments to check validity and reliability of the research tools.

Chapter four presents, analyzes interprets and discusses data collected by the research using the methods described in chapter three. The purpose was to transform raw data into information that is manageable, presented in an attractive, communicative manner. The interpretation aimed at drawing logical and sensible inferences from the information gotten from the study.

Chapter Five provides a summary, conclusions, recommendations, contribution to the body of knowledge and suggested areas for further research.

CHAPTER TWO

LITERATURE REVIEW

2.1.Introduction

The Literature review will concentrate on what analysts, researchers and educationists have discovered and said about teen pregnancies in developed countries, underdeveloped nations and Kenya specifically. The writing will look at the social, economic, political and social factors influencing teenage pregnancies and the recommendations by the writers aimed at managing teen pregnancies

2.2.The concept of Teen Pregnancy

Teenage pregnancy according World Health Organization (2018) refers to the pregnancy girls aged less than 20 years. Teenage pregnancy also called adolescent pregnancy is common among girls in the puberty stage who engage in Cases of teenage pregnancy have been on the increase especially in developing countries according to statistics given by Plan International (2019). Almost 90% of girls aged 15-21 years were forced to prove their fertility, early marriages, discriminative gender roles, power imbalance, and lack of access to contraceptives were among the major causes of teenage pregnancy. Further, in the traditional African society, girls have always been denied a chance to make decisions regarding their sexuality. Girls in poor and marginalized communities are mostly known to be pregnant within their puberty stage. Social, economic, political, and cultural factors are some of the reasons for increased teenage cases especially in developing economies.

2.3.Socio- economic factors and teen pregnancies

According to Boonstra (2011), socioeconomic condition that include joblessness, low level of education, and lack of sexual health education among families and communities contribute largely towards increasing teenage pregnancy. Isolation of a given class of people in the community either because disorders, health condition, or based on cultural factors influence the rate at which young girls drop out of schools because of expectancy.

Relatively, young girls in Children Welfare Organization were more likely to suffer from teenage pregnancy than young girls of the same age in a family setting. Parental styles in the two settings were different and further emotional security of satisfaction were better when a child was in a family setting or environment that when a child was in a Child Welfare

Organization. Fraternal love, provision of basic needs, parental guidance and role modeling were some of the aspects determining teenage pregnancy in the two family settings.

One study considered the association between parental sexual education, the media and the relationship with pregnancy-risk behavior. In the study, it was established that young girls who were given sexual education and watched the Television were less likely to suffer teenage pregnancy compared to girls who were not given sexual education and were allowed to watch television without restriction of content watched. The rationale behind it was that young girls given sexual education were more likely to use birth regulating measures that reduce unwanted pregnancies.

Ladies exposed to, abusive behavior, and family hardship during their youth are more likely to end up with teen pregnancy. As indicated by a recent report by world Health Organization WHO, 33% of teen pregnancies could be prevented if brutality to women stopped. Studies have additionally discovered that young men with aggressive and violent behavior or who experienced physical brutality has five times chances of impregnating a young lady as compared to their counterparts who were brought up in a loving family.

A similar research shows that young ladies whose fathers abandoned the family early in their lives have higher chances of early sexual action and youthful pregnancy. Young ladies whose fathers abandoned them at a later age had a lesser chances of early sexual action, and the most reduced rates are found in young ladies whose fathers were available all through their adolescence. In any event, when the scientists considered different components that could have added to early sexual movement and pregnancy (Veale, 1998).

2.4.Economic Factors and Teen pregnancies

As indicated by (PMA) 2020 Kenya study, poverty increases the chances of teen pregnancy. Young ladies from poor family units had a 26 percent possibility of starting childbearing prior. This was like another exploration led by Bonneville Teen Pregnancy Research Report (1997) which discovered that adolescent pregnancy is progressively normal among youngsters who have been burdened and economically disadvantaged at adolescence and have low morale for education or low career expectations. Children of young mothers are bound to have issues and in the long run become teen mothers themselves, subsequently propagating the cycle of poverty (Stonehocker, 1997).

Poor nations, for example, Niger and Bangladesh have undeniably increasingly teen mothers compared to financially rich nations, for example, Switzerland and Japan. In the UK, around half of every single teen pregnancy are concentrated among the 30% most denied populace, with just 14% happening among the 30% poor community. For instance, in Italy, the young birth rate in the wealthy focal locales is just 3.3 per 1,000, while in the less fortunate Mezzogiorno it is 10.0 per 1,000. Likewise, in the U.S., humanist Mike A. Guys noticed that teen pregnancy rates intently mapped destitution rates in California: (UNFPA. 2013.)

2.5.Social factors and Teen pregnancies

In a study conducted in Las Vegas, in North America, Akella & Jordan (2011) determined the influence social and cultural factors on teenage pregnancies and established that group ties were strong among adolescent girls and would always identify with group norms and practices as a show of loyalty. The introduction of early sexual relationships and thereafter engagement in unprotected sex is a behaviour that starts with one person in the group and whenever such behaviour is approved by others, then all group members will have to do the same to remain relevant in the formations. Fear of isolation and mockery has made many girls engage in unprotected sex with old male partners not because boys wanted it, but because fellow girls encouraged.

United Kingdom, compared to United States leads in cases of teen pregnancy majorly because of the permissiveness of the society. According to a study conducted by Honing (2012) in the U.K. among high school students that focused on determinants of teen pregnancy established that young girls suffered teen pregnancy because they wanted to rebel against family strict rules against socialization with friends. Further, the move to have a boyfriend and keeping him for girls was a daunting task and the only young girls felt secure was to get pregnant so as to commit their male partners and be secured of the relationship.

Teenagers who were increasingly exposed to sexuality in the media were likely bound to take part in sexual activities themselves. A survey carried out in 2006 found that young people who were increasingly exposed to sexual materials in the media were additionally bound to take part in sexual activities themselves. Adolescents exposed to the most sexual substance on television are twice as likely as teenagers observing less of this material to end up pregnant before they arrive at age 20.

Free access to obscene material on the internet is additionally liable to impact adolescents mind. Explicitly stirring material, regardless of whether it is on film, in print or set up with a good music, is unreservedly accessible to the young person and such data is frequently introduced out of the setting of the recommended sexual standards of that society.

2.6. Political factors and teen pregnancies

The study by Jones, Whitfield, Seymour & Hayter (2019) in western economies compared with emerging economies indicated that political instability among developing counties and hostile communities among them has aggravated cases of teenage pregnancies. In Kenya for example, Omoro et al. (2017) noted that post-election skirmishes, hostile communities, ethnic clashes and other political related conflicts. Common turmoil dating from the Mau battle for independence was linked to increased cases of teenage pregnancy. There are additionally significant increases in teenage pregnancies in South Africa, where their high numbers have been identified with the nation's violent ethnic and political clashes. In all of Latin America, Colombia has had one of the fiercest mainstream uprisings. Its present violence has been associated with thigh rate of adolescent pregnancies. Compared to Tanzania, which has been relatively peaceful, Uganda has undergone a series of political conflicts and ethnic marginalization, which contributed immensely to increased teenage pregnancy.

2.7. Cultural Factors and teen pregnancies

Onyango (1984) conducted a study in Kenya with an aim of establishing the influence cultural factors on teenage pregnancies and in his findings, the researcher established outdated cultural beliefs and practices such as women inheritance, early marriages, female genital mutilation, and the belief to consider any female person as a “breeding machine” has changed the perception of men towards women. In this case, according to the researcher, men consider any girl as long as they as over 10 years as old enough to make their own family. In such societies, girls do not make their own informed decision especially regarding to sexuality, which contributes largely to increased cases of teenage pregnancy. Furthermore, the society commends men who impregnate young girls, and the defiled girls are not supposed to report because the society disowns them or punish them for “disrespecting men.”

Onyango (1984) demonstrates that cultural standards and convictions compel young ladies' monetary strengthening particularly in many creating portions of the world. In these social

orders, customary qualities and some strict convictions compel young ladies from settling on their own choices and communicating their very own feelings. Walekhwa, R.N (1991) analyzed case that numerous societies support access to monetary assets for young men more than young ladies.

Another cultural standard in some communities in teen pregnancies. Young ladies are offered early for marriage on the grounds that they are seen as „someone else wealth and even an obligation to be disposed of as quickly as time permits. Furthermore teen pregnancies are as a result of the cultural standard which regards that fathers need to pay higher share for more older girls. A few Parents likewise believe that in the event that they offer their little girl for marriage earlier, at that point they can save on food and education (Smith, 1998). In a significant number of the nations where high teen pregnancy is predominant, other unsafe practices, for example, (FGM/C) are also practiced. In Kenyan Maasai people group, young ladies, some as youthful as seven, are viewed as adults after FGM and are immediately married off in order to acquire dowry. In certain societies, men won't marry ladies who have not experienced FGM/C. In Sierra Leone, a girl's inception incorporates figuring out how to assume the obligations of being a spouse. Parents are likewise prompted to plan early marriages for little girls because of an apparent need to save girls' pre-marriage virginity and to shield her and her family from the danger of disgrace or disrespect appended to the "indecent" or "wrong" conduct of sex outside marriage. For instance, in Malaysia, early marriage has well known help as a method for staying away from pre-marriage extramarital perversion. In the event that a young lady ends up pregnant outside marriage, the disgrace can lead families to see her privileges and prosperity as optional to the protection of family respect.

2.8.Theoretical Framework

The framework guided this study was Albert Bandura's Social Learning Theory and Maslow's Hierarchy of needs theory.

The social learning theory posits that there exist a mutual relationship between cognitive, behavioral and environmental determinants of human behavior (Bandura, 1977). The theory is based on four principles that include differential association, definitions, differential reinforcements and imitation. Individuals copy and imitate behavior from those within their social circle or those whose influence matter socially and are within the same age cohort.

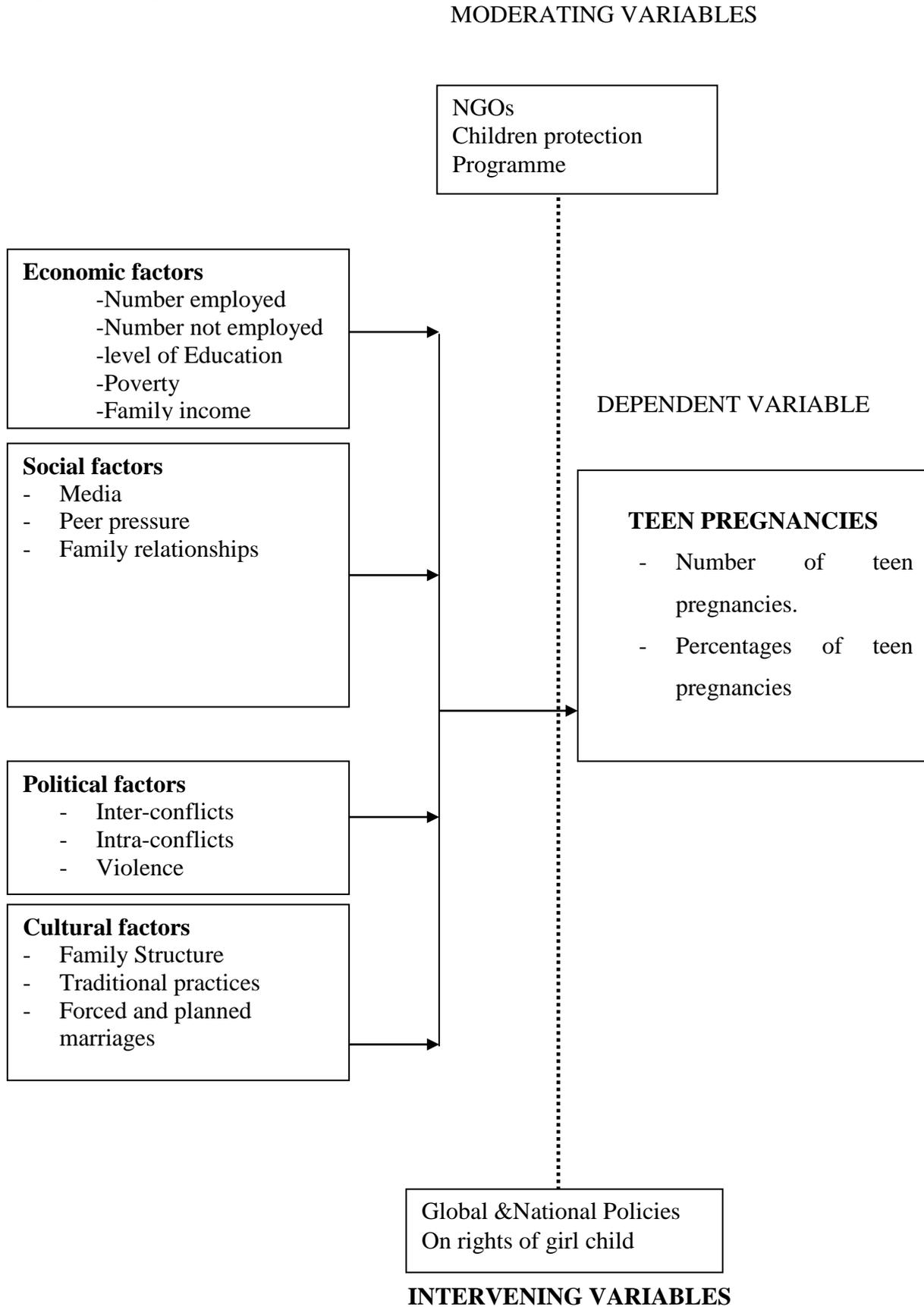
Based on this study, first teens tend to identify with groups, which determine norms and practices to be adopted including engaging in unprotected sex.

Another Theory was the Maslow's Theory of Hierarchy of needs. Maslow's (1970) Maslow spots love before self-esteem in his hierarchy of needs. He expressed that people develop and accomplish a degree of self-completion in particular if natural conditions empower certain essential should be met first. Maslow focused on that people endeavor to initially meet their physiological endurance needs, at that point their requirement for adoration and having a place, confidence needs, lastly their craving to get learning to know and get it. Self-actualization is the best you can be. Relative to this study, teens whose families are unable to meet basic needs are vulnerable to sexual exploitation from older men who can afford and avail basic needs to them. For instance, school going girls who are unable to afford sanitary pads, or even food tend to rely on older men for provision hence exchange the services offered or goods bought with sexual intercourse.

2.9. Conceptual framework

In this study the independent variables are the Socio-cultural factors that influence teen pregnancies in Kwanza Sub-County. While the dependent variable is the Teen pregnancies. The independent variables contribute to the increase of the teen pregnancies population which is a dependent variable

Fig 1.2 Conceptual Framework



2.10. Summary of Literature Review

In this chapter literature either directly or indirectly related to the study have been discussed. The literature review has focused on what researchers, scholars and educationists have found out and said about rapid increase of teen pregnancies in developed countries and third world countries and Kenya in particular. The literature has examined the social factors, economic factors, political factors and cultural factors which have contributed to the increase in the number of teen pregnancies in Kwanza Sub-county .

2.11. Knowledge Gap

Previous studies have been done on factors influencing pregnancies in the girl child in general but there is inadequate evidence on factors that continue to influence the alarming rates of teen pregnancies in Kwanza Sub-County Trans-Nzoia County. This study therefore seeks to fill the gap in knowledge on such factors as it will provide adequate information that would guide decisions regarding the managing of the crisis.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1.Introduction

This chapter focuses on how the study was carried out. It explains the research design, target population, sample size, sampling procedure, data collection instruments, data collection procedure and data analysis, and instrument validity and reliability of study and ethical considerations.

3.2.Research Design

This study adopted descriptive survey research design because the method was convenient for to study characteristics of respondents and give more information (describe) the population considered. The research design was also considered because the researcher could consider a small group and thereafter make inferences regarding a whole population (Orodho, 2004).

3.3.Target Population

According to the research conducted jointly by the Kwanza Sub-County Children's services in partnership with Save the Children's fund 2016, it is estimated that there were approximately 700 Teen pregnancies around Kwanza Sub County and four dispensaries offering antenatal and postnatal care. The Sub County Director of health services, in kwanza Sub County, Trans-Nzoia County, also confirmed that there were approximately 700 Teen mothers attending antenatal clinic prenatal clinics every Friday. In this study, the target population was teen mothers and teen pregnant girls from selected villages, which included 700 teen pregnancies and 4 medical officers in Kwanza Sub County. This was a survey conducted by the Ministry of Health Services in collaboration with Save the Children fund in 2015.

The total target population for this study was 704.

3.4.Sample size and sampling procedure

3.4.1. Sample Size

In this study, the sample size was determined using Krejcie and Morgan (1970) table. Using a target population of 704, the sample size was 248

The sample size was 248, based on Krejcie And Morgan (1970) table of sample determination.

To get the number of teen pregnancies to be interviewed in this study, the researcher will calculate the total number of teen pregnancies x the sample size / the specific target population

Which is $\frac{700 \times 248}{704} = 246.5 = 247$ Teen pregnancies /mothers.

704

To get the number of officers who was interviewed in this study, the researcher will take

The total number of all dispensary heads x sample size

Specific target population

Which is $\frac{4 \times 248}{704} = 1.4 = 1$ medical officer

704

3.4.2. Sampling procedure

This refers to the technique used by the researcher in selecting sampling units from the target population (Orodho 2004). Systematic sampling technique was used where a total of 248, respondents were selected. For this study, the participants were between the ages of 13-19 years. They were pregnant or having children and be willing to participate in the study.

3.5.Data Collection Instruments

Data for this study was collected through administration of questionnaires to respondents. The researcher will organize with respondents on how to collect filled questionnaires. In this study, questionnaires were used to collect data from teen mothers and health centre managers. This instrument was designed to collect background information about the teen pregnancies, their social cultural background, and economic status.

The second tool was interview schedules. In this study interviews was conducted to one manager of a selected health centre. The interview schedule was most reliable because a face-to-face interaction which enabled the researcher to seek clarification on the spot on some issues related to the study. It also enabled the researcher to follow up on incomplete or unclear responses by asking additional probing questions.

3.5.1. Piloting of the instruments

According to Polit and Beck (2008), a pilot study refers to a reconnaissance study that seeks to test instrument validity and reliability. In order to test reliability and validity of instruments, the researcher carried out a pilot study with a few respondents in the same study area.

3.5.2. Validity of the instruments

Validity refers to the degree to which the research instrument measures the subject under study (Mugenda, 2003). In order to test instrument validity, the researcher collected data using a structured questionnaire a selected group and shared the findings with the research supervisor whose expert judgment determined the fate of the instrument in terms of validity.

3.5.3. Reliability of Research Instrument

The reliability of research instrument refers to the extent to which the instrument yields the same results on repeated trials.

The following steps were followed:

The structured questionnaire was administered to a selected group of respondents who responded to questionnaires and their scores were recorded. The same group was revisited after two weeks and the same questionnaire was administered. Scores were recorded for the second time and then they were correlated to determine the degree of accuracy. If reliability is greater than 0.5 the instrument was considered reliable hence it was adopted for use in the study.

3.6.Data Collection Procedure

After acquiring requisite approvals from the University and from NACOSTI, the researcher conducted a pilot study and hence actual data collection. The Data was collected by administering questionnaires to teen mothers who responded to structured questions. The researcher took some of the respondents through the questions and organized on how to collect them. Qualitative data was collected from health facility managers through face-to-face interviews and responses were noted down.

3.7.Data analysis techniques

After assembling and organizing completed instruments, descriptive statistics were used to analyze data. Quantitative data was analyzed using the descriptive statistical tools of average or mean, percentages and frequencies. This data was presented in terms of tables, graphs and chart. In analyzing general and demographic information, the researcher computed percentages of the respondents who provided data. Qualitative data on the other hand was organized and summarized into themes opinions, reports and patterns relevant to the study. The Statistical Package for Social Sciences was used to analyze data.

3.8.Ethical consideration

The researcher sought consent of the respondent's prior the time of study. Information given was treated with confidentiality. The researcher was sensitive to human dignity but remained onto the intentions of the study. No name was indicated on the questionnaire and hence identity of the respondents was protected.

3.9.Operationalisation of variables

Table 1.0 Operationalisation of variables

OBJECTIVES	VARIABLE	MEASUREMENT SCALE	TYPE OF ANALYSIS
To establish the influence of economic factors on teen pregnancies in Kwanza sub county	Number employed Number not employed Level of Education poverty Family income	Nominal Scale Ordinal Scale	Descriptive Analysis
To explore the influence of social factors on teen pregnancies in Kwanza sub county	Media, peer pressure family relationships	Nominal Scale Ordinal Scale	Descriptive Analysis
To examine the influence of political factors on teen pregnancies in Kwanza sub county	Inter-conflicts Intra-conflicts Violence	Nominal Scale Ordinal Scale	Descriptive Analysis
To identify the influence of cultural factors on teen pregnancies in Kwanza Sub - County	Family Structure Traditional practices Forced and planned marriages	Nominal Scale Ordinal Scale	Descriptive Analysis
	Teen Pregnancy	Nominal Scale Ordinal Scale Ratio Scale	Descriptive Analysis Inferential Analysis

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS INTERPRETATION AND DISCUSSION

4.1. Introduction

This chapter presents, analyzes interprets and discusses data collected by the research using the methods described in chapter three. The purpose is to transform the raw data into information that is manageable, presented in an attractive, communicative manner. The interpretation is aimed at drawing logical and sensible inferences from the information gotten from the study. The chapter is organized in the themes: Sample response rate, demographic characteristics of sample, economic influence on growth, political influence, and the cultural influence on teen pregnancies

4.2 Sample Response Rate

The research target population was 700 teen mothers according to County Social Services, there are approximately 700 teen pregnant girls in Kwanza sub-county. A sample size of 238 children (100%) was chosen but only 197 (82.773%) Teen mothers were interviewed. The data addressing this research question were obtained from the questionnaire administered to 238 Teen mothers and 10 officers and guardians working with Children and presented in the tables below. The sample was drawn from four areas in Kitale namely; Kwanza ward (40 girls), Kapomboi Ward (59 girls), Keiyo Ward (42 girls) Bidii Ward (56 girls). (See table 1). Questionnaires were responded to in focus groups which include members of the public Teen mothers of different ages and children social workers.

Table 4. 1: Sample Distribution

Area	Frequency		%		rank
	Expected	Observed	Expected	Observed	
Kwanza ward	59.5	40	25	16.81	4
Bidii Ward	59.5	56	25	23.52	2
Keiyo Ward	59.5	42	25	17.65	3
Kapomboi Ward	59.5	59	25	24.79	1
Total	238	197	100	82.77	

4.3 Demographic Characteristics of Respondents

The researcher sought to find out the distribution of the Teen mothers according to level of education, size of family they came from,

Table 4.2: Age Distribution

Age distribution	Frequency	Percent
Age of the first sex experience		
10-12 yrs	20	10.15
13-15yrs	62	31.47
16-18yrs	75	38.07
19-21yrs	40	20.31
Age of partners		
10-15 yrs	2	1.01
16-20yrs	40	20.30
21-25yrs	75	38.07
26- and above yrs	80	40.60
	197*	100.0*

Legend

F-Frequency= 197

P-Percent=100.0

Thirty-two percent (32%) of the respondents began taking part in sexual exercises between the age of 13 years and 15 years; 38% between the periods of between 16 years 18 years while 10.15% began at the age of 10–12 years. These findings were supported by the findings of Cooper et al. (2004) who established in South Africa that the majority of teen mothers were aged below 19 years. In another study by Morake (2011), he observed that the primary age when teens had pregnancies because of early sexual engagements were between 13 to 16 years.

In the same table, around (40.6%) of the respondents had boyfriends who were 26 years or more; 38% had partners between 20–25 years and 20.3% had partners between 16–20 years. By far most of young people ended up pregnant by sexual partners who were older and more established than they were. Mwaba (2000) asserted that the increase in the number of teen pregnancies was occasioned by the refusal by young men to use condoms during sex.

Information about the use of contraceptives

Table 4.3: Age brackets

Age	Frequency	%	rate
10-12 yrs	1	1.01	3
13-15yrs	40	20.3	2
16-18yrs	75	38.07	1
Total	197	100	

In the findings presented in table 4.3, 75 (38.07%) of the respondents aged between 16-18 years indicated that at that age, they got information about the use of contraceptives. According to the findings as presented in table 4.3, the majority of respondents were aware of the information regarding the use of contraceptives. In the findings presented in Ritcher and Mlambo's (2005) observed that teen pregnancy increased because of lack of enough education and information about the use contraceptives and related misconceptions. Some indicated that injectable contraceptives cause overweight and watery discharge, while prophylactic pills were possibly taken when they planned to have sex or simply after the commitment. In an examination by Mwaba (2000) teen pregnancy communicated an inclination for getting the injectable preventative and expressed that condoms were not a birth control of their choice decision.. Respondents further said that young men didn't go to family planning facilities and were hesitant to use condoms as a way of controlling pregnancy since they maintained that sex with a condom was not enjoyable..

Table 4.4: Reasons why family planning methods are not used

Reasons for not using family planning	Total	%	rank
fear of complications	56	41.18	1
parental detection	30	22.06	2
Misconceptions	11	8.09	4
Fear of being overweight	9	6.61	6
Fear of seeing a doctor	11	8.09	4
Other	19	13.97	3
Total	136	100	

According to the findings, the majority of respondents, 56 (41.18%) indicated that fear of complications is one of the reasons why majority of respondents did not use various family planning methods. In another case, 30 (22.06%) respondents stated that parental detection was the reason why they did not use family various family planning methods.

These findings were in line with findings of a study that was carried out in Kenya about misconceptions and rumors about contraceptives. The study established that misconceptions about the use of contraceptives are propagated by women in their social informal gatherings. A study by Rhoun Ochako et al (2015) conducted in Kenya determined that teenage girls and young women who were surveyed indicated that the majority sourced information regarding contraceptives from fellow mates. Further, social networks contributed largely as primary influencers that determine the decision on the use of contraceptives.

4.4 Influence of Economic Factors on Teen pregnancies

Table4.5: Reason for teen pregnancies

Reason for teen pregnancies	Perception of	Perception of	parents/ rank
	Children Score	Guardians Score	
Drugs	0	1	13
Ill treatment by parents or guardians	3	1	7
Disobedience	2	2	7
Orphan hood	3	2	4
Rejection by family	-1	3	12
Desire to have money	2	3	4
Overcrowding at home	2	2	7
Parents disputes	2	3	4
Evil spirits/curses/witchcraft	2	1	11
Eviction from home	3	3	1
Poverty	3	3	1
Negative peer influence	3	3	1
Mass media			

From the findings presented in table 4.5, the majority of respondents stated that eviction from home, poverty and negative peer influence were the reasons given for increased teenage pregnancies. Parental disputes, desire to have money and orphan hood too were listed as reasons that contributed largely towards increased teenage pregnancies. The fact that teenagers accessed and watched any television stations without any supervision from adults.

Table 4.6: Orphan Status of the Teen pregnancies

Status	Frequency	%	rank
Non orphan	13	19.69	4
Paternal orphan	17	40.51	2
Maternal orphan	7	24.05	3
Double orphan	38	64.56	1
Total	75		

Out of 197 respondents that took part in the study, 66.4% of the Teen mothers in teen mothers in Kwanza Sub County are either double orphans or single orphan. Of this figure 40.51% are paternal orphans 24.05% maternal and 35.44% double orphaned. The data however, suggests that paternal orphans are at increased risk of becoming Teen mothers. The absence of a mother at home and the fact that fathers are the main breadwinners in many families appears not to be the main reason.

According to the findings presented in table 4.4, the majority of respondents who were double orphans 38 (64.56%) happened to be victims of teen pregnancies. This implied that lack of parenting guidance might have contributed largely towards escalating cases of teen pregnancies among double orphans.

4.5 Parental Guidance and Teen Pregnancy

The study sought to determine whether parental guidance had any influence on teen pregnancies in Kwanza Sub County. To answer this question, a five point scale of SA= Strongly Agree, A= Agree, UD= Undecided, D= Disagree and SD= Strongly Disagree was used and Table 4.8 reveals the study findings.

Table 4.7: Parental Guidance and Teen Pregnancy

Parental Guidance	Frequency	Percent	Rank
Strongly agree	98	49.7	1
Agree	71	36	2
UD	24	12.2	3
Disagree	2	1.01	4
Strongly disagree	2	1.01	4
Total	197	100	

In the findings presented in table 4.8, 98 (49.7%) and 71 (36.0%) of the respondents strongly agreed and agreed respectively parental guidance influenced teen pregnancy in such a way that lack of it increases chances of teenage girls to suffer early teenage pregnancy. On the other hand, 2 (1.01%) respondents in each case disagreed and strongly disagreed respectively that parental guidance influenced teenage pregnancy. This meant that lack of parental guidance did not in any way influence teenage pregnancy.

4.8 Political factors and Teen Pregnancies

Table 4.8: Divisions of Children's origin

DIVISION	Number of Children	%	rank
Namanjalala	60	25.21	1
Kolongolo	17	7.14	4
Kwanza	27	11.34	3
Bidii	14	5.88	5
Central	51	21.43	2
Others	12	5.04	6
Total	238	100	

Factors influencing the increase in the Teen mother’s population in Namanjalala at 25.21% are the same as those in Kolongolo at 21.43%. Kolongolo borders West Pokot County where there have been cattle rustling and political instability after every electioneering period since 1992. Mt. Elgon region experienced instability since and even more in the months leading to the 2007 general elections and culminating in heated clashes during the post-election violence period. Many people from these regions run to Namanjalala Division for refuge. 32% of the children interviewed from these areas indicated the reason why they looked for love outside marriage was because their parents were displaced during tribal clashes when their houses were burnt down. Since then, their parents have never been able to raise enough to sustain their families. The joint operation with the Kenya Defense Forces (then The Kenya Armed Forces) against the Sabaot Land Defense Force also so the killing and mutilations of hundreds which added to the instability of these districts (Nina O' Nina O'Farrell, 2008).

4.10 Social factors and Teen Pregnancies

The findings stress that unstable families, death of a parent or both and separation of parents influenced increased teenage pregnancies.

Table 4.9: Size of Children's Family

Size of the family	Frequency	%	rank
1 to 3	6	3.05	4
4 to 6	74	37.56	2
7 to 9	102	51.78	1
Greater than 10	15	7.61	3
Total	197	100	

In the findings in table 4.10, the majority of respondents, 102 (51.78%) observed that their family size ranged between 7 to 9. This was followed by 74 (37.56%) respondents who attested that their family sizes ranged between 4 to 6. Most teen mothers come from average to large sized families. The number coming from families of greater than 10 is significantly low probably because of very few families is that big in the current face of Kenya. The trend

seems to suggest that as the family size increases the probability for teen pregnancy also increases. Very few of children came from small size families maybe because there is better parental supervision and less economic burden on the parents or caretakers.

Table 4. 10: Whom Children Live With

Children living at home	Frequency	%	rank
With relatives	82	67.21	1
With Non – relatives	40	32.79	2
With Parents	18		
Total	140	100	

The study sought to determine the role of the extended family in the lives of Teen mothers. Out of 140 respondents who took part in the study, 122 Teen mothers lived with relatives represented about 67.21% of them. Most of these relatives were grandparents and elder siblings. The rest stayed with non-related guardians. Out of the 142 Teen mothers that stayed with caretakers 35.915% reported that the caretakers often fought in the house.

The trend starts from the top to imply that fights at home were not the main factor in causing children to go into the streets but the trend picks up from as the fighting in the house increases from 3 times a week showing that the more there was fighting in the home the more the environment at home became very unstable. The more unstable the environment at home, the more likelihood of early teen pregnancy with 25.35% reporting that their caretakers fought 4 to 6 time a week. (See table 4.12) The children were asked how often their parents or caregivers fought to help determine whether the instability had an influence on the growth of Teen mothers.

Table 4.11: How Often Caregivers Fight

Frequency of fighting/week	Frequency	Percent	Rank
0	91	64.085	1
1 to 3	15	10.563	3
4 to 6	36	25.352	2
Total	142	100	

In the findings presented in table 4.12, at least 35% of the respondents stated that their caregivers fought between 1 to 6 times a week a reason that influenced their social and psychological well-being hence making some of them to seek for refuge at their boyfriends houses. Some of the reasons cited for the fights at home were money, drunkenness, and no apparent reason while a large number (84%) had no idea why their guardians kept fighting.

Table 4. 12: Reason Guardian's Fought

Reasons for fighting	Frequency	Percent	Rank
Over money	2	3.56	3
Drunkenness	4	7.17	2
No apparent Reason	2	3.56	3
Don't Know	43	85.71	1
Total	51	100	

Upon more probe on the rationale behind couples fights, 85.71% of the respondents who were the majority indicated that they do not know the reason why their caregivers fought. Other respondents, 4 (7.17%), 2 (3.56%), and 2 (3.56%) stated that their caregivers fought because of drunkenness, over money and for no apparent reason respectively. Such reasons contributed largely towards the rationale behind increased cases where teenage girls were pregnancy at early years because they saw their homes as not safe.

4.11 Peer Pressure as an Influence on Teenage Pregnancy

Table 4.13: Peer pressure and Teen Pregnancy

Peer Pressure and Teen pregnancy	Frequency	Percent	Rank
Strongly agree	98	49.7	1
Agree	71	36.0	2
UD	24	12.2	3
Disagree	2	1.01	4
Strongly disagree	2	1.01	4
Total	197	100	

During the study, at least all respondents stated that they had friends whom they spend time with. In the findings presented in table 4.14, 98 (49.7%) and 71 (36.0%) strongly agreed and agreed respectively that their friends did influence them to have children. Jointly, over 80% of the respondents attested to the fact that their mates played a significant role that saw them engage in early sexual relationships that led to unwanted pregnancies. Gows et al. (2008) viewed that, peer pressure is often considered as a contributing factor towards teenagers' ability to made sexual decisions.

Table 4.14: Average Family Income

Average Monthly income	Frequency	%	Rank
less than 5000	78	39.59	1
6000-10000	54	27.41	2
11000-15000	30	15.23	3
16000-20000	15	7.61	4
21000-25000	12	6.09	5
26000 and above.	8	4.07	6
TOTAL	197	100	

Out of 197 respondents who took part in the study, 78 (39.59%) of the respondents came from families whose average income per month was less than Ksh. 5,000. On the same income status, 54 (27.41%), 30 (15.23%), 15 (7.61%) and 12 (6.09%) interviewed come from families whose monthly income was between Ksh. 6,000-10,000, 11,000-15,000, 16,000-20,000 and Ksh. 21,000-25,000 respectively. Only 8 (4.07%) respondents came from families that earned a monthly income of Ksh. 26, 000 and above. The trend seemed to suggest that the lower the family income, the more likelihood a girl from that family will become pregnant at an early age. The more the family is stable financially the lesser the likelihood of getting teen mothers with only four percent of teen mothers aged from families earning above ksh 26000

Increased levels of poverty influence young girls to exchange consumables, clothing, and even gifts for sex has always been a contributing factor of increased teenage pregnancies. Some parents can bring consider sending their teenage girls to go out, spend time with men so that they bring money for domestic utilization as one case informed this research thus:

“.....My mother is a single mother and we live in a one roomed house. She struggles to bring us up so often she sends us out to bring money for food. Since I have no job, I would sleep with men for cash since mum would not hear of any excuse for not bringing in money. I realized I was pregnant after doing this for three months.....”

A teen mother aged 19 from Kolongolo and another young girl (16 years) from Keiyo reported having sex in exchange for money. Her boyfriend would give her cash for food but she unfortunately became pregnant. A similar case for a 12 year old girl was identified in Goseta. Poverty in Kwanza has been confirmed in latest analysis including media reports of famine and limited access to basic needs. Other mothers earned livelihoods through the sale of local liquor (Busaa and Chan’gaa) with the girls being asked to assist with implied role of entertaining patrons to retain them as customers (Parenting Africa Network, 2015)

4.12 Cultural Influence on Teen Pregnancies

The study sought to find out the influence of Cultural practices on teen pregnancies. A question was asked about the most common cultural practices that influence teen pregnancies. The findings are demonstrated in the table below.

Table 4.15 Cultural practices influencing teen pregnancies.

Cultural Practices	Frequency	Percent	Rank
Disco Matanga	60	25.21	1
Circumcision ceremonies	17	7.14	4
Weddings	27	11.34	3
Female Genital Mutilations	1	5.88	5
Gender discrimination	4	21.43	2
Forced/Early Marriages			
Taboos			
Child abuse	12	5.04	
Sex Education			
TOTAL	238	100	

In the findings presented in table 4.16, 60(25.21%), 27 (11.34%), 17 (7.14%) and 12 (5.04%) of the respondents stated that disco matanga, weddings, circumcision ceremonies, and child abuse were common cultural practices, which came out repeatedly as a root cause of teenage pregnancies. Disco matanga is a traditional dance held after the death of a community member. Among the communities in Kwanza, these dances are held to mourn the dead as well as fundraise for burial. There are also night dances held around wedding ceremonies and traditional male circumcision ceremonies.

The societal myth that girls out to give birth upon reaching puberty has been occasioned by lack of enough sensitization and sexual education in elementary learning institutions in most schools in Kwanza. The cultural practice that allows men to marry men wives and male domination in the society has encouraged men to target young and teenage girls for sexual exploitation in the name of initiating the marriage process (Population Reference Bureau & Center for the Study on Adolescence fact sheet, 2015)

In the final report for Teenage Pregnancy Research in Kwanza Sub-County, Dec. 2016 Page 22 , it was noted that the majority of girls who got pregnant were forced to get married to men and boys who impregnated them hence curtailing their dreams to enhance their careers. However, according to boys who were interviewed, they were not ready to marry teenage girls after impregnating them because they were jobless and could not take care of the families.

CHAPTER FIVE

SUMMARY OF FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This section presents a summary conclusion, recommendations, and contribution to the body of knowledge and areas suggested for further research.

5.2 Summaries of the findings

In view of the information acquired to respond to the research questions, various research discoveries were presented in chapter four. The discoveries are outlined in this segment.

5.2.1 Demographic characteristics of respondents

The study revealed that girl's aged 41.5% had their first sexual experience at the age of between 10-15 years. In another case, over 78% of partners who impregnated teenage girls were aged over 21 years. The onset of puberty among some teenage girls marked the start of using contraceptives while over 41% teenage girls failed to use contraceptive because of fear of complications thereby exposed themselves to early pregnancies and Sexual Transmitted Infections.

5.2.2 Economic factors and the teen pregnancies

The study found out that there are very many orphans represented among the teen mothers. The study revealed that Paternal orphans make up a large Proportion of teen pregnancies. 39% of the children interviewed come from a family that earns ksh 5000 and below. The trend seemed to suggest that the lower the family income, the more likelihood a girl from that family will become pregnant at an early age.

Low economic status in Kwanza Sub-County has been affirmed in most recent studies including media reports of starvation and constrained access to fundamental needs. Kwanza Sub-County is frequently set among the least fortunate zones in Kenya, which enhances vulnerability especially for adolescents. Different mothers acquire employments through the nearby alcohol (Busaa and Chan'gaa) with the young ladies being solicited to help clients.

This child rearing practice opens the young ladies to the alcohol clients, who regularly tempt the young ladies and many get impregnated.

Most teen mothers originate from average to huge families. The pattern implies that as the family size builds the likelihood for adolescent pregnancy increases in light of the fact that there is increasingly financial weight on the parents or caregivers.

5.2.3 Social Factors and Teen pregnancies

The study revealed that over 90% of teen mothers come from average to large sized families with over 4 members per family, which increased strain on available basic needs hence leading to neglect and conflicts. The trend seems to suggest that as the family size increases the probability for teen pregnancy also increases. Very few of children came from small size families maybe because there is better parental supervision and less economic burden on the parents or caretakers. In that case, the study revealed that over 62% and 37% of teenage mothers lived with their relatives and non-relatives respectively. Such situations exposed them to early risky sexual behavior because of lack of parental guidance.

The study also that fights at home were not the main factor in causing children leading to teen pregnancies but the trend picks up as the fighting in the house increases from 3 times a week showing that the more there was fighting in the home the more the environment at home became very unstable.

Eighty percent of children who were interviewed demonstrated that their companions influenced them to have kids. Near 20 percent didn't concur with this; saying it was their choice to have kids. Peer pressure can be viewed as the primary factor that impacts young pregnancy in light of the fact that a large portion of the girls are having friends who are sexually active.

All of the teen mothers met said they have access to pornographic materials on the internet and on the televisions. Nobody is carefully managing them about which channels to watch on the television. The examination discovered that media influences adolescent pregnancy since youngsters invest the majority of their energy watching shows containing explicit pornographic material.

The investigation discovered that parental guidance has big contribution towards teen pregnancy. Many parents don't have the opportunity to talk about sexual issues with their children. They have a misguided judgment that discussions on sex and connections are a

taboo and ought not be discussed with children. Poor child rearing has had a negative influence in that children are not all around formed as parents' battle with gaining employments.

5.2.4 Political Factors and Teen pregnancies

The study discovered that areas that have experienced political tension like cattle rustling, tribal conflicts had more teen pregnancies as compared to areas that were peaceful. For example Kologolo boarders West Pokot County where there have been cattle rustling and political instability after every electioneering period since 1992. Mt. Elgon region experienced instability since and even more in the months leading to the 2007 general elections and culminating in heated clashes during the post-election violence period. Many people from these regions run to Namanjalala Division for refuge. 32% of the children interviewed from these areas indicated the reason why they looked for love outside marriage was because their parents were displaced during tribal clashes when their houses were burnt down. Since then, their parents have never been able to raise enough to sustain their families. The joint operation with the Kenya Defense Forces (then The Kenya Armed Forces) against the Sabaot Land Defense Force also so the killing and mutilations of hundreds which added to the instability of these districts.

5.2.5 Cultural Factors influencing Teen pregnancies

The study explored some unsafe cultural practices that influence teen pregnancies. A portion of the cultural practices were seen as very unsafe to a young girls since they hold discriminatory views about the roles and duties of ladies in the society and that results to unequal opportunities between men and women.

Destructive customary practices legitimize and propagate different types of violence against ladies including Female Genital Mutilation, early marriage, the different taboos or practices that forestall ladies access to education, medicinal services, economic openings and initiative positions. Most regular cultural practice which turned out over and over as a main driver of adolescent pregnancies in Kwanza Sub-region were Disco Matanga, traditional male circumcision ceremonies , gender prejudice, Early arranged marriages, Sexual abuse and Dowry and pride price. Disco matanga is a conventional move held after the death of a community member . Among communities in Kwanza Sub-County , these moves are held to grieve the dead just as raise support for funeral. There typically night dances held around wedding functions and Bukusu conventional male circumcision ceremonies, particularly

during even years. These dances are frequently attended to by unaccompanied kids and youthful people. The dances are held around areas where it is simple for this youngster's to stow away and engage in sexual relations, mostly unprotected.

5.3 Conclusions on the findings

Teenage pregnancies are influenced by peer pressure, lack of sexual education, low self-esteem and the permissive society that allows all sorts of evil among the young. Use of drug abuse and society that supports use of illicit substances to a large extent contributes largely towards the increase of teenage pregnancies.

Low standards of living, low earnings and the tightening state of the economy has influenced poor parenting where parents encourage their teenage girls to engage in early sexual activities for money. Low level of income exposes teens for sexual exploitation from men who are usually supported by the society. Failure to have punitive legal punishments and strict policies governing against teenage pregnancies has caused an increase in teenage pregnancies. Outdated societal practices and traditions, which favour men and discriminates against girls have contributed largely towards increased teenage pregnancies.

5.4 Recommendations

The factors that influence the teen pregnancies in Kwanza sub-county have been explained several major recommendations flow from the findings of this study as described below:

5.4.1 Economic Factors

Counteractive action to prevent Poverty through financial and social help of families headed by single parents, through prevention of economic and sexual abuse of children, and through setting pro-family policies, strategies is the most significant way to deal with the issue of teen pregnancies.

5.4.2 Social Factors and Teen pregnancies

Abstinence education programs advance restraint over every different methodology. Despite the fact that previous surveys discovered hardly any, compelling abstinence education programs, a growing number of restraint training programs have set up proof of viability lately. These programs principally advance restraint convictions and attitudes while emphasizing life purpose, goals and s and dreams.

Complete sex education projects center around improving reproductive health results, for example, avoiding pregnancy or expanding STI information. All in all these projects advance both abstinence and contraception use for juvenile who become sexually active.

Clinic based family planning projects are explicitly intended to be executed in a medical facility or by center staff or doctors. Regularly these projects should be designed in a way that suits easy access to young people who are looking family planning services

Parent contribution programs aimed at improving the parent-child relationship, especially around communication about sexual conduct. In certain occasions, guardians are the essential members in these projects; in others, the program is instructed to parent-child.

Parent involvement programs should focus on improving the parent-child relationship

Youth improvement programs could conceivably concentrate on reproductive health and expand professional social conduct, positive connections, school accomplishment, or healthy outcomes. A few of these projects have effectively diminished high teen pregnancies or postponed sexual inception notwithstanding positive effects on other youth advancement results.

5.4.3 Political Factors and Teen Pregnancies

There should be responsible engagement politically. Inflammatory remarks by politicians should cease and the government should clamp down on those playing divisive and inflammatory politics. The government must move with speed to address the long standing unresolved land issue and other historical injustices which have been the cause for tribal wars every electioneering period. Strict endurance to the regulation within which military forces act among civilian communities.

5.4.4 Cultural Factors and Teen pregnancies

Enlighten of communities on the advantages of lean sensible families against the cultural desire for large families should be encouraged. Ladies should be inspired and be given opportunities to strive to be all they can be. This would enable young girls to regard them similarly as they would their dads. Likewise, this would empower ladies be financially steady to have the option to educate their children as well as deal with their youth Program and school educational plan substance ought to have a cultural education in their curriculum .

In the event that individuals were progressively educated about their way of life and like customs, and how things used to be, and what ought to be continued today, perhaps they would concentrate more on that. Also, as, and possibly that would turn out to be additional tedious and like a greater amount of like a worth too than, as opposed to being explicitly dynamic. Since inside customary services and our way of life roles and duties and responsibilities of women were educated and men were instructed to respect ladies. A portion of the particular ways offered in how to best consolidate culture are consideration of inborn language, history, social/ethnic pride, functions, just as the fuse of customary lessons, abilities, and qualities as for how to be a sound man or lady and create solid connections, particularly with family. The introduction and utilization of customary camps will really help accomplish this.

5.5 Contributions to body of knowledge the study had the following contribution to the body of knowledge,

Objectives	Contributions
To establish the influence of economic factors on teen pregnancies in Kwanza Sub County.	Most teen mothers are orphans or half orphans. The larger the size of the families, the heavier the economic burdens on the parents and guardians of children add the more the susceptibility to early pregnancy and marriage. Child prostitution has attracted girls from economically strained families some even with full knowledge and support from parents and guardians to the streets.
To explore the influence of social factors influencing teen pregnancies in Kwanza Sub-County	The study indicated that teen pregnancies is increasing because of failures of educational system, parental negligence, excessively large families, growing poverty and society's inability to provide a future for its children. Ill treatment by parents' disputes or guardians, negative peer influence, family, and eviction from home.
To examine the influence of political factors on teen pregnancies in Kwanza Sub-County	The study discovered that There is goodwill from the government authorities to protect its citizens against traditional harmful practices However ,elected political leaders have always been a stumbling block protecting the same cultural practices alluding that it is an attack on local peoples culture. Other political factors included cattle rustling, tribal clashes and post election violence.
To identify the influence of cultural factors on teen pregnancies in Kwanza Sub-County	The study discovered Female Genital Mutilation, early marriages, various taboos or practices that prevent women access to education, healthcare, economic opportunities and leadership positions. Disco Matanga, Bukusu traditional circumcision ceremonies, gender discrimination are the main cultural factors influencing teen pregnancies in kwanza sub-county.

5.6 Suggested areas for further research

Based on the analysis and findings of this study, a number of avenues for further research were identified. Whereas there were reasonable grounds to believe that the said economic, factors, political and cultural factors contribute significantly to the increase in the number of teen pregnancies, a few guardians and children admitted that they were either cursed or bewitched. This is because there was no other reason that could explain otherwise as some of them came from relatively stable economic and political backgrounds and there were no major social or cultural issues which were identified in the study that could influence a Childs pregnancy. This study therefore recommends further research to investigate the role of witchcraft, curses or evil spirits in the increasing number of teen pregnancies.

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APPENDICES

INSTRUCTIONS

Answer all questions in the spaces provided.

Use a Tick (√) for the questions with choices in the appropriate box.

SECTION A

1. What is your age bracket

(10-12)

(13-15)

(16-18)

(19-21)

2. What is your level of education?

a) No formal Education ()

b) Primary ()

c) Secondary ()

d) Other ()

3. What is your marital status

a) Single

b) Married

4. What's the age of the father of your child

10-15years ()

16-20 years ()

21-25 years ()

26-Above years ()

5. From which village do you live.....

6. What is your orphan status?

Double orphan ()

Paternal orphan ()

Maternal orphan ()

Non-orphan ()

7. Whom do you stay with?

Parents ()

step-parents ()

Relatives ()

Siblings ()

Friends ()

Foster home ()

8. What circumstances led to the conception of your child?

.....

SECTION B: ECONOMIC FACTORS AND TEEN PREGNANCY

1. What is your occupation of your guardian/caregiver?

Dependant ()

Government Civil servant ()

Casual worker ()

Other specify.....

2. What is your mother's main source of income?What is the approximate income per month in Ksh ?.....

3. What is your father's main source of income?What is the approximate income per month?

4. Does your father or mother own a farm?

Yes ()

No ()

5. What is the size of your farm?

6. How much income do you make from your farm in a year?

7. Do you have enough food to last you a whole year?

A) Yes ()

b) No ()

SECTION C: SOCIAL FACTORS AND TEEN PREGNANCY

8. During the last 10 years, have you had any armed conflicts in your area?

Yes ()

No ()

9. If yes was your family displaced?

Yes ()

No ()

10. Respond to the following questions as they relate to social factors and teen pregnancy, use a tick in the space provided

Statements	Strongly agree		Agree		Undecided		Disagree		Strongly disagree	
Televisions programs, social media, and print media contribute largely towards the increase in teen pregnancy										
Teens belong to groups or formations, which dictate the behavior and actions to be adhered to by others.										
Lack of parental guidance influence teen pregnancy										

11. What are some of the cultural events you have participated in?

.....

12. Have you ever used contraceptives? Yes () no ()

I. If yes when did you start using the contraceptives?

10-12 Years () 13-15 Years () 16-18 Years ()

II. If no, why don't you use contraceptives? Give reasons

.....

a) SECTION D: POLITICAL FACTORS AND TEEN PREGNANCY

b) 10. Does your mother drink alcohol? Yes () No ()

a. How often? Daily () 2-3 days/week () 4-6 times/week ()

b. Does your father drink alcohol? Yes () No ()

- c. How often? daily () 2-3 twice per week () 4-6 times /week()
- d. Do your parents/guardians fight? Yes () No()
- e. How often? Daily() Twice per week () More than 3 times per week ()
- f. Reasons for fighting (a) over Money () (b) Drunkenness ()
 (c)No apparent reason () (d) Don't know ()
 (e) Other reasons ()
- g) How many meals do you have in a day? a) 3 () (b) 2 () c) 1 ()
- h) h. How many people leave in your home? 1- 3() 4-6() 7-9() 10 ()

11. Respond to the following statements/questions as they relate to political factors and its influence on teen pregnancy

Statements	Very great extent		Great extent		Moderate extent		Low extent		No extent at all	
Discrimination, hatred, and misunderstandings contribute to family relation stability, which leads to violence										
Friends to the family and close relatives have always influenced family conflicts because of selfish interests										
Lack freedom to share ideas and use of dictatorial style leads to aggression and hostilities especially when family members to rebel against.										

Appendix 2: Questionnaire For Dispensary Managers.

1. How many teen mothers attend antenatal and postnatal clinics per month?
2. What locations have reported the highest prevalence of teen pregnancies
3. In your own understanding, respond to the following question to indicate the extent to which you agree or disagree

Statements	Strongly agree		Agree		Undecided		Disagree		Strongly disagree	
Discrimination, hatred, and misunderstandings contribute to family relation stability, which leads to violence										
Friends to the family and close relatives have always influenced family conflicts because of selfish interests										
Lack freedom to share ideas and use of dictatorial style leads to aggression and hostilities especially when family members to rebel against.										

4. Approximately how many cases of rape/defilement are reported per month in this facility?
5. Does the government have a clear policy on eradicating teen pregnancies?
Yes () No ()
6. If yes what are those policies? Briefly explain.....
7. Tick one area which represents the cause for teen pregnancies whereby 0 means Least likely reason and 10 is the highest leading cause of teen pregnancies

NO		0	1	2	3	4	5	6	7	8	9	10
a.	Hunger											
b.	Poverty											
c.	Parental mistreatment											
d.	Culture											
e.	Peer pressure											
f.	Social media											
g.	Disobedience											
h.	Orphan hood											
i.	Desire to have money											
j.	Overcrowding at home											
k.	Lack of school fees											
l.	Sexual violence											
m.	Family disputes											
n.	Lack of contraceptives											
o.	Armed conflicts											

Any other reason apart from the once provided above? Please explain briefly

.....

Thank you very much for your time and cooperation

Appendix 3: Sample Size From A Given Population

N	S	N	S	N	S	N	S	N	S
10	10	100	80	280	162	800	260	2800	238
15	14	110	86	290	165	850	265	3000	241
20	19	120	92	300	169	900	269	3500	246
25	24	130	97	320	175	950	274	4000	351
30	28	140	103	340	181	1000	278	4500	351
35	32	150	108	360	186	1100	285	5000	357
40	36	160	113	380	181	1200	291	6000	361
45	40	180	118	400	196	1300	297	7000	364
50	44	190	123	420	201	1400	302	8000	367
55	48	200	127	440	205	1500	306	9000	368
60	52	210	132	460	210	1600	310	10000	373
65	56	220	136	480	214	1700	313	15000	375
70	59	230	140	500	217	1800	317	20000	377
75	63	240	144	550	225	1900	320	30000	379
80	66	250	148	600	234	2000	322	40000	380
85	70	260	152	650	242	2200	327	50000	381
90	73	270	155	700	248	2400	331	75000	382
95	76	270	159	750	256	2600	335	100000	384

Note: “N” is population size “S” is sample size.
 Krejcie, Robert V. Morgan, Daryle W., “Determining Sample Size for Research Activities”,
Educational and Psychological Measurement, 1970.

$$\text{Proportionate sample members} = \frac{\text{Total population} \times \text{sample size}}{\text{Total population}}$$

Appendix 4: Research Permit

THIS IS TO CERTIFY THAT:

MS. NANCY NALIAKA WAMALWA
of UNIVERSITY OF NAIROBI, 4380-30200
KITALE, has been permitted to conduct
research in *Transzoia County*

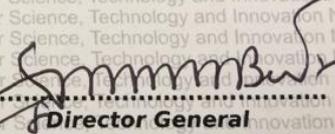
on the topic: *SOCIO-ECONOMIC*
FACTORS INFLUENCING TEEN
PREGNANCIES IN KWANZA SUB-COUNTY,
TRANS-NZOIA COUNTY, KENYA

for the period ending:
23rd May, 2020

Permit No : NACOSTI/P/19/66759/30397
Date Of Issue : 29th May, 2019
Fee Received :Ksh 1000



Applicant's
Signature


Director General
National Commission for Science,
Technology & Innovation

Appendix 5: Research Authorization Letter



**NATIONAL COMMISSION FOR SCIENCE,
TECHNOLOGY AND INNOVATION**

Telephone: +254-20-2213471,
2241349,3310571,2219420
Fax: +254-20-318245,318249
Email: dg@nacosti.go.ke
Website : www.nacosti.go.ke
When replying please quote

NACOSTI, Upper Kabete
Off Waiyaki Way
P.O. Box 30623-00100
NAIROBI-KENYA

Ref. No. **NACOSTI/P/19/66759/30397** Date: **29th May, 2019.**

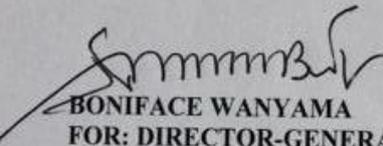
Nancy Naliaka Wamalwa
University of Nairobi
P.O Box 30197-00100
NAIROBI.

RE: RESEARCH AUTHORIZATION

Following your application for authority to carry out research on *“Socio-economic factors influencing teen pregnancies in Kwanza Sub-County, Trans-Nzoia County, Kenya.”* I am pleased to inform you that you have been authorized to undertake research in *Trans Nzoia County* for the period ending **23rd May, 2020.**

You are advised to report to **the County Commissioner and the County Director of Education, Trans Nzoia County** before embarking on the research project.

Kindly note that, as an applicant who has been licensed under the Science, Technology and Innovation Act, 2013 to conduct research in Kenya, you shall deposit **a copy** of the final research report to the Commission within **one year** of completion. The soft copy of the same should be submitted through the Online Research Information System.


BONIFACE WANYAMA
FOR: DIRECTOR-GENERAL/CEO

Copy to:
The County Commissioner
Trans Nzoia County.

The County Director of Education
Trans Nzoia County.