

HSRC Research Output Submission Template							
Please complete this template and submit it – along with the print or electronic copy of the research output concerned – to Hanlie Rossinger (hrossinger@hsrc.ac.za). The research output will be added to the research outputs database and published on the Internet and intranet, as well as in the HSRC Annual Report and other reports where appropriate.							
Please note that research outputs cannot be added to the database if this form is not completed and submitted.							
Is this output project related?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	X	if yes, provide the project number.	<input type="text"/>
Title	Teenage pregnancy in South Africa: A human rights approach.						
Authors	Wiebesiek, L., Vawda, MY., & Munthree, C.						
Type of output	Select the appropriate output type from the list below:						
Monograph/book*							
<input type="checkbox"/>	Peer reviewed						
<input type="checkbox"/>	Non-peer reviewed						
Chapter in Monograph/book*							
<input type="checkbox"/>	Peer reviewed				Title of monograph/book in which chapter appears		
<input type="checkbox"/>	Non-peer reviewed				<input type="text"/>		
*(For monographs/chapters, a letter from publisher must be submitted as proof of peer review.)							
Journal Article							
<input type="checkbox"/>	Peer reviewed				Title of journal in which article appears		
<input type="checkbox"/>	Non-peer reviewed				<input type="text"/>		
<input type="checkbox"/>	Newspaper Article						
<input type="checkbox"/>	Review in Journal						
<input type="checkbox"/>	Research Report- Client						
	Client name and month in which report was submitted						
<input type="checkbox"/>	Research Report- Other						
	Month in which report was submitted						
<input checked="" type="checkbox"/>	Conference or Seminar Papers						
	Name, date and place of conference/seminar						
	September 2011. Paper presented at the HSRC Social Science Conference, Johannesburg, South Africa.						
<input type="checkbox"/>	Other, please specify						
Confidential?							
	Yes	<input type="checkbox"/>	X	No	<input type="checkbox"/>		
Submitted by:	Mohammed Vawda						
Submission date:	23/03/2012						

HSRC RESEARCH OUTPUT

7247

Pretoria Office
134 Pretorius Street, Pretoria, 0002, South Africa. Private Bag X41, Pretoria, 0001, South Africa.
Tel: +27 12 302 3177 Fax: +27 12 302 2041

Cape Town Office
Plein Park Building, 69-83 Plein Street, Cape Town, 8001, South Africa.
Private Bag X9182, Cape Town, 3000, South Africa. Tel: +27 21 465 8000 Fax: +27 21 466 8001

Durban Office
750 Francois Road, Intulhuko Junction, Cato Manor, Durban, 4001, South Africa.
Private Bag X07, Delbridge, 4014, South Africa. Tel: +27 31 242 5400 Fax: +27 31 242 5401

Port Elizabeth Office
44 Pickering Street, Newton Park, Port Elizabeth, 6055, South Africa
PO Box 34115, Newton Park, 6055, South Africa. Tel: +27 41 399 8700 Fax: +27 41 399 8711



Exploring Teenage Pregnancy in South Africa: A Human Rights Approach

by

Mohammed Yacoob Vawda

Lisa Wiebesiek

Human and Social Development



Exploring Teenage Pregnancy in SA 1

- Recent Newspaper reports
- Age 15-19 (Makiwane and Udjo 2006)
- SADHS (2003) – 12%
- SADHS (1998) – 16%



Exploring Teenage Pregnancy in SA 2

- Proportion of teenagers who have been pregnant rises:
 - 15 years (2%)
 - 19 years (**27%**)(SADHS, 2003)
- 7% of teenagers with higher education reported to have been pregnant compared with **20%** with grade 6 – 7 education in the same age group.
- **HIV**
 - unprotected sex
 - prevalence (15-19) F = **6.7%**, M = 2.5% (Shisana et al., 2008)
 - **13.7%** of pregnant teenagers 15-19 were HIV + (ANC Survey, 2009)

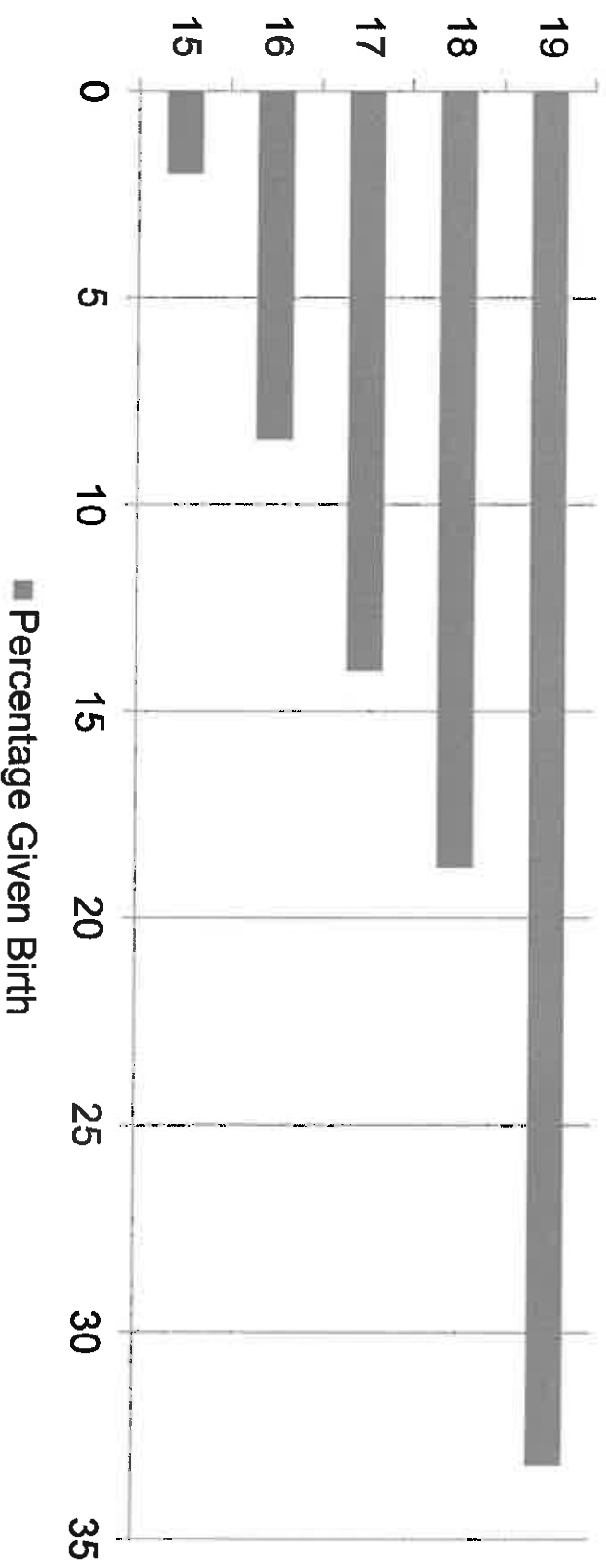
A Human Rights Approach

- State Obligations (Gruskin, Ferguson & O'Malley, 2007)
- 3 Questions to bear in mind:
 1. Has the State fulfilled its promises and obligations?
 2. What role has/should the State play in the prevention and management of teenage pregnancy?
 3. What does the response of the State reveal about SA's attempt to deal with the issues of and surrounding teenage pregnancy?
- (Adapted from Cameron, 2006)
- 2 Rights to focus on:
 1. The Right to the highest standard of health
 2. The Right to Education

National Income Dynamic Study (NIDS)

- Conducted in 2008
- First national panel study in South Africa.
- The study will be conducted every 2 to 3 years
- Social and Economic Indicators:
 - Economic activity
 - determinants health and well-being
 - household structure and composition
 - Education
 - Fertility and migration patterns
 - Household expenditure and income
- Sample Size: 7305 households at an individual level
- Sampling Strategy Over Household Survey*

Situational Analysis



Percentage Ever Given Birth by Age-Group

Situational Analysis (2)

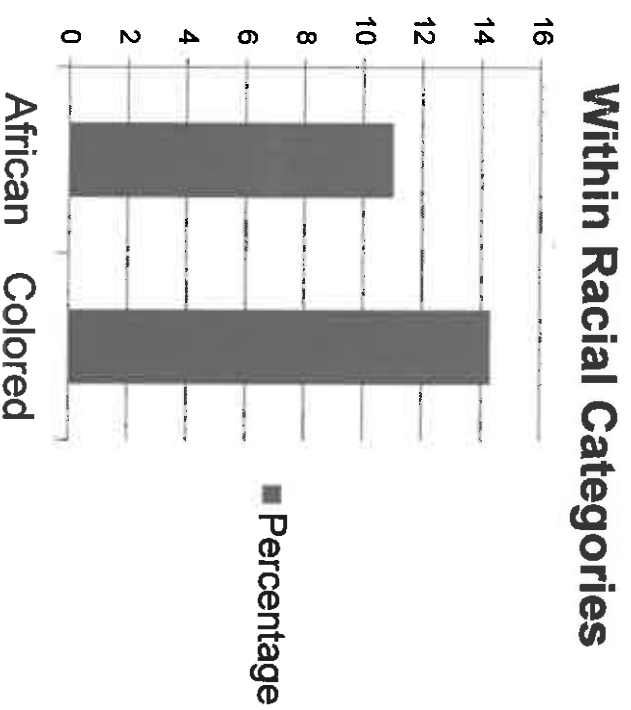
Age Groups	Age Specific Fertility Rate (ASFR)	ASFR (per thousand)
>15	0.010993	11
15-19	0.1095	109*

Age-Specific Rates of Fertility by Age-Group

Situational Analysis (3)

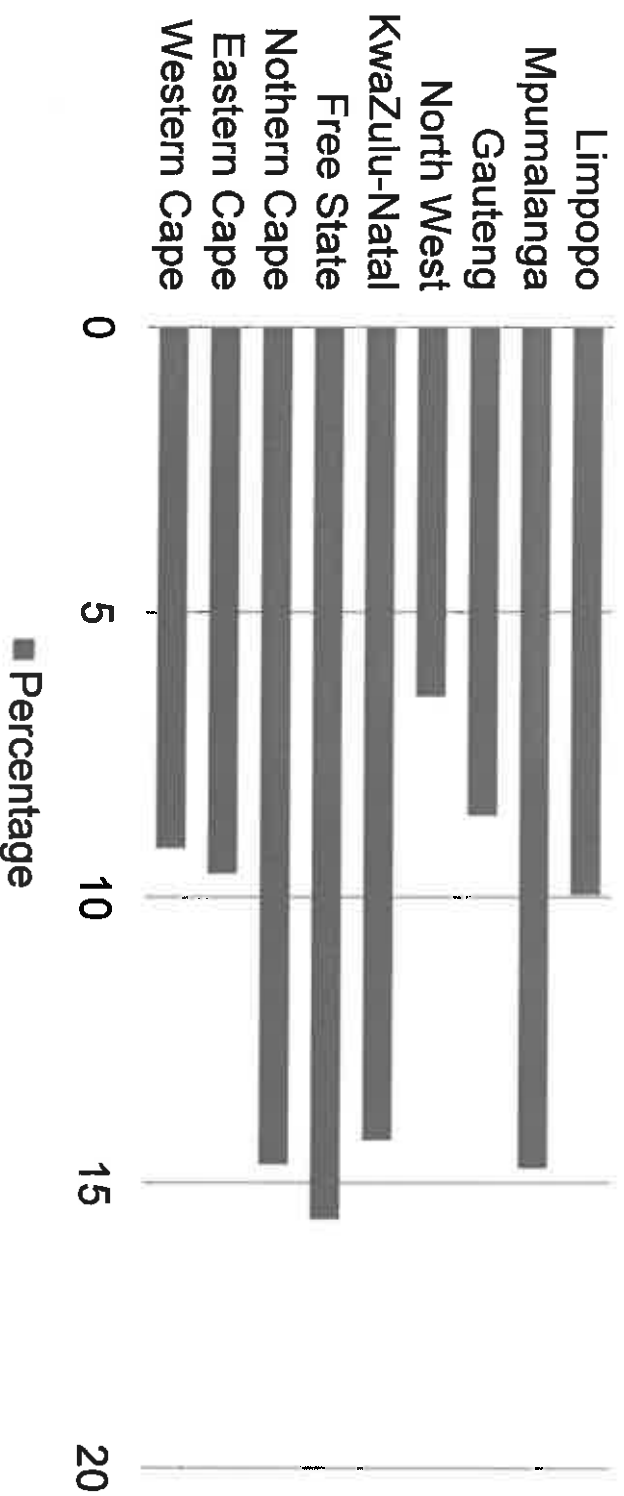
Country	Percentage
China	0.2
Turkey	5
Texas	6.3
Venezuela	9
South Africa	10.9
Ethiopia	10.9
Swaziland	11.1
Bangladesh	13.3
Cameroon	13.6
Zambia	15
Uganda	15.9
Angola	16.5
Mali	19
Niger	19.9

Racial Disparities



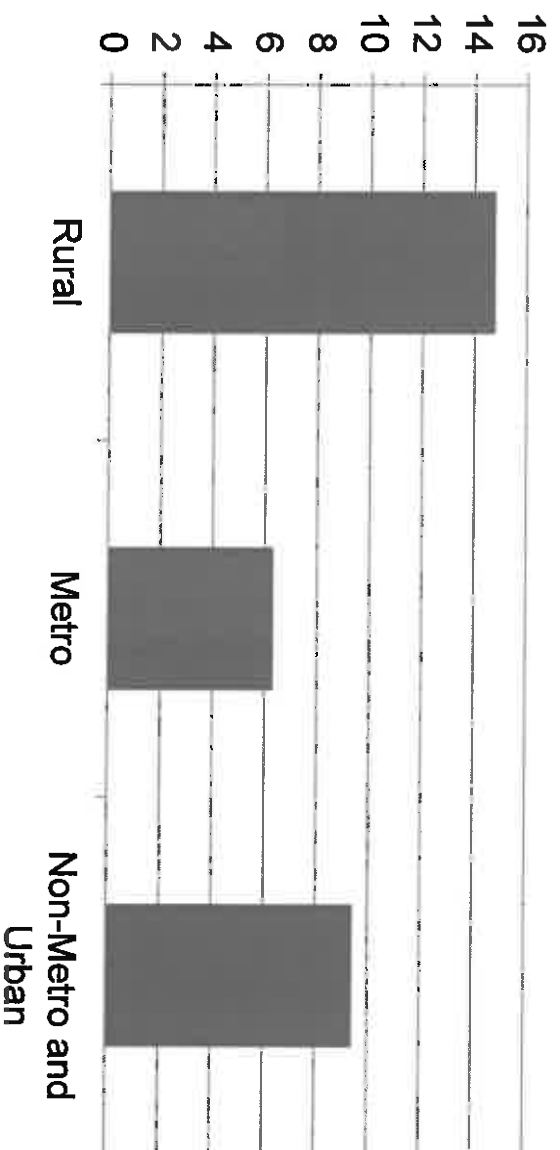
Percentage Teenagers ever Given Birth distributed over Racial Categories*

Provincial Disparities



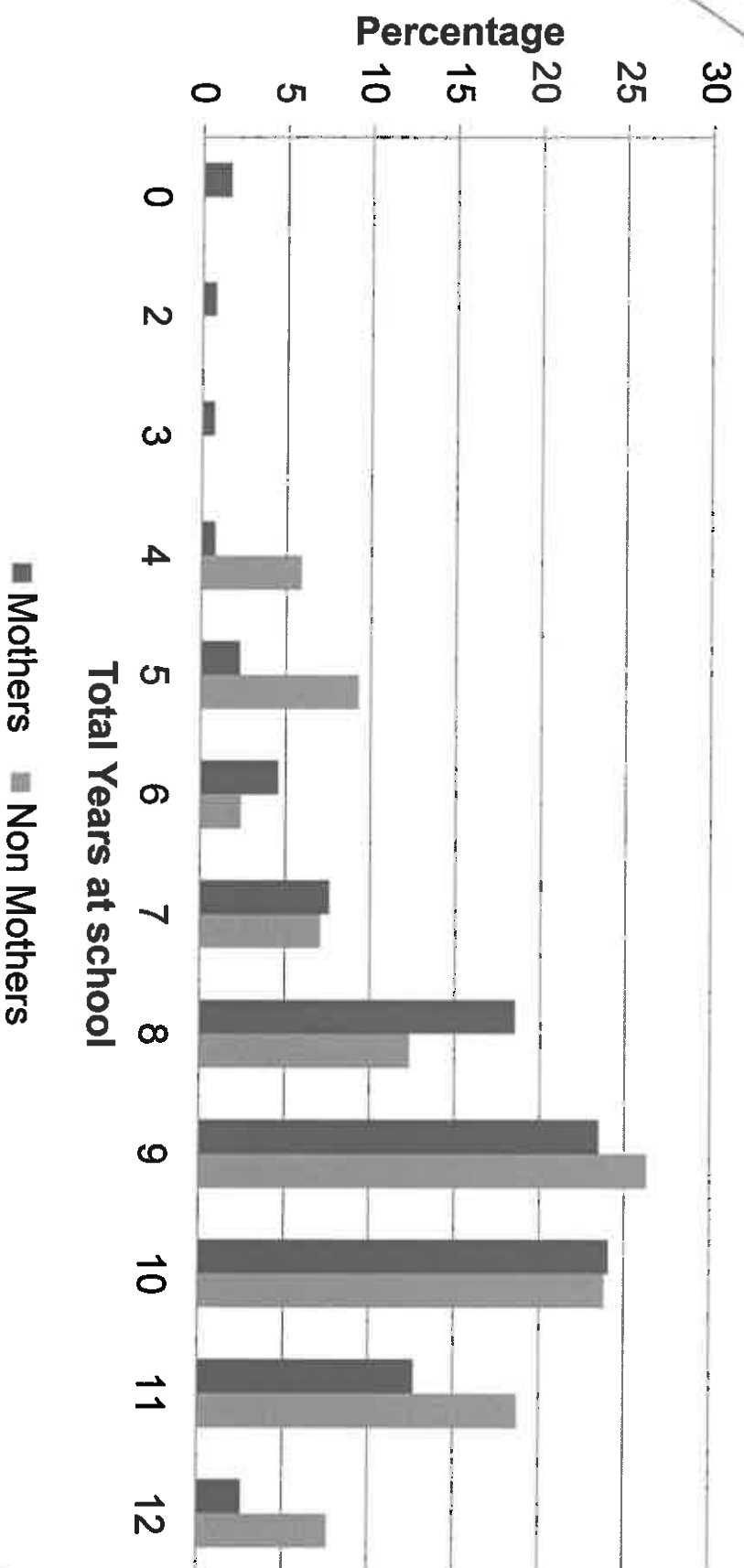
Percentage Teenagers ever given birth distributed over Province*

Residential Disparities



Percentage Distribution of Mothers over Place of Residence

Possible Implication



Comparison of Mothers and Non-mothers aged 15-19 by Years of Schooling

Possible Implication (2)

Age Groups	Children given birth to but later died (Percentage)
>15	62
15-19	8

Table Showing Number of Child Mortalities by Age-Group

Right to the HIGHEST STANDARD of Health

- S. 27 SA Constitution, Art. 12 ICESCR, NSP 2007-2011
- Health-risks associated with teenage pregnancy and child-bearing
- Prevention – Family Planning
- Termination of Pregnancy (TOP)
- Ante-natal Care (incl. PMTCT)
- Rural teenagers

Right to an EDUCATION

- S. 29 of the Constitution
- Art. 13 & 14 of the ICESCR
- Everyone has a right to education and that education should contribute to the **full development** of the human personality.
- Return to School
- Quality of education received, including education on sexual and reproductive health
- Prevention
- Management

Concluding Remarks

- Prevention and Management
 - Participatory methodologies
 - Right to be free from all forms of violence
 - GENDER
- Return to 3 questions posed earlier:
 1. Has the State fulfilled its promises and obligations?
 2. What role has/should the State play in the prevention and management of teenage pregnancy?
 3. What does the response of the State reveal about SA's attempt to deal with the issues of and surrounding teenage pregnancy, including gender inequality?