



**The Plight of Teenage Girls Displaced
by the COVID-19 Pandemic in Namibia
A Critical Review**

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Abstract

The phenomenon of teenage pregnancy has become a thorn in the flesh for many countries, including Namibia as many learners become pregnant while schooling. This study gives an exploratory analysis on the increased number of girls who were impregnated during lockdown. The key question of this paper is, what will happen to the future of these teenagers? Pregnancies among learners threaten, not only their human rights, but their health and social welfare and the health and welfare of the children born to them. These young females often terminate their education, and this has an implication for girls becoming uneducated and not being able to contribute to the socio-economic development of the country as their male counterparts. This practice may lead to a perpetual cycle of the culture of poverty in which

their children may further go on to become a teenage parent. Therefore, this critical review paper focuses on four main areas; firstly, presents plight of teenage pregnancy displayed by COVID-19 in Namibia. Secondly, depicts the ideas of learner pregnancy policy, and life skills education guidelines. Thirdly, reveals factors influencing teenage pregnancy in schools in Namibia, (rape culture.) Fourthly, unpack the implications of learners' teenage pregnancy (to human rights, health, socio-economic, psychological/mental health) to education, women and girls' empowerment agenda and socio-economic development. Lastly, the article concludes by unveiling strategies to mitigate the scourge (the fresh ways of dealing) with the plight of teenage pregnancy in this transforming society and point out some areas for further studies. The answers provided by theoretical analysis are not always definitive in nature, however, they might provide some insight into future phenomena.

Keywords: Teenager pregnancy, Life skills, gender-based violence, sexual abuse, girls' empowerment, girls' education

1. Introduction

Teenage pregnancy is a global concern as it affects both national and international communities. Teenage pregnancy refers to female adolescents becoming pregnant between the ages of 13-19 (Heerden-Petersen, 2015). According to the World Health Organization (WHO, 2020), it is estimated that at least 10 million unintended pregnancies occur each year among adolescent girls aged 15–19 years in the developing world. It has been reported to be one of the main issues in every health care system since early pregnancy can have harmful implications on girls' physical, psychological, economic and social status. In 2014 the World Health Organization reported that 11% of all births were due to women aged 15-19 years and approximately 95% of teenage pregnancies occur in developing countries (Indongo, 2020). Teenagers are young people aged between 10–19 years (Heerden-Petersen, 2015). During this period, an individual transform from childhood to adulthood and it is characterized by physical and psychological growth. Due to the physiological and psychological changes that take place, adolescents are interested in exploring the world around them, in which some become sexually active. This puts them at a risk of sexually transmitted infection (STIs) and pregnancy, as some young people may lack often adequate knowledge of safe sex.

In the context of Namibia, over the years, teenage pregnancy has been a thorn in the flesh of parents and educators and continues to be a societal concern. For instance, Matthys (2022) report revealed that, approximately, one in four girls in Namibia becomes pregnant before they

turn 20, as some 160 800 teenage pregnancies were recorded in the country from 2010 to 2022. In some years, the teenage pregnancy rate is higher than the rate at which learners advance to tertiary education. Further, Matthys (2022) states that from 2018 to 2021, teenage pregnancies stood at 56 300, while the number of Grade 12 learners who qualified for university stood at 37 480. The four Northern regions, that is; Ohangwena, Kavango East, Omusati and Oshikoto, are topping the most affected areas, highlighting the challenges girls in the country's most impoverished regions are confronted with.

In addition, Indongo (2020) revealed that the spatial distribution of teenage pregnancy is more prevalent in Kavango region with 15.6% followed by Ohangwena region with 11.6% and Oshana region with 3.4%. However, with the scourge of COVID-19, teenage pregnancy has escalated. Namibian schools were on lockdown from March to August in 2020 (a period of six months), due to COVID-19 pandemic. The lockdown had affected many aspects of life in the country and globally. For example, many people lost their lives due to COVID -19; some lost their jobs and livelihood as there was no movement whatsoever, except what was essential. This closure of schools had a catastrophic impact on the society. Ngatjiheue (2020) reported that 3323 schoolgirls were pregnant after COVID -19 lockdown.” Worrying statistics to that effect indicate that Three thousand three hundred and twenty-three school girls in Namibia became pregnant when schools were closed temporarily from March to August 2020. Such girls did not return to school when the schools reopened in September 2020, because of fear and stigma. Hako and Shipalanga (2022) assert that, information whether directly or indirectly attests to the importance of providing sexual and reproductive health and rights education to school-going adolescents in order to curb early and unplanned pregnancies and giving them a complete state of physical, mental and social well-being in all matters relating to the reproductive system.

In a period of 3 years, Namibia recorded a strangling increase of teenage pregnancy among young learners in Namibia’s schools. As a focus of this paper, with the emerging of COVID -19 pandemic, in 2020, different reports revealed the plight of girls during lockdown. Tafirenyika (2020) interviewing the Kavango East regional education director, Pontianus Musore states that:

“Some of the common reasons that we have observed in the region leading to the contribution of teenage pregnancies during Covid-19 could be that, most of the learners were lacking control and support at home. Teenage pregnancies among learners have a detrimental effect on their school attendance, academic performance, emotional behaviour and relationships between the pregnant girls and their

peers and educators. Boy learners are not that much involved in impregnating fellow learners because they do not have money” (Tafirenyika, 2020: 2).

Emerging from the above, teenage pregnancy among school going girls are not necessarily due to fellow learners, but predominantly, adult males from the community. This practice does not only obstruct the government’s efforts, especially from the ministry of education – with a recent introduction of Sexual Reproduction Health Education Program (SRHEP). Considering the fact that, Namibia, through the MoEAC has policies and guidelines addressing ways teenage pregnancy can be mitigated. Our argument is that, no development of any nation can be realised without sustainable education for all. The strangling numbers of girls battling pregnancies at a tender age are hindrances, which demands critical analysis. Therefore, this critical review paper focuses on four main areas; firstly, presents plight of teenage pregnancy displayed by COVID-19 in Namibia. Secondly, the depiction of learner pregnancy in policy documents and life skills education guidelines. Thirdly, some conclusions for the causes of increase in teenage pregnancy during lockdown. Fourthly, the paper concludes by unveiling strategies to mitigate the scourge (the fresh ways of dealing) with the plight of teenage pregnancy in this transforming society and point out some areas for further studies. The answers provided by theoretical analysis are not always definitive in nature, however, they might provide some insight into future phenomena.

3. Methodological considerations

The study adopted desk review as the methodology to analyse secondary data. The researchers sought to objectively and rationally review the relevant legislations, policies and programmes, as well as of recent literature and online data. The literature review further included published and newspapers articles, school reports, and Life Skills Education guidelines and curricula. Data were analysed qualitatively by using content analysis where only the main ideas of the key findings were considered. What follows is the analysis of Learner Pregnancy Policy and Life skills guidelines to understand how teenage pregnancy ought to be handled and prevented in schools, and how such living documents can be used to guide actions during and in post-COVID -19 pandemic lockdowns.

4. The Learner Pregnancy Policy in Namibia

The Cabinet of the Republic of Namibia approved the Education Sector Policy for the Prevention and Management of Learner Pregnancy (ESPPMLP) and directed the ministry of education to implement the policy with maximum urgency (MoE, 2009). This policy applies to all primary and

secondary schools in Namibia, public and private. The good intention of the policy is to improve on the previous policy of 2001 which in our views did not produce the intended outcome. The purpose of the current policy is to reduce and prevent teenagers from becoming early parents through support and increasing implementation of preventative guidance by the government and to combat social exclusion of teenage mothers. In addressing discrimination against the girl-child in schools, the Namibian education policy provides that a pregnant girl may continue with her education at school, until the time of her confinement, or an earlier date on the advice of a medical practitioner or clinic nurse.

4.1 The policy above gives a pregnant girl several opportunities or options and we summarized them as follows:

- a) The chance to remain in school while expecting
- b) The opportunity to return to the same school after twelve months (1 year) post- delivery.
- c) The opportunity to go to another school of her choice if there is a space
- d) The option to follow non – full time schooling.

The authors proceed to examine each of this opportunity in terms of the challenges that prohibit the fully implementation. The policy articulates very clearly what is required, in terms how pregnancy learners ought to be treated (MoE,2009; LAC, 2008).

- There should be at least one member of staff with whom the girl can discuss her situation. It should be known who the teacher is that will be prepared to discuss the matter sympathetically and non-judgmentally, and provide counselling or direct the girl to someone who will be able to provide counselling.
- The girl should be obliged to reveal the identity of the responsible male. She should be made aware of the consequences both of providing this information and of withholding it.
- The girl may continue with her education at school, until the time of her confinement or an earlier date on the advice of a medical practitioner or clinic sister. After giving birth, and provided that a social worker is satisfied that the infant will be cared for by a responsible adult the girl shall have the right of readmission to the same school within twelve months of date on which she left school, irrespective of her age.
- A girl who has left school because of pregnancy may write her end-of-year examinations provided that she can satisfy the school board that her work is up to standard.

- If she is a boarder in a government school hostel, she shall be entitled to continue in the hostel for the period that she is attending school under the same conditions as would have applied had she not fallen pregnant.
- These provisions are not intended as a form of punishment. They recognise that by becoming pregnant the girl has taken on other responsibilities which must be given due attention.

However, it appears that the awareness of the policy among teachers, parents, and learners is a piecemeal and its implementation is inconsistent. Some stakeholders, including parents, openly opposed Learner Pregnancy Policy because they felt it is too lenient and seems to promote early sexual debut and early pregnancies (Kapenda, 2012). Furthermore, while the policy considers keeping pregnant girls in school, it apparently does not pay much attention to the academic results of these learners, as most pregnant learners tend to perform poorly due to many factors. These learners have to cope with school and the big responsibilities that come with pregnancy and preparation for parenthood. Bullying and social discomfort in the school environment can also contribute to failure, which may cause them to repeat the grade or fail totally.

4.2 (a) Challenges for pregnant learner remaining in schools

The policy allows pregnant learners to continue with school until four weeks before delivery, and resume school after delivery, provided that they have a certificate of fitness by a health care worker (MoE, 2009). The possibility to continue schooling during pregnancy is a great opportunity, however pregnant girls face a lot fear, guilty, rejection and stigma. Nembwaya and Nghiinomenwa (2020) point out that “*Most of these girls did not return when schools reopened in September, because of fear and stigma, thus abruptly cutting their schoolyear short.* It is well-documented, that fear of the unknown is very high among pregnant girls. They worry about their future, health, babies, and parenting issues. Pregnant and parenting teenagers experience stigma in multiple sectors in society. They feel it at school, in medical offices and clinics, with social services, in the media and sometimes in the negative glares and even verbal assaults they receive in public.

The fact that one looks different from other learners will attract a lot of attention, labeling, stereotype, separation and discrimination. In addition, being pregnant while in school seems a confirmation of promiscuity. The true of the matter is that other learners might have been involved in similar entanglement but, they are viewed as saint just because they are not pregnant.

Furthermore, studying while pregnant is not easy and many at times the pregnant girls are expected to perform just like other non-pregnant learners in class. During pregnancy, one needs a lot of rest, however if you are pregnant and need to stay up to study for the test or exams that can be quite challenging. Teachers may have to adapt the way they teach, the way they assess, any uniform or dress codes. Teachers and administrators ought to be sympathetic and assist the pregnant girls more in order to give them courage to complete their education.

In a nutshell, a lot of efforts and campaign still need to be carried out to educate the public, schools and hospitals/clinics on the fear, guilty, rejection and stigma faced by pregnant/parenting girls. The negative strategies employed do produce and perpetuate stigma among teenage pregnancy and teenage parenthood that is harmful to these young parents, their children and the society at large.

4.3 (b) Learner-mother opportunity to return to the same school's post-delivery

The opportunity to return to the same school after twelve months (1 year) post-delivery has its own merits and demerits. Hamalwa (2022) reported that Oshikoto region recorded 1294 teenager pregnancy over the past three years, which only 749 girls have returned to school after giving birth while 545 have not returned. On the merit, the UN Convention on the Rights of the Child (UN,1994) urges governments, which are part of the Convention like Namibia to develop policies that allow learner parents to continue with their education. Some learner feels happy to be given a second opportunity to continue with their education, because such learner parents do not have to start from the beginning, but just continue, principal and life skill teacher/ counselor teacher, parents/guardians are already aware and involved, there is also a policy to guide the school on teenage parents.

The demerits are that some learners feel embarrassed and guilty that they do not want to face the teachers, principal and other learners, teenage parents are subjected to social ill of labeling, stereotype, separation and discrimination which they struggle to overcome daily. Most teenager parents are not privilege enough to either have someone to help throughout or to be in boarding schools. Some lack information and are not aware of the policy of returning after post-delivery. Other reasons such as socio-economic, age and lack of family support can prevent learners from returning after delivery. Hence, girls are still at risk of dropping out even if re-entry is an option since the school environment is frequently unfriendly and unsupportive. Many studies have shown that prenatal pregnancy hinders educational attainment. UNICEF (2016) study showed that most of the adolescents who drop out of school as a result of pregnancy fail to return to school, due to

financial constraints and stigma. Indongo (2022) indicates that studying and looking after the baby can be overwhelming for some and they end up dropping out. It is evident that adolescent pregnancy and subsequent parenting can create major obstacles to any learner's achievement in school. However, for young women already experiencing academic failure, or low levels of achievement, it can be devastating. The policy should have considered the effects that pregnancies can have on the academic performance of learners.

4.4 (c) Learner-mother opportunity to go to another school of her choice

The UN Convention on the Rights of the Child, article 12 stated *children have the right to give their opinion freely on issues that affect them and adult should listen and take children serious* (UNICEF, 2016). As per the above convention the teenagers have the right to choose another school of her choose without hindrance or denial.

The study on the assessment of re-entry policy for girls in six countries: the case of Namibia by Kapenda (2012), expressed differing views on the re-entry. Specifically, on the opportunity to get admission in another school. Some interviewed members felt that it was encouraging teenager pregnancy, some pessimists stated that it was wasting of time (the pleading question is this because these returning teenagers were not able to complete their education or was this a form of discrimination), some principals expressed that *they did not want to clean up other people's mess* (by implication it seems that was the previous school problem). In addition, most of these learners struggle to performance well as a result, other schools are not too keen to take them. Those who managed to successfully implement this opportunity were due to their family social economic status or had very enlighten principals or good performances. However, most learners end up dropping out because they do not have the necessary opportunity to go to the school of their choice. It would have been better if this transfer is done by the social workers/life skill teachers.

4.5 (d) The option to follow non–full time schooling.

The most viable option for teenager parents to continue with their education is distance education. Distance education, also called distance learning, is the education of learners who may not always be physically present at a school due to various constrains. Odimegwu and Mkwanzani (2016) state that internet technology has enabled many forms of distance learning through open educational resources and facilities such as e-learning. Odimegwu and Mkwanzani further assert distance education opportunities have proven to be effective as face-to-face learning programmes especially if the instructor is knowledgeable and skilled. However, most teenagers are

unable to afford these distance learning programmes due to social economic reasons. Unlike government schooling which is free, most distance education institutions require registration fees and they are privately owned in Namibia. Many teenager parents have no one to help them enroll in these abundantly available services. Some teenagers do not have the necessary skills to access the free online courses.

It's worth making the effort to continue with education, as it has many benefits for the teenager parents including job and financial security to be able to support themselves and their children. It also allows the teenager parents to connect with other people and feel less lonely. Schools must provide support to help young parents and pregnant teenagers to continue and complete their studies.

In conclusion, the revised policy of 2009, which is currently in force, shortened the period of staying at home after giving birth to a week or so. The learner is allowed to come back to school immediately after birth, provided that her condition is certified as good by a medical practitioner. The boy responsible for the pregnancy can remain at school, contrary to the provisions of the previous policy. Most importantly, although the policy articulated the procedures on how learners be treated once got pregnant, the policy is silent on the ways teenage pregnancy can be prevented, especially during lockdown. In the light of the above, the major gaps identified in Namibia's implementation of Learner Pregnancy Policy are as follows:

- Lack of comprehensive, nationwide Early Unplanned Programme;
- Lack of Adolescent Friendly Health Services (AFHS);
- Lack of Sufficient efforts to engage parent on Sexual Reproductive Health (SRH) for adolescents and young people; and
- Lack of standardized referral tools and procedures between schools and service providers

5.0 Life Skills Education Guidelines

Because of the personal and social demands made on learners, they are expected to develop life skills and get guidance and counselling when necessary. The Ministry of Education, Arts and Culture (MoEAC) (2016) directed that schools with 250 learners must have at least one teacher with training in and/or experience in life skills, guidance and counselling to ensure that school counselling programme is implemented at school level (MoEAC, 2016). Where this is not possible, a designated teacher should be given responsibility in the interim and go through in-service professional development in Life skills education and guidance and counselling approaches. In addition to the teaching of Life Skills education, the school must make time and space available for direct one-to-one or small-group counselling.

However, this directive has no significant importance in the implementation of Life skills education in Namibia as the situation in the regions is far from being realized and this paralyzed the functions of the Life skills teachers/teacher-counsellors. In the light of the above, there are schools in Namibia with less than 250 learners, but these schools are submerged with social, personal, and psychological problems. Now, one has to question which aspect is more vital than the other if we are to help the learners. Is it the number of learners per school (250) or is it the need that prevails on the ground?

Equally important, Namibia implements Comprehensive Sexuality Education (CSE) with an intention to curb early unplanned pregnancy amongst school going children. The different approaches used to teach sexuality in schools include class room sessions, boy's and girl's clubs and talk; counselling sessions; My Future is My Choice (MFMC); and the Window of Hope Programmes (UNESCO, 2018). CSE is taught to learners in Grades 4-7; however, there are some challenges with actual implementation as some teachers tend to prioritise promotional subjects, of which CSE is not. As a result, personal values and attitudes often negatively impact implementation of the intervention.

Nevertheless, the study of Hako and Bojuwoye (2019) found the majority of schools in the regions not to have enough trained human resources and essential materials for the implementation of life skills education and counselling services. This situation resulted in schools in disadvantaged communities like remote regions to under utilise the life skills and counselling programme and in return hindered the anticipated programme objectives.

On the other hand, Life skills education, has for a long time been handled by unprofessionally trained Life skills teachers thereby making it difficult for them to present quality Life Skills lessons and provide quality counselling services to learners in need (Hako & Bojuwoye, 2019). This arrangement could have stemmed from the Namibian premise that every teacher is a "guidance minded" and therefore expect every teacher in the county to carry out his/her functions with guidance aim.

Conversely, this arrangement has not yet yielded much anticipated positive results because of the Life skills/teacher-counsellors' inability to effectively address the psycho-social and academic needs of all learners. Although Life Skills teachers/ teacher-counsellor have attended workshops on basic counselling skills, which are conducted by Regional School Counsellors, they still lack critical counselling skills and techniques to handle counselling issues. For this reason, the Ministry of Education, Arts and Culture needs to take cognizant that Life skills education is a specialized field of education where teachers need to be trained in theory and practice of

counselling to be able to guide learners develop right attitudes and competencies, cope with educational, personal, social and career related problems.

In addition, institutions of teacher training should offer the course of basic counselling skills to all Life Skills Career specialization teachers in order to fulfill the motto of "*every teacher is life skills teacher*". Thus, appointing untrained Life skills/teacher-counsellors to teach Life skills subjects and provide counselling services to learners in Namibia is the main hindrance to effective implementation of the Life skills education in schools.

6.0 Factors influencing teenage pregnancy during COVID -19 Lockdown in Namibia

A wide spectrum of literature and study findings have been documented worldwide regarding adolescents' sexual behaviour and the various causes of teenage pregnancies (UNESCO, 2018; Indongo, 2020; Heerden-Petersen, 2015; Odimegwu & Mkwanzani, 2016; Wado, Sully & Mumah, 2019). In Namibian, for example, some cultures, customs and traditions lead to early marriage which would, therefore, lead to early pregnancy (Heerden-Petersen, 2015). In these cases, pregnancy is acceptable and is most often intentional; however, teenage pregnancy is most often unintentional and due to a variety of different reasons. Factors which can lead to early pregnancy include peer pressure, "sugar daddy" relationships, lack of parental love and guidance, failure of parents to discuss sex with their children, lack of recreational activities for youth and alcohol abuse. Some of these factors are discussed below:

6.1 Not going to school (being idle)

During lockdown because of restrictions of movement, many children could not cope with idleness. It is arguably that going to school helps to keep children busy for the most part of the day. Staying home was very straining and some youth had nothing to do rather than to experiment with alcohol, drugs and sex. Also, many adults were no longer going to work, so they mostly engage youth in games including sex.

Teenagers, however, do not realize the impacts alcohol and drugs have on the functioning of their brain, especially the effects of binge drinking which is consuming large amounts of alcohol during one sitting. Drinking excessively as well as experimenting drugs may lead to unwanted and unintentional pregnancy. These substances greatly affect a teens ability to logically think logically and carry out general thinking processes, thus increases the chances they will engage in unprotected and unsafe sexual activity (Heerden-Petersen, 2015).

6.2 The socio–economic factors and Poverty

Many scholars reported that teens who become pregnant often come from families of low socio-economic status. For example, Nekongo-Nielsen and Mbukusa (2013) have cited poverty as one of the reasons that drive young girls to have sexual relationships with older men often referred to as “sugar daddies” for material gains, thereby putting themselves at risk of unwanted pregnancies.

Cementing the aspect of poverty and socio-economic factors, at the recent national launch of the United Nations Population Fund flagship 2022 State of World Population Report at Rundu, Rivaldo Kavanga, the deputy director of the Ministry of Education, Arts and Culture in the Kavango East region and, chairperson of the Health Committee of the Children’s Parliament in Namibia, exposed that,

“Poverty has pushed parents to prompt their teenage daughters to have babies, so that they can become beneficiaries of the teenage mothers’ grant. Teenage pregnancies are exacerbated by school-going girls who are forced, by poverty, to have transactional sex to meet their basic needs. For many adolescent girls, constituting the 1,6 million Namibians marginalised by poverty, teenage pregnancies are inevitable. Namibia also continues to face an ample number of challenges, while mitigating the teenage pregnancy crisis. Efforts by the government and civil society organisations (CSOs) are commendable, but more needs to be done” (UNFPA/Namibia, 2022).

6.3 Peer Pressure and Sexual Abuse/Violence/Exploitation

Peer pressure is another major cause of sexual abuse, often females may be pressured or forced by an older male partner to engage in sexual activity. These young females out of fear, may feel forced to engage in unprotected sex with an older man driven by peer pressure. In in 2021, Hamalwa of the New Era Newspaper, in an interview with the education director in Ohangwena, Isak Hamatwi, said that:

“The number is huge as the majority of the culprits involved in impregnating learners are cattle herders, taxi drivers, police officers and ‘sugar daddies. These are the people who have cash instantly available. Some parents encourage their daughters to fall pregnant for economic reasons, to have grandchildren, and also to receive bribery from the cattle herders or cuca shop owners. The sad revelation of the dialogue is that the culprits tend to force the girls to have unprotected sex for the reason that they are paying for the sex. To that end, many girls do not have any choice but to give in, and learner pregnancies remain on the rise that even primary school girls are not spared” (Hamalwa, 2022).

The study of Indongo (2020) found that teenage pregnancy was mostly caused by peer pressure, older friends with children, poor education knowledge, fear of rejection and desire for government social grant. Another key point is sexual abuse is also another reason why teens may become pregnant. Some children have unfortunately been sexually abused by predators or family even before entering puberty. Early sexual abuse has been linked to later teen pregnancies (Heerden-Petersen, 2015). These young children often are unable to inform a trusted adult about the situation due to fear of being harmed by their predator. These situations, further exacerbate the life of the children as they enter adolescence and increase chances of teenage pregnancy.

6.4 Media Influence/ Communication means

While schools were on lockdown, mostly resulted in remote schooling (teaching both virtually and remotely - distributed materials for self-learning, or engaging via WhatsApp, etc.). In Namibia, this led students and teachers to be catapulted into virtual teaching and learning situations with the majority of them having no preparation for this shift. With the impact of COVID -19 pandemic on education, using online electronic media had become a means of education and it is very difficult to detect what teenagers do with their electronics media gadgets. Parents/guardians are left feeling helpless on how to control what their teenagers do with the most sought out necessity of electronics communication. It is during this period when learners, especially, girls, who fall part of the risk. Most teenage have access to cellphones, computers, televisions and radios communication. It is widely reported that satellite communication contributes to teenage pregnancy (Odimegwu & Mkwanzani, 2016). Odimegwu and Mkwanzani further alluded that teenagers are constantly exposed to sexual images and massages through media communications and some are even addicted to such messages and images without any parental directions or guidance (Odimegwu & Mkwanzani, 2016). It is a hard truth that a lot of music and movies that teenagers listen to and watch are about sex or about sexual intimacy /intercourse.

In view of the above, the media has a large effect on teenage pregnancy, especially during lockdown because of restricted movements and the demand for people to use mostly information communication technology and some teenage spent a lot of time watching TV and listening to music. This led to many teenage girls to sleep with men just to be given a cellphone or to get money to buy a cellphone, even if it is just "cam touch" which lead to the increase in teenage pregnancy during lockdown.

Some television shows such as "Teen Mom" and "16 and Pregnant"(Heerden-Petersen, 2015). These shows often glamorize pregnancy

and hide the true hardships associated with pregnancy which encourages these teens to become pregnant. Some teenage females become pregnant just so they can drop out of school or force their partners into a deeper commitment. These televisions glorify the idea of having a child through the promotion of these teenagers having a more adult lifestyle, with more responsibility and decision-making power.

7.0 Strategies to mitigate the scourge of Teenage Pregnancy in Namibia's Schools

7.1 Sexual Health Reproductive Programme (SHRP)

Sexual and reproductive health and rights are critical entitlements best supported through human rights-based approaches empowering rights-holders to claim their rights and duty bearers to fulfil their obligations. McGranahan et al. (2021) believe that every person is entitled to good sexual and reproductive health. This involves being free from sexually transmitted infections, gender-based violence and maternal mortality, and being able to access essential health services. For this reason, after independence in 1990, Namibia adopted the World Health Organization's Health Promoting

School Initiative (HPSI). HPSI's adoption aimed to deliver on the Vision 2030 goal of ensuring equity and access to quality education for all Namibians, especially young people (MoHSS, 2015).

Namibia's School Health Programme furthermore complements the Eastern and Southern African (ESA) Commitment on Comprehensive Sexuality Education and Sexual and Reproductive Health and Rights. Such initiative strives for improved access to quality sexuality education and reproductive health services for all young people. In other words, schools are to ensure that learners are educated about the benefits and risks of engaging in early sexual activities, appropriate use of contraceptives, rights to free and informed choice in respect of sexual matters, and health care information. To attain that, it was then expected for each school to have a comprehensive plan focused on comprehensive sexuality education, teenage pregnancy prevention, and to empower a girl child to develop decision making skills, resiliency and coping skills.

Empowerment is a process of awareness and capacity building that leads to greater participation, decision-making power, and transformative action. There are different types of empowerments that include educational, economic, policy, and community support. In this review, we define empowerment for adolescent girls to include community, educational, economic, and policy support. Through empowerment, adolescents and women are equipped with knowledge and skills which enable them to make informed choices and take control of decisions that affect many aspects of their daily lives, including sexual and reproductive health. Thus, efforts that

empower adolescents are crucial in reducing adverse sexual and reproductive outcomes such as adolescent pregnancies.

7.2 Family and Peer Support

Teenage mothers can increase their resilience by having the support of their parents as well as maintaining social relations with their peers. Having those connections throughout your pregnancy and after as well as having all of that support greatly influences the mothers' attitude and adaptation to her new role in life (WHO, 2020). Furthermore, another protective factor which increases teenage mother resiliency is if teenage mother returning to school after giving birth rather than dropping out, they will be kept busy by school work as well as intermingling with other peers (MoE, 2010). Such practice will prevent them engaged in dangerous activities such as sex and drugs or hanging out with the wrong people. They will have a hope to finish schooling and have a future. The overall most important factor is the teenage mother having the support of her mother (Indongo (2020). The mother of the teen can be extremely helpful in terms of emotional support for her daughter as well as financial aid and helping her daughter with child-rearing responsibilities of the new born.

7.3 Education and knowledge

Education is one of the strongest predictors of health status; the more schooling people have the better their health is likely to be and the longer the life expectancy (Freudenberg & Ruglism, 2007). From a young age, young children and adolescents must have a reliable and trustworthy adult to confide in. Having an approachable and knowledgeable role model or adult in your life will greatly decrease the chances of teen pregnancy. Parents often neglect explaining the anatomy of the body to their children, however, it is documented that providing this information and educating children during their youth is an extremely important protective factor against teen pregnancy (WHO, 2020; UNICEF, 2016).

Further, they need unconditional love and support from their parents as it is critical in ensuring the child to make better choices about their future sexual activity. Having love from one's parents ensures that these adolescents are not left feeling unwanted and uninvolved. Moreover, developing a strong relationship and having an open communication between child and parent is critical as these children are more likely to ask for help in times of crisis.

7.4 Ubuntu- “We” culture practices and creation of Safe Havens

Previously, African traditions had a way of bringing up children in their communities. Nowadays, the upbringing of a child in the village is entirely up to the parents and this has made the proper upbringings of

children in the villages and communities cumbersome or problematic, especially to the young mothers. The African slogan: “It takes a village to raise/educate a child” goes one of the African adages. It is highly recommended to revive this type of cultural value in our communities as a strategy to support teen mothers.

Despite all the good intervention policies that are in place, the problem persists! Ubuntu entails recognizing our humaneness in the children and culprits. And that, “*I am because we are*”, in Mbiti’s words (Shanyanana & Cross, 2014) as a nation and equal human beings. Through Ubuntu (Uuntu), parents, teachers and learners could be requested to avail time to support teen parents during pregnancy and afterwards to ensure they successfully complete their studies.

Secondly, that men, mostly adults that are reported to have been culprits in impregnating these children could change their mindsets and allow girls, the future leaders complete their studies without any hindrance. Lastly, policy makers and relevant ministries (Education, Health, Education and Safety and Security) could amend policies addressing teenage pregnancy to include steps in confronting culprits and strategies of mitigating teenage pregnancy during lockdown and beyond.

Recommendations

For proper implementation of Learner Pregnancy Policy, it is recommended for Namibia to:

- Strengthen Adolescents Friendly Health Services (AFHS) by training more service providers;
- Rebrand Comprehensive Sexuality Education (CSE) as a promotional subject;
- Provide Sexual Reproductive health (SRH) services at times convenient to learners;
- Use social media to appeal to young people with SRH messaging;
- Develop SRH referral tools and Standard Operating Procedures (SOP) to improve linkages between schools and services;
- Involve key stakeholders such as parents, traditional and religious leaders, other community gatekeepers, as well as adolescent girls and boys in designing and implementing a national Learner Pregnancy Policy (UNESCO, 2018).
- Parents/guardians, teachers, community members should communicate more often about the importance and dangers of using media communication especial electronics communication as there are a lot of uncommission information out there.

- Strengthen parental/guardians' relationship with their teens and improve communications to understand what the child thinking or feelings
- Watch movies together with teenagers and discuss to raise awareness
- Increase on campaign on teenage communication on sexual and reproductive health issues
- Communicate strategies on teenage pregnancy and support
- Spur funding and increase sexual education campaign
- Create youth communication centers throughout the communities
- Encourage and sponsor musicians to come up with sexual education music
- Strength life skills training and provide schools with qualify life skills teachers
- Examining sexual exploitations and abuse among young school going girls and boys

Future research directions

Although several studies on teenage pregnancies were conducted around the world, some of the interventions seem not to bear fruits as expected. Therefore, the study by Kinemia and Mugambi (2016) on social media and teenage pregnancy in Kenya is very interesting and worth echoing. Thus, future researchers in Namibia may investigate how:

- the social media significantly influenced teenage sex
- media usage by teenage at home and at school
- the material students looked for using electronic media
- mobile phones ownership and usage
- the types of music and the frequency of listening to sexually explicit music on mobile phones
- the type of sex texting messages teenage send and overall teenage activities using the internet

Conclusion

The study presents the plight of teenage pregnancy in Namibia that has become a great alarm for families. The paper discussed the policy and life skills education guideline responsive to teenage pregnancy and factors and experiences of schools on implementation of the policy, issues of safety of learners and their right to access sustainable education and empowerment, and finally recommend the amendment of the learner policy to include suitable ways to address teenage pregnancy during and in the post-Covid-19 pandemic. The fundamental issue raised is the improper implementation of general policy and legislation, despite their availability in the nation. To

lower the nation's pregnancy rate, more education and awareness campaigns, more staff, improved accountability, and better coordination are required.

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References:

1. Freudenberg, N., & Ruglis, J. (2007). Reframing school dropout as a public health issue. *Prev Chronic Dis.* 4(4): A107. Epub PMID: 17875251; PMCID: PMC2099272.
2. Hako, A.N., & Bojuwoye, O. (2019). Experiences of Stakeholders on the School Counselling Services in the Ohangwena Region of Namibia. *European Journal of Educational Sciences*, 6, (1), 1-21. Doi:10.1019044/ejes/.v6no1a1.
3. Hako, A.N., & Shipalanga, P.D. (2022). Exploring Innovative Teaching Approaches to Adolescents' Sexual and Reproductive Health and Rights Education During the COVID-19 Pandemic in Oluno Circuit, Oshana Region of Namibia. *European Journal of Educational Sciences*.9, (2), 44-60 Doi:10.19044/ejes.v9no2a44 URL: <http://dx.doi.org/10.19044/ejes.v9no2a44>
4. Hamalwa, F. (2022). Namibia: Oshikoto records huge number of teen pregnancies. *New Era*, 26 January:1
5. Heerden-Petersen, E. (2015). *Life Skills: My Journey, My Destiny* (second edition). Van Schaik Publishers: Pretoria.
6. Indongo, N. (2020). Analysis of Factors Influencing Teenage Pregnancy in Namibia. *Medical Research Archives*, [S.l.], v. 8, n. 6, ISSN 2375-1924. Available at: <<https://esmed.org/MRA/mra/article/view/2102>>. Date accessed: 06 Aug. 2022. doi: <https://doi.org/10.18103/mra.v8i6.2102>.
7. Kapenda, H. M. (2012) The case of Namibia. [https //Fawena. Org](https://Fawena.Org) >resources retrieved on 20 June 2022.
8. Kinemia, K., A., & Mugambi, M. M. (2016). Social Media and Teenage Pregnancy among students in Secondary Schools in Imenti North Sub-County, Meru County, Kenya [www. Ijsrm. in](http://www.Ijsrm.in) >article >view retrieved, 5 July 2022.
9. Legal Advice Center [LAC]. (2008). School Policy on Learner Pregnancy in Namibia www.lac.org.na >pdf retrieved, 07 June 2022.

10. Matthys, D. (2022). 160 800 teen pregnancies since 2010, The Namibian Newspaper, News National | 2022-07-16.
11. Accessed: <https://www.namibian.com.na/114254/read/160-800-teen-pregnancies-since-2010#:~:text=ABOUT%20one%20in%20four%20girls,pupils%20advance%20to%20tertiary%20education.08/08/2022>.
12. McGranahan, M., Bruno-McClung, E., Nakyeyune, J. et al. (2021). Realising sexual and reproductive health and rights of adolescent girls and young women living in slums in Uganda: a qualitative study. *Reprod Health* 18, 125 <https://doi.org/10.1186/s12978-021-01174-z>.
13. Ministry of Education (2009). Education Sector Policy for the Prevention and Management of Learner Pregnancy. Windhoek: Government of the Republic of Namibia.
14. Ministry of Health and Social Services (MoHSS) (2015). Guidelines for the prevention of mother to-child transmission of HIV. Windhoek: Namibia.
15. Ministry of Education, Arts and Culture (2016). The National Curriculum for Basic Education: National Institute for Educational Development (NIED), Okahandja Namibia.
16. Ministry of Education. (2010). The National Curriculum for Basic Education, Windhoek: Namibia.
17. Nekongo-Nielsen, H. & Mbukusa, N. (2013) The Educational consequences of teenage pregnancy in Kavango region: *Studies in Humanities and Social Sciences*; 2, 2016-7215.
18. Nembwaya, H., & Nghiiinomenwa, E. (2020). 3300 schoolgirls pregnant after COVID lockdown. (The Namibian Newspaper, 2020-11-20). Accessed: <https://www.namibian.com.na/206504/archive-read/3-300-schoolgirls-pregnant-after-Covid-lockdown07/06/2022>
19. Ngatjiheue, C. (2021, October 21). Ministry psychologist speaks on teenage pregnancy. Recovered from: <https://www.namibian.com.na/106555/read/Ministry-psychologist-speaks-on-teenage-pregnancy>.
20. Odimegwu, C., & Mkwanzani, S. (2016). Factors Associated with Teen Pregnancy in sub-Saharan Africa: A Multi-Country Cross Sectional Study. *African Journal of Reproductive Health, (Special Edition)*; 20(3): 94.
21. Shanyanana, R.N., & Cross, M. (2014). Active participation in Namibia's democratic education system: challenges for the girl child. *Southern African Review of Education with Education with Production*, 20, 26-40.

22. Tafirenyika, T. (2020). Teenage pregnancy spike during lockdown. *Confidante Newspaper*, October, 8, 2020. Accessed: <https://confidentenamibia.com/teenage-pregnancies-spike-during-lockdown>, 09/08/2022.
23. UNESCO (2018). *Situational Analysis on early and unintended pregnancy in Eastern and Southern Africa*. February 2018. Paris: France.
24. UNFPA/Namibia (2022). *Seeing the Unseen*. Opinion Editorial during moderation of an Intergenerational dialogue on unintended pregnancies in Namibia during the launch of the 2022 State of World Population report on World Population Day, 11 July 2022 in Rundu, Kavango East Region. Accessed: <https://namibia.unfpa.org/en/news/seeing-unseen>, 09/08/2022.
25. UNICEF (2016). UNICEF's written submission to the Committee on the Rights of the Child for the Day of General Discussion on 'Children's Rights and the Environment', 23 September, 20/06/2022.
26. The United Nations (1994). *Convention on the Rights of the Child: Background and Policy Issues*. Updated: December 6, 2022. <https://www.refworld.org/pdfid/4d19fa2327f.pdf>
27. Wado, Y.D., Sully, E.A., & Mumah. J.N. (2019) Pregnancy and early motherhood among adolescents in five East African countries: a multi-level analysis of risk and protective factors. *BMC Pregnancy and Childbirth*, 19:59.
28. World Health Organizations (2020). Adolescent pregnancy. <https://www.who.int/news-room/fact-sheets/detail/adolescent-pregnancy>. <https://apps.who.int/iris/bitstream/handle/10665/329883/WHO-RHR-19.15-eng.pdf>.