

## Experiences and Coping Strategies of School Going Breastfeeding Adolescents from Katima-Mulilo and Sesheke Secondary Schools in Sesheke district, Western Province of Zambia

Mooto Mutakatala<sup>1)</sup>, Marjorie Kabinga Makukula<sup>2)</sup>, Brenda Sianchapa<sup>3)</sup>

<sup>1)</sup>Master of Science in Midwifery Women and Child Health,  
Faculty of Midwifery, University of Zambia, Lusaka, Zambia

<sup>2)</sup>Department of Basic and Clinical Nursing, University of Zambia

<sup>3)</sup>Department of Midwifery Women and Child Health, University of Zambia

Received: 19 March 2023; Accepted: 25 April, 2023; Available online: 16 May, 2023

### ABSTRACT

**Background:** The re-entry policy was introduced in Zambia in 1997 to allow pregnant girls to continue their education. However, the increase in dropout rates among re-entered adolescents has become a significant concern in schools, so it is necessary to explore and understand the lived experiences of school-going breastfeeding adolescents. The re-entry policy needs to be revised to protect the school-going breastfeeding adolescent (SGBA) from the challenges related to mothering while schooling. The study aimed to explore the experiences and coping strategies of SGBA in Secondary Schools of Western Province in Zambia.

**Subjects and Method:** The study employed a descriptive phenomenology design—the research sample comprised sixteen (16) participants. Fourteen (14) girls re-entered after maternity leave. Nine (9) from Sesheke and five from Katima-Mulilo secondary schools, including two (2) guidance teachers, one (1) from each school. A purposive sampling technique without maximum variation was used. Data generation was through in-depth, semi-structured interview guides and which were audio recorded. In addition, the data underwent manual and Microsoft word coding accompanied by Nvivo version 11 and thematic analysis.

**Results:** The findings revealed that breastfeeding school-going breastfeeding adolescents experienced many challenges in pursuing and completing their school. The challenges ranged from combining roles of schooling and mothering, financial challenges, stigma and discrimination, poor academic performance and lack of breastfeeding space within school premises, including minimal and lack of support from peers and school authority.

**Conclusion:** The data shows the numerous challenges faced by breastfeeding adolescents. Therefore, the Ministry of Education, schools, parents and other stakeholders should review and amend the re-entry policy to enable it to respond to girls' needs to improve their stay in school and performance.

**Keywords:** Coping Strategies, Breastfeeding, Adolescents, Experiences, School-going.

### Correspondence:

Mooto Mutakatala. Department of Midwifery Women and Child Health, Faculty of Midwifery, University of Zambia, Lusaka, School of Nursing Sciences P O BOX 50110. Email: mootomutakatala@gmail.com. Mobile:+26 0977502912.

### Cite this as:

Mutakatala M, Makukula MK, Sianchapa B (2023). Experiences and Coping Strategies of School Going Breastfeeding Adolescents from Katima-Mulilo and Sesheke Secondary Schools in Sesheke district, Western Province of Zambia. *J Matern Child Health*. 08(03): 370-381. <https://doi.org/10.26911/thejmch.2023.08.03.12>.



© Mooto Mutakatala. Published by Master's Program of Public Health, Universitas Sebelas Maret, Surakarta. This open-access article is distributed under the terms of the [Creative Commons](https://creativecommons.org/licenses/by/4.0/)

[Attribution 4.0 International \(CC BY 4.0\)](#). Re-use is permitted for any purpose, provided attribution is given to the author and the source is cited.

## BACKGROUND

Early motherhood has shown a steady increase, as confirmed by available statistics. This trend is seen both in developed and developing countries. For instance, approximately 16 million teenage girls become mothers yearly Gyan (2013), most of them from economically disadvantaged settings (Konadu Gyesaw and Ankomah, 2013). In addition, the prevalence of adolescent pregnancy in the Sub-Saharan African region is estimated at 19.3% (Kassa et al., 2018).

In 2014, the estimated number of teen pregnancies was 15,000 among enrolled girls per year (Ministry of Education, 2014). To this confounding adolescent pregnancy rate, only 50 per cent of girls who become pregnant return to school (Raqib S, 2018). School-Going Breastfeeding Adolescents (SGBA) most often find themselves undertaking roles of motherhood and pupils at home and school, which can stress these adolescents and affect their schoolwork.

Studies on the school re-entry policy have reported that teen mothers who re-enter school have faced many challenges despite the policy (Sitali, 2011; Mweemba, 2014). School-going breastfeeding adolescents have needs that are unique to the developmental stages of adolescence, especially when faced with challenging situations demanding coping. For example, Pogoy (2014) states that in the Philippines, teen mothers were being discriminated against by their peers, making some quit school. Another survey conducted in China by Erfina et al. (2019) revealed that teen mothers experienced sleepless nights thinking of what to do about their situation. Further, stigmatization and discrimination were among the sources of stress experienced by school-going breastfeeding adoles-

cents. Mwanza (2018) further noted that the girls experienced stress due to a lack of school, home, and community support.

Teen mothers need to develop coping strategies to pull through this unplanned event. Maluwa-Banda (2004) defined coping strategies as behaviours individuals use to avoid, relieve, or react to a traumatic situation. For example, according to (Labrague et al., 2017), an emotion-focused approach like wanting to abort is one of the strategies used to cope with challenging situations. In addition, a study conducted in the United States of America by (Bityutskaya and Korneev, 2021) revealed that self-blame and wishful thinking were among the critical coping strategies.

The Zambian breastfeeding policy emphasises the need to protect, promote and support breastfeeding (Ministry of Health, 2015). This policy entails that implementation should be anywhere a breastfeeding mother is found, whether at work, school, or college. It further states that successful breastfeeding depends on factors like social support from family, friends, and peers.

## SUBJECTS AND METHOD

### 1. Study design

The research study employed a descriptive phenomenology design to emphasise the meaning of an individual's perceptions, feelings, and lived experiences to understand the phenomena clearly.

### 2. Population and Sample

It comprised sixteen (16) participants. Fourteen (14) girls re-entered after maternity leave. Nine (9) from Sesheke and five from Katima-Mulilo secondary schools, including two (2) guidance teachers, one (1) from each school. A purposive sampling technique without maximum variation.

### 3. Study Instruments

The instrument used in collecting research data was an in-depth semi-structured interview guide using a tape recorder.

### 4. Data Analysis

Used in-depth, semi-structured interview guides. For analysis, Microsoft word software accompanied by Nvivo version 11 was adopted to check for frequency or omission of identified items/ themes. Transcribed data were coded and then grouped into themes allocated to different objectives under study. The emerging themes and subthemes were then analysed and interpreted decisively.

### 5. Research Ethics

Research ethical issues, including informed consent and assent, anonymity and confidentiality, were addressed carefully during the study. The research ethical clearance approval letter was obtained from the UNZA Biomedical Research Ethics Committee and National Health Research Authority Ref NHRA 00020/06/01/22 on January 06, 2022.

## RESULTS

### 1. Sample Characteristics

In this study, a total of fourteen (14) adolescent breastfeeding mothers, nine (9) from Sesheke secondary school, five (5) from Katima secondary schools, and one (1) teacher from each school. During data analysis, three themes and nine sub-themes emerged. The three themes are breastfeed-

ing and schooling, an emotional undertaking, the support given to breastfeeding adolescents, and adjusting to the new reality.

### Breastfeeding and schooling an emotional undertaking

Participants expressed that the process of breastfeeding and schooling is an emotional undertaking. They reported how bad it felt to leave their babies with others when they went to school because they had to conform to the bitter change. Therefore, the theme has three subthemes, namely: (a) Mothering and schooling, (b) Academic performance, and (c) Divided attention at school.

All Participants confirmed having faced challenges when combining mothering and schooling. They reported that the time of separation with their babies was too long. In most cases, they would find their babies crying when returning from school as they miss the love and care of their mother. Below is an extract from the views with L5, a participant from Sesheke Secondary:

“..... the challenge I used to find is that I had to be leaving my baby with my neighbours and only to come back home around 14 hours or at times when I attend prep at 16 Hours..... (L5, Interview, February 2022).

However, the school-going breastfeeding adolescent desires to forge ahead and complete their education because of the numerous benefits afterwards.

**Table 1. Perception of participants on mothering and schooling**

| Major Theme  | Sub-theme                   | Key statement  |
|--|-----------------------------|--|
| Breastfeeding and schooling an emotional undertaking | Mothering and schooling     | Difficult to find somebody to remain with the baby while at school                             |
|  | Academic performance        | Divided time between the baby and schoolwork   |
|  | Divided attention at school | Thinking of baby while at school<br>Miss class in the afternoon to rush to breastfeed the baby |
| Support given to the breastfeeding schoolgirl        | Family support              | Influential support from the mother<br>No support from the father of the baby                  |
|  | Support from the school     | Poor support from the school   |

| Major Theme                  | Sub-theme          | Key statement  |
|------------------------------|--------------------|--|
|                              |                    | Stigma and discrimination from peers   |
| Adjusting to the new reality | Support from peers |  |
|                              | Keeping busy       | Being involved in income-generating Income   |
|                              | Time management    | Study after-home chores and baby sleeping  |
|                              | Ignoring           | Isolate oneself and concentrate on the baby<br>No formal counselling for re-entering girls |

Most of the girls acknowledged that academic performance was affected by mothering after re-entry to school. The long maternity breaks the girls undergo affect their academic performance. Participants confirmed that no formal re-entry orientation is given to the girls when they return to school after giving birth. Lack of re-orientation makes it challenging to catch up with lessons, and worse still, at this level of learning, their study groups are not prominent, and the schools need modules to help the girls catch up.

**L11 narrated her experience and said, “..... my performance is poor, the reason being that I do not have enough time to study because of the concentration on the baby.....no time to study because when the child cries, at that moment, I stop studying.....” (L11, Interview, February 2022).**

Affirming this, the guidance teacher (TRK) put it as follows:

.....” It usually becomes a challenge when the girl misses’ lessons-even when she gets the notes without explanation; comprehension does not take place”.....” the other challenge is that at this level, the learners do not have study groups and even modules”..... (TRK, Interview, February 2022)

After missing classes for six (6) months or more, breastfeeding girls find it challenging to catch up with lessons lost. This situation has affected the academic performance of

most of the interviewed girls.

The research established that the girls experienced divided time between schooling and breastfeeding their babies. Most of them narrated that the caretakers had been randomly bringing the babies to school mainly because they were crying or sick. In this case, all the attention shifts to the baby, and she loses out on academic lessons. In addition, concentrating at home is the trickiest situation because it usually involves caring for the baby, doing house chores, and studying. L3 said caring for the baby and studying cannot be done simultaneously. She summed up her feeling and experience as tabulated below:

**L3 .....”If the baby starts crying while studying,” I immediately stop and care for the baby before I continue.” “In the process, I lose concentration “..... “it is difficult to study at home because the baby would like my 100% concentration” (L3, Interview, February 2022)**

Abandoning schoolwork was the only alternative when the baby cried and as it wanted attention from the mother. To confirm this assertion, L9 went on and narrated that:

..... “Many times, I have to stay away from school because no one is willing to stay with my baby” .....” (L9, Interview, February 2022).

Due to multi-tasking, participants feel stressed due to limited time to care for their

children and prepare for schoolwork 19. In most cases, they perform their roles as mothers by taking the child to under five clinics and attending to other house chores at the expense of schoolwork (Maynard, 1999, as cited in Mweemba G M, 2014). Most interviewees revealed they needed help balancing school needs and home chores, including their obligations.

### **Support given to breastfeeding adolescents**

This theme will report on the various elements that emerged under the following sub-themes: support from family, support from the school, and support from peers.

Most participants confirmed that support was more from the parents than from any other segment of society. The support given to the girls was in the form of caring for the baby when the girls were at school, finances to buy milk, soap, and diapers, counselling, and emotional support. However, most of them indicated no help from the baby's father. For example, L6, one of the girls informed the researcher and narrated that:

**L6.....**" my parents do much more than anybody else; they have been buying diapers and milk for my baby.....she has been taking care of my baby when I go to school" ...

Another girl L3 confirmed the challenges about the support from the baby's father and said: "no support from the father of my baby because he does not buy food and diapers." **(L3, interview, February 2022)**

The social support from the family, especially at home, can either make or break up the girls going through this unplanned transition.

The study further established that the two secondary schools needed more proper and well-organised support. Schools needed to provide re-entry orientation and continued counselling services, causing stress,

especially since they are combining school and mothering. About breastfeeding on the school premises, respondent L10 put it categorically and said:

.....No orientation was given to us when we just re-entered the school....." in addition, the school does not allow breastfeeding because there is even no room where one can breastfeed from" .....**(L10, Interview, February 2022).**

The two guidance teachers from Katima-Mulilo and Sesheke Secondary schools added their experience concerning support from the school authority and teachers. A guidance teacher from Sesheke secondary school narrated as follows:

..... "the girls are encouraged to seek permission in the afternoon so that they go tend to their babies ..... "I also encourage them to ask teachers in subjects where they are unclear; however, very few do so" As the school, we do not meet the girls when they report back as a group but individually for counselling.".....**(TRS, Interview, February 2022)**

Participants' responses indicate that support from school authorities needed to be structured. A formal system was required to receive the re-entered girls and prepare them for the challenges ahead. Guidance teachers from the two schools narrated during the interview that the girls need to be oriented upon re-entry to prepare them academically and emotionally.

The participants from the two schools acknowledged that peer support is not available, and their peers need to be prepared to receive and accept those re-entering. The school-going breastfeeding adolescents need their friends to lean on at this crucial time more than any other time; however, the same peers scold and stigmatise them. With that visible tag of having a baby and breastfeeding, peers take advantage of and use it to ridicule and stigmatise them at

every opportunity.

L4 confirmed that this support, at times, could be more forthcoming. She went on to recount:

..... “my main challenge is that other pupils laugh at me and mock me. “I usually feel horrible. ”) ..... **L9, Interview, February 2022**

#### **Adjusting to the new reality**

Respondents said they used different coping strategies to adapt to this unexpected and unplanned reality of mothering and schooling. Sub-themes formed the themes: (i) keeping busy and (ii) time management. (iii) Ignoring the happening around

Participants indicated that one of the strategies for coping with the stress of mothering and schooling was keeping busy. They narrated that they used the solving-problem style to make life less stressful by doing piecework to raise funds in their spare time. In addition, they reported that they keep themselves busy by concentrating on schoolwork and doing home chores. For example, participant L10 narrated during the interview and said:

..... in coping with stress, “I usually get busy- getting involved in domestic chores and doing my school work.” **(L10, interview, February 2022)**

After missing each other for 6 hours attending school, the reunion requires the adolescent mother to breastfeed the baby, wash their clothes, and bathe them before retiring back to schoolwork. All these works will keep the girls busy, and the brain will focus and concentrate on what they are doing.

Respondents’ other coping strategy was concentrating on productive activities, especially during their spare time when the girls are not at school. A number of the girls have reported having to manage their time by keeping themselves busy immediately after they come from school. One of the

respondents, L1, narrated her experience thus:

..... “after school,” I am expected to participate in the domestic work to manage my time; immediately “I return from school, I have to breastfeed, wash and bathe the baby, cook and get back to my school work” ..... **L1, Interview, February 2022)**

Some respondents indicated that one of the coping strategies they used was ignoring the happening around them. Instead, they usually occupy themselves with work, school, and even the baby. Therefore, identifying girls utilising this strategy is critical because they are candidates for counselling and treatment if necessary. To confirm this finding, one girl used the avoidance strategy and said:

..... “I just ignore what is happening” ..... **(L3, Interview, February 2022)**

This unproductive strategy may lead to depression and other mental illnesses, and they should be observed and referred for counselling.

## **DISCUSSION**

The study explored the experiences and coping strategies of School Going Breastfeeding Adolescents in two secondary schools in the Western province of Zambia. The findings generated three themes that emerged from no sub-themes.

### **Mothering and schooling**

The findings showed that respondents needed help in combining breastfeeding and schooling. However, they were cheerful and eager to complete their education owing to teachers’ and parents’ encouragement. The finding aligns with a study by (Mangino, 2008), who reported that bonding was among the better-known “benefits” of breastfeeding. Further states that, on the other hand, “bonding” can make it difficult to leave their babies with others. Several

studies have alluded that many school-going breastfeeding adolescents must learn to incorporate breastfeeding into schooling (Mpetshwa, 2001). However, Ntinda et al. (2016) reported a contrary finding that early motherhood appeared to cause many feelings of happiness, regret, and anxiety and a personal sense of satisfaction and accomplishment in some. The school-going breastfeeding adolescents struggled to leave their babies in other people's hands even when they knew it was unsuitable and uncondusive to the baby's healthy growth.

#### **Academic performance**

Under this sub-theme, the study found out that the girls' performance was affected due to the new reality the girls found themselves. This situation posed a significant challenge to their progression in school. According to Fennel and Arnot (2008), as cited by (Mufalo and Kabeta, 2019), teen mothers' roles as mothers, daughters, and learners co-exist simultaneously and in conflict. It was evident from the data collected that teen mothers had to perform their socially prescribed roles of daughters and mothers within their cultural setup and gender. Another survey was conducted in Indonesia by (Erfina et al., 2019) where the majority, 70%, said they spend sleepless nights because of breastfeeding while going to school. Further, Ojo et al. (2020) indicated that most respondents found studying while caring for a child difficult. Because of this, the respondents mentioned that their academic performance was poor at school.

#### **Divided attention**

The study findings were that school-going breastfeeding adolescents experienced the challenge of managing the roles of a mother and the demands of school. This finding aligns with Fennel and Anort (2008), as cited by Mufalo and Kabeta (2019), who revealed that the roles of teen mothers as mothers, daughters, and learners co-exist

simultaneously and in conflict. In addition, school-going breastfeeding adolescents find it challenging to manage schoolwork. They feel stressed due to limited time to care for their child and prepare for schoolwork (UNICEF, 2016). However, to the contrary, Etuah, Gbagbo, and Nkrumah (2018) state that breastfeeding adolescents felt that the pregnancy was "mistimed as it occurred during schooling, posing some physiological, financial, and academic challenges."

#### **Family support**

Participants narrated that apart from their mothers, the rest of the family members, including the child's father, were not supportive. The findings align with the study by Micah et al. (2013), who reported that social support from family, friends and partners is among the most critical factors affecting school-going breastfeeding adolescents. Another study supporting the finding is that of (Mwansa, 2011), whose results indicated that the majority, 55% of participants, lacked emotional support while 45% experienced poor healthcare access. However, Pigaiani et al. (2020) had a different finding where the report indicated that data was available from 306 participants, which gave a positive reading of the continuous period (57.8%), and home support was at (63.1%).

The Zambian breastfeeding policy emphasises the need to protect, promote and support breastfeeding (Ministry of Health, 2015). This policy entails that implementation should be anywhere a breastfeeding mother is found, whether at work, school, or college. It goes on to state that successful breastfeeding depends on factors like social support from family, teachers, and peers.

#### **Support from school**

From the analysis, the two schools under study do not have any orientation programs for the girls who re-enter after a maternity

break. In support of these findings, Mweemba (2014) contends that teen mothers, who returned to school, encountered challenges arising from the negative perception among fellow learners and the lack of support from teachers and the school infrastructure environment. The young mothers perceived themselves to be discriminated against by teachers in educational support (Ntinda, Thwala and Dlamini, 2016). On the contrary, Mwanza (2018) reported that school-going breastfeeding adolescents had the shelter to breastfeed their children if needed. Affirming this, a study by Mwansa (2011), conducted in the Eastern province of Zambia, indicated that the majority, 55% of school-going breastfeeding, received support from school authorities.

#### **Support from the peers**

School-going breastfeeding adolescents experienced no support from peers at school. In support of the findings, the study conducted in the Philippines by Pogoy (2014) aimed to explore lived experiences of early pregnancy among teenagers and showed that their peers discriminated against them. In line with previous studies, it is clear that there is little or no support from peers as established by stigma and discrimination. However, Pigaiani et al. (2020) reported that data was available from 306 participants who gave a positive reading of the continuous period (57.8%), thus revealing that almost all adolescents kept contact with their partners, friends, and teachers. Chumler et al. (2016) also agreed with the findings. They reported that adolescent mothers used positive reappraisal of life circumstances to create a positive self-image and resist the stress of stigma and parenting. Peer support is the bedrock of settling down after the break and a facilitation space for learners to concentrate and achieve good results. Peers have a significant influence on the life of Breastfeeding School

going girls. A positive attitude towards the girls will facilitate positive results, while a negative one will influence the girls in the opposite direction.

#### **Keeping busy**

This coping strategy was used by most of the girls, especially during their free time. Study findings indicate that after school, they had to allocate time to cater to baby care, washing clothes, cooking, and school work. These activities occupy their time such that before they realise it, it is time to sleep and think of the following day's activities. In Saudi Arabia, findings by Raheel (2014) indicate that adolescent school-going girls adopted problem-solving coping strategies rather than emotion-focused ones to combat stress. Mukwato et al. (2017) further reported that victims avoided negativity and focused on their own and their child's future. These findings are affirmed by Kaye (2008), whose results state that the majority, 73% of the respondents among school-going adolescents, used tension reduction as a coping strategy. However, the coping strategies and support by the adolescents varied in line with whether adolescents were experiencing higher or lower levels of adversity over time and according to the resources available within their physical and social contexts (Stapley et al., 2022).

#### **Time management**

Respondents' other coping strategy was concentrating on productive activities, especially during their spare time when the girls are not at school. A number of the girls have reported having to manage their time by keeping themselves busy immediately after they come from school. While in school, teachers and counsellors advised girls to concentrate on school and avoid overthinking about the baby. It meant that to cope with several stresses, the girls had to utilise their free time to engage in several



activities that earned them an income. To support the findings, Karimi (2015) reported that the lack of much-needed financial, emotional and social support was challenging. Kaye (2008), in his study to assess the coping strategies that school-going breastfeeding adolescents use, showed that school-going breastfeeding adolescents utilised time management as a coping strategy.

### **Ignoring the happening within the surrounding**

Some respondents narrated that one strategy they used to cope with the situation was to ignore the happening around them. This assertion was in tandem with a study by Kaye (2008), where the results showed that school-going breastfeeding adolescents utilised avoidance through physical activity as a coping strategy. Respondents kept themselves busy by ignoring the happening in their surroundings and focused on physical activities to do away with stress. Equally, the study showed that the emotional support the respondents received was one way they used to cope with the stress they faced.

Because of this, resources are necessary to allow the pupils to manage these events successfully. For example, Heiman (2004) states that family relationships and coping strategies are the most prominent personal factors that facilitate the development of adapted behaviours. Therefore, teenage mothers may need this support in adapting to the new role of motherhood and schooling. Another study by Raheel (2014) reported that schools in Saudi Arabia identify and build mechanisms for early and timely diagnosis of stress among adolescents and support adolescents to adopt problem-solving coping strategies rather than emotion-focused ones to combat stress.

Study limitations include using only the qualitative design and limiting the

benefits of triangulation with quantitative findings. Furthermore, purpose sampling limited the generalizability of the results as it is limited only to those with similar characteristics. However, the study ensured rigour and a thick description of the experiences.

The study established that school-going breastfeeding adolescents experienced many challenges in completing school. The respondents narrated their challenges, including baby care at school, missing classes, no support from school authorities and teachers, financial constraints, stigma, and discrimination. However, they went ahead and informed the researcher on how they have been coping with the challenges experienced, some of which included keeping themselves busy, time management, and sometimes just ignoring. These findings can help improve the conditions and livelihood of re-entered girls in schools and at home.

The study recommends that the Ministry of Education, working with key stakeholders, review and amend the re-entry policy to respond to the identified needs of different school-going breastfeeding adolescents. They should further work on the infrastructure of the schools to include space where the girls, especially the breastfeeding ones, can interface with their babies during school time. Furthermore, the school authority and teachers should prepare the environment, especially the peers, to receive the re-entered breastfeeding girls to avoid stigmatisation and discrimination. Further, the Ministry of Education, working with other Government departments like social welfare and child health and NGOs, should offer support in the form of financial literacy and survival skills to the breastfeeding school-going adolescents in alleviating economic challenges and also the creation of a position of

teacher counsellors in all secondary schools to ensure the implementation of professional psychosocial counselling.

#### **AUTHOR CONTRIBUTION**

Mooto Mutakatala developed the proposal and prepared all research administration documents (research permits) and data collection with guidance from Kabinga Makukula and Brenda Sianchapa. Kabinga Makukula, Brenda Sianchapa and Mooto Mutakatala collaborated in analysing and interpreting data. Mooto Mutakatala drafted the article, while Kabinga Makukula and Brenda Sianchapa helped revise the article by adding intellectual content and did the final proofreading. Kabinga Makukula did the final proofreading and approval of the version for publication.

#### **FUNDING AND SPONSORSHIP**

The study was self-funded.

#### **ACKNOWLEDGEMENTS**

I thank the Almighty God for his guidance throughout the study period. Sincere gratitude to the Supervisors, Dr Kabinga Marjorie Makukula and Mrs Brenda Sianchampa, for their unwavering guidance throughout the research process.

Many thanks also go to Mr Samuel Litebele, a Public Health Specialist and Researcher, for the academic support, to Sesheke District Education Board's office for permission to interview the pupils, and to my husband, children, and family for their support and understanding during the period of study.

Lastly, I thank the participants for their cooperation and openness, as this study would have been impossible without them.

#### **CONFLICT OF INTEREST**

There was no conflict of interest in this

study.

#### **REFERENCES**

- Bityutskaya EV, Korneev AA (2021). Subjective appraisal and orientations in difficult life situations as predictors of coping strategies. *Psychol Russ.* 4(3): 180-199. doi: 10.11621/pir.2021.03.12.
- Chumbler NR, Ganashen S, Cherry CO, Wright DG, Bute JJ (2016). Rewriting life narratives: positive coping mechanisms in adolescent mothers' special social groups, social factors and disparities in health and health care. *Research in Sociology of Health Care.* 34: Bingley: Emerald. 199-224. Available at: <https://doi.org/10.1108/SO-275-495920160000034011>.
- Erfina E, Widyawati W, McKenna L, Reisenhofer S, Ismail D (2019). Adolescent mothers' experiences of the transition to motherhood: An integrative review. *Int J Nurs Sci.* 6(2): 221-228. doi: 10.1016/j.ijnss.2019.03.013.
- Etuah PA, Gbagbo FY, Nkrumah J (2018). Coping with pregnancy in academic environment: experiences of pregnant students in a public university in Ghana. *Journal of Woman's Reproductive Health.* 2(2):1. doi: 10.14302/issn-2381-862X.jwrh-18-2090.
- Gyan C (2013). The effects of teenage pregnancy on the educational attainment of girls at Chorkor, a suburb of Accra *Journal of Educational and Social Research.* 3(3): 53. doi:10.36941/jesr.
- Heiman T (2004). Examination of the salutogenic model, support resources, coping style, and stressors among Israeli university students. *J Psychol.* 138(6): 505-520. doi: 10.3200/JR-LP.138.6.505-520.
- Karimi EW (2015). Challenges experienced by young-mother learners upon re-entry to formal primary school. A case

- in one of the divisions of coastal region. Thesis. University of OSLO.
- Kassa GM, Arowojolu AO, Odukogbe AA, Yale AW (2018). Prevalence and determinants of adolescent pregnancy in Africa: a systematic review and Meta-analysis. *Reprod Health*. 15(1): 195. doi:1186/s12978-018-0640-2.
- Kaye DK (2008). Negotiating the transition from adolescence to motherhood: Coping with prenatal and parenting stress in teenage mothers in Mulago hospital, Uganda. *BMC public health*. 8(1): 83. doi:10.1186/1471-2458-8-83.
- Gyesaw NY, Ankomah A (2013). Experiences of pregnancy and motherhood among teenage mothers in a suburb of Accra, Ghana: a qualitative study. *Int J Womens Health*. 5(1): 773-80. doi: 10.2147/IJWH.S51528.
- Labrague LJ, McEnroe-Petitte DM, Gloe D, Thomas LV, Tsaras PK (2017). A literature review on stress and coping strategies in nursing students. *Journal of Mental Health*. 26(5): 471-480. doi:10.1080/09638237.2016.12447
- Maluwa-Banda D (2004). Gender sensitive educational policy and practice: the case of Malawi. *Prospects*. 34(1): 71-84. doi:10.1023/B:PROS.000002668.92752.3b.
- Mangino JG (2008). Voices of teen mothers: Their challenges, support systems, and successes. Doctoral Dissertation, University of Pittsburgh.
- Micah DJ, Joy LC, Chris LA, Halimat O (2013). Pregnancy stigmatization and coping strategies of adolescent kid mothers in Lagos. *African Journal of Bioscience*. 6(2): 1-15.
- Ministry of Education Science Vocational Training and Early Education (2014). Zambia: Education For All 2015 National Review: 44. Lusaka Zambia.
- Ministry of Health (2015). National breastfeeding policy and action plan 2015 - 2020. Lusaka Zambia.
- Mpetshwa N (2001). An exploratory study of the experiences of black teenage mothers. Thesis Rhodes University, East London.
- Mufalo SM, Kabeta MR (2019). Challenges of school re-entry among learner-mothers and mitigation strategies instituted by stakeholders in schools in Masaiti District. *International Journal of Humanities Social Sciences and Education (IJHSSE)*. 6(9): 73-82. doi:10.20431/2349-0381.060908.
- Mukwato PK, Maimbolwa M, Mwape L, Muleya MC (2017). Experiences, needs and coping strategies of pregnant and parenting teenagers: A perspective from Lusaka and North Western Provinces of Zambia. *Journal of Research Development in Nursing and Midwifery*. 6(4): 056-067. doi: 10.14-303/JRNM.2017.110.
- Mwansa A (2011). Re-entry to school after giving birth: An evaluation of the process used to design and implement policy in Zambia. CREATE pathways to Access Series, Research Monograph Number 70. Pp 44. Centre for International Education, Sussex, Falmer, UK. ISBN: 0-901881-83-X.
- Mwanza MN (2018). Factors that influence the use of the education re-entry policy for adolescent mothers in Monze, Zambia. Governance and Development Policy (GDP). Thesis Hague, Netherlands.
- Mweemba G M (2014) Challenges faced by teen mothers who re-entered School: A case of selected Schools on the Copper belt Province of Zambia. Thesis. University of Zambia.
- Ntinda K, Thwala SK, Dlamini TP (2016). Lived experiences of school-going early mothers in Swaziland. *Journal of*

- Psychology in Africa. 26(6): 546–550. doi:10.11114/JETS.V314.902.
- Ojo IO, Aina OA, Ani OB, Onianwa PO (2020). The challenges and coping strategies of exclusive breastfeeding practices among student mothers at a Nigerian university. *African Journal of Midwifery and Women's Health*. 14(2): 1-9. doi:10.12968/ajmw.2019.-0016.
- Pigaiani Y, Zoccante L, Zocca A, Arzenton A, Mengolli M, Fadel S, Ruggeri M et al. (2020). Adolescent lifestyle behaviors, coping strategies and subjective wellbeing during the COVID-19 pandemic: an online student survey. *Healthcare (Basel, Switzerland)*. 8(4): 472. doi:10.3390/healthcare8040472.
- Pogoy AM (2014). Lived experiences of early pregnancy among teenagers: a phenomenological study. *European Scientific Journal*. 10(2).
- Raheel H (2014). Coping strategies for stress used by adolescent girls in Riyadh, Kingdom of Saudi Arabia. *Pakistani journal of medical sciences*. 30(5): 958. doi:10.12669/pjms.305.5014.
- Raqib S (2018). *Zambia Should Keep Young Mothers in School*. Lusaka. Available at: <https://www.hrw.org/news/2018/08/06/zambia-should-keep-young-mothers-school> (Accessed: 8 March 2023).
- Sitali NM (2011). The effectiveness of the Re-Entry Policy in selected high schools of Kabwe district. Thesis. University of Zambia.
- Stapley E, Stock S, Deighton J, Demkowicz O (2023). A qualitative study of how adolescents' use of coping strategies and support varies in line with their experiences of adversity. *Child Youth Care Forum* 52: 177– 203. doi: 10.1007/s10566-022-09682-0.
- UNICEF (2016). A survey on factors associated with school-going breastfeeding Adolescents. Lusaka. Available at: [www.unicef.org/reports/breastfeeding](http://www.unicef.org/reports/breastfeeding) accessed 30.03.2023.