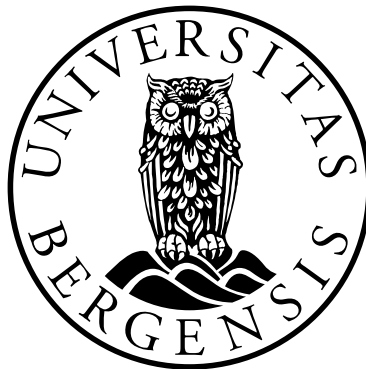


**Family values of young people
in Limpopo, South Africa:**

**A sociocultural psychological study on perceptions
and experiences of reproduction and parenthood**

Ingrid Onarheim Spjeldnæs



Dissertation for the degree philosophiae doctor (PhD)

University of Bergen, Norway

Contents

- Contributors 4
- Acknowledgements..... 5
- List of abbreviations 7
- List of figures..... 8
- List of tables..... 8
- Note on terminology 8
- Summary 9
- List of papers..... 11
- 1. Introduction 12
- 1.1. Defining the problem..... 12
- 1.1.1. The state of the family in South Africa 12
- 1.1.2. Challenges and risks of young people in South Africa 15
- 1.1.3. Development of social welfare policies 16
- 1.1.4. Overall rationale of the study 18
- 1.2. Situating the problem 19
- 1.2.1. Adolescence and identity formation 19
- 1.2.2. Womanhood and motherhood 21
- 1.2.3. Masculinities and fatherhood 23
- 1.3. Approaching the problem..... 26
- 1.3.1. Family change research 27
- 1.3.2. The values of children study I (VOC I) (1970s)..... 29
- 1.3.3. Theory of family change..... 31
- 1.3.4. Values of children study II (VOC II) (2000s) and the theory of family change 36
- 1.3.5. The values of children study (VOC) in South Africa..... 37
- 2. Study rationale and research aims 39
- 2.1. Study I 39
- 2.2. Study II 41
- 2.3. Study III..... 42
- 3. Study design and Methods..... 44
- 3.1. The study site..... 44
- 3.2. Mixed-methods design 48

3.2.1.	Sequential-emergent mixed methods design	49
3.3.	Cross-sectional design	55
3.3.1.	Participants and procedures	55
3.3.2.	Measures	56
3.3.3.	Statistical analysis.....	58
3.4.	Phenomenological design.....	65
3.4.1.	Central principles.....	67
3.4.2.	The specific phenomenological approaches.....	69
3.4.3.	Piloting.....	70
3.4.4.	Recruitment	71
3.4.5.	Data collection	72
3.4.6.	Study participants	78
3.4.7.	Analysis	80
3.5.	Ethics	89
3.5.1.	Ethical clearance.....	90
3.5.2.	Informed consent	90
3.5.3.	Confidentiality.....	95
3.5.4.	Compensations.....	95
4.	Findings	97
4.1.	Paper I.....	97
4.1.1.	Changes in reproductive attitudes	97
4.1.2.	Continuity of reproductive attitude	98
4.2.	Paper II	99
4.2.1.	Limited interaction with father and men	99
4.2.2.	Aspiring responsible fatherhood.....	100
4.3.	Paper III.....	101
4.3.1.	Responsible motherhood	101
4.3.2.	Trusting relationship.....	102
4.3.3.	Aspiring responsible motherhood.....	102
5.	Discussion.....	105
5.1.	Main findings	105
5.1.1.	Attitudes towards reproduction in a context of absent fathers	105
5.1.2.	Transition to adulthood.....	108
5.1.3.	Changing ideals of gender equality	111
5.2.	Methodological considerations	115

5.2.1. Challenges in the mixed-methods design	115
5.2.2. Challenges in the cross-sectional design	116
5.2.3. Challenges in the phenomenological design	119
6. Conclusions and implications.....	126
References.....	129
Errata.....	146

Appendices

Appendix 1 Interviews with experts in Limpopo in education, health and social work	i
Appendix 2 Collaborators' agreement in the "Value of Children and Intergenerational relations"	iii
Appendix 3 Values of Children Questionnaire (VOCQ)	vi
Appendix 4 Focus group topic guides 2005 and 200	xxiv
Appendix 5 Interview guides semistructured interviews 2005 and 2007	xxx
Appendix 6 Information about writing diary	xxxvii
Appendix 7 Ethical clearance by Medunsa Campus Ethics Committee at the University of Limpopo	xxxix
Appendix 8 Inclusion in SATZ and ethical clearance	xli
Appendix 9 Memorandum of Understanding between the University of Limpopo and the University of Bergen	xliii
Appendix 10 Informed consent principal	xlviii
Appendix 11 Informed consent participants	li
Appendix 12 Information letter to participants	liii

Paper I

Paper II

Paper III

Contributors

This PhD is a result of cooperation between the following contributors:

Centre for Knowledge Based Practice, Bergen University College, funded and employed the candidate. The center provided supervision through Associate Professor Janet Harris.

Centre for International Health (CIH), University of Bergen, has administered this PhD and provided the scientific environment through the Research School for International Health. The centre has provided the main supervision of the candidate through Professor David L. Sam and Professor Karen Marie Moland.

South Africa Tanzania Project (SATZ) is a joint research project of the University of Bergen and the University of Limpopo in South Africa. This study was included in the project. The Centre for Health Promotion, University of Limpopo, South Africa, offered the candidate office, practical assistance, and scientific advice through the Director Hans Onya during fieldwork.

The Department of Psychosocial Science, University of Bergen, has provided scientific environment through the Society and Workplace Diversity Research Group lead by Professor Gro Mjeldheim Sandal.

The Nordic Africa Institute in Uppsala, Sweden, granted the candidate scholarship in 2006 for a one month stay at the Institute to study at the library.

Acknowledgements

I would like to express my sincere gratitude to the young people in Limpopo who willingly shared their stories about family life and invited me to their homes.

I am very grateful to my supervisors, who have shared their experiences and knowledge of social science and psychology. My main supervisor, David Lackland Sam, has inspired me with his insight in the broad lines in (cross-) cultural psychological research. I am also sincerely thankful to my co-supervisor Karen Marie Moland for her insightful feedback, clear advice, and tireless attention to details in the write up. My co-supervisor Janet L. Harris – thank you for encouragement and for sharing your sense for structure and methodology.

I am thankful to Karl Peltzer, Human Sciences Research Council and University of Limpopo, who coordinated the South African Values of Children study (VOC), and later let me use the data for this dissertation. I am also appreciative to the four students; Gladys Phaswana, Sabina Raphala, Mary Phosoko and Cynthia Ledwaba, who collected the quantitative data.

I am grateful for the assistance from several people regarding the qualitative data collection in Limpopo: Johanne Sundby, University of Oslo, Leif Edward Aarø (SATZ) University of Bergen, and Hans Onya, Center for Health Promotion at University of Limpopo. A warm thank to Wenche Dageid, University of Oslo, who shared her contacts and experiences from her fieldwork in Limpopo.

Mpho Sebola, Mary Mabala, and Sibongile Ndwambi assisted me in collecting the qualitative data. Special thanks to Mpho Sebola, who assisted me both in 2005 and 2007. His involvement, enthusiasm and endless energy in working with youths were inspiring. I thank Mary for our trips to schools and places in Mankweng. Sibongile taught me a lot about being young in Limpopo. Thanks to Tonje F. Aase and Mokope Makgopa for transcribing the data material. I am thankful to Mpole Samuel Masemola at the University of Oslo, who checked the translated tapes. My friends at campus at

the University of Limpopo, Ingrid Fourie and Elizabeth Steinbach – thank you for letting me share and discuss my daily challenges during fieldwork.

I acknowledge the Centre for Knowledge Based Practice, Bergen University College for funding. I am appreciative to Monica W. Nortvedt and all my colleagues at the centre. Warm hugs to Heidi Skramstad, Eva Haukeland Fredriksen, Nina Rydland Olsen and Ragnhild Øye Bjarkøy, who have been important sources of support.

I have appreciated being a part of the Centre for International Health, University of Bergen, which included me in an exciting scientific and cultural diverse environment. Especially thanks to Alemnesh Mirkuzie. I am appreciative to the members of the Society and Workplace Diversity research group, Faculty of psychology, University of Bergen.

I am very thankful to my parents, who made me interested in Africa from an early age, and who have supported and encouraged me through my education. Special thanks to my father for visiting me during fieldwork and for helping me to collect literature at the library in Limpopo. Special thanks to my mother for being there for my children whenever needed. I am also thankful to my aunt Inger, who looked after my youngest child in a period of the write-up.

To my husband Jørgen – thank you for support, patience and advice through these years. To my two small children, Elise and Peter, who were born during the course of this study, thank you for inspiration and joy!

Bergen, Norway

August 2013

Ingrid O. Spjeldnæs

List of abbreviations

AIDS Acquired Immune Deficiency Syndrome

CIOMS Council for International Organizations of Medical Sciences

CSG Child Support Grant

HIV Human Immunodeficiency Virus

NSD Norsk Samfunnsvitenskapelig datatjeneste

NVivo (software program)

PAF Principal Axis Factoring

PCA Principal Component Analysis

REK vest Regional Committee for Medical Research Ethics in Western Norway

SES Socioeconomic Status

SATZ South Africa Tanzania Project

SD Standard Deviation

TFR Total Fertility Rate

voc (in small letters) the construct of values of children

VOC (in capital letters) The Values of Children studies

VOCQ Values of Children Questionnaire

List of figures

Fig. 1 General model of the family in context	35
Fig. 2 Family model of interdependence	35
Fig. 3 Family model of independence	35
Fig. 4 Family model of emotional interdependence	35
Fig. 5 Map of South Africa and its provinces	46
Fig. 6 Photo of Mankweng.....	48
Fig. 7 Sequential emergent mixed-methods design	54
Fig. 8 Photo of Mankweng.....	73

List of tables

Table 1 Principal component analysis with varimax rotation of reasons for wanting a child among adolescent women in South Africa	62
Table 2 Principal component analysis with direct oblimin rotation of reasons for wanting a child among adolescent women in South Africa. Pattern Matrix.	63
Table 3 Principal component analysis with direct oblimin rotation of reasons for wanting a child among adolescent women in South Africa. Structure Matrix.....	64
Table 4 Data collection in 2005 and 2007 and the study participants	78
Table 5 Steps of text analysis for Paper II	85
Table 6 Steps of text analysis for Paper III	89
Table 7 Summary of the three Papers	104

Note on terminology

In South Africa the term “Africans” is often being used as an analytical category in research, since it has descriptive power (Morrell, 2001). Being aware that the term derives from “Bantu” and the separation of the South African population into four categories (Bantu, Whites, Colored, and Asian) during the years of apartheid, “Africans” is being used here when referring to information from statistic or demographic reports or other research where the term has been used to describe socioeconomic conditions. The study participants in this thesis are of Northern Sotho ethnicity, which is the term used when referring to them.

Summary

Background: The institution of the family in South Africa is commonly described as being in a state of crisis, and young people's family values are key in learning about how to break the negative trends in the institution of the family in the country (Holborn & Eddy, 2011). The aim of this thesis was to improve understanding of values related to reproduction and family life among young people in poverty-ridden communities in South Africa.

Methods: The research problem was approached in a sociocultural psychological perspective. Family values were studied through attitudes towards having children and experiences of and expectations towards parenthood among adolescent men and women in the Limpopo Province. A mixed-methods approach comprising of three phases: 1) quantitative methods, 2) qualitative methods, and 3) mixing the two methods in an overall discussion of the findings, were used. In the quantitative phase, a cross-sectional design was used to measure attitudes towards reproduction in three generations of women (n=516). In the qualitative phase, a phenomenological design was used to explore how adolescent men and women (n=22) conceptualize parenthood.

Results:

The continuity and changes in attitudes towards reproduction through the three generations of women (Paper I) were better understood through knowledge about how young people conceptualized fatherhood (Paper II) and motherhood (Paper III). While motherhood was understood in terms of responsibility, single parenthood, and availability, fatherhood was understood in terms of irresponsibility, unavailability, and absence. The conceptualizations of fatherhood and motherhood in the young people indicated a desire to change from their parent generation, especially the young men. The young men and women expressed similar and compatible parenthood agendas where gender equality arises as a very central family value.

Conclusions: This thesis contributes to the debate about the family described as “being in a state of crisis” in South Africa by giving voice to disenfranchised young people in their transition to adulthood. Their urge for gender equality in the family certainly indicates a family institution in transition, which is an important input to future debates and policy making.

List of papers

I

Spjeldnaes, I.O., Sam, D.L., Moland, K.M., & Peltzer, K. (2007). Continuity and change in reproductive attitudes of teenage women, their mothers, and maternal grandmothers in South Africa. *South African Journal of Psychology*, 37(4):856-877.

II

Spjeldnaes, I.O., Moland, K.M., Harris, J., & Sam, D.L. (2011). Being man enough: Fatherhood experiences and expectations among teenage boys in South Africa. *Fathering*, 9 (1), 3-21.

III

Spjeldnaes, I.O., Moland, K.M., Harris, J., & Sam, D.L. (Accepted for publication) Responsible Mothering in Limpopo, South Africa: Perspectives of Adolescents. *Psychology & Society*.

1. Introduction

1.1. Defining the problem

1.1.1. The state of the family in South Africa

The institution of the family in South Africa is commonly described as being in a state of crisis (Holborn & Eddy, 2011) and, according to Akande, Adetoun and Tserere (2006, p. 447), its structure and functions are breaking down. Several unique conditions in South Africa affect families in particular ways. The legacy of apartheid and especially the migrant labor system still influence family life. Poverty and the HIV and AIDS pandemic deeply affect the health and well-being of family members. These circumstances cause broken families, with an increasing number of single-parent households, absent fathers, orphans and child-headed households (Holborn & Eddy, 2011).

Holborn and Eddy (2011, p. 1) state in the report *First steps to healing the South African family* that South African family life has never been simple to describe and that the concept of the nuclear family, comprising parents and children only, does not reflect the variety of South African families. The extended family comprising grandparents, uncles, aunts, cousins, or other caregivers and guardians has always been and continues to be of great importance (Muthwa, 1994; Wittenberg & Collinson, 2007). Today, the most common household is the single-parent household (Holborn & Eddy, 2011, p. 1). African children in South Africa most commonly live with their mother only (42%) versus only 3% living with their father as the only parent. Living with both parents (28%) is just as common as not living with either parent (27%) (SAIRR, 2011/2012). Skip-generation households, in which children live with their grandparents and great aunts or uncles, have also become the norm (Mturi, Xaba, & Sekokotla, 2005; SAIRR, 2011/2012). Child-headed households, in which all members are younger than 18 years, have increased (Mturi et al, 2005; Holborn & Eddy, 2011).

An increasing number of children and adolescents experience one or both parents dying. Nearly 4 million children had lost one or both parents in 2008, an increase of one third from 2002 (Holborn & Eddy, 2011). According to Holborn and Eddy (2011), the HIV and AIDS pandemic is a main driver of broken families. More than 5 million people are living with HIV in South Africa, mostly adults of reproductive age (UNAIDS, 2012). African women of reproductive age (15–49 years) have a higher prevalence of HIV and AIDS than other groups based on sex, age and ethnicity (Shisana et al., 2009). Although the infection rate has started to decline, families will experience long-term effects for many years to come. Today, South Africa has 2.1 million orphans aged 0–17 years because of AIDS, and there will be more AIDS orphans in the coming years. Orphans losing their mother are more vulnerable than orphans losing their father, since the mother is more likely than the father to take responsibility if the other parent dies. The care burden on older people has increased. Older women, in particular, care for their adult children with AIDS (Tshililo & Davhana-Maselesele, 2009) and their orphaned grandchildren (Nyasani, Sterberg, & Smith, 2009; Penn, Watermeyer, MacDonald, & Moabelo, 2010; Schatz, 2007). Older people also compensate for the lack of income from adult children with AIDS (Ardington, Case, Islam, Lam, Leibbrandt, Menendez, & Olgiati, 2010).

Violence is another major problem and after apartheid domestic violence has become a national issue receiving mass-media attention. The idea of strangers as the main perpetrators has shifted to family member being the main perpetrators (Dunkle, Jewkes, Brown, Yoshima, Gray, McIntyre, & Harlow, 2004; Morrell, 2009; Posel, 2005). Sexual violence by husbands and/or fathers creates a picture of men, once protectors as intruders and rapists (Posel, 2005). This has severe implications for mothers and children (Mehlwana, 1996). Children growing up in violent homes are more likely to become violent as parents themselves (Walker, 2005).

Another facet of a violent society is the high number of deaths related to violence, and men are much more likely than women to die as a result of violent behavior. This may explain why paternal orphans (2,468,000) outnumber maternal orphans (624,000)

(Holborn & Eddy, 2011). However, violent deaths among men only partly explain why so many children and adolescents are growing up without a father. Many children have never known their father. The situation of broken families refers not only to violent family members and parents who die but also to the increase in living absent fathers.

The number of absent fathers has increased since apartheid was abolished, especially among African, rural families (Richter & Morrell, 2006), and exceeds the estimate of father absence elsewhere in sub-Saharan Africa (Posel & Devey, 2006). Today, it is more common in South Africa to have an absent (51%) than a present father (31%) (SAIRR, 2011/2012). Many fathers are absent from the household for most of the year (Richter & Morrell, 2006). In the rural province of Limpopo, 60% of men are not residing with their family for more than 6% of the year (Collinson, Tollman, Kahn, Clark, & Garenne, 2006). The absence of men is mainly related to labor migration in South Africa. Although the migratory labor system of apartheid, in which African men were forced to move to urban areas to find work and separated from their families, has been eliminated, men in the rural provinces migrate more than ever to find work (Posel & Devey, 2006; Holborn & Eddy, 2011). The unemployment rate, which measures anybody without a job who wants to work and is available to take up employment, is rising and increased from 32% in 2001 to 36% in 2012 (SAIRR, 2011/2012).

The situation of men who are unable to support their family coupled with the high level of domestic violence perpetuated by men has been interpreted as men being in crisis in South Africa (Morrell, 2001). According to Ramphele (2002, p. 158), men incapable of taking on the provider responsibility in the family may be a “burden of failure that becomes intolerable”, and fathers may desert their family in a physical or mental sense. According to Mturi et al. (2005), the absence of fathers has several negative implications for the family. It is related to a “lack of dignity” in the neighborhood; to children not getting properly disciplined; to increasing risk of intruders in the household; and to inability to make decisions until the father returns home (Mturi et al., 2005, p. 56). Further, children with absent fathers experience less support and involvement in their schoolwork (Smit, 2006), and tend to perform more

poorly in school than children with present fathers (Mboya & Nesengani, 1999; Timæus & Boler, 2007; Townsend, Madhavan, Tollman, Garenne, & Kahn, 2002).

Poverty lies at the core of the crisis of families and men, and South Africa is one of the most consistently unequal societies in the world, where income inequality has increased rather than improved after apartheid officially ended in 1994 (UNDP, 2010). In the racial hierarchy that still exists, African families have been most severely affected by the great economic inequality and continue to constitute the economically most disadvantaged group of citizens (SAIRR, 2011/2012).

1.1.2. Challenges and risks of young people in South Africa

Adolescents represent the largest age cohort in South Africa, with 5.2 million 15–19 years old (Stats SA, 2010a). They were born during the years of liberation and high future hopes and have been called “Mandela’s children” (Barbarin & Richter, 2001, p. 1). Entering into adult life, however, this generation faces particular challenges in completing education and finding work. They are likely to take risks related to sexual and violent behavior (Brook, Morojele, Zhang, & Brook, 2006).

Completing education represents one of the major challenges for African youths, where only 31% of pupils in secondary high school graduated (matriculation) in 2009. Higher education participation among Africans 20–24 years old is 14%. Entering the labor market is also difficult. Among people 15–24 years old in South Africa, the unemployment rate is high at 68 % (SAIRR, 2011/2012).

Fertility among adolescents (15–19 years old) is very high, despite the declining total fertility rate of 2.35 today (SAIRR, 2011/2012) that makes South Africa more similar to Europe and the North America, and which is often described as “a unique fertility transition” (Swartz, 2009, p. 498). There are 52 births per 1000 adolescent women (The World Bank, 2011). One in five women has given birth at age 18 years and more than 40% at age 20 years (Harrison, 2008). Having a child at this age is associated with health and social risks. Adolescent women are more vulnerable to complications

during pregnancy (McDevitt, 1996) and have a higher risk of depression and emotional instability. Further, they are more likely to perform poorly in school (Bloom & Hall, 1999) and to experience disgrace and stigma (Richter & Mlambo, 2005). Limited educational and employment opportunities as young mothers may result in both mothers and children suffering socially and economically (Breheny & Stephens, 2007; Macleod, 2003; Mojapelo-Batka & Schoeman, 2003).

Adolescents are especially vulnerable to acquiring HIV as nearly 9% of people 15–24 years old are living with HIV (Department of Health, 2010). Adolescent women face a particular risk of acquiring HIV infection. The infection rate is 12% among adolescent women and 5% among adolescent men (UNAIDS, 2012). Unequal gender and power relations characterize adolescent sex (Pettifor, Measham, Rees, & Padian, 2004). Young poor women tend to have sex with older men who may be able to give economic returns, but young women lack sexual agency and power to negotiate condom use (Lesch & Kruger, 2005). This is described as an important driving force behind the HIV epidemic in poverty settings (Katz & Low-Beer, 2008).

Youth violence is pervasive and according to Higson-Smith (2006), youth violence is not only caused by poverty but also by other cultural factors, such as the legacy of apartheid. Young people are being socialized into a society in which violence has been normalized also in the family (Jewkes, 2002). A lifestyle study by the Centre for Justice and Crime Prevention (Leoschut, 2009, cited in Holborn & Eddy, 2011) found that 24% of young people experienced being punished physically by family members. The great majority of young victims (75%) did not receive any support or counseling. Violence among young people in intimate relationships is common: 21% reported that they had perpetrated violence against their partner.

1.1.3. Development of social welfare policies

A holistic social welfare framework has been developed since the 1990s to improve living conditions (Triegaardt, 2002). All South African families in need are entitled to economic and social security grants (Kaseke, 2010). Women aged 60 years and men

aged 65 years are entitled to old-age pensions. The child support grant (ZAR 240 per month = USD 24) targets the poorest children in the most rural areas, and the foster care grant (ZAR 690 per month = USD 69) is given, for example, to grandparents who care for orphaned grandchildren. Poor families can access food parcels (ZAR 500 = USD 50) for 3 months (Kaseke, 2010). Employed people are economically secured from temporary unemployment caused by termination of employment, maternity, adoption or illness (Olivier, 2004). However, the economic security net has several gaps. Economic compensation to parents who are at home caring for children is lacking (Goldbatt, 2005). Children in poor families do not easily manage to access the social security grants (Guthrie, 2002). Only 5% of unemployed people receive social security pensions (Kaseke, 2010). The health care system at the state and local levels lacks resources to provide necessary care for older, sick and disadvantaged people (Triegaardt, 2002).

The development of the welfare framework has given priority to health and education. Several studies for preventing HIV infection have been carried out, both community based (Dageid, 2007) and school based (Helleve, 2010). The state spending on education has increased, for both public school education and universities (SAIRR, 2011/2012).

The constitution has enshrined gender equity across ethnic groups. The Women Empowerment and Gender Equality Bill (Minister of Women, Children and People with Disabilities, 2012) strongly calls for the equal participation of women in the economy and in positions of decision-making in the labor market. Further, the Choice of Termination of Pregnancy Act was introduced in 1996, and South African women (including minors) have the right to choose abortion up to 12 weeks of gestation.

Civil society and government have carried out action to promote involved fatherhood. The Commission on Gender Equality has been focusing on issues related to men and masculinities. The Human Sciences Research Council introduced the Fatherhood Project in 2003. Groups of men and fathers are active in civil society in responding to

HIV and AIDS and domestic violence through such campaigns as Men as Partners (www.engenderhealth.org/our-work/gender/men-as-partners.php) and the 16 Days of Activism for No Violence against Women and Children (www.info.gov.za/events/national/16days.htm). The Unmarried Fathers' Fight (TUFF) is a support group that has been lobbying to fight laws discriminating against unmarried fathers (Morrell, 2001). Nevertheless, the legal position of fathers is rather weak if they are not married to the child's mother. The responsibilities and rights of unmarried fathers have been improved (clause 21 of Children's Bill 70 of 2003) as a result of several controversial cases during the 1990s in which fathers challenged the existing laws (Gallinetti, 2006; Mosikatsana, 1996).

1.1.4. Overall rationale of the study

The problem is defined as the family institution in South Africa being in a state of crisis, where the young generation is considered particularly at risk, being faced with a number of challenges and risks in their transition to adulthood. Poverty exacerbates the crisis of the family and worsens the prospects for the young generation of Africans in South Africa (Holborn & Eddy, 2011). According to Lubbe (2007) the family has not been subjected to sufficient critical analysis, because the family is perhaps the most timeless, central and enduring of all social institutions and is thus often taken for granted. The research dealing with the family in South Africa has often been survey based and measures causes and effects, with limited attention to how people understand the family and family life (Holborn & Eddy, 2011; Seekings, 2003). More than a decade ago, social scientists indicated the need to know more about the significance of the family to breach "the downward spiral of family disintegration" (Burman & Van der Spuy, 1996, p. 631). Research in South Africa and elsewhere has documented that the family and parents are especially influential in young people's internalization of values and norms (Alberts, Mbalo, & Ackermann, 2003; Davies & Friel, 2001; Mboya, 1998; Owens, Scofield, & Taylor, 2003; Pretorius, Ferreira, & Edwards, 1999; Turnbull, Van Wersch, & Van Schaik, 2008). Given the current family crisis, the need to explore how the family is understood and the role of the family in producing and reproducing the values related to gender relations and family life has

become imperative. *First steps to healing the South African family* (Holborn & Eddy, 2011) calls for research on values in family life and on the transmission of values to young people.

The overall goal of this study is to increase understanding of the values related to reproduction and family life among young people in poverty-ridden South African communities.

1.2. Situating the problem

In adolescence, people make plans about their future and start shaping their adult identity. The sociocultural environment highly influences identity formation, which may take many forms. A central perspective of adult identity is parenthood. Since parenting is a social process influenced by the environment (Lubbe, 2007; Sonuga-Barke, 2008), the debates in South Africa differ considerably from the debates in North America and northern Europe, where most research on parenthood has been carried out (Kağıtçıbaşı, 2007). Parenting skills, styles and assisted reproductive techniques are some of the debates in high-income countries. In South Africa, the dominant parenthood discussions have been related to the absence of fathers and the predominance of single mothers.

This section locates the crises of the institution of the family in South Africa through debates in the empirical literature on adolescence and identity formation; womanhood and motherhood; and masculinity and fatherhood.

1.2.1. Adolescence and identity formation

Adolescence has been defined as one phase between 13 and 18 years of age (Erikson, 1968) and has several phases from 11 to 22 years of age (Kroger, 2000). Developing an adult identity is key in adolescence, in which people make plans about their future and often explore various identities. The opportunities and limitations for shaping adult identities depend on the socioeconomic environment in which people live as

well as peers and family (Arnett, 2010; Kroger, 2000; Larson, Wilson, & Rickman, 2009).

High-income countries and regions have a wide range of transitional paths to adulthood (Arnett, 2010). Education and employment represent common routes to adulthood. Parenthood is often postponed until education is completed and a job secured in the late twenties or thirties (Lampic, Skog Svanberg, Karlstrom, & Tyden, 2006). In poverty-ridden contexts, by contrast, the opportunities for young people are considerably more limited (Slugoski & Ginsburg, 1989). Education and employment opportunities are few, and becoming a parent often presents an alternative way to achieve adult identity (Brandt & Kvande, 1998; Edley & Wetherell, 1999). Masculine identities are closely linked to fatherhood in poverty settings (Brandt & Kvande, 1998; Edley & Wetherell, 1999; Connell, 1998; Morrell, 2007). The idea about becoming a father is often instilled at an early age among poor South African boys (Morrell, 2007). The high rate of teenage pregnancy shows that motherhood is a common route to womanhood among African girls in South Africa (Harrison, 2008).

Although adolescents are exposed to myriad social influences from peers, media, school and other institutions in their local environments, international research has documented that parents are a major influence in socialization (Davies & Friel, 2001). Parents are not only the first but also one of the most important educators for adolescents (Turnbull et al., 2008). International research has widely documented intergenerational effects on young people's shaping of identity, in which parents' sense of self, perceptions and behavior are being transmitted to children (Alberts et al., 2003; Davies & Friel, 2001; Owens et al., 2003; Zani, 1993, in Kroger, 2000). Parents particularly influence young people's perceptions about their future and social reality (Zani, 1993, in Kroger, 2000). A close relationship with parents positively influences adolescents' well-being and mental health (Owens et al., 2003) and their views on relationships and intimacy (Alberts et al., 2003; Davies & Friel, 2001). Also research among Africans in South Africa has documented that parents have great influence on adolescents' self concept and behavior (Mboya, 1998; Pretorius et al., 1999).

Children growing up in stable families with present and involved parents have better prospects for healthy development and smoother transitions to adult roles. Young people in two-parent families in South Africa are less likely to be involved in risky behavior related to substance use (Madu & Matla, 2003), sexuality (Brook et al., 2006) and violence (Abrahams & Jewkes, 2005; Ward, Martin, Theron, & Distiller, 2007). Since only 28% of children and adolescents in South Africa live with both parents (SAIRR, 2011/2012) it is important to be aware that the upcoming generation is probably internalizing the norms of broken families.

1.2.2. Womanhood and motherhood

In the recent decades women's increased access to the public sphere and opportunities for education and economic independence have led to debates about how womanhood and motherhood are linked. The ideal of a dual-earner family, in which both women and men are earning an income, is gaining prominence not only in high income, Western countries, but also in sub-Saharan African countries (Akande et al., 2006; Akande, Adetoun, & Osagie, 2006; Lubbe, 2007; Silberschmidt, 1999). This influences how womanhood and motherhood are understood. The two dominant discourses on the association between womanhood and motherhood are the discourse on motherhood as a natural urge for all women and the discourse on motherhood as socially constructed.

Motherhood has been represented as a natural urge in all women, with the primary responsibilities being related to domestic tasks and childcare. Not becoming a mother has been labeled as being deviant from the normal course of womanhood in this discourse (Chodorow, 1978; Gillespie, 2003). This discourse is reflected both in pre- and post-apartheid research in South Africa (Mamabolo, Langa, & Kiguwa, 2009; Krige, 1938).

Feministic and social constructionist perspectives developed in various socioeconomic contexts have questioned the ideas about motherhood as natural instinct and that

women's identity is achieved through the mother role. These discourses are instead concerned about the social context of motherhood and point out that mothering depends on environmental factors, such as the father role and gender equality. Scheper-Hughes (1992, p. 341) argues that mother love is "anything other than natural and instead represents a matrix of images, meanings, sentiments and practices that are everywhere socially and culturally produced". In view of the women's liberation movement during the 1970s, seeing motherhood as a natural urge is being dismissed as essentializing and romanticizing motherhood (Allen, 1984).

The process of democratization in South Africa has influenced how women view themselves in terms of gender (Gillespie, 2003). The constitution has enshrined gender equity (Minister of Women, Children and People with Disabilities, 2012), and an increasing number of women are formally employed (Lubbe, 2007). The increased opportunities for women in the labor market have made women start asking questions about womanhood and motherhood. Motherhood may not be the only route for women to attain adult identity (Gillespie, 2003). Education and work are also ways to self-realization as a woman. Nevertheless, the challenges related to being a working woman while maintaining the responsibility of being the primary and often sole caregiver for children is discussed. A study of young women students (Mamabolo et al., 2009) found that some of them aspire to build a career and view this as self-fulfilling yet want to become "good" mothers who spend time with their children. Their construct of womanhood is ambivalent given the challenges of combining it with a career. As a solution, some of the young women planned to make a career before having children.

Another and more radical feminist approach argues that motherhood is pathologizing, because the family forms the basis for oppressing women (Hare-Mustin & Marecek, 1990). Activists in South Africa are concerned that women do not get the same opportunities as men in the labor market and men play a more active political role that leads to less advancement for women in the process of democratization (Hutson, 2008). Given the prominence of both the discourse on motherhood as a natural urge

for all women and the discourse on motherhood as socially constructed in young South African women today, it is important to get more knowledge about how young women see womanhood and motherhood.

1.2.3. Masculinities and fatherhood

The position of men in society has changed in the wake of women's repositioning in many societies. Women's increasing access to the public sphere and opportunities for economic independence in recent decades has affected men (Georgas, 2006). Men's identity is changing given the dual-earner family, in which the man is no longer the sole economic provider and more is expected of men as caregivers and carrying out domestic tasks (Silberschmidt, 1999). As the roles of women in society have been repositioned during the past three decades, extensive research has been conducted on men and masculinity.

An early theoretical contribution is the concept of "hegemonic masculinity" described by Carrigan, Connell and Lee in 1985 as a type of masculinity that silences other types of masculinities and that may symbolize an ideal and dominant way of being a man in a society. Another milestone in the development of theory was 10 years later when Connell (1995) published *Masculinities*, arguing that masculinity is fluid and distinguishing between different types of masculinities and the power hierarchy between these. In recent decades, this field has expanded by using a wide range of methods from ethnographic studies to large-scale multinational comparisons (Hearn et al., 2002) and by developing areas of applied research within education, health, violence, counseling and fathering (Connell, 2006). The field of masculinities has been globalized from being mainly based in Australia, Europe and North America to expand to resource-limited regions and countries (Morrell, 2001; Silberschmidt, 1992). The field has diversified, since arriving at a universal definition of masculinity is problematic, but studies on masculinities have at least two commonalities: they are related to contemporary feminism, and they frame issues related to violence (Connell, 2006).

According to Connell (1995), there are some premises in common for all men since men have access to the patriarchal dividend, and that this may imply exercising power over women and other men. Although men in Africa represent large variations when it comes to ethnicity, religion, language and geography, they share the history of having dealt with colonials and now experiencing globalization where they may be positioned as “the other” (Ouzgane & Morrell, 2005). In this respect, the conceptual move from a focus on “men” to a focus on “masculinities” the last decade is fruitful (Morrell, 2005), because it makes it possible to explore the varieties of masculine qualities in men instead of categorizing men as one group sharing a spectrum of interests. In Africa, this is indeed valuable, with race and class also being acknowledged as analytical concepts within masculinities.

The field of masculinities has been enriched by African contributions since the mid-1990s (Horowitz, 2001; Jobson, 2010; Maharaj, 2001; Montgomery, Hosegood, Busza, & Timæus, 2006; Morrell, 2001; Ouzgane & Morrell, 2005; Reid & Walker, 2005; Silberschmidt, 1999). Despite calls for studies on men before this (Boserup, 1980), documentation on the formation of men’s identity in relation to the socioeconomic changes has been scattered. A man’s traditional role as the provider of the family was at stake in the collapse of the formal economy and high unemployment rate in countries in sub-Saharan Africa during the 1980s. The traditional definitions of male identity as the “breadwinner” and the “head of the household” were challenged. During the economic hardship, most researchers have examined women’s coping and empowerment. Silberschmidt (1992) have argued that the socioeconomic changes have implied more radical and negative changes for men’s sense of self than for women. Masculine identities in the family may be hard to change since they traditionally are linked to the dominant and superior roles (Minsky, 2000). The inability to shape new and positive identities has been called a crisis of men (Edley & Wetherell, 1999).

A crisis of men has also been discussed in South Africa. Men not being able to maintain their provider responsibility have been considered a crisis for men

(Ramphele, 2002). The high unemployment rate and women's increasing participation in the labor market challenge the provider role of men (Collinson et al., 2006; Posel & Devey, 2006). Absence caused by labor migration and the high rate of domestic violence has also been viewed as a crisis of men (Morrell & Jewkes, 2011).

Another discourse on men and masculinities in South Africa is on alternative masculinities oriented towards the private sphere (Shirani & Henwood, 2011). Men who are performing care work in nongovernmental organizations, schools, the health sectors and the community and men caring for sick relatives and being the primary caregivers for children exemplify alternative masculinities in South Africa (Morrell & Jewkes, 2011).

Fatherhood has lately been considered a subfield of the framework of masculinity and implies studying men's relationships with children and the changing traditional role models of fathers (Connell, 2006). However, the significance of the fathers' role and fathers' absence in child development has been a debated area in psychology since World War II, when father absence affected many children separated from their fathers (Jones, Kramer, Armitage, & Williams, 2003). Most research suggests that absent fathers influence a child's social, moral, and cognitive development, which may create behavioral difficulties (Jones et al., 2003; Minsky, 2000). The emotional and physical presence of fathers is important in the unconscious emotional development of children's identity (Minsky, 2000). The effects of involved fathering for a child's sense of well-being has been documented (King & Sobolewski, 2006; Videon, 2008). Especially boys may experience a need for a present father figure during adolescence (Jones et al., 2003). Fathers play a significant role in boy's identity formation and may influence their sons' ability to express affection (Floyd, 2001). Viewing the father role in terms of care and emotional involvement has developed a discourse on "new fatherhood" (Lewis & O'Brien, 1987).

In post-apartheid South Africa, fatherhood has been linked to negative connotations, such as “absence” and “violence” (Langa, 2010; Madhavan, Townsend, & Garey, 2008; Sylvester & Bojuwoye, 2011). Nevertheless, the discourse on “new fatherhood” is also visible (Morrell, 2006; Morrell & Jewkes, 2011). For example, the study of men by Montgomery et al. (2006) found fathers who have the sole care responsibility for children even though they are not necessarily the biological father of the child. They are fathering abandoned children in their extended family or their partner’s child. The research on fatherhood is still limited in South Africa, since studies have often used the perspective of women. The voices of men have been particularly called for in HIV campaigns (O’Regan, 2006; Peacock & Levack, 2004; Varga, 2001).

Improving knowledge about fatherhood in South Africa is important, because the situation of absent fathers is interpreted at the core of the crisis of the family. Likewise it is important to get more knowledge about motherhood in the same setting, since motherhood and fatherhood are tightly connected and inform each other. Fatherhood and motherhood are both debated as being in a state of transition. Men and masculinities are discussed in terms of a crisis at the same time as the discourse on “new fatherhood” is gaining prominence. Motherhood is increasingly seen in relation to women having more opportunities in the labor market. Given the transition of parent roles, more knowledge about fatherhood and motherhood in South Africa is needed, particularly from the viewpoint of young people in the poor, rural areas.

1.3. Approaching the problem

A sociocultural psychological perspective focuses on the individual in the family situated in the wider social environment. The core idea is that “people and their social worlds are inseparable: they require each other ... in a process of an ongoing mutual constitution” (Markus & Hamedani, 2010, p. 3). Two major approaches to human nature in the sociocultural psychological perspective are cross-cultural psychology and cultural psychology. Cross-cultural psychology looks for differences and similarities in mental functioning in two or more cultural groups. It focuses on the role of culture on human behavior and tries to tease out the cultural role from a comparative approach by

studying more than one society at a time (Berry, Poortinga, Breugelmans, Chasiotis, & Sam, 2011). Cultural psychology is rooted in anthropology and evolutionary foundations, is more concerned with studying the meanings of one specific culture and pays less attention to cross-cultural comparisons (Kitayama & Cohen, 2010). Despite the differences in the two approaches, they are closely connected, since they communicate and inform each other. The two approaches have sometimes been referred to jointly as (cross-) cultural psychology.

This study focuses on young people in rural, poor areas in their transition to adulthood, through a (cross-)cultural psychological lens. The study on the values of children (VOC) and the theory of family change constitute the theoretical starting-point for this dissertation. Before I present VOC and the theory of family change, I briefly describe the field of knowledge from it developed.

1.3.1. Family change research

The field of family change research has developed mainly in the high income, industrialized Western world – the minority world, whereas about 90% of the world’s population lives outside these societies – the majority world¹ (Kağıtçıbaşı, 2006). The social and economic influences on the structure and function of the family in the past 200 years have been the main concern (Georgas, 2006). The most notable change since the 1960s in high income, industrialized Western societies is the shift to smaller families. The fertility rate is generally decreasing, while the rates of divorce, cohabitation, remarriage, and women in paid labor have increased. The state has generally taken over functions of the family such as education and health care. The changes related to the family have been theorized in two ways: viewing the institution of the family as declining and breaking up or as adapting to the societal changes (Georgas, 2006).

¹ Minority world refers to the world’s population in the industrialized, Western countries, formerly called the First World. The majority world, formally called the Third World, refers to the population outside the high-income, industrialized Western countries (Kağıtçıbaşı, 2007).

Viewing the institution of the family as declining and breaking up presents several critical questions about the future existence of the family. Following Durkheim, Laing (1969, in Georgas, 2006) asked whether children would live in a structure called family at all when they become adults with their own children, and whether they would isolate themselves from their aging parents and relatives. Whether the nuclear family structure would develop in other regions of the world has also been debated. Popenoe (1988, in Georgas, 2006) based his notion about a post-nuclear family on studies in the United States and Sweden. He argues that the family is becoming weaker because of fewer functions, joint activities and less high-quality time in the family.

Viewing the institution of the family as adapting to societal changes represents the other main perspective (Georgas, 2006). Parsons (1965) argued that the nuclear family is a positive adaptation to living in an industrialized society, that family functions have been reduced and that people have become more independent from kin. Although Parsons' idealization of the breadwinner father and the housekeeper mother have received major criticism in the postmodern era (Saez, 2012), his interpretation of family change as providing increased opportunities for involvement in socializing children and for marital commitment has been more positively acknowledged.

The modernization theory has developed within the approach focusing on the ability of the family to adjust to societal changes. The theory proposes that families in industrialized Western countries used to live in an extended family structure and converged to a nuclear family structure as a response to the industrial revolution. The theory argues that families in all societies in the world will eventually follow the Western family ideal because of socioeconomic development (Inkeles, 1998). However, historical evidence shows that the typical family structure in pre-industrial Western societies was nuclear. Hence, families have not changed from an extended to a nuclear structure in the course of industrialization as proposed by the theory (MacFarlane, 1987). Recent evidence rather indicates an increase of the extended family structure in the United States in the past 30 years (Harrell, Kassner, & Figueiredo, 2011). Moreover, the economic advancement in other societies than the

high-income industrialized Western, such as India, Singapore, Republic of Korea, Hong Kong, Japan and Taiwan, has not necessarily led to a shift towards a nuclear family structure (Kağıtçıbaşı, 2006). For example, in India, the extended family structure has been the cultural ideal, with “jointness” symbolizing wealth, since supporting a large family is more expensive (D’Cruz & Bharat, 2001).

The modernization theory is mainly on research carried out in northern Europe and North America. About 90% of the literature about the family refers to Western, high income societies. The economic development in the minority world cannot explain family change in the majority world (Bennett, 1984; Kağıtçıbaşı, 2006). Kağıtçıbaşı (2006) wanted to study the phenomenon of family change in majority world contexts. She argued that, if the industrial revolution did not cause nuclear families in minority world countries, one could not expect nuclear families to develop in the course of modernization and globalization in other parts of the world either. Little is known about family change in majority world contexts. According to Kağıtçıbaşı (2006), anthropological studies in preindustrial societies in the majority world have a long history, but knowledge about family change in contemporary national societies is limited. This calls for alternative perspectives on the family in a much wider range of cultures.

1.3.2. The values of children study I (VOC I) (1970s)

The values of children study (VOC) (Arnold & Fawcett, 1975) represent a response to the need for cross-cultural studies on the family outside the industrialized, high income Western societies. VOC emerged within a developmental framework, which looked at the individual in relation to the level of the family and societal development (Smith, Bond, & Kağıtçıbaşı, 2006). VOC built on the earlier research that focused on the adaptive elements of the family in relation to societal changes. However, VOC was positioned in sharp contrast to Parsons’ idealization of the nuclear family by studying both nuclear and extended family structures and not emphasizing or idealizing either. VOC explores family change in view of its functional dynamics in terms of production

and reproduction in urban and rural areas of countries in both the minority and majority worlds.

The original values of children study (VOC I) was initiated at the conference on the Assessment of the Satisfactions and Costs of Children in 1972 at the East-West Center in Honolulu, Hawaii (Arnold & Fawcett, 1975; Bulatao, 1975; Fawcett, 1972). The main issue of concern was the alarming population growth in the majority world and the decreasing population in the minority world. This raised questions about people's motivation for childbearing. The overall goal was to learn more about people's underlying motivations for childbearing to assist policy-makers' attempts to influence fertility behavior and consequently reduce population growth. A research team of demographers, economists and psychologists wanted to answer the basic question: "Why do people want children?".

In 1975, a cross-cultural survey was carried out in Indonesia, the Republic of Korea, the Philippines, Singapore, Taiwan, Thailand, Turkey, the United States and Germany to find differences and similarities in the values of having children. Several reasons for childbearing were identified among the more than 20,000 respondents, mostly married women of reproductive age. The responses clustered into three reasons for wanting to have children, also referred to as values of children.

1. The **economic or utilitarian values of children** refers to the material benefits parents get from having children, both when the child is young and may contribute to household chores and as an adult, often reflecting aging parents' need for economic security.
2. The **social-normative values of children** is based on the social acceptance that married couples attain from having a child and the continuation of the family name.
3. The **psychological or emotional values of children** refer to the love, joy, and care in nurturing a child and the pleasure you may get from watching your children grow (Hoffman & Hoffman, 1973).

The values of children construct (voc²) suggests that women attach three types of values to having children that are seen as intervening variables between background factors (such as age, family structure, degree of urbanization and affluence) and socio-psychological variables (such as attachment) (Arnold & Fawcett, 1975; Fawcett, 1972; Hoffman & Hoffman, 1973; Kağıtçıbaşı, 1982).

Fertility behavior and the three different types of values of children were interpreted in relation to the cultural context. Evidence (Fawcett, 1972; Kağıtçıbaşı, 1982) showed that the economic values of children are important in less-industrialized, rural areas that report a high fertility rate and have a limited social security system. The economic functions of the family are important, and aging parents expect support from grown-up children. Mothers tend to prefer sons in this type of society, expecting that a son will provide in old-age. Psychological or emotional values of children were more important in urban, affluent contexts, where the fertility rate is low. Economic values of children did not seem to make sense in a context where having children is related to high costs, and where one does not expect financial support from children in old-age.

1.3.3. Theory of family change

Kağıtçıbaşı (2007) developed a theory of family change from the mid-1980s, which builds on VOC I. The theory of family change contributes to the limited theorization of the family in the majority world by presenting an alternative view to the modernization theory about a global convergence towards the prototypical nuclear family ideal in middle-class, industrialized Western societies. Kağıtçıbaşı (2007, p. 129) argues that change is happening at different levels in all societies but may take different forms in the various societies and does not necessarily follow the paths of high-income, industrialized Western countries. Finding out why and how the changes in family take place in different regions of the world is considered of major importance to be able to learn more about the future of the institution of the family. The main

² voc (in small letters) refers to values attributed to children by parents and VOC (in capitals) refers to the study (Kağıtçıbaşı, 2007).

underlying cause of the variations of the voc construct was socioeconomic development, the starting-point of the family change theory.

In the theory of family change, socioeconomic development is linked to the family and the individual (Kağıtçıbaşı, 2007). The family is situated in a cultural and socioeconomic environment and understood both in terms of social and psychological features. The social characteristics reflect the family structure. Kağıtçıbaşı defines family structure not only as extended or nuclear. It includes the directions of wealth flows between generations, family ties, fertility and the status of the woman within the family. The psychological characteristics of the family refer to the family system, such as family values, family interaction, socialization and relations between self and others. The economic and the psychological and emotional voc are reflected in the theory of family change through the changing emotional and economic functions of the family. To avoid confusing the structure and function of the family, Kağıtçıbaşı (1996) coined the concepts “structurally extended” and “functionally extended” families. The former refers to the cultural ideal of a large family and the latter to a nuclear family structure in which the ties between nuclear households are closely knit, such as in terms of joint production and childcare.

The general model of family change (Fig. 1) in cultural contexts developed three heuristic models, which suggest that functional links between society, culture, the family and the self are developed: 1) the family model of interdependence, 2) the family model of independence and 3) the family model of emotional interdependence.

The family model of interdependence (Fig. 2) is a prototype of families living in collectivistic cultures, where people tend to view themselves as part of a group (such as a family) and consider the needs of the group more important than those of the individual.

The living conditions are characterized by agrarian, subsistence economies, often situated in the majority world. The family structure is counted through the male line

(patrilineal) and functionally extended. The material and emotional investment is not only channeled between children and parents but also circulated within a net of grandparents, aunts, uncles or other family members. Typically, aging parents are supported economically. Women's status in the family is low, and the fertility rate in the society is high. Giving birth to a son may increase a woman's status within the family. These social characteristics are linked to the psychological characteristics of the family system in terms of high son preference, the value of interdependence and the economic voc.

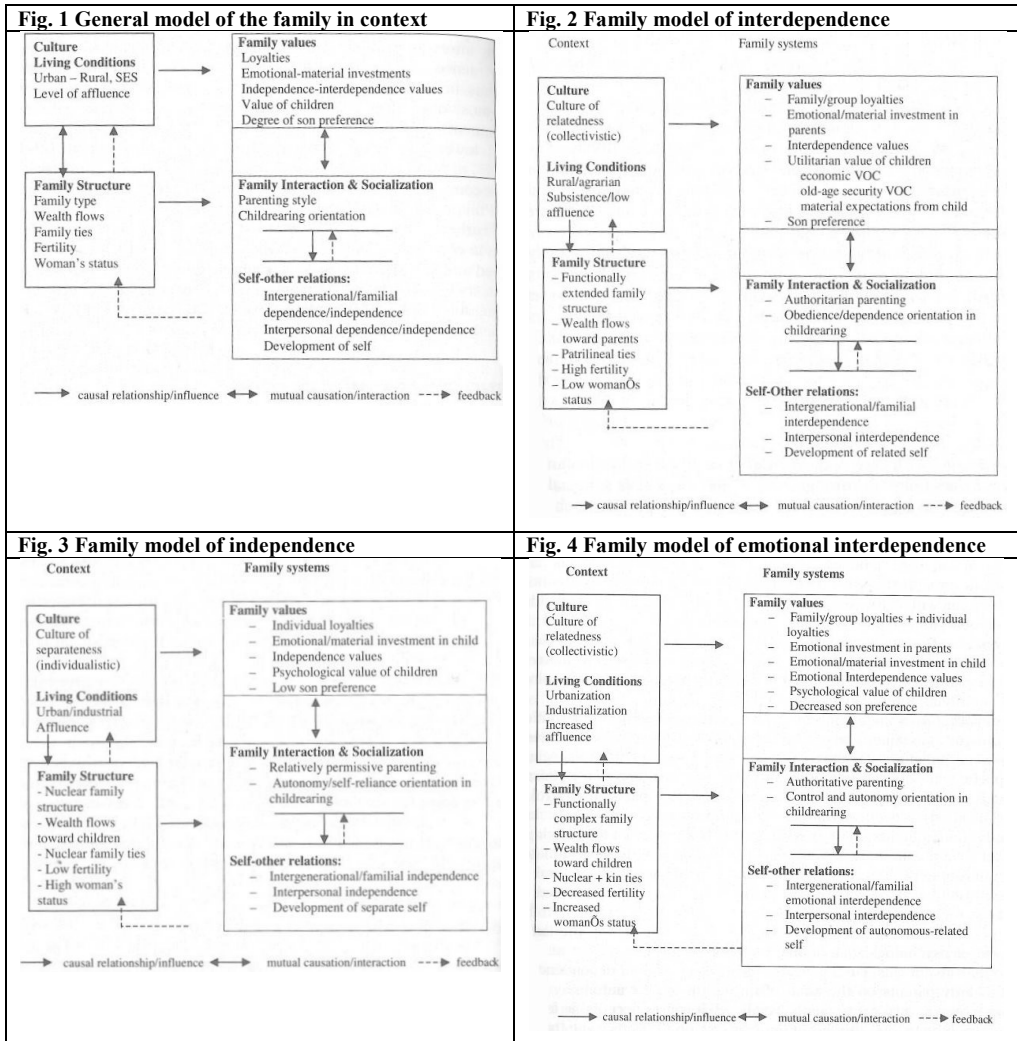
The family model of independence (Fig. 3) is a prototype of families living in individualistic cultures, where people tend to focus primarily on themselves and the needs of their immediate families. The living conditions are characterized by affluence and the urbanization of middle-class societies. The family structure is nuclear, in which the material and emotional investment is directed towards children rather than the oldest generations. The status of women in the family is high, and the fertility rate in society is low. These social characteristics are linked to the psychological characteristics of the family system in terms of low son preference, of independence and the psychological and emotional voc.

The family model of emotional interdependence (Fig. 4) is a dialectic synthesis of the two prototypes described above. The model is characteristic of majority world contexts, where the living conditions have improved through increased urbanization and industrialization. The societal changes are reflected in unique ways in the institution of the family and differ from families in the regions experiencing the industrial revolution in the minority world. The family structure is characterized by being functionally complex and differs from the family structure described in the model of interdependence. The interdependence between generations is sustained for emotional investment, but material investment loses its importance. Emotional investment flows towards both children and aging parents, but material wealth is not invested in aging parents. In such contexts, the fertility rate is often declining, and the status of women in the family is improved. This is linked to the psychological

characteristics of the family system in terms of a decreasing preference for having a son, emotional interdependence value and the psychological and emotional voc.

Fig. 1-4.

Four models of family change³



³ The figures are reproduced from: Kağıtçıbaşı, C. (2007). *Family, self, and human development across societies. Theories and applications*. Hillsdale, NJ: Lawrence Erlbaum Associates, 2007. Reprinted with permission.

1.3.4. Values of children study II (VOC II) (2000s) and the theory of family change

The original VOC studies conducted in the 1970s (VOC I) were repeated in Germany, Turkey, Indonesia and the Republic of Korea in the 2000s and called VOC II (e.g. Kağıtçıbaşı & Ataca, 2005; Kim, Park, Kwon, & Koo, 2005; Mayer, Albert, Trommsdorff, & Schwarz, 2005; Trommsdorff, 2001; Trommsdorff & Nauck, 2003). The data from these countries provided a longitudinal study over a 30-year period, which made it possible to study possible changes over time in values of children. Aiming to develop broader cross-cultural comparisons, VOC II included more countries: Israel, India, France, the Republic of China, the Czech Republic, Ghana and South Africa (e.g. Mareš & Možný, 2005; Sabatier & Lannegrand-Willems, 2005; Sam, Peltzer, & Mayer, 2005; Zheng, Shi, & Tang, 2005). An additional aim in the VOC II studies was to gain more knowledge about intergenerational relations by researching three generations of biologically linked women; teenage women, mothers and maternal grandmothers (300 families in each country). In addition, the mothers of toddlers were recruited (300 in each country). Along with declining fertility rates, especially in high income, industrialized Western societies, there has been interest in researching why people do not want to have children. These reasons have also been related to economic (such as too expensive), social (such as reducing social activities) and psychological (such as emotionally draining) factors (Kim et al., 2005).

Most of the countries in the VOC I study have experienced great socioeconomic development since the 1970s, reflected in the VOC II study that give support to the theory of family change. The psychological and emotional voc is gaining prominence, while the economic and utilitarian voc is becoming less important in the 2000s (Kağıtçıbaşı & Ataca, 2005; Kim et al., 2005; Zheng et al., 2005).

In Turkey, the increased urbanization, economic growth, and better educational opportunities since the 1970s seem to have affected how women value children. The economic voc was emphasized more strongly in the 1970s (Kağıtçıbaşı, 1982) than in the 2000s when the psychological and emotional voc has become more important

across social strata. (Kağıtçıbaşı & Ataca, 2005). Nevertheless, the results should be considered based on differences in the sample: the VOC I study was carried out in a national representative sample of married mothers, and the partial replication in VOC II focused on a purposive sample of mothers of adolescents (older mothers), their mothers (grandmothers) and the adolescents, and a separate group of younger mothers 1) in urban areas with medium and high socioeconomic status, 2) in urban areas with low socioeconomic status and 3) in rural areas. Since two thirds of Turkey's population is urban, Kağıtçıbaşı (2007) argues that comparisons can be made to the VOC I study. The results from the studies in Turkey support the family change theory by showing that the material (economic voc) and not psychological (psychological and emotional voc) declines with economic development. This also provides evidence for the idea about a convergence towards the model of emotional interdependence.

The assumption about individuality and the family model of independence in the minority world is debated (Kağıtçıbaşı, 2007, p.156). Less need for economic investments in the family as a result of socioeconomic development does not necessarily imply a decrease in emotional interdependence. On the contrary, the emotional functions of the family are adaptive and important elements in societal change. A review of studies in individualistic cultures concluded that the emphasis on emotional relations in the family is becoming more prominent (Kağıtçıbaşı, 2007, pp. 156–161). Kağıtçıbaşı proposes a different global convergence than the modernization theory: Countries both in the majority and the minority worlds converge towards a pattern of decreasing economic dependencies in the family, but sustained or more prominence to emotional interdependencies in the family.

1.3.5. The values of children study (VOC) in South Africa

In the 2000s, South Africa and Ghana were the first countries in Africa to be included in the VOC study. The aims of the South African VOC study (Sam et al., 2005) included investigating women's preferences for family size in three cohorts of mothers

(mothers of toddlers, mothers of adolescent children and grandmothers) and determining to what extent the structure of the voc can be identified. The results indicated a steady decline in the ideal number of children from the grandmothers to the mothers with a toddler. Fertility was positively associated with the traditional or utilitarian voc, and negatively associated with the psychological or emotional voc. This is in accordance with the original idea of the VOC study (Arnold & Fawcett, 1975).

The three suggested types of vocs (economic, social-normative and psychological) found in earlier VOC studies were not clearly recognized. Instead, two types of vocs were identified: 1) social and emotional and 2) traditional or utilitarian. These were interpreted as a “conglomeration” (p. 372) of the three types of vocs. The women did not very clearly distinguish between emotional, social and practical values. The social and emotional voc consists of all the emotional, social-normative and practical benefits of having a child, but the traditional and utilitarian voc only comprises utilitarian voc. Sam et al. (2005, p. 372) argue that “the unique socio-political situation of the country where women have not really had the liberty to decide on their fertility behavior” may explain discrepancy with earlier VOC studies.

This indicates a need to know more about the socioeconomic context of family life and reproduction in South Africa. It is necessary to learn more about the particular area of Limpopo, where the participating women live, and how motherhood and parenthood are understood.

The literature search for this dissertation was completed in January 2013.

2. Study rationale and research aims

The overall goal of this study is to improve understanding of values related to reproduction and family life among young people in poverty-ridden communities in South Africa. Young people's family values are key in learning about how to break the negative trends in the institution of the family in the country (Holborn & Eddy, 2011).

Values serve as standards to guide the selection or evaluation of behavior, people or events (Smith & Schwartz, 1997), and this study on family values is conducted accordingly – to explore the evaluation and standards regarding reproduction and parenthood of young adolescents in a low-income area in the Limpopo Province, South Africa. Family values were studied through attitudes towards having children and experiences of and expectations towards parenthood among adolescent men and women.

The first paper aimed to trace continuity and change in attitudes to reproduction among adolescent women in Limpopo and their mothers and grandmothers. The second paper aimed to identify how adolescent men conceptualize fatherhood in the Mankweng area in Limpopo. The third paper aimed to identify how adolescent men and women conceptualize motherhood in the same area.

2.1. Study I

The overall aim of the first study was to identify changes in and/or continuities of reproductive attitudes in three generations of women in the Limpopo Province, South Africa.

The study aimed to add to the international VOC studies by exploring the values of children (voc) in a setting in Africa. This could contribute to the development of the voc construct as a cross-culturally valid concept. One VOC study had already been carried out among cohorts of mothers in South Africa (Sam et al., 2005), but this study aimed to study reproductive attitudes in three generations of women: adolescent

women, their mothers and grandmothers. Using three generations of women enabled us to study how attitudes towards reproduction have changed and/or continued. The women in the grandmother generation gave birth during the first period of apartheid, the women in the mother generation gave birth during the last years of apartheid and during post-apartheid, and the adolescent women have not yet started their reproductive life phase. The women in the study represent very different perspectives when answering questions related to having children. This spectrum is interesting considering the societal transformation from an apartheid regime to a post-apartheid society, with the profound changes in the institution of the family one also expects a break in women's family values.

The study aimed to emphasizing the adolescent women, by using them as starting-point in comparing the reproductive attitudes with that of the older generations of women. The focus on nulliparous adolescent women expands the previous VOC study in South Africa (Sam et al., 2005), which only looked at mothers. The views of the young women make an important contribution about the direction of the institution of the family. The adolescent women are the future generation of women and mothers and represent the largest cohort in the population (15–19 years old) (Stats SA, 2010a). It is important to find out more about the family ideals of the upcoming generation of women in a context where the gender and parent roles are in transition, and where motherhood is increasingly seen in relation to women having more opportunities in the labor market.

This study furthermore aimed to give voice to adolescent women who are living in an economically disadvantaged, predominantly rural province, because women growing up in a poverty setting face several challenges related to reproduction in their transition to womanhood. They are particularly at risk of experiencing unwanted pregnancy and of being infected of HIV. Young women's perceptions about reproduction may be useful in planning family policies in South Africa, especially in the rural provinces. This study aimed to identify changes in and/or continuities of

reproductive attitudes in three generations of women in South Africa through the following research questions.

- 1) What are the women's views on the ideal timing of the first childbirth?
- 2) What are the women's views on the ideal number of children?
- 3) What are the women's preferences towards the sex of the child?
- 4) What reasons do the women give for wanting children?

2.2. Study II

The overall aim of the second study was to identifying local conceptualizations of fatherhood through adolescent men's experiences of being fathered and their aspirations about becoming a father in the area of Mankweng in the Limpopo Province.

The study aimed to shed light on the results of the VOC studies in South Africa (Study I; Sam et al., 2005) through developing conceptualizations about fatherhood.

The VOC studies have mainly focused on women, and the VOC studies in South Africa have solely researched women. Not including the views of men when researching family values only provides partial understanding of the family situation. The perspectives of adolescent men in Limpopo were expected to add insight to the reproductive attitudes of the women living in this area.

The aim of researching local conceptualizations of fatherhood differs from the rationale of studying the already developed construct of the values of children (voc). Little was known about how adolescent men understand fatherhood in Limpopo. Adolescent men's personal experiences and perceptions of norms related to fatherhood can give more information about the situation of father absence, which represents a core issue of the family in crisis in South Africa. Male labor migration is particularly prevalent in the Limpopo Province, which makes the views of adolescent men from this province extremely relevant.

Studying fatherhood in poverty settings is important, because it represents a common transitional path to adulthood for young men and a lens for learning more about masculinities (Connell, 1998). This study may add to the scattered literature about how adolescent men in economically disadvantaged areas in South Africa shape masculine identities and may contribute to the discussion about men in crisis in the country (Morrell, 2001; Ramphele, 2002) and the discourse on “new fatherhood” (Morrell & Jewkes, 2011; Ramphele, 2002; Roy, 2008). Anderson, Kaplan, Lam, and Lancaster (1999) studied experiences of being fathered by biological fathers versus stepfathers in Cape Town, and Morrell (2006) studied the paternal aspirations of adolescent men in school of varying socioeconomic status in Durban. Otherwise, little is known about how young men experience fatherhood in poor areas in South Africa. This study aimed to explore how young men conceptualize fatherhood in the Mankweng area of Limpopo through the following research questions.

- 1) How do adolescent men experience interacting with men and fathers about the transition to manhood?
- 2) How do adolescent men describe their expectations towards their own role as a father in the future?

2.3. Study III

The overall aim of the third study was to identifying local conceptualizations of motherhood through adolescent men’ and women’s experiences of being mothered and the adolescent women’s aspirations about becoming a mother in the area of Mankweng in Limpopo.

Given the limited literature on motherhood in Limpopo, this study was conducted to enhance the understanding of women’s reproductive attitudes in Study I and in Sam et al. (2005) through developing conceptualizations about motherhood.

Developing motherhood conceptualizations in Mankweng was considered useful, because they could inform the conceptualizations developed on fatherhood in Study II, and make it possible to compare the parenthood agendas of young men and women. Exploring conceptualizations of both fatherhood and motherhood within a particular geographical area improves understanding about the current crisis of the family, because it may give new information about the experiences of growing up in single-mother homes and having absent fathers.

This study aimed to merge a gendered perspective on motherhood that scrutinized both male and female voices. The gender perspective is particularly relevant in a context where men and women traditionally have had very different roles (Mönnig, 1967) but where the role expectations are changing substantially. Women remain the primary caregivers for children while becoming more active in the formal labor market (Akande et al., 2006). Women spending more time outside the home in a context of father absence may influence the socialization of children into adult roles and identities. This study aimed to voice young people's perceptions about motherhood through the following research questions.

- 1) How do the adolescent men and women experience being mothered?
- 2) How do the adolescent women describe their future aspirations about mothering?

3. Study design and Methods

First, this section presents the study site. Then, the overall mixed-methods design is presented, followed by the quantitative design and procedures and the qualitative design and procedures. Finally, ethical considerations are discussed.

3.1. The study site

The study site is situated within the Capricorn District Municipality in the Limpopo Province of South Africa. The quantitative data (Paper I) were collected from local rural and urban municipalities in Capricorn, and the qualitative data (Papers II and III) were collected in one semiurban site, Mankweng, in Capricorn.

The Limpopo Province is located in the far north of South Africa, bordering on Botswana, Zimbabwe and Mozambique. The province is generally considered poor and predominantly rural and disadvantaged (Stats SA, 2010c). The main industries are agriculture, mining and tourism. The unemployment rate is very high, at 44% (SAIRR, 2011/2012), and the median earnings are among the lowest in the country at ZAR 1800 per month (USD 180) (Stats SA, 2010d). Many people migrate to find work in the more urbanized, neighboring Gauteng Province (Stats SA, 2010b).

Limpopo Province accounts for 11% of the total South African population of nearly 50 million (Stats SA, 2010b). The great majority of the inhabitants of Limpopo are Africans (97%). The province is young, with 58% of the population younger than 24 years old (Stats SA, 2010a), and there are more women than men from age 25 years (Stats SA, 2010c). The average household size is 3.8 (SAIRR, 2011/2012). The fertility rate is higher than the national total fertility rate but generally lower than those of other rural areas in sub-Saharan Africa. The fertility rate has declined from 6.6 in 1960 to 3.1 in 1998 (CIA World Fact book, 2012a) to 2.28 in 2011 (CIA World Fact book, 2012b). The life expectancy for men born from 2006 to 2011 is 54.8 years

versus 57.8 years for women (Stats SA, 2010a). The number of recorded marriages declined from 1999 to 2008 (Stats SA, 2010b).

The Capricorn Municipal District is located at the core of the province and counts 1.2 million inhabitants (Stats SA, 2009). Mankweng is located 40 kilometers east of the provincial capital, Polokwane (Fig. 5). It comprises semiurban townships, rural villages and informal settlements. Compared with other areas in Capricorn, Mankweng has developed financial infrastructure and services, including branches of South Africa's large chain stores, and the University of Limpopo is located there. The standard of living has improved in several ways in the past decade: nearly 50% of the households use electricity for lighting, cooking and heating, and more than 80% have access to piped water. Most households do not have a flush toilet but a pit latrine without ventilation. Some households have mobile phone, radio and television, but few have a computer or Internet access (Stats SA, 2009).

Fig. 5
Map of South Africa and its provinces



During apartheid (1948–1994), Limpopo consisted of three homelands (Gazankulu, Venda and Lebowa). The homelands were organized to separate the African and white citizens. Similarly to the other African homelands, Gazankulu, Venda and Lebowa were mainly rural and considerably disadvantaged, offering unproductive land, poor housing and few work opportunities (Marais, 2005). Policies deeply affected family life. The Mixed Marriages Act of 1949 prohibited people of different ethnic groups from marrying, and the Abolition of Passes and Documentation Act of 1952 contributed to splitting families. The Abolition of Passes and Documentation Act of 1952 restricted people from moving out of their homelands. The urban labor preference policy secured white employment before Africans could enter the city.

Northern Sotho is the major ethnic group in Limpopo. Northern Sotho arrived in the area around 1650 and built a powerful empire that lasted until 1826. They were predominantly agricultural, with men raising cattle, women making pottery and both growing crops, weaving and carrying out basketry (Krige, 1938). Various spirits, souls and powers have been deeply embedded in their worldview. Spiritual life was deeply rooted in daily life and passed on through generations (Mönnig, 1967). The family has been the core of the social organization. A married man headed a family, and the children belonged to their father's lineage (patrilineage). The household arrangements were patrifocal, centered on the father and his kin (Kuper, 1975, Mönnig, 1967). The mother of the child was included in her husband's family upon marriage. The families carefully planned and decided on marriages. The family operated as one economic unit (Mönnig, 1967). Marriage goods (cattle), called *lobola*, were transferred from the groom's to the bride's family and symbolized the obligations of the two families.

Having many children symbolized wealth and strengthened the power of the family, especially having sons. Fertility has been strongly associated with both male and female identity but most strongly bound to female identity. A female was not fully considered a woman until she gave birth to her first child (Mönnig, 1967). Grandmothers played an important role in upbringing young children and giving advice regarding health (Penn et al., 2010; Wolf, 2005). Older people were also influential in decision-making and education. Appointed older men and women carried out comprehensive initiation rituals for boys and girls in their transition to adulthood.

Some of the customs of the Northern Sotho are still prominent in daily life. For example, faith healing is practiced through rituals and the use of holy water, ash, prayers and tea (Peltzer, 1999). Religion is important, and many of the Northern Sotho belongs to the Zion Christian Church (ZCC). The custom of Lobola is still required on marriage. However, the patriarchal family structure is according to local sources whom I interviewed (see p. 70 and Appendix 1), not as dominant anymore, and the initiation rituals for boys and girls are disappearing. The Northern Sotho use their own language called SePedi, and most young people understand English well.

Fig. 6
Photo of Mankweng



3.2. Mixed-methods design

Combining qualitative and quantitative sources of data to answer research questions in social and behavioral research can be traced back to the late 1960s. The development of mixed methods started systematically during the 1980s when scholars from various disciplines, including nursing, sociology and education, brought together their thoughts about how to link the two paradigms of quantitative and qualitative methods. Over the years, the mixed-methods approach has received increasing acceptance and has often been referred to as a third paradigm (Tashakkori & Teddlie, 2003). Nevertheless, definitions of the design appear to be a continual issue of debate (Johnson, Onwuegbuzie, & Turner, 2007). Morse and Niehaus (2009) see the mixed methods as comprising one dominant (qualitative or quantitative) and one additional component (qualitative or quantitative), and the additional component cannot be

considered as an independent study method. In this tradition, the various studies included in the research design must be published as a whole and not in separate studies. Other scholars (Creswell & Plano Clark, 2011; O’Cathain, Murphy, & Nicholl, 2010), view qualitative or quantitative substudies involved in a larger project as independent pieces of work that can be published alone. According to this tradition, the methods can be mixed at any point in the study. This latter tradition has informed the design of this study.

3.2.1. Sequential-emergent mixed methods design

I used a mixed-methods design (Tashakkori & Teddlie, 1998) by combining quantitative and qualitative methods in a sequential, emergent manner (Fig. 7) (Creswell & Plano Clark, 2011). The design is sequential because a quantitative study was conducted first, followed by the qualitative studies. The design is emergent, because the need to incorporate a qualitative approach developed during the process of analyzing the quantitative data.

I used a mixed-methods design in this study because I assumed that mixing the methods would give insight into how people perceive reproduction and family life that could not be obtained from either quantitative or qualitative methods alone. Further, different methods can answer different research questions, which enabled me to investigate family values from two very different angles: through attitudes towards reproduction among three generations of women and through adolescents’ perceptions of parenthood. Incorporating both quantitative and qualitative methods is an advantage in researching complex issues (O’Cathain et al., 2010). Family life in South Africa is complex because of the great diversity (Holborn & Eddy, 2011). Moreover, families in South Africa are described as being in crisis today, which further complicates the task of representing values related to family life (Holborn & Eddy, 2011). Combining quantitative and qualitative methods to develop a fuller picture of the research problem has similarly been done in a sociological study of young people’s attitudes towards their lives (Woolley, 2009).

Theoretical lenses

The theoretical lenses used in this study were cross-cultural psychology and cultural psychology (see p.26-27). The cross-cultural psychological approach mainly follows a deductive way of reasoning, and the cultural psychological approach is predominantly inductive.

Deductive reasoning starts with general statements about mental functioning and aims to develop universal and comparative understandings of human behavior across various cultures (Berry et al., 2011). Inductive reasoning evaluates general propositions derived from specific examples, often drawn from everyday life events, and aims to develop meanings valid in one particular culture and not to develop cross-culturally valid concepts (Markus & Hamedani, 2010).

First, family values related to reproduction and family life were studied using mainly a cross-cultural, deductive approach. The research aims were to compare the attitudes about having children across three generations of women in South Africa, and to reflect upon these with the results of VOC studies in other countries. Testing the voc construct in a South Africa setting could contribute to develop cross-culturally valid concept.

Next, family values were researched using predominantly a cultural, inductive approach. This approach started with individual experiences and aspirations and aimed to produce knowledge about reproduction and parenthood in Limpopo. The aim was to identify concepts valid in this specific cultural context and not to develop cross-cultural ideas about parenthood.

These perspectives may be viewed based on the dialectic theory of mixed methods (Greene & Caracelli, 1997). The dialectic theory aims to produce knowledge based on placing methods side by side by using clearly defined and diverse research paradigms (Betzner, 2008). By using both deductive and inductive approaches, I assumed that my understanding of family values in Limpopo would increase and better achieve a

unified whole than if I only used one of the approaches. I carried out the mixed-methods approach in three separate phases, which are detailed in the following paragraphs.

Phase 1

The first phase required a deductive approach, since the aim was to test assumptions about having children in the international VOC study in a South African context. Values of children (voc) had already been identified and discussed in relation to background factors and socio-psychological variables in various cultural contexts (Arnold & Fawkett, 1975; Fawkett, 1972; Hoffman & Hoffman, 1973; Kağıtçıbaşı, 1982). Values of children had also been researched among three cohorts of mothers in South Africa (Sam et al., 2005). The present study aimed to continue the work of Sam et al. by researching adolescent women and making comparisons with the mothers' and grandmothers' generations through the following research questions.

- 1) What are the women's views on the ideal timing of the first childbirth?
- 2) What are the women's views on the ideal number of children?
- 3) What are the women's preferences towards the sex of the child?
- 4) What reasons do the women give for wanting children?

These questions required quantitative methods, because they were standardized to make comparisons across generations. The quantitative data collection, analysis and write-up took place before the next phase of the study started.

Phase 2

The second phase of the study was initiated in response to the limitations of the first phase. Several issues that rose from the quantitative VOC studies carried out in South Africa (Paper I; Sam et al., 2005) needed to be clarified.

- 1) The assumption of the VOC study that childbearing is an active, conscious choice by women or couples did not seem appropriate in South Africa, where 70% of

pregnancies among women 18–35 years old were unplanned (Umsobomvu Youth Fund & HSRC, 2003). This meant that there were questions about having children in Limpopo that could not be answered through the deductive approach.

2) The voc construct constituting three values described in the VOC I studies (Arnold & Fawcett, 1975; Fawcett, 1972; Kağıtçıbaşı, 1982) have not been clear in the VOC II studies, because they found from two to four values (see Kim et al., 2005; Mareš & Možný, 2005; Mayer et al, 2005; Paper I; Sabatier & Lannegrاند-Willems, 2005; Sam et al., 2005; Sam, Amponsah, & Hetland, 2008). The divergent results may be a result of the use of different measures and samples. Kim et al. (2005) and Mareš & Možný (2005) reported that they had used factor analysis, and not principal component analysis, like Sam et al. (2005), Paper I, and Sam et al. (2008). Kim et al. (2005), Sam et al. (2005) and Sam et al. (2008) included only groups of mothers, and not adolescent women like other studies (Mareš & Možný, 2005; Mayer et al, 2005; Paper I; Sabatier & Lannegrاند-Willems, 2005). Given the uncertainty about the number of values of children and why the South African VOC studies (Paper I; Sam et al., 2005) found two values of children, and particularly why it was found in the adolescent women, who had not been studied until the present study in South Africa (Paper I), I considered it useful to get more knowledge about the cultural context of the adolescent women.

3) Family life in Limpopo in South Africa is highly influenced by labor migration among men, but the VOC study in South Africa only investigated women. I wanted to find out more about how young men understand parenthood.

4) The identified difference between the future aspirations of having children and the social reality in which the young women lived (Paper I) intrigued me to find out more about this by investigating how young women understand motherhood.

Only qualitative methods could provide the necessary tools to find out more about the points raised above. The aim was not to test existing assumptions and frameworks but

to explore a field that was largely unknown based on the informants' life world. An open-ended approach in which the informants could decide on the types of responses they wanted to give and not being tied to specific response alternatives was important. A research design that offered flexibility was also crucial so that the topic guides could be adjusted during data collection. Being able to follow up topics of interest was important, even if they were not included in the topic guide.

Qualitative methods were used to explore the following research questions.

- 1) How do adolescent men experience interacting with men and fathers about the transition to manhood?
- 2) How do adolescent men describe their expectations towards their own role as a father in the future?
- 3) How do young men and women experience being mothered?
- 4) How do young women describe their future aspirations about mothering?

The qualitative data collection, analysis and write-up took place before the final phase started.

Phase 3

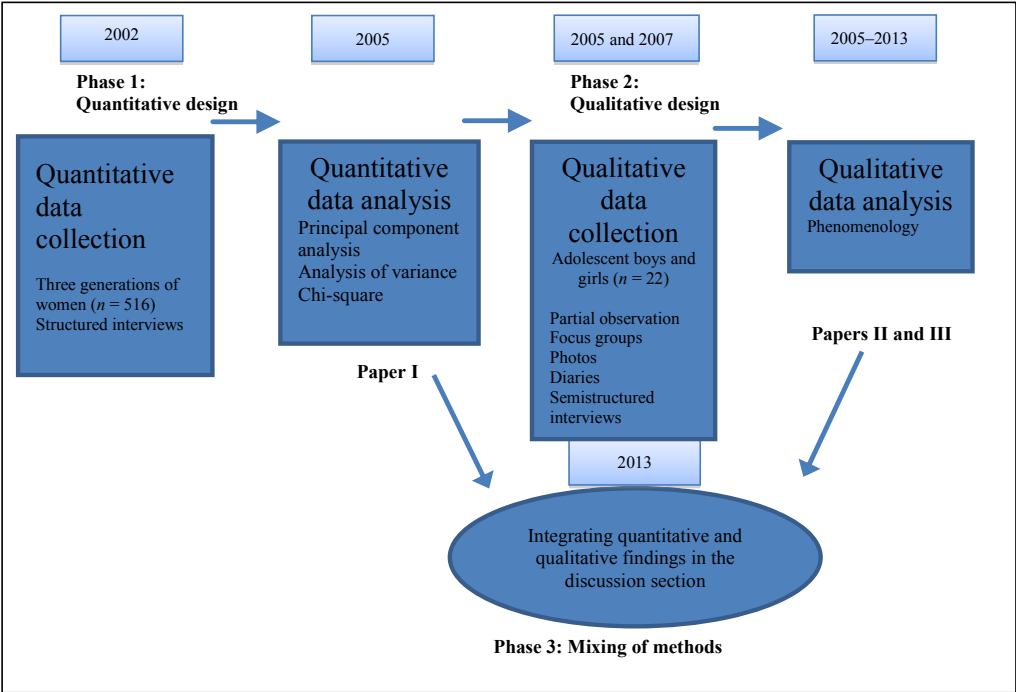
The third phase integrated the quantitative and qualitative methods. The aim was to present a fuller view of family values by reflecting on the findings about attitudes towards reproduction (quantitative data, Paper I) and perceptions about parenthood (qualitative data, Papers II and III) in the discussion chapter of this dissertation.

The prioritized approach in the mixed-methods design

Priority was given to the subsequent qualitative methods (phase 2). This priority is commonly indicated as: quan>QUAL (Morse, 2003). Addressing the limitations of the quantitative design in the first phase required using a wide range of qualitative methods and follow-up data collection. The qualitative data were used to explore how parental norms were embedded in the sociocultural setting. This demanded thorough contextualization of the living surroundings of the study participants, which was not

carried out in the quantitative study. More resources were used in the qualitative phase in terms of time analyzing and writing up. Putting more resources into the qualitative part when the study topic is considered complex is useful (De Lisle, 2011), and this applies to family values in South Africa (Holborn & Eddy, 2011). The ability of qualitative methods to more accurately provide understanding of complex issues is grounded in the use of open-ended questions, in which the participants can describe their views freely. Follow-up questions in a face-to-face interview situation may enhance the accounts of the participants. Alternative or unknown perspectives that frame the complex issue of the family may be brought to light through the open-ended approach. This rationale was also used in another mixed-methods study that researched conceptualizations in the family (Brannen, Hepinstall, & Bhopal, 2000).

Fig. 7
Sequential emergent mixed-methods design



3.3. Cross-sectional design

The first phase of the mixed-method design involved using a quantitative, cross-sectional design (Paper I). The data had been collected in South Africa as part of the international VOC study in 2002 (Appendix 2) before this dissertation was planned. I was given access to analyze the material in 2005. The general aim of the VOC studies was to understand why people wanted to have children in various cultural contexts. This study wanted to continue Sam et al.'s study (2005) on three groups of mothers in South Africa, by studying a new group of women: adolescent women. The aim was to compare their views about having children to the views of two of the mother groups already studied in Sam et al.: mothers with an adolescent child and grandmothers. This study composed a triad of biologically linked women, which created a platform for exploring continuity and changes in attitudes towards reproduction.

A cross-sectional design was deemed appropriate since the participants could differ in the variables related to having children, but sharing the background characteristics of sex, socioeconomic status and ethnicity.

3.3.1. Participants and procedures

A total of 516 women from the Capricorn Municipal District in the Limpopo Province participated in this study. The participants comprised three generations of women: adolescent women ($n = 197$), mothers ($n = 186$) and grandmothers ($n = 133$). Relatively few grandmothers participated because of ill health or death. To increase the size of the grandmother group, the grandmothers of adolescents other than the participants were included. The participants in the mother group were all biological mothers of the adolescent women. The mean age of the adolescent women was 14 years (standard deviation (SD) = 1.2), 40 years for the mothers (SD = 7.05) and 65 years for the grandmothers (SD = 9.60). All belonged to the Northern Sotho ethnic group, and most identified themselves as having lower middle socioeconomic status and were Christians.

The inclusion criteria for participation defined in the international VOC protocol were that the adolescent women should be 12–15 years old and had no child and that the mothers should be married. The latter criterion could not be adhered to in South Africa, since most mothers were not married. Seventy-nine per cent of urban, African mothers are single (TGI, 2007, cited in Holborn & Eddy, 2011).

Participants were recruited through a multi-stage cluster sampling procedure. This implied identifying a starting household with an eligible respondent in six rural and urban areas in Capricorn, Limpopo Province, including the semiurban site of Mankweng. The participants were interviewed orally face-to-face using a closed, quantitative interview with predefined questions and, most often, predefined response alternatives in a questionnaire.

The research assistants carrying out the interviews were four undergraduate or graduate Northern Sotho women in their late twenties. The interviews lasted 2 hours on average, and data collection took 3 months to complete. The research assistants reported that none of the selected women refused to be interviewed. A small amount of money was given to the participants as a surprise gift after the data collection was completed.

3.3.2. Measures

The measures were based upon the VOC Questionnaire (VOCQ) (Appendix 3). The VOCQ was developed by an international group of researchers and included the topics of the values of children and intergenerational relations (Trommsdorff, 2001; Trommsdorff & Nauck, 2003). Other than adjusting the demographic variables to suit the South African context, the versions of the VOCQ were identical to the international questionnaires. There were separate questionnaires for each group of women: the adolescent women, the mothers and the grandmothers. The three questionnaires were translated from English into SePedi and back-translated according to scientific standard procedures (Brislin, 1986).

The full scale (the one used to assess the reasons for wanting and for not wanting to have a child) has been described in various publications (special issue of *Applied Psychology: An International Review*, 2005, 54(3)); 23 of the 48 items included were taken from the original VOC study in the 1970s. Twelve items were drawn from the Family and Fertility Survey (Pohl, 1995), and 13 items were developed specifically for the VOC II replication in the 2000s. The responses were on a 5-point Likert scale with the end-points 1 = “not important at all” and 5 = “very important.” Of the 48 items, 27 examine the reasons for wanting children and 21 the reasons for not wanting children. This study was limited to investigating the items about reasons for wanting children.

Given the different reproductive stages in life of the three groups of women, not all groups were asked all questions. The mothers were presented with all 27 reasons for wanting children, the grandmothers 23 and the adolescent women 18. All participants were asked 16 of the 27 items, and these are thus comparable in further analysis. The reasons for having children were presented in such statements as:

- “because of the special feeling of love that develops between parent and child”;
- “because watching children grow is a pleasure”; and
- “because people with children are less likely to be lonely in old age”.

The participants were also asked about their preference for the sex of the child, perceptions about ideal family size and ideal age for having their first child. Since both the mothers’ and the grandmothers’ groups already had given birth, some of these questions were asked in a hypothetical manner: “If you had [only] one child, would you prefer a boy or a girl?” Other questions were about their ideals: “What is the ideal family size in your opinion: in other words, how many children are in an ideal family?” Mothers and grandmothers were also asked at what age they gave birth to their first child. For the adolescent women, these topics were formulated to measure their future aspirations about family life: “Do you want to have children some day?” If yes: “How many children do you want to have?” “How old do you think you’ll be when you have your first child?” “If you had exactly one child, would you prefer a boy or a girl?”

The following demographic information was obtained: marital status, highest level of education, the number of years in school, employment status, religious beliefs and affiliations, ethnic minority group affiliation, socioeconomic status and area of residence (urban versus rural). We used the statistical package SPSS 14.0 for Windows in the analysis.

3.3.3. Statistical analysis

Reasons for wanting to have children

Principal component analysis (PCA) was carried out to obtain more knowledge about the reasons for wanting to have children. Several items measured why these women wanted children, and it was reasonable to believe that some items were closely related and correlated. PCA is a statistical method that is considered useful in transforming several variables into new and fewer variables or components.⁴ PCA differs from common factoring analysis, which is based on the idea that the set of variables has an underlying, latent factor (Schwarz, 2011). Principal axis factoring (PAF) is a type of factoring that, unlike PCA, considers the common variance of the items only and removes the uniqueness and unexplained variability from the analysis. PCA is a simpler method mathematically. It considers all the available variance and does not remove the unique variability. However, the difference between PAF and PCA is debated and has been found to be marginal where data sets using both methods may converge in the results (Thompson & Vidal-Brown, 2001). We chose PCA over PAF since the main aim was to compare the three groups of women, and two of the groups (the mothers' and the grandmothers' generations) had already been analyzed using PCA (Sam et al., 2005). Thus, we considered it important to carry out the analysis with the third group, the adolescent women, similarly by using PCA.

⁴ Paper I refers to the components as “factors”, because the literature interchangeably uses these words (Schwarz, 2011).

The sample size of the adolescent women ($n = 197$) was adequate to conduct PCA. The Kaiser-Meyer-Olkin (KMO) test measures the appropriateness of PCA and shows how much the correlation between pairs of variables is reduced when adjusting for other correlations in the matrix. Kaizer, Meyer, and Olkin considered a KMO result exceeding 0.80 as “meritorious”. In this case, the KMO result was 0.86, and PCA could be carried out.

Exploratory instead of confirmatory analysis was used, because we were uncertain how many components we could expect in the responses of these adolescent women since they had not been researched in the previous South African VOC study (Sam et al., 2005).

To determine the number of components to be extracted, we relied on the number of components with eigenvalues greater than 1 and the number of correlation coefficients that were low. Based on eigenvalues, 3 components could be extracted (with the following eigenvalues: 5.43, 1.14 and 1.02 for components 1, 2 and 3 respectively). A closer look at the scores of the items in the correlation matrix indicated that three items (“Older relatives feel you should have more children”, “Sure that enough children will survive to adulthood” and “Children can help when they are old”) had factor loadings of less than 0.3. Loadings on the items of less than 0.3 are considered low, and including them in the resulting component is therefore inappropriate. All loadings of 0.3 and less were excluded from the analysis. The few loadings of 0.3 shown in the table were kept there to show possible cross-loadings. Subsequently, one possible component based on eigenvalues had to be eliminated. We faced deciding whether two or three components best represented the items.

The aim of rotation is to make the component structures more interpretable (Abdi & Williams, 2010). We carried out various types of rotation to find interpretable component structures and to determine whether two or three components best represented the reasons for wanting to have children. We carried out orthogonal rotation (varimax), which suggested two components. The rotated component matrix

indicated some cross-loading, and these items were removed. The items “To help your family economically” and “It is a duty according to your belief” made the components not interpretable from content perspective and they were excluded from further analysis. We retained one item (“Because your life will be continued through your children”) despite the cross-loading because keeping this item resulted in a structure similar to that of the older women previously reported (Sam et al., 2005). Retaining this item did not affect the internal consistency of the component, and the component was also interpretable.

The final scale comprised 12 items. We again carried out varimax rotation, resulting in two components (Table 1). The first component was called the social and emotional voc and explained 28% of the total variance. The component included 6 items, such as “because of the pleasure you get from watching your children grow” and “to have someone to love and care for”. The second component was called traditional and utilitarian voc and explained 27% of the total variance. The component included 6 items, such as “because a child helps around the house” and “because any new member makes your family more important”. Their Cronbach’s alpha coefficients were 0.84 (social and emotional voc) and 0.80 (traditional and utilitarian voc). The two sum scores that were constructed based on the grouping of items were correlated ($r = 0.67$; $P < 0.001$). With the high correlation between the two components, a direct oblimin rotation should have been preferred.

A direct oblimin rotation showed a two component solution (Tables 2,3). The first component accounted for 46.74% of the explained variance, and reported eigenvalues of 6.08. The component included 8 items, such as “To carry on the family name” and “Because people with children are less likely to be lonely in old age”. The second component accounted for 8.39% of the explained variance, and reported an eigenvalues of 1.09. The component included 5 items, such as “Because of the pleasure you get from watching your children grow”, “Because of the feeling of love that develops between parent and child”. The Oblimin rotation showed a fairly good two factors, and the two components were strongly correlated at .60.

The results of the varimax and the direct oblimin rotations were not very different in terms of content. The results from rotations indicated two components. The varimax rotation solution however was preferred (as was used in Paper I), because some of the items appeared easier to interpret using the varimax rotation. We found the items “Because parenthood improves your standing and betters your reputation among your kin” and “Because raising children helps you learn about life and yourself” difficult to interpret in the direct oblimin rotation solution. These clustered with items that reflected traditional and utilitarian voc. The two items rather appears to reflect social voc. In the varimax rotation, the two items clustered with other social and emotional voc. Since the aim of rotation is to make the items more interpretable, using the varimax rotation was deemed more acceptable. These results also resembled the components of the mothers’ and the grandmothers’ generations in the previous VOC study in South Africa (Sam et al., 2005).

Table 1
Principal component analysis with varimax rotation of reasons for wanting a
child among adolescent women in South Africa

Items	Components	
	1	2
Because of the pleasure you get from watching your children grow	.760	
To have someone to love and care for	.742	
Because it is fun to have young children around the house	.698	.341
Because of the feeling of love that develops between parent and child	.697	
Because parenthood improves your standing and betters your reputation among your kin	.610	.445
Because raising children helps you learn about life and yourself	.604	.446
To carry on the family name		.530
Because a child helps around the house		.795
Because any new member makes your family more important		.772
Because your life will be continued through your children	.434	.497
Because having children increases your sense of responsibility and helps you to develop	.311	.644
Because people with children are less likely to be lonely in old age		.679

Table 2
Principal component analysis with direct oblimin rotation of reasons for wanting a child among adolescent women in South Africa. Pattern Matrix.

Items	Components	
	1	2
To carry on the family name	.792	
Because people with children are less likely to be lonely in old age	.762	
Because a child helps around the house	.738	
Because your life will be continued through your children	.736	
Because having children increases your sense of responsibility and helps you to develop	.535	
Because parenthood improves your standing and betters your reputation among your kin	.493	-.355
Because any new member makes your family more important	.416	-.344
Because raising children helps you learn about life and yourself	.408	-.380
Because of the pleasure you get from watching your children grow		-.909
Because of the feeling of love that develops between parent and child		-.858
Because it is fun to have young children around the house		-.740
Because it is a duty according to your belief		-.650
To have someone to love and care for		-.571

Table 3

Principal component analysis with direct oblimin rotation of reasons for wanting a child among adolescent women in South Africa. Structure Matrix.

Items	Components	
	1	2
Because people with children are less likely to be lonely in old age	.757	-.450
Because life will be continued through	.751	-.468
Because a child helps around the house.	.741	-.449
To carry on the family name	.711	-.343
Because parenthood improves your standing and betters your reputation among your kin	.706	-.651
Because having children increases your sense of responsibility and helps you to develop	.676	-.556
Because raising children helps you learn about life and yourself	.636	-.625
Because any new member makes your family more important	.623	-.594
Because of the pleasure you get from watching your children grow	.442	-.846
Because of the feeling of love that develops between parent and child	.443	-.814
Because it is fun to have young children around	.564	-.812
Because it is a duty according to your belief	.423	-.669
To have someone to love and care for	.466	-.645

One aim of paper I was to compare the adolescents with the mothers' and the grandmothers' generations. We carried out the comparisons by using analysis of variance (ANOVA), which is useful in comparing the means of three different groups. The mean scores were compared rather than the component structures. The reliability of the 12 items making up the two component structures from the PCA was tested separately for the mothers' and the grandmothers' groups. The Cronbach's alpha coefficients for the social and emotional voc and for the traditional and utilitarian voc were 0.81 and 0.78, respectively, in the mothers' group. For the grandmothers' group, these were 0.92 and 0.84, respectively. The reliability coefficients were thus quite similar and acceptable for comparison. ANOVA and a post-hoc test (Fisher's least significant difference) were carried out to determine the differences in the scores in the groups of women. The eta coefficient was also estimated to determine whether the

effects were large, moderate or small based on Cohen's d , where an effect size of 0.2 to 0.3 is considered "small"; around 0.5 is "medium"; and 0.8 to infinity is considered "large".

Age at first childbirth, ideal family size and preference for daughter or son

The adolescent women's views about the ideal age of having their first child was compared with the actual age to when the mothers' and the grandmothers' groups actually experienced having their first child by using ANOVA. This appeared the best way to make cross-generational comparisons, since the mothers' and the grandmothers' groups were not asked about perceptions of the ideal age. All three groups of women were asked about their perceptions about an ideal family size. ANOVA was performed to determine whether the mean scores differed significantly in the questions about age at first childbirth and family size.

We calculated the effect size to determine the magnitude of the strength of the relationships between age at first childbirth and ideal family size in the groups of women. Effect size measures the strength of an association and provides more information about the strength of the relationship than the test of significance (Kelley & Pracher, 2012). We estimated effect size according to eta squared (η^2) and interpreted it in Cohen's terms.

Comparing how the three groups of women answered to the question about preference for a daughter or son in a one-child scenario is on a nominal scale and required the chi-square test.

3.4. Phenomenological design

The second phase of the mixed-method design is a qualitative approach (Papers II and III) where I used unstructured participant observation, focus group discussions, diaries, photos and semistructured individual interviews. The findings derived through the quantitative design produced several arguments (see p. 51-52) for examining family values through another method. My interest drove towards generating an exploratory

type of knowledge about family values among young people, which could shed more light on the quantitative data.

We considered a research design that did not predefine response alternatives about attitudes towards having children, but rather let the study participants define what was important, to be necessary to improve understanding of the reproductive attitudes of adolescent women in Limpopo. This required qualitative methods, because they aim to identify local conceptualizations of a phenomenon (Triandis, 2007) among a limited number of participants (Sokolowski, 2000). The views of Laszloffy (2002), who emphasizes an open angle of incidence, and Sprey (2000), who recommends a discovering attitude in researching the concept of family, informed the approach.

Phenomenology was chosen as a study design to enable an open and explorative approach to studying young people's perspectives on family life in their social context. Phenomenology was a useful approach for exploring the phenomenon of parenthood as perceived by the adolescents, since it can capture people's perceptions of their reality and reflections on their own experiences (Merleau-Ponty, 1962). I was interested in the adolescents' perceptions of their reality and explored the phenomenon of parenthood through their experiences and perceptions. Phenomenology stays close to the experiences of the participants and emphasizes the importance that the researchers are giving to their concepts of the research topic. This reduces the chance that the researchers are projecting their personal views onto the perceptions of the participants. I considered this important in view of the cultural gap between the study participants in South Africa and me being Norwegian.

Phenomenological psychology builds upon Husserl's philosophical movement from the early 1900s and is concerned with everyday experiences and people's perceptions of them (Giorgi & Giorgi, 2006). How people perceive a specific experience is the issue of concern and represents a window to get a wider understanding of the social world (Merleau-Ponty, 1962). In the health and social sciences, phenomenology is used to explore such phenomena as what constitutes learning in everyday activities

(Giorgi, 1985a), what the home life of the child is like (Langeveld, 1983), the experience of life after burn injury (Moi, Vindenes, & Gjengedal, 2008) and experiences of empowerment in participating in a microcredit group (Spjeldnaes & Sotberg, 2002).

3.4.1. Central principles

The principles of subjectivism, intentionality, noema versus noesis, description, structure and contextualization were central in choosing phenomenology as the study design.

Subjectivism is essential to produce knowledge about human behavior and represents a contrast to the discussion about the subject–object dualism. In a positivist paradigm, subjectivism implies bias and measurable objects as the only way to produce science (Bem & Looren de Jong, 1997). Researching people as objects largely underpinned the quantitative phase of this study and was counterbalanced via a phenomenological design, by collecting information on family life as close to the source as possible. Phenomenology rejects subject–object dualism, because thinking of objects separately from how people perceive them does not make sense; “the exact same object may mean very different things to different people or even different things to the same person on different occasions and different contexts” (Langdrige, 2007, p. 9). It is not relevant to learn about the specific phenomenon of being fathered in a low-income area without considering how the people living there experience this.

Intentionality refers to consciousness or awareness as turned outwards, shaped in contact with the social world. This is in contrast to seeing consciousness as being directed inwards, which does not consider people’s thoughts and feelings in relation to their social surroundings (Sokolowski, 2000). The concept of intentionality is useful in exploring young people’s experience in the family, because the type of consciousness of interest is the perceptions turned outwards on the world: towards the social interaction going on or not going on in the family.

Noema versus noesis makes an important distinction between what is experienced (noema) and how something is experienced (noesis). These concepts were useful to distinguish between experiencing being mothered or fathered (e.g. experiencing having a father who was largely absent due to labor migration) versus how the adolescent reflected on this specific experience (e.g. longing for their father).

Description is a key feature of phenomenology (Giorgi, 1985b), and was used through participants describing their experiences in interviews. With the researchers operating in a foreign cultural context, the descriptions of the participants were of major importance. Starting the research process on a more interpretative level, I would run the risk of misinterpretation.

Structure was useful both in data collection and analysis. To ensure that the questions that arose from the quantitative design would be addressed, it was important to keep to the topics of reproduction and family life and not let the participants initiate irrelevant topics. The use of semistructured interviews is the most common way of collecting data in phenomenological research and provides the researcher with a certain level of structure in the interview guide. The interview guides were structured to enable the participants to tell about their experiences of family life in an open-ended and flexible manner. For example, within the broad question “Could you describe a typical day for you?” there were prompts with the aim of mapping the family. Other approaches, such as narratives or discursive psychology, could not have offered the required structure for this research. Narratives emphasize storytelling by way of seeing “our lives through the creation and exchange of narratives” (Murray, 2006, p. 113), and the discursive approach focuses on language in speech and text as being produced in a natural environment (Willig, 2006).

Contextualization is possible through phenomenological approaches by using methods that are not based upon oral or written sources. The limited available information about the institution of the family in contemporary Limpopo created a need to learn about the family through as many angles as possible. I needed to get

information not only through the words of the participants, but also through what I could understand through participant observation and photos. These methods could provide information about the home and social environment of the study participants that contextualize information derived through oral and written accounts. Knowledge from observations and photos were particularly valuable since I conducted research in a cultural context very different from my own cultural background.

3.4.2. The specific phenomenological approaches

This study used two phenomenological approaches: a descriptive phenomenological approach (Giorgi, 1985a, b) and an interpretative approach called interpretative phenomenological analysis (Smith, 2006; Smith, Flowers, & Larkin, 2010).

The two approaches represent different levels of consciousness, where the descriptive level is closer to what is actually experienced and the interpretative approach is further removed from experience. Explaining or interpreting a phenomenon is a representation that has been consciously considered before it is reproduced.

The descriptive phenomenological approach (Giorgi, 1985a, b) was used in the first part of the qualitative study. It was considered an advantage to stay as closely as possible to what was actually experienced when researching topics that were relatively unknown. The use of this approach can be exemplified by questions in the interview guide: “Could you please show me your photos and tell me about them?” Such a question could produce descriptions about everyday life that were very close to what had been experienced.

As the research proceeded, and I had acquired more knowledge about family life in Mankweng, another level of consciousness was required in my interpretation of the data. There was a need for interpretation to further develop conceptualizations of parenthood. Interpretative phenomenological analysis was chosen, because I aimed to search for the meaning of the study participant’s experiences and perceptions about

parenthood by using interpretations from both the study participant and myself as the researcher (Smith, 2008; Smith et al., 2010).

Hermeneutics is a process of interpretation in which the aim is to obtain a valid and common understanding of the meaning of a text (Kvale, 1996, p. 46). We captured the adolescents' own interpretations or reflections of parenthood in the interviews by asking them to explain issues from their diaries. This brought the study participants back to episodes of daily life which they had written some time ago and on which they were encouraged to reflect again. Interpretations from the study participants were also investigated through the follow-up interviews, where they were asked to deepen issues from their first interview. I interpreted their frameworks of meaning about parenthood in turn as a researcher. This process of double hermeneutics refers to the intersection of two frames of meaning, constituted by lay actors and the meta-languages invented by the social scientists (Giddens, 1984, p. 374).

I also used interpretation through the hermeneutic circle, which is known as a dynamic relationship between the parts and the whole (Smith et al., 2010). For example, one section of an interview about such topics as the mother as a role model was analyzed in relation to the whole interview and then interpreted in relation to the participant's diary and his or her viewpoints in the focus group discussions and later considered in relation to other participants.

3.4.3. Piloting

Piloting was carried out before data collection to develop interview guides and get more practice as an interviewer. Pilot interviews were conducted with young people other than the participants, both individually ($n = 3$) and in one group session with three participants. Considering the limited available literature about the family institution in Limpopo, I also interviewed experts ($n = 12$) in Limpopo in education, health and social work to gain more information about the situation of young people (Appendix 1).

3.4.4. Recruitment

Access to a school to recruit participants was enabled through the South Africa and Tanzania school-based program, SATZ.⁵ Mankweng was the study site of SATZ in Limpopo, and two SATZ researchers selected one of the intervention secondary schools in Mankweng for this study. They selected the school based on the criteria that it should be an average school (a medium-level school in teaching equipment, such as books) with both male and female students. We assumed that recruiting from one average school in this area would create a sufficiently homogeneous sample considering the socioeconomic background, which is considered an advantage in focus group research (Asbury, 1995). We believed that this type of school could reflect our objective of exploring the lived experiences of adolescents of low socioeconomic status in a gendered perspective.

We purposively recruited study participants from the selected school of 1111 enrolled students in 2005 based on three criteria: age, sex and diversity of informants. We recruited students in mid-adolescence (15–17 years old) and late adolescence (18–22 years old) based on the idea that mid- and late adolescents could reflect more on their future aspirations than early adolescents (11–14 years old) (Kroger, 2000). We recruited an approximately equal number of men and women to identify possible variation by sex. Aiming to keep an open atmosphere and reduce the fear of gossip among participants in the focus group discussions (Asbury, 1995), we recruited study participants from parallel classes. A research assistant and a teacher at the school ensured that the criteria were met. Recruitment was not based on criteria related to the family, such as absent or present parents. The recruitment was neither based on criteria related to reproduction, such as whether the adolescent had a child or were expecting a child.

⁵ Three universities in Africa and four in Europe, including the University of Limpopo and the University of Bergen, initiated SATZ in 2001. The aim was to promote sexual and reproductive health in adolescence through a school-based health education program (Helleve, 2010; Aarø, Flisher, Kaaya, Onya, Fuglesang, Klepp, & Schaalma, 2005).

3.4.5. Data collection

Before the data collection started, the participants were gathered at an information meeting, where they were told about the aims, methods and ethics of the study (see more p.92).

The data collection involved unstructured participant observation, focus group discussions (8), photos from the everyday lives of the study participants (19), diaries (21) and semistructured interviews (42) (Table 4). I believed that several methods could produce knowledge about youths' perceptions of parenthood from various angles that could enhance the trustworthiness.

The methods were carried out stepwise to approach the participants gradually. The data collection started with participant observation, in which the researcher and the participants got to know each other in the daily surroundings of the participant. This was followed by focus group discussions, diaries and photos. Individual interviews were carried out last when the participants and the researchers already had met several times. This was an advantage since we assumed that the researchers and the participants knew each other better at that point and that the two parties could thus interact more smoothly. The interaction between the interviewer and the interviewee is vital for producing knowledge (Kvale, 1996).

Three Northern Sotho research assistants contributed in the data collection: one male social worker in his early thirties and a woman in her early twenties who both had previous experience in assisting in a PhD dissertation, and a woman master student (in the SATZ project) in her late twenties. We collected the data during 2005 (October–December) and conducted follow-up in 2007 (May–June and October–December).

The first step of the data collection in 2005 (October–December) implied carrying out unstructured participant observation, which is an acknowledged method in interpretative phenomenological analysis (Smith et al., 2010). It implied being present in the daily life of the participants without predefining exactly what to look for

(Maykut & Morehouse, 1994). The aim was rather to see the participants in their “natural setting” (Flick, 1998), because that could contextualize and support other sources of data (Smith et al., 2010).

Unstructured participant observation involved me spending time in the schoolyard and neighborhood and visiting the homes of some participants. Participant observation was carried out throughout the data collection period.

Fig. 8
Photo of Mankweng



The second step of data collection involved focus group discussions. This was initiated after a few weeks of unstructured participant observation. Time spent on participant observation had given me the opportunity to prepare the topic guides for the focus group discussions, and the participants were well informed about what was expected in a focus group discussion. Focus group discussions generate data produced by individuals who are gathered in a group to discuss a common interest or experience. The aim of using this method was to produce data about family norms in Mankweng

through a process of group dynamics. Focus group discussions were also used to prepare and contextualize the individual interviews. This is in accordance with previous research using interpretative phenomenological analysis (Macleod, Craufurd, & Booth, 2002). Focus group discussion is considered a way to get information from a group if limited information is available (Murdaugh, Baker Russell, & Sowell, 2000) and to shed light on complex issues from different angles simultaneously (Bojlen & Lunde, 1995). Considering the limited literature about families in Limpopo and that families in South Africa are seen as “complex” (Holborn & Eddy, 2011), these points were also important for focus group discussions.

The focus group discussions were carried out separately for men and women since we believed that adolescents are more open about such sensitive topics as contraception in a same-sex group. The aim was to conduct series of focus group discussions including the same participants each time. The women’s focus group discussions were conducted three times with the same seven participants. The men’s focus group discussions were conducted three times but with varying numbers of participants.⁶

The topic guides included questions about family norms in Mankweng: having children, reproductive health, HIV and adolescent pregnancy (Appendix 4). The steps of introductory, focusing, rounding up and follow-up phases were followed (Maynard-Tucker, 2000). The male research assistant moderated the focus group discussions for the male participants, and the female research assistant moderated the focus group discussions for the female participants. They were experienced as moderators and used SePedi during the focus group discussions. I was present as an observer and facilitated the practicalities. They lasted 1–2 hours and took place at the local health clinic.

The third step of data collection involved diaries, which gave me the opportunity to access the informants’ experiences and thoughts about parenthood through their

⁶ Twelve participants attended the first session, which we considered too many. None volunteered to leave, so we decided to carry out the sessions with the topic guide in a large group. Two of these participants did not contribute to the group discussion and did not participate later and were not counted in the total sample in Table 4. In the next focus groups, five participants attended.

written accounts. Descriptive phenomenology often uses writing about experiences as a method (Giorgi, 1985b). The aim was to learn about their everyday life and to prepare to meet the participants in individual interviews. In the last focus group discussion, the participants were asked to write diaries for the next three weeks and were given a notebook and a pen. The participants were instructed to write about what happened in their daily life from morning to evening. They were to feel free to include what they desired from their daily life. Thirteen diaries (6 men, 7 women) were collected.

The fourth step involved photos. Disposable cameras were distributed to the participants during the second focus group discussion. They were encouraged to photo people and places that were important to them. This method is often referred to as photovoice: participatory action research in which individuals photo their everyday life (Baker & Wang, 2006). The aim of this exercise was twofold: to ease the start of the interview and to learn about the home and social environment of the participant. Giving cameras to the participants gives power to the participants in determining what is important in the research topic and encourages trust in the relationship between the researchers and the participants (Einarsdottir, 2005). Photos can capture moments of daily life, which may be an interesting platform to start a conversation. They may also give useful information about the presence and absence of family members (White, Bushin, Carpena-Mendez, & Ni Laoire, 2010). Nineteen disposable cameras (10 from men, 9 from women) were turned in and developed. The photos and negatives were brought to the individual interview and used as warm-up in the interview conversation.

The fifth step involved individual interviews, which gave me the opportunity to explore the experiences and aspirations of family life through a face-to-face conversation. Semistructured interviews are defined as a professional conversation based on experiences from everyday life “whose purpose is to obtain descriptions of the life world of the interviewee with respect to interpreting the meaning of the described phenomena” (Kvale, 1996, p. 5). This method is common in both interpretative and descriptive phenomenology (Langdridge, 2007). The aim of carrying

out individual interviews was to collect personal perspectives on family issues, which differ from the views on common family norms in the community obtained through the focus group discussions. Another aim was to get clarifications and elaborations of descriptions in the diaries.

The interviews were carried out with 19 participants (10 men, 9 women). The topic guides were developed based on the previous steps of data collection. The interview guide included a set of main topics: mapping the family life and daily life, views on having children, reproductive health and future aspirations (Appendix 5) to ensure the scope but still enable flexibility. For example, prompts were added to explore questions that arose from reading the diaries. The initial phase of talking about the photos was followed by questions based on the interview guide. The participant could choose language and interviewer: a SePedi- and English-speaking Northern Sotho man or woman research assistant or me, an English-speaking Norwegian woman. The interviewee decided the place of the interview: the classroom after school, a local health clinic where one of the research assistants worked, the research assistant's home or the university campus. The interviews lasted 40–75 minutes.

Follow-up data collection was initiated in 2007 (May–June and October–December). The purpose was to fill in missing information about the family situation for some of the male participants and to further explore motherhood among both male and female participants. Except for the use of photos, the same methods as in 2005 were used.

The first step involved follow-up interviews (7 men) in May to collect the missing information. The research assistants coordinated and conducted these interviews in the home of the male research assistant, lasting 30–60 minutes (Appendix 5).

The second step involved diaries. The male research assistant contacted both male and female participants in May and asked whether they would like to make notes in a diary over a period of 6 months. The participants were given a notebook and pen and instructed to note when they were in contact with their father and describe the

interaction. They were also given a short written instruction (Appendix 6). I collected 8 diaries (4 from men, 4 from women) in November.

The third step involved unstructured participant observation to maintain the social bonds and contextualize the daily life of the participants. This implied home visits, informal talks with relatives and short trips in the area with participants. Observation was not carried out in school because of school vacations. This method was used from November to mid-December.

The fourth step involved focus group discussions to get more information about the participants' views about norms of motherhood and fatherhood in Mankweng. Two parallel focus group discussions were conducted in mixed-sex sessions of six participants. We decided upon mixed-sex group, because we believed that could produce an interesting group dynamic considering the gendered topic of fatherhood and motherhood. The topic guides included views on common family, responsibilities in a family, and presented various scenarios in a family (Appendix 4). The male research assistant moderated the focus group discussions in SePedi, and I observed and facilitated the practicalities. They lasted for about 1.5 hours and took place at the local health clinic.

The fifth step involved follow-up interviews to get more information about personal views on motherhood and fatherhood (Appendix 5). The interviews were carried out among 16 participants (12 men, 4 women). Since some of the women already had elaborated widely on the topic in the first interview, there was no need to conduct a follow-up interview with all of them. The interviewee could choose the language and interviewer: a SePedi- and English-speaking Northern Sotho man or me, an English-speaking Norwegian woman. The interviews took place in the local health clinic and lasted for about 1 hour.

Monetary compensation for time was given as a surprise gift at the end of the study in 2005. The same amount of money was given when the follow-up study in 2007 ended.

The money covered two return trips on public transport in the area. Fruit and drinks were served during all of the focus group sessions and interviews.

3.4.6. Study participants

Twenty-two adolescents (13 men, 9 women) 15–19 years old participated in the qualitative part of the study (Table 1). In paper II, only the men were considered. In paper III, both men and women participants were considered. The participants attended grade 10, 11 or 12 in secondary school. They were of Northern Sotho origin (except for one), belonged to various Christian denominations and defined themselves as being of lower socioeconomic status. Papers II and III provide information about the family situation of the participants.

In 2005, 19 adolescents (10 men, 9 women) participated. With some exceptions, the same participants were involved in the follow-up study in 2007. Sixteen adolescents (12 men, 6 women) participated in 2007. Five of the women withdrew from participating in interview and focus group discussion, because they lacked time, but allowed me to come and visit them (participant observation). One man had migrated from Limpopo and did not participate in the follow-up. Three new men were recruited. We required more young men than women to saturate the data since the men tended to give shorter and more superficial descriptions.

Table 4
Data collection in 2005 and 2007 and the study participants

Participant	Sex	Age	Data collection 2005				Follow-up 2007					
			Participant observation	Focus group sessions	Diary	Photo	Interview	Participant observation	Focus group sessions	Diary	Interview May	Interview October
1	M	18	School Neighborhood	1	Yes	Yes	English Interviewer F	Neighborhood Trip to Polokwane	-	Yes	SePedi Interviewer F*	English Interviewer F
2	M	16	School Neighborhood	1	-	Yes	English Interviewer F	Neighborhood	-	-	SePedi Interviewer F*	English Interviewer F
3	M	18	School Neighborhood Home visit	1	-	Yes	English Interviewer F	Neighborhood Home visit	-	Yes	SePedi Interviewer F*	English Interviewer F
4	M	16	School Neighborhood	3	-	Yes	SePedi Interviewer M	Neighborhood	1	-	SePedi Interviewer F*	SePedi/English Interviewer M
5	M	16	School Neighborhood	3	Yes	Yes	SePedi/English Interviewer M	Neighborhood Trip to church Home visit	1	Yes	SePedi Interviewer F*	SePedi/English Interviewer M
6	M	15	School Neighborhood Home visit	3	Yes	Yes	SePedi/English Interviewer M	Neighborhood	1	-	-	English Interviewer M
7	M	19	School Neighborhood Trip Polokwane	3	Yes	Yes	English Interviewer F	-	-	-	-	-
8	M	16	School Neighborhood	1	-	Yes	English Interviewer F	Neighborhood Visit aunt	1	-	-	English Interviewer F
9	M	16	School Neighborhood	1	Yes	Yes	SePedi Interviewer M	Neighborhood	-	Yes	SePedi Interviewer F*	SeP Interviewer M
10	M	15	School Neighborhood	3	Yes	Yes	SePedi Interviewer M	Neighborhood	-	-	SePedi Interviewer F*	SePedi Interviewer M
11	M	15	-	-	-	-	-	Neighborhood	-	-	-	English Interviewer F
12	M	15	-	-	-	-	-	Neighborhood	-	-	-	SepEn Interviewer M
13	M	16	-	-	-	-	-	Neighborhood	-	-	-	SepEn Interviewer M
14	F	18	School Home visit	3	Yes	Yes	English Interviewer F	Home visit Trip to relatives	1	Yes	-	English Interviewer F/M
15	F	16	School Neighborhood Home visit	3	Yes	Yes	SePedi/English Interview. F*	Neighborhood Home visit Trip to church	1	Yes	-	SepEn Interviewer F/M
16	F	16	School Neighborhood Home visit	3	Yes	Yes	English Interviewer F	Neighborhood Home visit	1	Yes	-	English Interviewer F
17	F	18	School Home visit	3	Yes	Yes	SePedi/English Interviewer M	Home visit	-	-	-	-
18	F	16	School Neighborhood	-	-	Yes	English Interviewer F	-	-	-	-	-
19	F	17	School Neighborhood	3	Yes	Yes	English Interviewer F	Meet at her work	-	-	-	-
20	F	16	School Home visit	3	Yes	Yes	English Interviewer F	-	-	-	-	-
21	F	15	School Neighborhood Home visit	3	Yes	Yes	English Interviewer F	Neighborhood Home visit	1	Yes	-	English Interviewer F
22	F	17	School Neighborhood	-	-	Yes	English Interviewer F	-	-	-	-	-
Total				6	13	19	19		2	8	7	16

Note *The Northern Sotho female research assistant

3.4.7. Analysis

The analysis of papers II and III started during data collection by reflecting on immediate impressions. Shortly after each focus group session and interview, the atmosphere and non-verbal cues as perceived by me and the research assistant(s) were discussed and filed in my memos. My memos also included comments to the diaries and notes from the participant observations, and were filed in the software program NVivo.

The audiotaped data from the focus group discussions and semistructured interviews were transcribed verbatim as soon as possible. We aimed at a high level of details (such as pausing, sounds and laughter), since that is recommended in descriptive phenomenological research (Giorgi, 1985b). An experienced Norwegian or Northern Sotho transcriber or I transcribed the tapes including English speech. Northern Sotho transcribers translated and transcribed the tapes including SePedi speech. Sections of some of the diaries were written in SePedi, and these were translated into English.

The structured process of analysis started after translation and transcription. The descriptive phenomenological method (Giorgi, 1985b) was used in the first phase of the analysis, followed by interpretative phenomenological analysis (Smith et al., 2010). The focus group discussions, diaries and interviews were subjected to structured text analysis.

The information derived through unstructured participant observation and photos were not subjected to structured analysis, and I have not reported specifically from these data in the papers. Instead, this information has been used to enhance understanding of families in Mankweng and the participants' family situation. I wrote memos from the participant observations daily, which were later used primarily to map the family situation of the participants and contextualize the accounts given in the focus group discussions, diaries and interviews. The types of data that were generated were information about the kind of housing and neighborhood in which they lived, who

lived in the house and the level of English of the adults at home. The photos gave me immediate impressions of their social and family life and assisted the start of the interview, but were not used in any analysis.

In the following paragraphs, I aim to make the link between the data and the interpretations transparent.

Paper II

Initially, we analyzed the testimonies of both the male and the female participants. At this point, the research question was broadly defined, where the aim was to find out more about young people's perceptions of reproduction and family life. As the analysis progressed, specific research questions about fatherhood were formulated. It was decided to focus on the men only and exclude the women. A male sample would counterbalance the female sample in paper I. Further, the limited qualitative literature that exists about young men and fatherhood in semiurban South Africa suggested that this is an important topic that needs to be followed up (Morrell, 2006). Connell's argument (1998) that fatherhood represents a prism for understanding young people's masculine identities in resource-limited settings was an important reason to focus on the men. The following section outlines first the analysis of the individually-based data (interviews and diaries), then the group-based data (focus group discussions), and last the individual and the group data together. The analysis of the individual and the group data included several steps, which will be detailed (Table 5).

First, we analyzed the data from the individually based data (interviews and diaries) to identify personal experiences and aspirations about fatherhood. The analysis was carried out according to Giorgi's (1985b) stepwise procedure.

Step 1: The analysis started by reading and re-reading the interviews and the diaries, participant by participant. The aim was to get a sense of the whole. Immediate comments were written by hand in the margin of the interview transcripts or in the diary.

Step 2: The aim was to identify “meaning units” in the interviews and diaries (Giorgi, 1985b, p. 11), which implied breaking down the large amount of text into shorter units that are more manageable for analysis. The meaning unit was determined based on the criterion of a description of a specific experience, attitude or aspiration linked to the phenomenon of fatherhood. In accordance with Giorgi’s recommendation, the units of meaning were identified in a rather spontaneous manner. A change in attitude or aspiration marked a start of a new meaning unit. However, recognizing such changes could take a second reading. The entire interviews and diaries were divided into meaning units. An interview normally had about 30 meaning units. The interview material was imported into NVivo, which made it easier to organize and view the meaning units from the whole data material. The diaries had 5–40 meaning units depending on the length of the diary. They were not transferred to NVivo, because they were written by hand.

Step 3: The aim was to transform the participant’s everyday expressions into psychological meanings about fatherhood. Each meaning unit was interrogated and described briefly in one or two sentences to reflect the relevance for the research topic. I aimed to stay at a descriptive level close to the words of the participant when writing the statements corresponding to the meaning units. For the interview material, the statements were written under “annotations” in NVivo, because they provided a direct link to the meaning units filed in NVivo. The statements could be viewed on a list separately from the meaning units to which they were connected. This provided an overview of the interview data from each of the participants. For the diary material, the statements were written in Word.

Step 4: The aim was to analyze the statements made in step 3 in relation to the specific research topics that had emerged at this stage: 1) experiences of being fathered and 2) aspirations about fathering. All statements from all participants

were interrogated: first, participant by participant, and then I looked at similarities and differences in the statements about fathering across all participants. This resulted in several themes, which were considered, discussed and refined. The themes were checked towards the original descriptions of the participants. Eventually, two themes were suggested: experiences of interactions and future aspirations about the father role.

Second, the group-based data (focus group discussions) were analyzed to identify norms about fatherhood in the local community. The focus of the analysis had turned from the individual to the group as the basic entity. The idiographic emphasis of Giorgi needed to be adjusted for multiple voices. The data were examined through a top-down approach, in which the data were analyzed at a group level regardless of who said what. We adhered to the procedure of interpretative phenomenological analysis of focus group research (Tomkins & Eatough, 2010):

Step 1: The entire material from the focus group discussions was read in detail to get a sense of the whole. Notes were written in the margin of the transcripts. They often took the form of asking questions about the material. It was an aim not to have the suggested themes from the individually based analysis in mind, since they could color the analysis.

Step 2: Identifying emerging themes meant identifying a broader level of meaning in a section of the text that was relevant to the topic of fatherhood in the community. The emerging themes were identified based on the notes in step 1. I made a three-column matrix in Word for each focus group discussion that included the original transcript, the initial notes and the suggested emerging themes. Several themes about fatherhood emerged that required further interrogation.

Step 3: The suggested emerging themes were refined and transformed to more conceptual, abstract themes about fatherhood in Mankweng. Three major themes emerged from the focus group discussions material.

Third, the individual and group data were examined together. This involved looking at each individual's views on fatherhood in the focus group discussions. The basic unit was the individual in the group, which is called a bottom-up perspective in interpretative phenomenological analysis (Tomkins & Eatough, 2010). This idiographic emphasis supplemented the analysis of diaries and interviews. The suggested themes from the previous analysis of both the individual and group material were refined according to the information derived from the bottom-up analysis. A final set of themes was determined based on all data sources and polished during the writing process. Throughout the steps of analysis, the transcripts were checked to ensure the original words of the participants.

Table 5
Steps of text analysis for Paper II

Interviews and diaries Descriptive phenomenological analysis				Focus group discussions Interpretative phenomenological analysis			Final themes
Step 1	Step 2	Step 3	Step 4	Step 1	Step 2	Step 3	
Reading the transcripts	Identifying meaning units	Summarizing each meaning unit in a statement	Identifying themes	Making notes for the text	Identifying emerging themes	Identifying conceptual themes	
<p><i>Tell me more about your family!</i></p> <p>My family ...</p> <p><i>When you grew up, who did you grow up with?</i></p> <p>When I grew up, I grew up with my cousin and brother. I grow ... in family with no dad. I have never met my dad. Maybe I might have seen him at an early age, when three, but later – just seen his photos. It’s like he is still living, so maybe someday. I know he has been with my mum for some time, and ... there’s a reason why he isn’t here. Like ... back then ... I don’t know what was the reason for this departure.</p>	<p>I grow ... in family with no dad. I have never met my dad. Maybe I might have seen him at an early age, when three, but later – just seen his photos. It’s like he is still living, so maybe someday.</p>	<p>He grew up without a dad.</p>	<p>Absent father</p>	<p>Usually ... for us boys – our fathers don’t sit down with us and talk about things and advise us about sexual transmitted diseases and HIV and things like that.</p> <p>My note: Fathers don’t discuss sexually transmitted diseases, including HIV. But are there other sensitive topics that fathers or other men in the family normally talk about with their adolescent sons?</p>	<p>Not open about discussing sensitive topics</p>	<p>Limited interaction with men, including their father</p>	<p>Limited interactions with father and other men</p> <p>Not an open somebody</p> <p>Not being man enough</p> <p>Aspirations about responsible fatherhood</p> <p>Guiding</p> <p>Providing</p> <p>Emotional presence</p>

Paper III

The data analysis for paper III used interpretative phenomenological analysis (Shinebourne & Smith, 2009). The entire data set had already been cross-examined in relation to the phenomenon of fatherhood, which meant that I had a detailed overview

of the material at this point. This implied a need to move beyond the descriptive approach of phenomenology and reaching a higher level of interpretation through interpretative phenomenological analysis. The knowledge about absent fathers from paper II led to interest about motherhood in the same setting. Thus, the analysis started with specific research questions. How do young men and women experience being mothered? How do young women describe their future aspirations about mothering?

A mixed sample of both men and women was decided on, because it would be interesting to know from both sexes about the mother role in a context of absent men. The aspirations towards becoming a mother were considered relevant from the perspective of the young women only, since paper II had already reported the young men's aspirations about parenting. The following section outlines first the analysis of the individually-based data (interviews and diaries), then the group-based data (focus group discussions), and last the individual and the group data together. The analysis of the individual and the group data included several steps, which will be detailed (Table 6).

First, the individually based data (interviews and diaries) were analyzed to identify personal experiences and aspirations about motherhood. The analysis was carried out according to the steps of interpretative phenomenological analysis (Shinebourne & Smith, 2009):

Step 1: The aim was to find out what was happening in the text by reading and re-reading the transcripts. Comments to the text were written in the right-hand margin, aiming to stay close to the text and not abstract or search for conceptualization at this level. The comments were filed in NVivo, which made it possible to view lists of all of the comments for each of the participant linked to the memos.

Step 2: The aim was to identify emerging themes, which referred to a broader level of meaning in a section of the text. This process implied thoroughly

examining the initial notes from the first step of analysis and transforming them into more meaningful statements (Langdrige, 2007, p. 111). The emerging themes were written in the left-hand margin of the text. Steps 1 and 2 could thus be seen in a three-column matrix, including the original transcript in the middle, the initial notes and the emerging themes. One matrix was made for each interview. I made notes by hand in the margins of the diaries.

Step 3: The aim was to identify the meaning of the text on a more analytical and conceptual level. This started by interrogating the emerging themes. Similarities between emerging themes were identified and clustered and given a new and a more analytical label, such as “role model”. Some emerging themes needed to be divided and yet others lost relevance. Some of the themes appeared more overarching, which were referred to as superordinate themes, such as “responsible motherhood”. Other themes represented various areas of meaning of the superordinate themes, which were called subordinate themes (Langdrige, 2007, p. 111), such as “being there”. Identifying conceptual themes involved double hermeneutics, in which my interpretation was second order to how the participants’ made sense of their experiences (Smith et al., 2010). The hermeneutic circle was used to repeatedly check the original transcripts against the subordinate themes and the superordinate themes. In NVivo, the themes were organized under tree nodes, which provided a hierarchy of the superordinate and subordinate themes.

Step 4: A table was made to illustrate the conceptual themes, which included quotes with reference to the data material. In accordance with the recommendations of interpretative phenomenological analysis, the writing of the results from the analysis started immediately after the fourth step, while the details and a sense of the whole were fresh in mind. The themes were refined during the writing process.

Second, the group-based data from the focus group discussions were analyzed, aiming to identify norms about motherhood in the local community. The focus group discussions were analyzed through a top-down perspective, following the procedures of interpretative phenomenological analysis similar to those in paper II (see p. 83) (Tomkins & Eatough, 2010). This resulted in a set of emerging themes about mothering, which were abstracted to four conceptual themes, such as “role model”.

Third, the individual and group data were examined together. This involved a bottom-up perspective of interpretative phenomenological analysis in which attention was paid to the individual views of the focus group participants on motherhood (Tomkins & Eatough, 2010). The accounts of the participants in the focus groups were then interrogated based on what they had said about motherhood in the interview and diary. This process refined the suggested conceptual themes derived from the previous phases of analysis. A final set of themes was made and refined during the writing process. The emerging themes were continually checked against the transcripts to ensure that the words of the participants were preserved.

Table 6
Steps of text analysis for Paper III

Interviews and diaries Interpretative phenomenological analysis			Focus group discussions Interpretative phenomenological analysis			Final themes
Step 1	Step 2	Step 3	Step 1	Step 2	Step 3	
Making notes to the text	Identifying emerging themes	Identifying conceptual themes	Making notes to the text	Identifying emerging themes	Identifying conceptual themes	
<p>My mother is my very, very, very best friend. I tell her most of the things. Yesterday when I went to a meeting and I came back at around 15:00, and then she said "Have you met that guy again!?" Ha ha.</p> <p>My note: Her mother is her best friend, and she tells her mother things.</p>	Mother is a confidant	Trusting relationship	<p>There is this girl ... who has a child and she is my age and then she cannot afford to meet the needs of her child. She doesn't look after that baby. The grandmother is the one to provide care. Actually, she sometimes leaves the baby at home alone.</p> <p>My note: Perception about a teenage mother who does not know how to properly care for a child.</p>	Ability to provide proper care	Responsible motherhood	<p>Responsible motherhood</p> <p>Being there</p> <p>Providing</p> <p>Guiding the transition to adulthood</p> <p>Trusting relationships</p> <p>Confidant</p> <p>Role model</p> <p>Aspiring responsible motherhood</p> <p>Planning the timing of and the number of children</p> <p>Being there, providing and guiding</p>

3.5. Ethics

In this study we followed the guidelines spelled out by Western Norway Regional Committee for Medical and Health Research Ethics (REK vest), the International Ethical Guidelines for Biomedical Research Involving Human Subjects of the Council for International Organizations of Medical Sciences (CIOMS), the United Nations (UN) Convention on the Rights of the Child, and the International Comparative Social Science Research (UNESCO, 1994).

3.5.1. Ethical clearance

The Ethics Committee of the University of Limpopo (the University of the North at that time) approved the quantitative data collection in 2002. The University of Limpopo funded the study.

Regarding the qualitative data collection, the Western Norway Regional Committee for Medical and Health Research Ethics (REK vest) was contacted in 2005. According to REK vest local authorities in the country where the study was to be conducted⁷ had to be contacted. Medunsa Campus Ethics Committee at the University of Limpopo approved the study (Appendix 7). This study was undertaken under the SATZ research project. SATZ had received ethical clearance from REK vest. In addition, local authorities in Limpopo approved the project: Limpopo Provincial Department of Health and Social Development, Polokwane, South Africa and the ethics committee of the University of Limpopo (Appendix 8). This PhD was undertaken under the umbrella of the memorandum of understanding between the University of Limpopo and the University of Bergen (Appendix 9).

3.5.2. Informed consent

Conducting research on adolescents of low socioeconomic status requires carefully considering the ethical procedures. Adolescence is a vulnerable life phase, and adolescents of low socioeconomic status may be particularly vulnerable when being asked to participate in research funded by an institution in a high-income country, because this may create unrealistic expectations about receiving monetary compensation. Every effort was made to ensure that participants did not feel exploited, disrespected or disappointed. The process of providing information was vital,

⁷ From 2005 to 2008 the Western Norway Regional Committee for Medical and Health Research Ethics vest (REK vest) had limited capacity and therefore defined their task as assessing studies to be performed in Norway and in countries that did not have an official science and technology commission. Local authorities in South Africa where the study should be conducted should be contacted. Permission was thus not sought from agencies in Norway, such as the Norwegian Social Science Data Services (NSD).

including the kind of information, how the information was provided and by whom it was provided.

Informed consent may be difficult to obtain when the participants are considered vulnerable, have little education and are from a different culture than the researcher (Nama & Swartz, 2002). Furthermore, the age of the participants required special attention. The issue of informed consent was given considerable thought. Youth participation and their right to express themselves are detailed in the United Nations Convention on the Rights of the Child and the International Ethical Guidelines for Biomedical Research Involving Human Subjects of the Council for International Organizations of Medical Sciences (CIOMS).

The United Nations Convention on the Rights of the Child underlines the respect for the views of children (younger than 18 years). Paper 12 stipulates that children have the right to express their views freely in all matters affecting them and that the views of children should be given due weight in accordance with their age and maturity. Only children can represent the views of children, and in a societal perspective, it is important to include the views of people younger than 18.

The International Ethical Guidelines for Biomedical Research Involving Human Subjects of the Council for International Organizations of Medical Sciences (CIOMS) say that people older than 12 or 13 years are capable of understanding and thereby can give informed consent but that this consent normally should be complemented by parental permission. CIOMS guideline 14, however, says that parental permission may be dropped in studies in which the research involves investigation of adolescents' beliefs and behavior regarding sensitive topics, such as sexuality and domestic violence. Parental knowledge of the subject matter may place the adolescents at some risk of being questioned by their parents. Although sexuality and domestic violence were not spelled out as overall topics in this research, the interview guides included sexuality, and domestic violence could arise as a topic in the open-ended approach to studying the institution of the family.

The competence to consent was thoroughly discussed with the local SATZ researcher. Given the problem of illiteracy, a low educational level in the parent generation in Mankweng and the fact that parents were often absent from the household because of labor migration, it was decided that informed consent should be obtained from the principal of the school of the participants. This procedure was already established as a routine in the SATZ study. Hence, the principal gave permission for the pupils to participate before the qualitative data collection started (Appendix 10). The pupils themselves consented to participate and signed the standard informed consent format provided by the University of Limpopo (Appendix 11).

In prior to giving their informed consent, the participants received written and oral information about this study. The participants were provided with an information letter (Appendix 12), but more importantly was the oral information given at the information meeting (separate meetings for the male and female participants) about the study before the data collection started in 2005. In these meetings, held in a classroom after school hours, it was possible for us to deepen the written information, and the participants could ask questions. The male research assistant, who was also a social worker and had already good rapport with many of the young people in the area, led the meetings, and created a humorous, open and informal atmosphere, and the adolescents followed up with questions. He explained, in their local language SePedi, the aims, the methods and the ethics of the study. He spelled out that the aim of the research was to learn about family life and their future aspirations about family and career, which implied that the participants would be asked questions about their family and their views on having children and health, such as HIV. The various methods were detailed according to what they are, how they are carried out, where they will be carried out, and who will manage the methods. The time frame, including the planned order of the methods (participant observation first, then focus groups, photos and diaries, and last individual interviews) was also detailed.

The single-use cameras would be used to assist the start of the individual interview so that the researcher could get a wider understanding of their home and social surroundings. It was informed that the photos would not be used in any kind of analysis, and would not be printed in any kind of published or unpublished materials. No copies of the photos would be made, and the participant would keep the negatives and positives after the interview.

The writing of diary was also issued for detailed information, particularly since this implied “producing data on their own” without the presence of a researcher. We asked them to write about their daily life, which meant that they were relatively free to include what they wanted. The issue of keeping such a diary in their home was discussed in view of the risk of other household members that would look in it. The participants were encouraged to keep the diary in a secret place at home. They could also hand it in to me (I was present in school every day in that period) during the day if they feared that someone would find it at home when they were in school.

The issues of informed consent, voluntariness and confidentiality were dwelled on at length. The principle that participation in the study was voluntary was underlined and the ways the confidentiality of the study participants would be protected throughout data collection and in managing the data later were thoroughly explained. Since the participants were young people who were recruited into the study through the principal of the school, it was crucial that they understood what it meant that participation was voluntary and that withdrawal would not imply any sanctions, neither from the school nor from the researcher. At every encounter in focus group sessions or individual interviews, the participants were reminded that they could withdraw at any time and refrain from answering any question without giving a reason and without being penalized. They were asked about and consented to the use of a tape-recorder during focus group discussions and individual interviews.

The research assistant stressed in the information meeting that this was a low-budget dissertation study and that payment for participation could not be expected. I was present at the two information meetings for male and female participants to tell them about myself and why I was interested in learning about their daily life and to clarify questions they might have about participation.

Being aware that the participants could be overwhelmed of both the written and oral information that they received at the beginning of the study, I saw it as imperative to repeat the information about the aims, methods and ethics while spending time together during the participant observation. This was useful because the participants got the opportunity to ask questions in a setting where there were not many other participants, like in the information meeting.

Before the data were collected in the follow-up study in 2007, the participants were gathered in another information meeting. The participants were given similar information as in 2005 about the aims, methods, and ethics of the study. They were also given written information about the progress of the study and what to write in the diary.

The quantitative data collection took place before this dissertation study was initiated, and informed consent was obtained from all the participants by the research assistants before the data collection started. The participants were informed about the study through the research assistants in SePedi before participation, and they were ensured that participation was totally voluntary, and that anonymity was guaranteed by not disclosing any personal information to a third party. Since the mothers of the adolescents participated in this study, parental consent was a different issue in the quantitative data collection than in the qualitative data collection. The mothers participating in the study allowed their daughters' to participate, and the adolescent women gave their informed consent before participation.

3.5.3. Confidentiality

Confidentiality was preserved by using pseudonyms and numbers instead of their names and by not revealing any kind of information to a third party that might disclose the identity of the participants. In the following, I will detail more about how confidentiality was preserved in the qualitative data collection.

Other people near the venues of the focus group discussions and interviews could not hear what was being said. Information about how the data would be stored was given before data collection. The tapes, transcripts and diaries are stored in a locked closet and will be destroyed when the study is finalized. Considering the fear of gossip, confidentiality was discussed with the participants before each focus group discussions. Confidentiality was also discussed with the research assistants and transcribers, who signed a non-disclosure statement.

The exercise of photographing third parties raised ethical concerns related to confidentiality. For example, if a brother of a participant experienced being photographed, and learned that the disposable camera was given as part of a research study, he may worry that his photo could be used in analysis and printed in a report. It was therefore particularly important with the detailed information that the participants were provided with in prior to handing out the cameras, so that the participants also could inform people on the photo about the purpose. I collected the cameras from the participants after a week and brought them to a photo shop in Polokwane to be developed. After a few days, I collected the positives and negatives, and no copies were made. When the participant came for the individual interview, we looked through the photos together.

3.5.4. Compensations

Since the study participants were given monetary compensation after the 2005 qualitative data collection, this could have encouraged or discouraged their willingness to participate in the follow-up in 2007.

Considering the time and effort the participants had spent on this study, I wanted to give them something in return. The participants were invited to a closing session at the end of each data collection period. In 2005, I invited two youth leaders, who were involved in community work and trained to empower adolescents in Limpopo, to hold a seminar. In 2007, we gathered in one of the classrooms at the University of Limpopo, where the participants got an introductory lesson by an information technology consultant about how to use the Internet and create an e-mail account to keep in touch and for general use. At their request, I made a presentation about empowerment and educational opportunities in Limpopo, including how to apply for a scholarship.

The participants were given contact information in case they needed or wanted to stay in touch after the interviews. Some of them contacted me, because they needed to talk more about some issues discussed in the interviews, such as problems in the family. One participant spoke of mental problems because of a troublesome childhood and needed help. I had several talks with the participant face to face and over the phone and later through e-mail. I referred the participant to the research assistant, who is trained as a social worker. I have stayed in touch with some of the participants through e-mail over the years. Both parties have initiated the communication. The information gained through this contact has not been used as data.

4. Findings

This chapter summarizes the main findings from the three papers of the dissertation (Table 7).

4.1. Paper I

The first paper investigated family values of young people through continuity and changes in attitudes towards reproduction through a cross-sectional study of three generations of women ($n = 516$) in a low income area in South Africa. The study was carried out in rural and urban areas of the Capricorn District, which is situated in the central part of Limpopo Province. The reproductive attitudes investigated were: the timing of having the first child, the ideal number of children, preference for a son or daughter in a one-child scenario and the reasons for having children.

The changes and continuity were studied through differences and similarities in the responses given by the women in the three different generations: grandmothers, mothers and adolescent women. We observed changes in the timing of having the first child, the ideal number of children and sex preference in a one-child scenario, and continuity in the values of having children (voc).

4.1.1. Changes in reproductive attitudes

The adolescents wished to postpone childbearing to a (statistically significantly) higher age compared with the ages at which the mothers and the grandmothers had their first child. The mean age at which the adolescent women desired to have their first child was 27 years ($SD = 4.8$). The women in the mother generation had their first child at age 21 years ($SD = 5.8$), and the women in the grandmother generation had their first child at age 20 ($SD = 3.1$). Thus, the adolescents wished to postpone childbearing 6 years compared with when their mothers had their first child and 7 years compared with their grandmothers.

The other obvious change in reproductive attitudes was the desired number of children. The adolescent women wished to have statistically significantly fewer children than the perceived ideal number of children in the mothers' and grandmothers' groups. The mean desired number of children reported by the adolescent women was 2.7 (SD=1.9). The mean desired number of children in the mothers' generation was 3.5 (SD=1.2) and 4.3 in the grandmothers' generation (SD=1.9).

The third change we observed was a tendency to prefer a daughter in a one-child scenario. The adolescent women clearly preferred having a daughter (53%). Only 23% aspired to have a son, and 24% reported that the sex of the baby did not matter. In the older generations of women, the sex preference did not seem that important. The most frequent answer was that "the sex of the baby did not matter" (50% of mothers and 57% of grandmothers). Nevertheless, more women aspired to have a daughter (26% of mothers and 26% of the grandmothers) than a son (24% of mothers and 17% of grandmothers), also in the older generation of women.

4.1.2. Continuity of reproductive attitude

Values of children or the reasons for wanting to have children did not change as much in a generational perspective. The reasons for wanting to have children were rather similar, which indicated a continuity of reproductive attitudes from the grandmothers' generation to the adolescent generation.

The women were presented with several statements on a five-point Likert scale for why they wanted to have children. The responses of the adolescent women were measured using principal component analysis (PCA). The following two components of reasons for wanting to have children were found: "social and emotional values of children" and "traditional and utilitarian values of children". The "social and emotional values of children" comprised statements about why they wanted children such as "because of the pleasure you get from watching your children grow" and "to have someone to love and care for". The "traditional and utilitarian values of children"

comprised such statements as “to carry on the family name” and “because a child helps around the house”. The “social and emotional values of children” was more important than the “traditional and utilitarian values of children” to the adolescent women.

The cross-generational analysis of the values of children was done by comparing the mean scores of the components using ANOVA, which showed that the women in the three generations did not give very different weight to their reasons for wanting children. The adolescents stressed the “social and emotional values of children” to the same degree as the mothers’ generation but less than the grandmothers’ generation. Greater difference, however, was seen in the “traditional and utilitarian values of children”, in which the adolescent women gave significantly lower importance compared with the older generations of women.

4.2. Paper II

The second paper investigated family values of young people through conceptualizations about fatherhood among adolescent men in the area of Mankweng situated in Capricorn in the Limpopo Province. Fatherhood was researched through the adolescent men’s experiences of interacting with men and fathers about the transition to manhood, and their aspirations about becoming a father in the future. Phenomenological approaches were used in the analysis. Two superordinate themes were identified: 1) Limited interactions with father and men and 2) Aspiring responsible fatherhood.

4.2.1. Limited interaction with father and men

The analysis of the experiences of being fathered indicated that the adolescent men’s interaction with fathers and other significant men, such as uncles, grandfathers, stepfathers, neighbors or others, was very limited. Most of the adolescents had not experienced having a father in the household on a daily basis during childhood or adolescence. Fathers or other adult men were generally absent from the household. Some had never known their father, because he was dead or had abandoned the family.

Others had a labor migrant father, who returned home monthly or less often. The adolescent men grew up with their mother and siblings on a daily basis, and some also shared the household with maternal grandparents, aunts and cousins. The limited interaction between the adolescent men and fathers or other significant men illuminated two sub-themes: 1) “Not an open somebody” and 2) “Not being man enough”.

“Not an open somebody” referred to how the adolescent men commonly perceived the ability of their father and other significant men to interact with them. Fathers and men were not seen as being open about issues in the adolescents’ transition from boyhood to manhood. The challenges adolescent men faced during adolescence in Mankweng, such as the risk of HIV infection, were commonly not topics for discussion in the father–son relationship. The adolescent men aspired to learn about the views of a father and longed to talk with a father figure, but the fathers were not available. They were either absent from home or the adolescent men did not dare to initiate conversations related to the difficult transition to adulthood. Thus, few adult male role models in their family or in their neighborhood could offer the desired guidance and support.

“Not being man enough” referred to how the adolescent men commonly interpreted fathers’ contributions to the family. In the views of the adolescent men, their father or other significant men did not take sufficient responsibility to meet the economic and emotional needs of their family. A labor migrant father’s economic input to the family in Mankweng could be modest, and his absence from home also severely curtailed the emotional bonds between father and son.

4.2.2. Aspiring responsible fatherhood

The analysis of how the adolescent men wished to manage the father role themselves in the future differed greatly from their experiences of being fathered. The adolescent men strongly opposed their father and aspired for another level of involvement in family life and childrearing. The adolescent men expressed that they wanted to

become a “responsible father”. Their conceptualization of a responsible father illuminated three subthemes: 1) Providing economically, 2) Guiding the transition to adulthood and 3) Offering emotional care. The adolescent men wanted to provide economically but aspired to share this responsibility with a future wife. They aspired to live in the home of the family on a daily basis, and wished to share the daily responsibilities of raising and caring for children with their future wife. Guiding their adolescent children in their transition to adulthood was considered of utmost importance, particularly on issues related to reproductive health and HIV.

4.3. Paper III

The third paper investigated family values of young people through conceptualizations about motherhood among adolescent men and women in the particular area of Mankweng situated in Capricorn in the Limpopo Province. Motherhood was researched through the adolescents’ experiences of being mothered, and aspirations about mothering in the adolescent women. Phenomenological approaches were used in the analysis. Three superordinate themes were identified: 1) Responsible motherhood, 2) Trusting relationship and 3) Aspiring responsible motherhood.

4.3.1. Responsible motherhood

The adolescents perceived their mother as being responsible, which is reflected through the following three subthemes: 1) Being there, 2) Providing economically and 3) Guiding the transition to adulthood.

Being there was primarily linked to their mother’s presence throughout their childhood both physically and emotionally. In adolescence, some experienced that their mother was a labor migrant who returned to Mankweng on weekends only. This physical absence was experienced as difficult, but the mother commonly followed up through phone calls during the week, thus signaling an emotional availability that the adolescents treasured. Providing economically was defined as another important responsibility. The mother was seen as the main provider in the family and sometimes

the sole provider, but commonly she was said to share the economic responsibility with the father or other persons. The guiding role of the mother in the adolescents' transition to adulthood in issues related to social life, education, sexuality and reproductive health was seen as another core function of mothering and especially in the absence of fathers.

4.3.2. Trusting relationship

What characterized the adolescents' relationship to their mother was trust, which is reflected through two subthemes: 1) Confidant and 2) Role model.

A trusting relationship seemed to be closely related to their experiences of having responsible mothers who were present, provided economically and who guided them through childhood and adolescence. The trust that the adolescents vested in their mothers was expressed in several ways, especially in terms of seeing her as their primary confidant and a role model. Although the mother appeared to be one of the most important role models for both adolescent men and women, her role of being a confidant seemed more important for the adolescent women than for the men. The mother–daughter relationship was defined along generational and seniority lines, but the relationship between the adolescent men and their mothers seemed more ambiguous, as there were issues related to sexuality and reproductive health that the adolescent men could not confide to a mother.

4.3.3. Aspiring responsible motherhood

The analysis of the adolescent women's future aspirations of mothering revealed that the young women aspired to become “responsible mothers” as seen through the following subthemes: 1) Planned motherhood, 2) Being there, 3) Providing economically, and 4) Guiding.

Their aspirations were based on their experiences of being mothered as being present in everyday life, providing economically and guiding. However, their ideas of responsible motherhood differed on two important points – careful planning of

motherhood and shared parenthood. The two are closely connected. This required being employed and a stable relationship with a man before having children. Thus, the timing of becoming a mother was crucial and so was the number of children. Although the adolescent women aspired to take on the responsibilities of being there for their younger children on a daily basis, providing and guiding in much the same way as their mothers, they wished to share these responsibilities with a future husband. In their ideals about parenthood and family life, the husband would be living at home on a daily basis, would take part in the daily care of young children and would contribute in guiding adolescent children in their transition to adult life. The adolescent women aspired to be a joint provider with their husband.

Table 7
Summary of the three Papers

	Paper I	Paper II	Paper III
Participants	Adolescent women (<i>n</i> = 197) Mothers (<i>n</i> = 186) Grandmothers (<i>n</i> = 133) Total (<i>n</i> = 516)	Adolescent men (<i>n</i> = 13)	Adolescent men (<i>n</i> = 13) Adolescent women (<i>n</i> = 9) Total (<i>n</i> = 22)
Types of data	Structured questionnaires	Participant observation Focus group discussions Diaries Photos Semistructured interviews	Participant observation Focus group discussions Diaries Photos Semistructured interviews
Analytical approach	Cross-sectional	Phenomenology	Phenomenology
Main findings	<p>Changes in reproductive attitudes</p> <p>Desire to postpone first childbirth among the adolescent women compared with the age at which their mothers and grandmothers had their first child</p> <p>Preference for fewer children among the adolescent women compared with the ideal number given by mothers and grandmothers</p> <p>Higher preference for a daughter in a one-child scenario in the young generation compared with the mothers and grandmothers</p> <p>Continuity of reproductive attitude</p> <p>Two types of values of children:</p> <ul style="list-style-type: none"> • social and emotional values of children; and • traditional and utilitarian values of children <p>The two types of values of children were not weighted very differently across generations</p>	<p>Limited interactions with father and men</p> <p>Not an open somebody Not being man enough</p> <p>Aspiring responsible fatherhood</p> <p>Guiding Providing Emotional presence</p>	<p>Responsible motherhood</p> <p>Being there Providing Guiding</p> <p>Trusting relationships</p> <p>Confidant Role model</p> <p>Aspiring responsible motherhood</p> <p>Planning Being there Providing Guiding</p>

5. Discussion

This section discusses the main findings and then focuses on methodological issues, including the strengths and limitations of the study.

5.1. Main findings

This is the third phase of the mixed-methods design, in which the main findings from the quantitative and qualitative data are integrated in an overall discussion. Young people's values related to reproduction and parenthood in Limpopo are discussed from three different perspectives. First, the attitudes towards reproduction (Paper I) is discussed based on the experiences of being mothered and fathered in Mankweng (Papers II and III). Second, the desire to postpone motherhood is discussed based on the challenges of growing up in Limpopo. Third, attention will be focused on how young men and women aspire to raise their children in this context. Finally, the family values of the adolescents will be viewed based on the family model of emotional interdependence (Kağıtçıbaşı, 2007).

5.1.1. Attitudes towards reproduction in a context of absent fathers

The attitudes towards reproduction both changed and continued through the three generations of women in Limpopo (Paper I). The adolescent women wished to have fewer children than the number the mothers and grandmothers perceived as the ideal number of children in a family. The young women wished to have their first child around age 27 years, which is about 7 years later than when the women in the mother's and grandmother's generations gave birth to their first child. The young women preferred a daughter to a son. The mothers and grandmothers also preferred a daughter to a son, but less strongly than the adolescent women. The young women emphasized social and emotional reasons for wanting children more than the traditional and utilitarian reasons for wanting children, which was also found in the mothers' and grandmothers' generations. According to the VOC I studies (Arnold & Fawkett, 1975;

Fawcett, 1972; Hoffman & Hoffman, 1973; Kağıtçıbaşı, 1982), psychological reasons for wanting children are associated with urban, affluent contexts that are very different from Limpopo and traditional and utilitarian reasons are associated with lower-income areas. Thus, it is necessary to look into other contextual issues characteristic of Limpopo in particular and South Africa in general.

The desire for fewer children reflects the fertility decline in South Africa and Limpopo in recent decades (Moultrie, Hosegood, McGrath, Hill, Herbst, & Newell, 2008). The common explanation for fertility decline is economic development (Kağıtçıbaşı, 2007), but this reason does not seem to fit in poverty-ridden parts of South Africa. Several explanations for what has been called a “unique fertility transition” in South Africa (Swartz, 2009, p. 498) have been suggested. During apartheid, contraceptives were introduced free of charge, and it was also suspected that African women were sterilized without their consent (Wolf, 2005). Post-apartheid, the introduction of the Choice of Termination of Pregnancy Act of 1996 and the HIV epidemic may have affected fertility. Women living with HIV have less chance of getting pregnant (Sharma, Feldman, Golub, Schmidt, Silver, Robison, & Minkoff, 2007). Women’s increasing educational and work opportunities (Lubbe, 2007) have very likely affected on the low fertility rate. Adolescent fertility, which is very high in South Africa, has also been part of the debate. In South Africa, young mothers tend to return to school after childbirth, which commonly implies a delay in the birth of a second child and a smaller completed family size (Kaufman, de Wet, & Stadler, 2000). Further, the situation of labor migrant husbands during and after apartheid may have contributed to the declining fertility rate. It is argued that women started to control their fertility by limiting their number of children when the money supplied by their labor migrant husbands diminished (Swartz, 2009). This study contributes findings that may further improve understanding of why poor adolescent women desire few children in Limpopo.

In Mankweng, Limpopo, parenthood, as defined by adolescents, means taking responsibility, which in this study involved three main issues: 1) presence,

involvement and availability in their daily life, 2) economic provision and 3) offering guidance about adult life during adolescence. When a mother or a father does not take those responsibilities, this may signal irresponsible parenthood (Papers II and III).

The contrast between the experiences of being fathered and mothered was huge in Mankweng. The experiences of being fathered were described in terms of fathers who were “not an open somebody” and “not being man enough” to take on a provider, caring and adviser role in the family (Paper II), whereas the experiences of being mothered were described in terms of responsibility and trust. Mothers needed to cover for the lack of care, support and guidance from fathers, who were largely absent and unavailable (Paper III). Providing economically and guiding boys about becoming a man in the Northern Sotho culture have traditionally been ascribed to men (Mönnig, 1967) but women are often taking this over in present-day Mankweng. The burden for mothers of taking on the load of responsibilities in a context where fathers were experienced as being irresponsible may affect young women’s fertility aspirations and their ideals about having few children.

Similarly, the young women’s aspirations to postpone childbearing may be seen as an expression of adjusting to the situation of absent men and broken families and in Limpopo. In Mankweng, where a mother often has to be not only the primary and often sole caretaker but needs to contribute substantially to the household finances, a young woman see it as responsible to get an education and paid work settled before having children.

Decreasing preference for a son has been explained as an expression of economic development, where the financial support from a son is no longer needed in old age (Kağıtçıbaşı, 2007). In South Africa, where the old-age pension is paid to all citizens above age 65 years (Kaseke, 2010) the expectations towards economic contribution from a son may be diminishing, and the utilitarian reasons for wanting children may not be as important as social and emotional reasons for wanting children. When men commonly migrate, mothers may expect not only absent husbands but also absent

adult sons, and mothers may prefer to have a daughter who may be more likely to stay in Limpopo and offer emotional support to aging parents. Desiring a daughter may also express fear of raising a son as a single mother. Being a role model and guiding a son has traditionally been ascribed to men in the Northern Sotho (Mönnig, 1967). Proper role modelling is especially relevant in an era of HIV, and young women may fear that they are not able to take the necessary responsibility in a son's transition to manhood. Adolescent men in Mankweng longed for a man to take on a father role (Paper II). Longing for a present and involved father figure has been interpreted as "father hunger" (Herzog, 2001), and a mother's efforts do not fill such a void.

The burden of responsibilities of mothers in a context of broken families and absent men may contribute to shaping adolescent women's awareness about future family life and to adjusting their plans to become a responsible mother even if they have to parent their children without a father. Considering the dramatic political changes, however, the changes through the generations were not dramatic. This may signal that women in all generations have adjusted to the situation of absent husbands. The young women simply follow the strategy of previous generations but express a strong desire to improve the situation of the mother role by being more independent from the father of their children.

We were however not able to find clear explanation through this contextual framework to why the young women expressed two and not three values of children as suggested in the original idea about voc (Arnold & Fawcett, 1975; Fawcett, 1972; Kağıtçıbaşı, 1982).

5.1.2. Transition to adulthood

This section focuses on various challenges the adolescent women in Limpopo may face in their transition to womanhood.

The adolescent women wished to postpone their first childbirth to their late twenties (Paper I), and the preferred transition to adulthood was through education and work,

not through motherhood (Paper III). These aspirations break with the norm in the Northern Sotho, where the transition to womanhood has been through motherhood. They also break with what has been understood as common transitions to adulthood in other poor societies (Brandt & Kvande, 1998; Brook et al., 2006; Edley & Wetherell, 1999; Gangadharan & Maitra, 2001; Garenne, Tollman, Kahn, Collins, & Ngwenya, 2001; Morrell, 2007). The high rate of teenage pregnancy in Limpopo, however, challenges the ideal of education as a route to womanhood (Richter & Mlambo, 2005). Hence, the reality for many young girls is that motherhood remains the route to womanhood despite changing norms. Because it is well documented that it is an unwanted situation for the young women (Papers I and III; Bafana, 2010; Kessy & Rwabudongo, 2006; Mkhwanazi, 2010) and that it has several negative implications for the young mother and her child (see p. 15), it is important to find out more about the processes behind the high risk South African adolescents have for getting pregnant.

A variety of factors are discussed as influencing teenage pregnancy in South Africa: limited available routes to adulthood for young people in poor areas (Garenne et al., 2001), the effects of early childbearing among older sisters (Munthree, 2009), adolescent boys in poor South African contexts desiring to become a father early to promote masculine identity (Hendricks, Swartz, & Bhana, 2010) and limited knowledge about contraceptives (Richter & Mlambo, 2005). The child support grant has been discussed as being a motivation for young, poor girls to get pregnant. Several recent studies have however rejected any relation between the high fertility rates and the introduction of the child support grant (Makiwane, 2010; Moultrie & McGrath, 2007; Udjo, 2009). This section examines how experiences of being fathered and mothered in the context of broken families may exacerbate the difficult transition to womanhood in Limpopo (Papers II and III).

The absence of fathers has been related to high rates of teenage pregnancy in South Africa (Macleod, 1999). Adolescent men in Mankweng longed for a present, supportive and guiding father figure and could be hesitant about asking their mother for advice regarding the transition to manhood. This is in accordance with earlier

research finding that sons were less likely than daughters to receive information from a mother about risks related to sexuality (Aronowitz, Rennells, & Todd, 2005; Turnbull, et al., 2008). Fathers' limited availability and mothers' limited ability in Mankweng to offer the needed guidance indicate that young men are largely left without parental support in adolescence. Lack of parental support has been found to lower adolescents' ability to develop awareness of the risks related to sexuality, such as not using condoms and forced sex (Frank, Esterhuizen, Jinabhai, Sullivan, & Taylor, 2008). The lack of support from a father experienced by young men through adolescence may limit their awareness of risks related to sexual relationships, which again put young women at risk of unwanted pregnancy as well as HIV infection in their transition to womanhood.

Both international (Aronowitz et al., 2005; Averett, Benson, & Vaillancourt, 2008; Davies & Friel, 2001; Kapinus & Gorman, 2004; Owens et al., 2003; Silitsky & Jones, 2004; Turnbull et al., 2008; Wamoi, Fenwick, Urassa, Zaba, & Stones, 2010) and South African (Brook et al., 2006; Ramarumo, Mudhovozi, & Sodi, 2011) literature indicates that the mother is significant in promoting healthy sexual behavior among adolescent children. The educational level of the mother, however, is significant. An international report indicated that the mother's level of education varies with teenage childbearing (McDevitt, 1996). South African research has documented that well-educated mothers not only positively affect their children's progress in school (Timæus & Boler, 2007) but also influence the likelihood of using contraceptives (Kaufman, Clark, Manzini, & May, 2004). The mothers of the adolescent women referred to in paper I have a low educational level, and this may signify both lack of support in the young women's schooling and their use of contraceptives. Paper III found that mothers were rated as the young women's most important role model, but the role modeling function of mothers in South Africa has been an issue of debate. African women in South Africa have demonstrated limited power in relation to sexuality and men (Lesch & Kruger, 2005), which implicates poor role modeling for daughters, who may develop limited power in sexual relationships and get pregnant before they desire to have children.

Young women's desire to shape female identity in terms of education and work, and delay motherhood, may be challenged by the circumstances of absent fathers, adolescent men who lack awareness of risky sexual behavior, uneducated mothers and poor role modeling. This supports previous conclusions that parents are important in the process of socialization and role models in adolescents' transition to adulthood (Alberts et al., 2003; Davies & Friel, 2001; Owens et al., 2003; Turnbull et al., 2008; Zani, 1993, in Kroger, 2000).

5.1.3. Changing ideals of gender equality

So far, the discussion has focused on how experiences of being mothered and fathered add insight to adolescent women's attitudes about having children. This section examines how young men and women aspire to raise their future children in Mankweng (Papers II and III).

The young men expressed a strong wish to break radically from how they had been fathered (Paper II). They wanted to become responsible fathers, very similar to how they had been mothered (Paper III). Childrearing was considered a joint project with a future wife. Most of the young men wanted their wife to be educated and working, which indicated a break with how family roles traditionally have been constructed in South Africa (Morrell & Jewkes, 2011). This has also been seen in a working-class community outside Johannesburg, where boys developed positive and very different male identities from their own fathers (Langa, 2010). This indicates that young men in South Africa may be in a process of shaping another type of masculinity than their fathers in which emotional involvement is important and contributes to the discourse on "new fatherhood" in South Africa (Morrell & Jewkes, 2011; Ramphele, 2002; Roy, 2008; Shirani & Henwood, 2011).

The young women wanted to follow the footsteps of their mother (Paper III) much more closely than the boys' wish to break radically from their father. The young women wanted to become mothers who are present in everyday life and provide their

children sufficient emotional care, very much in accordance with what they reported that their mothers had done. Providing financially and guiding their children through the challenging phase of adolescence were also strongly stressed. In contrast to their mothers, however, the young women stressed the importance of not only completing education before having children but also to sharing domestic tasks and childcare with their husband.

The compatible parenthood agendas of young men and women indicate that gender equality arises as a very central value that breaks with the family life of the previous generation. The aspirations not only indicate a change in masculinities but also a change in ways to define womanhood in Limpopo. When young people from Mankweng are expressing such strong awareness about gender equality, this clearly reflects an institution of family in transition.

5.1.4 Family values of young people and the family model of emotional interdependence

This section considers the family values of young people in Limpopo in view of Kağıtçıbaşı's family model of emotional interdependence (2007). This model (Fig. 4) is designed to understand families in contexts in the majority world that are undergoing great societal transition in terms of improved living conditions, urbanization, decreasing fertility rate and increased status of women in the family. In addition to these types of societal changes, the model proposes that the economic interdependence between generations loses relevance, but the emotional support in the family remains important.

The model of emotional interdependence sheds light on the family situation in Limpopo and South Africa in two ways. First, the great societal transition in the country in the past 15 years complies with the model's characteristics of improved living conditions, urbanization, decreasing fertility rate and increased status of the woman in the family. Families in all provinces are experiencing improved living conditions in terms of housing and access to piped water and electricity (SAIRR,

2012). The country is urbanizing and has reported a declining fertility rate for 45 years (Moultrie & Timæus, 2003; Swartz, 2009), and gender equality is enshrined in the constitution (Hutson, 2008).

Second, the family values of the adolescents in this study are in accordance with the family model of emotional interdependence: Emotional values of children, low son preference and a desire for a limited number of children. Responsible parenthood, referring to both parents – mother and father – sharing the responsibilities attached to having children equally. This relates to increased status of a woman in the family, and an urge for gender equality. These values support Kağıtçıbaşı's idea about family change towards the model of emotional interdependence in Majority world contexts.

Even though the model is useful in discussing South Africa as a country undergoing great societal transformation in the context of family change and when discussing young people's ideals and family values in Limpopo, the model presents limitations in fully understanding the present reality for families in Limpopo and Mankweng. Considering the great economic inequalities in the country (UNDP, 2010), the model may reflect family change in segments of the society, but certainly not the reality in a poverty-ridden area such as Limpopo. The situation in poor areas seems to make financial dependence important in the family. The social security system in South Africa has severe limitations that particularly affect poor families (Goldbatt, 2005; Guthrie, 2002; Kaseke, 2010). Research has documented that financial support is transferred between generations, and that the old-age pension appears to be one of the most accessible social pensions (Bohman, Van Wyk & Ekman, 2009), which is sometimes being shared with the whole family (Schatz, 2007). This indicates that the economic investments and wealth flows in the family are very important, which is not in coherence with the idea about a convergence towards the model of emotional interdependence.

Since the model most closely represents the adolescents' family values and not their present reality, it may be primarily used to improve our understanding of the kind of

family change young people desire. However, the young people's urge for change as expressed through their family values is not sufficient to implement change. The challenges posed by poverty, unemployment and HIV indicate that intentions to change family life at the individual level are insufficient to produce change at the societal level. Changes must be implemented at a structural level (Hutson, 2008, p. 84).

Implementing family change from a structural level may start by reflecting more upon how the institution of the family is described and debated. Nkosi & Daniels (2007) have indicated how the family institution in South Africa has been discussed very pessimistically and that the focus should be turned towards its strength and potential. The discussions on "broken families", "family in crisis" and "men in crisis" could be more contested by discourses that focus on the capacity of poor families in South Africa. Paying more attention to the potential of single mothers, by defining their strength and resources, has been carried out in Sweden (Fransehn & Back-Wicklund, 2008). In South Africa, like in African American communities in the United States (Dilorio, Resnicow, McCarty, De, Dudley, Wang, & Denzmore, 2006) it has been documented that mothers have been shown to be important in teaching adolescent children about sexuality and contraceptives (Brook et al., 2006; Ramarumo et al., 2011). This may be especially important in Limpopo, where the ability of schools to communicate messages related to HIV has been questioned (Helleve, 2010). Moreover, the discourse on "new fatherhood" in which men's effort and motivation to take responsibility for emotional care in the family have been central could be a starting-point to discuss how changes could be implemented. Older people represent another resource in the family. African women demonstrate strength in caring for the younger generations in the era of HIV (Nyasani et al., 2009; Penn et al., 2010; Tshililo & Davhana-Maselesele, 2009), and they hesitate to see it as a burden (Schatz, 2007). Thus, giving more weight to relational capacities in the families, such as emotional care, may be important in a context where poverty tend to stress the hardship of economic dependencies between family members.

5.2. Methodological considerations

5.2.1. Challenges in the mixed-methods design

Scholars have not yet arrived at a unified definition of mixed-methods research (Johnson et al., 2007), and this poses one of the challenges of using it in this dissertation. Since this study comprises three independent substudies, in which quantitative and qualitative methods were not mixed in the data collection or data analysis but only in an overall discussion of the dissertation, some scholars, such as Morse & Niehaus (2009), would not define this study as having mixed methods. This dissertation could instead have been described as comprising two designs, cross-sectional and phenomenological designs, without seeing it as having mixed methods. However, since a key feature of mixed methods is eclecticism (Johnson & Onwuegbuzie, 2004), and since the initial cross-sectional design called for a subsequent phenomenological study to provide a wider understanding of the results, the two designs are linked and should be integrated in an overall method.

Another limitation is the type of mixed-methods design used here. Ideally, a qualitative design could have been adopted before the quantitative design to use the conceptualizations about fatherhood and motherhood to develop a more culturally sensitive questionnaire to be used in the next phase. Further, carrying out a concurrent design instead of a sequential design could have been an advantage, because the quantitative and qualitative designs could be mixed at other levels than the discussion section. Mixing during data collection or the analysis phases could have produced more integrated knowledge about reproduction and parenthood. Perhaps it could have provided more explanation to the two component solution of the values of children. Nevertheless, mixing the methods at this level enables the analysis in each of the quantitative and qualitative designs to emerge independently, which allows space for such topics as “absent fathers” in the qualitative analysis to come to the fore – a topic not seen at all in the quantitative analysis. This design thus allows for “silence” about certain topics in the other method (O’Cathain et al., 2010, p. 1148).

5.2.2. Challenges in the cross-sectional design

The challenges and limitations in the cross-sectional first phase of the mixed-methods research represented the key motivation to initiate the phenomenological design. This section examines the main limitations of the cross-sectional design.

Cross-sectional designs are only able to describe associations between variables at one time. This was a challenge since the three generations of women obviously represented different reproductive phases in their lives. The grandmother and mother groups had already given birth to one or more children and had probably finished their childbearing period, whereas the adolescent women potentially had childbearing in their future. A longitudinal study following a group of women from their adolescence and 20 years forward could have strengthened the study. However, such data were not available in South Africa, and such data collection would require decades to complete. Cross-sectional designs can further not draw causal inferences, which meant that we could not identify cause and effect relationships in the data material. This was not a goal in this study, since we believe that attitudes towards reproduction often form part of a web of factors mutually affecting each other.

Validity

The cross-sectional design needs to be evaluated based on the statistical tests, construct validity, external validity and possible biases during data collection.

The most important limitation is the uncertainty to whether the latent components actually represent what the participants meant while answering the questions. Limiting the reasons for wanting to have children from 16 items to 2 components may have given a too simplistic picture of the complex issue of motivations for childbearing. The idea of principal component analysis (PCA) is to make the data more manageable, but the simplification may miss the meaning the respondents assigned to their answers in

numbers. The predefined response alternatives did not allow the participants to present their own ideas, which lead us to question the construct of values of children (voc).

Construct validity refers to whether a scale measured the theoretical construct that it meant to measure (Cozby, 1993). In this case, the construct of voc was measured to understand South African women's motivations for childbearing, and found two voc (social and emotional and traditional or utilitarian) in adolescent women, which differed from the original suggestion of the three voc (Arnold & Fawcett, 1975; Fawcett, 1972; Kağıtçıbaşı, 1982), also discussed in some VOC II studies (Kağıtçıbaşı & Ataca, 2005; Kim et al., 2005; Zheng et al., 2005). Though the divergence may be a result of the use of different samples and measures (see p. 52), it is necessary to look closer at the construct in view of reproductive issues in South Africa.

The voc construct is based on the question “Why do people choose to have children?” assuming that an individual or a couple makes an active, conscious choice to have children. The study participants were only given the following predefined response alternatives: 1) “yes/probably”, 2) “no/probably not” and 3) “I don't know” to answer the complex question, “Do you want to have children?”

The rate of unplanned pregnancies in South Africa of 70% among 18- to 35-year-old women (Umsobomvu Youth Fund & Human Sciences Research Council, 2003) clearly indicates that becoming pregnant is not necessarily a choice. South Africa is known to have an epidemic level of sexual violence (POWA & ALN, 2010). A study of pregnant women found that 55% reported a history of physical or sexual violence from a male partner (Dunkle et al., 2004). Forty-five per cent of 14- to 24-year-old women did not perceive their first sexual intercourse as willing (Hallman, 2005), and 28% of men interviewed in a random community-based sample reported having raped a woman (Jewkes, Sikweyiya, Morrell, & Dunkle, 2009).

A bulk of international research, including countries that participated in the original VOC study I, such as the United States (Schwartz, Peacock, McRae, Seymour, &

Gilliam, 2010) the Philippines (Williams, Sobiesczyk, & Perez, 2001), Japan (Goto, Yasmura, Yabe, & Reich, 2006) and Turkey (Erol, Durusoy, Ergin, Döner, & Çiçeklioglu, 2010), also recognized that pregnancy intentions are complicated. Dichotomization between “wanted” and “unwanted” pregnancies is too simplistic, because other categories, such as “ambivalence” and “avoidance” (Schwartz et al., 2010) also emerge as salient in women’s thoughts about having children. Hence, bearing children is not necessarily a rational choice, which makes the issue of childbearing motivation a comprehensive research topic. The ontological foundations of seeing giving birth as a conscious, active choice put limits to the VOCQ in other cultural contexts than where it was originally developed in the 1970s. The VOC II study in the Czech Republic used qualitative interviews to compliment the VOCQ (Mareš & Možný, 2005).

The construct validity might have been improved through analyzing the scale of why people do not want to have children, which is also included in the VOCQ. In view of adolescent women expressing an attitude towards wanting to have fewer children, it would be particularly interesting to find out their reasons for not wanting to have children.

External validity refers to whether the results from the women in this study could be generalized to other populations. It was difficult to generalize the findings from the South African VOC study to populations in other countries that also participated in the VOC study since different samples and measurements were used. Cautiousness should be considered in generalizing the findings about having children obtained in Limpopo to other contexts in South Africa, since Limpopo is considered “rural” and one of the poorest provinces in the country. However, other “rural”, generally poor provinces could also draw on the results of this study. The Northern Sotho people, represented in this study, may also have different views on having children than other ethnic groups in South Africa. In the view of the southern Africa fertility transition (Caldwell & Caldwell, 2002; Potts & Marks, 2001), this region in sub-Saharan Africa may gain from the knowledge about reproductive attitudes.

The representativeness of the sample within a Limpopo context could also be questioned. The selection criteria requiring nulliparous adolescent women may have excluded common attitudes towards reproduction, since many adolescent women in Limpopo already are mothers (Richter & Mlambo, 2005).

The data collection procedure may have carried interviewer bias, meaning systematic differences in how the various interviewers collected the data. For example, the appearance of a highly educated local woman may have motivated the participants, who generally had a low level of schooling, to answer in a socially desirable way about having children. Since highly educated women in South Africa tend to have fewer children than women with less education (Gangadharan & Maitra, 2001) this may have influenced the answers about perceptions of an ideal family size.

5.2.3. Challenges in the phenomenological design

The qualitative methods were designed to address some of the limitations of the cross-sectional design by allowing the study participants to speak more freely about their views on reproduction and family life. The qualitative data showed that the topic of parenthood was useful to better understand young women's attitudes towards reproduction. Although the phenomenological design met some of the limitations of the quantitative study, the qualitative design has several other limitations that need to be discussed.

Challenges in qualitative research are often related to potential pitfalls of humans in the roles as the research instrument and in making the link between the data and the interpretations transparent. In addition, the challenge of conducting qualitative research in a cultural setting different from one's own is an important consideration. These challenges were considered throughout the qualitative research process, which is detailed in the following paragraphs through the concepts of reflexivity, validity and transferability.

Reflexivity

Reflexivity is an important “tool” in meeting challenges in qualitative research. It implies that researchers are conscious and reflective about their own position, the questions being asked and the methods being used, because these issues may influence the knowledge produced in the study (Langdrige, 2007).

In my role as a foreign researcher in Mankweng, it was indeed important how I entered the field and presented myself to the study participants, because that could influence the quality of the data. The male research assistant who was also a local social worker whom the young people generally respected and liked therefore made the first steps in approaching the study participants and introduced me to them at the information meeting. After I presented myself, I underlined that I was interested in their personal opinions, and that I wished to learn as much as possible about their everyday life. As put forward by Robson (1993), this meant that they and not me as the researcher became the experts of this study.

It is likely that the young people saw my white skin as salient. Considering the history of apartheid and the post-apartheid era, I was aware that my skin color could bear negative associations. However, I had the impression that my Norwegian and European status made them a little curious. As a foreigner, white, female, highly educated and 29 years old, I represented a different background to the youths whom I wanted to get to know. Further, I had no husband or children at the time of data collection in 2005, and this seemed to surprise the youths, considering my age. The fact that one of the Northern Sotho research assistants was also 29 years old, female, highly educated, single and childless made us look somewhat similar, which became particularly obvious in one of the focus group discussions with the women participants. The adolescent women asked us about why we were still single and childless at our age. As such, our background characteristics may have influenced the adolescent women’s responses about future aspirations, since some of them said we appeared to be their role models. I was further aware of the challenges related to the

gender aspect in collecting the data, which was also a reason for giving the informants a choice of interviewers.

Being the research instrument, as Kvale (1996) describes the role of the qualitative researcher, requires discussion about the foreknowledge of the researcher before entering the field. In phenomenological research this is considered based on the concept of epoché (Sokolowski, 2000) referring to the aim of bracketing or being aware of our own assumptions through the research process. My assumptions about adolescents' family life in a South African poverty setting could be colored by my background from a nuclear family life discourse in a rich welfare state. However, I aimed at being aware of those socioeconomic contrasts throughout the process, for example, through openness in the way of asking questions and later analyzing them. My presuppositions may also have been shaped by experience from fieldwork among urban, middle-class businesswomen in Uganda.

Another way of considering reflexivity is through the insider versus outsider concepts, which is indeed important when approaching people who have a different background. Clearly being categorized as an outsider in Mankweng carries the danger of misrepresenting the young people. In my experience as a researcher, it was also an advantage coming from the outside; as some of the participants indicated, it was easier to trust "someone from the outside", because they will leave the community and do not have the chance to gossip. However, being a Norwegian PhD fellow in a South African context poses several potential challenges in producing valid research, which are detailed in the next paragraphs.

Validity

Evaluating the validity of qualitative research often starts by asking whether the sample of study participants is appropriate. This was assessed for age, sex and selection of school.

Even though 22 adolescents may represent a large sample for phenomenological researchers, it was necessary in this study because of the cultural differences between the researcher and the participants. Considering my limited previous knowledge about family life in Mankweng, I needed the perspectives from all these people to further represent perceptions about parenthood and family values.

The slight overweight of male participants could indicate that the objective of developing a balanced perspective of young men and women was violated. Nevertheless, the data material constituting the accounts of the adolescent men did not outweigh those of the adolescent women. More young men were needed to represent their views more fully, because they tended to give shorter and more superficial descriptions.

Another important factor in assessing the validity is the use of a school as the basis for recruiting study participants. Other perspectives on reproduction and family life could have been obtained from young people selected from such locations as the local health clinic or a local drama group. Using a sample recruited from a school seemed appropriate, however, since most adolescents in South Africa attend school (SAIRR, 2011/2012). The selected semiurban school was also considered an average school in Mankweng, which seemed to make this choice valid for discussing the family values of adolescents in this area. It is important to bear in mind that students attending a more rural school may have other perspectives on family life, such as labor migrant parents.

The next question in assessing the validity is whether the findings appear to be relevant to the aim of the study. The aim of the qualitative phase in this study was to better understand women's attitudes towards reproduction in Limpopo. The findings from the qualitative phase showed that local conceptualizations about motherhood and fatherhood were relevant (see discussion p.104). However, during both the data collection and the analysis, our attention could have been more tied up to the four specific research questions of the quantitative phase of this study. A more systematic

approach to analyzing these issues in a qualitative perspective could have brought more light to the voc construct in Limpopo. Using a more open approach, which was able to identify other issues related to family life as well, was however very important to adhere to the overall purpose to increase understanding of the values related to reproduction and family life among young people.

The credibility refers to how true the research appears and is important in evaluating the validity. Bringing in various perspectives during the research process is often referred to as triangulation (Mays & Pope, 2000). This was seen as a way of compensating for being an “outsider” and ensuring reflexivity in the process. Triangulation was used at the following levels in the research process; 1) the data sources, 2) the data collectors and 3) during the data analysis.

First, using five different qualitative methods (participant observation, focus group discussions, interviews, diaries and photos) created an opportunity to explore the individual study participants’ responses from different perspectives. Second, involving local research assistants in collecting the data stimulated a wider variety of follow-up questions and ways of seeing the interview situation and interviewee than I could achieve alone. Third, the process of analysis involved contributions from people with different perspectives. The perceptions of the local research assistants were considered as were the views of 10 young people attending school in the Mankweng area other than the study participants. They filled out a “validation form” comprising quotes from the study participants that I had difficulty understanding, such as the wording “street fathers”. In addition, these people were asked for their opinions as to whether an experience was common or not common in Mankweng. My three supervisors (Ghana/Norway, United States and Norway) from the fields of cross-cultural psychology, public health and global maternal health contributed different perspectives when reviewing the data analysis.

Language and translation are important: all data collectors and participants have English as their second language, which gives room for misunderstanding. However,

the research assistants had previous work experience with Norwegians, which may have eased their understanding of my English. Another challenge related to language was obviously in the focus group discussions that were mainly carried out in SePedi. My role was thus limited to an observer with little opportunity to ask follow-up questions. To ensure the quality of the translation, a student in Norway fluent in SePedi checked about half the interviews and the focus group discussions.

Transferability

The findings are based on data collected from a small group of participants in one specific area, and the transferability to other contexts needs to be discussed.

The findings were obtained in Mankweng in the Capricorn district in Limpopo. Capricorn represents one of the most urbanized and developed districts in Limpopo (Stats SA, 2009b), which means that they may not cover the perspectives of family life of young people living in the deep rural areas in Limpopo. The Mankweng youths may be greater influenced by urbanization, and their future aspirations about education may not represent the aspirations of youths in the more rural districts. Nevertheless, the context of unemployment and labor migration seem to apply to the province as a whole, which means that the views of adolescents in Mankweng about absent parents because of labor migration, especially fathers, may be transferable to a province level.

Limpopo Province represents one of the most disadvantaged provinces in the country, with poorer living conditions, higher fertility rate, higher unemployment rate, fewer institutions for higher education and greater net outward migration than the more urbanized provinces, such as Gauteng (Holborn & Eddy, 2012; SAIRR, 2012; Stats SA, 2010b, 2010c, 2010d; CIA World Fact book, 2012b). These factors indicate that the findings may be specific to the province. Since there are more workplaces and educational institutions other provinces, like Gauteng, the issue of migration and absent parents may not be as salient for adolescents in those provinces. The findings from Limpopo, however, may be transferable to similar contexts of unemployment, migration and poverty in South Africa. The findings related to absent fathers and

present mothers are transferable in the sense that South Africa's policies on family and fatherhood represent the structural framework for families across the country.

6. Conclusions and implications

The purpose of this study was to obtain more knowledge about values related to reproduction and family life among young people in an economically deprived area in South Africa, because young people's family values have been pointed out as key in learning about how to break the negative trends in the institution of the family in South Africa (Holborn & Eddy, 2011).

I approached the research problem in a sociocultural psychological perspective, and studied family values through attitudes towards having children and experiences of and expectations towards parenthood among adolescent men and women in the Limpopo Province. I carried out the study using a mixed-methods design, comprising of three phases: 1) quantitative methods, 2) qualitative methods, and 3) mixing the two methods in an overall discussion of the findings. The integration of the quantitative and qualitative methods produced insights that would not have been available by using the individual methods side by side. In this design, the adolescent women's attitudes towards reproduction produced in the VOC study (Paper I) were better understood through local conceptualizations of fatherhood and motherhood (Papers II and III). Since the results in the first paper needed to be explained in another framework than VOC, this may imply that other VOC studies also require alternative frameworks to discuss their findings. This is particularly relevant in VOC II studies that were not included in the original VOC I study when the research instrument (VOCQ) was developed. The further development of the VOCQ may gain from considering the relevance of local concepts about fatherhood and motherhood.

Young people in Limpopo expressed family values of reproduction and parenthood that could be viewed in light of Kağıtçıbaşı's family change model of emotional interdependence: Emotional reasons for wanting children, low son preference and a desire for a limited number of children. Responsible parenthood was conceptualized in terms of both parents taking an equal share of the responsibilities of raising children.

These family values reflected that gender equality in the family is very central to future parents in a rural, poor province in South Africa.

The continuity and changes in the attitudes towards reproduction were interpreted in a sociocultural framework of poverty, unemployment and male labor migration, where fatherhood was understood in terms of irresponsibility, unavailability, and absence, and where motherhood was understood in terms of responsibility, single parenthood, and availability. The burden of responsibilities of mothers in the context of broken families and absent men in Limpopo may have adjusted the young women's future aspirations. Their attitudes expressed a strong desire to improve the situation of the mother role by becoming financially independent and limiting the burden of responsibilities related to childcare and household chores. However, the young women's desire to shape female identity in terms of education and work, and delay motherhood, could be challenged by circumstances in the institution of the family in Limpopo.

The conceptualizations of parenthood in young people in the Mankweng area in Limpopo confirm previous family research that parents are important in adolescents' transition to adulthood. In a context of broken families and absent men, the mother appears particularly essential. A mother appeared role model not only for the young women, but also for the young men. Still, the young men longed for a father-figure to confide in and to receive advice and guidance from in their difficult transition to manhood. This is important to pay more attention to in HIV prevention in areas where male labor migration is pervasive.

The young men aspired to shaping masculine identities in terms of responsible fatherhood, radically different from their own fathers, which means that the young men and women expressed similar and compatible parenthood agendas. This clearly shows that the institution of the family in Limpopo is in a state of transition, where gender equality is essential.

This study contributes to the debate about the family described as “being in a state of crisis” in South Africa by giving voice to young people in their transition to adulthood. The young men and women in this study had reflected considerably about future family life and expressed clearly how they wanted to turn the “crisis of men” to “involved fatherhood”. The call for gender equality in the family among young people living in a context of poverty is a key input to future debates and policy making about the institution of the family in South Africa. Gender equality are challenged by several factors above the individual and family levels, such as unemployment, limited educational opportunities and the weak legal position of fathers in South Africa, thus it is important to find ways to implement changes from a structural level. It is pertinent that the concerns and future hopes of young people in Limpopo are being taken into the public discourse of family life in South Africa and that legal change and poverty reduction are implemented. It is important to increase work opportunities, limit male labor migration and increase women’s educational opportunities in Limpopo to create the basis for better future prospects for families.

References

- Abdi, H., & Williams, L. J. (2010). Principal component analysis. *Wiley Interdisciplinary Reviews: Computational Statistics*, 2(4), 433-459.
- Abrahams, N., & Jewkes, R. (2005). Effects of South African men's having witnessed abuse of their mothers during childhood on their levels of violence in adulthood. *American Journal of Public Health*, 95 (10), 1811-1816.
- Akande, A., Adetoun, B., & Osagie, J..(2006). Botswana. In J. Georgas, J.W. Berry, F.J.R. Van de Vijver, C. Kağıtçıbaşı, & Y. Poortinga (Eds.), *Families across cultures. A 30-nation psychological study* (pp. 251-258). Cambridge: Cambridge University Press.
- Akande, A., Adetoun, B., & Tserere, M.(2006). The South African Family. In J. Georgas, J.W. Berry, F.J.R. Van de Vijver, C. Kağıtçıbaşı, & Y. Poortinga (Eds.), *Families across cultures. A 30-nation psychological study* (pp. 442-449). Cambridge: Cambridge University Press.
- Alberts, C., Mbalo, N.F., & Ackermann, C.J. (2003). Adolescent relevance of domains of identity formation: A South African study. *Journal of Youth and Adolescence*, 32 (3), 169 – 184.
- Allen, J. (1984). Motherhood: the annihilation of women. In J. Trebilcock (Ed.), *Mothering: Essays in Feminist Theory*, (pp. 315-331). Totowa, NJ: Rowman & Allanheld.
- Anderson, K.G., Kaplan, H., Lam, D., & Lancaster, J. (1999). Paternal care by genetic fathers and stepfathers II: Reports by Xhosa High School Students. *Evolution and Human Behaviour*, 20, 433-451.
- Ardington, C., Case, A., Islam, M., Lam, D., Leibbrandt, M., Menendez, A., & Olgiate, A. (2010). The impact of AIDS on intergenerational support in South Africa: Evidence from the Cape Town area Panel Study. *Research on Ageing*, 32 (1), 97-121.
- Arnett, J.J. (2010). *Adolescence and Emerging adulthood. A cultural approach, 4th edition*. New Baskerville: Prentice Hall.
- Arnold, F., & Fawcett, J. T. (1975). *The value of children: A cross-national study, (Vol 3)*. Honolulu, Hawaii: East West Center.
- Aronowitz, A., Rennells, R., & Todd, E. (2005). Hetero social behaviors in early adolescent African American girls: The role of mother-daughter relationships. *Journal of Family Nursing*, 11(2), 122-139.
- Asbury, J. (1995). Overview of Focus Group Research. *Qualitative Health Research*, 5 (4), 414-420.
- Averett, P., Benson, M., & Vaillancourt, K. (2008). Young women's struggle for sexual agency: the role of parental messages. *Journal of Gender Studies*, 17 (4), 331-344.
- Bafana, T. (2010). *Factors influencing contraceptive use and unplanned pregnancy in a South African population*. Master of Science in Medicine. Johannesburg: Faculty of Health Sciences, University of the Witwatersrand.
- Baker, T.A., & Wang, C.C. (2006). Photovoice: Use of a Participatory Action Research Method to Explore the Chronic Pain Experience in Older Adults.

- Qualitative Health Research*, 16, 1405- 1413.
- Barbarin, O. A., & Richter, L. M. (2001). *Mandela's children: Growing up in post apartheid South Africa*. New York: Routledge.
- Bem, S., & Looren de Jong, H. (1997). *Theoretical issues in psychology. An introduction*. London: Sage Publications.
- Berry, J., W., Poortinga, Y.H., Breugelmans, S.M., Chasiotis, A.C., & Sam, D.L. (2011). *Cross-cultural psychology. Research and applications. Third Edition*. United Kingdom: Cambridge University Press.
- Betzner, A. E. (2008). *Pragmatic and Dialectic Mixed Method Approaches: An Empirical Comparison*. Doctoral dissertation, Faculty of the graduate school of the University of Minnesota, United States of America.
- Bloom, K.C., & Hall, H.S. (1999). Pregnancy wantedness in adolescents presenting for pregnancy testing. *American Journal of Maternal-Child Nursing*, 24(6), 296-300.
- Bohman, D.M., Van Wyk, N. C., & Ekman, S.-L. (2009). Tradition in transition – intergenerational relations with focus on the aged and their family members in a South African context. *Scandinavian Journal of Caring Sciences*, 23, 446-455.
- Bojlen, N. S., & Lunde, I.M. (1995). Fokusgruppeinterview som kvalitativ forskningsmetode. Oversigtsartikel. *Ugeskr.Læger. Vitenskap og Praksis*, Københavns Universitetet, 157/23.
- Bongaarts, J. (2002). The end of the fertility transition in the developing world. *Population and Development Review*, 28(3), 419–443.
- Boserup, E. (1980). African women in production and household. In C. Presvelou, & S. Spijkerks-Zwart (Eds.), *The household, women and agricultural development (pp. 11-34)*. Wageningen: H. Weenman & B.V. Zonen.
- Brandt, B. & Kvande, E. (1998). Masculinity and child care: The reconstruction of fathering. *The Sociological Review*, 46(2), 293-314.
- Brannen, J., Hepinstall, E., & Bhopal, K. (2000). *Connecting Children: Core and Family Life in Later Childhood*. London: Routledge.
- Breheny, M., & Stephens, C. (2007). Individual responsibility and social constraint: The construction of adolescent motherhood in social scientific research. *Culture, Health & Sexuality*, 9 (4), 333-346.
- Brook, D.W., Morojele, N.K., Zhang, C., & Brook, J.S. (2006). South African adolescents: pathways to risky sexual behavior. *Education and Prevention*, 18 (3), 259-272.
- Brislin, R. W. (1986). The wording and translation of research instruments. In W.J. Lonner & J.W. Berry (Eds.), *Field methods in cross-cultural research*(pp. 137-164). Newbury Park, CA: Sage.
- Bulatao, R.A. (1975). *The value of children. A cross-national study: Philippines*. Honolulu: East West Center.
- Burman, S., & Van der Spuy, P. (1996). The Illegitimate and the Illegal: The Effects of Apartheid on Births out of Wedlock. *Journal of Social History*, 29(3), 613 - 635.
- Bynum, M.S., & Kotchick, B.A. (2006). Mother- adolescent relationship quality and autonomy as predictors of psychosocial adjustment among African American adolescents. *Journal of Child and Family Studies*, 15 (5), 529-542.
- Caldwell, J.C., & Caldwell, P. (2002). *The fertility transition in sub-Saharan Africa*.

- Paper presented at the conference on Fertility and the current South African issues of poverty, HIV and AIDS and youth. Department of Social Development, South Africa and Human Sciences Research Council, Pretoria, South Africa
- Carrigan, T.R., Connell, R.W., & Lee, J. (1985). Toward a new sociology of masculinity. *Theory and Society*, 14, 551-604.
- Chodorow, N. (1978). *The Reproduction of Mothering*. Berkeley: University of California Press.
- Choice on Termination of Pregnancy Act (1996). *Choice on Termination of Pregnancy Act*. Act 92 of 1996, Republic of South Africa. Retrieved from <http://www.polity.org.za/html/govdocs/legislation/1996/act96-092>.
- Collinson, M.A., Tollman, S.M., Kahn, K., Clark, S.J., & Garenne, M. (2006). Highly prevalent circular migration. In M. Tienda, S.M. Tollman, E. Preston-Whyte, & S.E. Findlay, (Eds.), *African Migration in Comparative Perspective*. Johannesburg: University of the Witwatersrand Press.
- Connell, R. W. (1985). *Masculinities*. Cambridge: Polity.
- Connell, R.W. (1998). Masculinities and globalisation. *Men and masculinities*, 1(1), 3-23.
- Connell, R. W. (2006). *Masculinities. Second edition*. Reprinted. Cambridge: Blackwell Publishers Ltd.
- Convention on the Rights of the Child (1990). General Assembly resolution 44/25 into force 2 September 1990. Retrieved from: http://webcache.googleusercontent.com/search?q=cache:aN1UsCbY6LsJ:www.unicef.org/crc/files/Rights_overview.pdf+&cd=1&hl=en&ct=clnk&gl=no
- Council for International Organizations of Medical Sciences (CIOMS) (2002). *International Ethical Guidelines for Biomedical Research Involving Human Subjects*. Prepared by CIOMS in collaboration with the World Health Organization (WHO).
- Cozby, P.C. (1993). *Methods in Behavioural research, Fifth edition*. California: Mayfield Publishing Company.
- Creswell, J. W., & Plano Clark, V.L.P. (2011). *Designing and conducting mixed methods research, second edition*. London: Sage.
- Dageid, W. (2007). *Caring for those infected means caring for the future. A community based, participatory support initiative aimed at meeting the needs of HIV positive people in the Limpopo province of South Africa*. Doctoral dissertation, Faculty of Social Sciences, University of Oslo, Norway.
- Davies, E.C., & Friel, L.V. (2001). Adolescent sexuality: Disentangling the effects of family structure and family context. *Journal of Marriage and Family*, 63, 669-681.
- D'Cruz, P., & Bharat, S. (2001). Beyond joint and nuclear: The Indian family revisited. *Journal of Comparative Family Studies*, 32, 167-194.
- De Lisle, J. (2011). The benefits and challenges of mixing methods and methodologies: lessons learnt from implementing qualitatively led mixed methods research designs in Trinidad and Tobago. *Caribbean Curriculum*, 18, 87-120.

- Department of Health (2010). *National Antenatal Sentinel HIV and Syphilis Prevalence Survey in South Africa, 2009*. Retrieved from: <http://www.info.gov.za/view/>
- Dilorio, C., Resnicow, K., McCarty, F., De, A. K., Dudley, W. N., Wang, D. T., & Denzmore, P. (2006). Keepin'it REAL!: Results of a mother-adolescent HIV prevention program. *Nursing research*, 55(1), 43-51.
- Dunkle, K. L., Jewkes, R. K., Brown, H.C., Yoshima, M., Gray, G.E., McIntyre, J.A., & Harlow, S.D. (2004). Prevalence and patterns of gender-based violence and revictimization among women attending antenatal clinics in Soweto, South Africa. *American Journal of Epidemiology*, 160 (3), 230-239.
- Edley, N., & Wetherell, M. (1999). "Imagined futures: Young men's talk about fatherhood and domestic life". *British Journal of Social Psychology*, 38, 181-194.
- Einarsdottir, J. (2005). Playschool children in pictures: children's photographs as a research method. *Early Child Development and Care*, 175 (6), 523-541.
- Erikson, E.H. (1968). *Identity, youth and crisis*. New York: Norton.
- Erol, N., Durusoy, R., Ergin, I., Döner, B., & Çiçeklioglu, M. (2010). Unintended pregnancy and prenatal care: A study from a maternity hospital in Turkey. *The European Journal of Contraception and Reproductive Health Care*, 15(4), 290-300.
- Fawkett, J.T. (1972). *The satisfaction and costs of children: Theories, concepts and methods*. Honolulu, HI: East-west Population Institute.
- Flick, O. (1998). Group procedures. In *An introduction to qualitative research*, (pp. 114-127). London: Sage Publications.
- Floyd, K. (2001). Human affection exchange: I. Reproductive probability as a predictor of men's affection with their sons. *Journal of Men's Studies*, 10 (1), 39-49.
- Frank, S., Esterhuizen, C.C., Jinabhai, K., Sullivan, M., & Taylor, M. (2008). Risky sexual behaviours of high-school pupils in an era of HIV and AIDS. *South African Medical Journal*, 98 (5), 394-398.
- Fransehn, M., & Back-Wiklund, M. (2008). Presence of the absent father: how lone mothers with sons construct and animate the absent father through narratives. *European Journal of Social Work*, 11 (4), 369-381.
- Gallinetti, J. (2006). Legal aspects of fatherhood in South Africa. In L. Richter, & R. Morrell, (Eds.), *Baba. Men and fatherhood in South Africa*, (pp.201-215). Cape Town: HSRC Press.
- Gangadharan, L., & Maitra, P. (2001). Two aspects of fertility behaviour in South Africa. *Economic Development and Cultural Change*, 50(1), 183-200.
- Gangadharan, L., & Maitra, P. (2003). Testing for son preference in South Africa. *Journal of African Economies*, 12(3), 371-416.
- Garenne, M., Tollman, S., Kahn, K., Collins, T., & Ngwenya, S. (2001). Understanding marital and premarital fertility in rural South Africa. *Journal of Southern African Studies*, 27 (2), 277-290.
- Georgas, J. (2006). Families and family change. In J. Georgas, J.W. Berry, F.J.R. Van de Vijver, C. Kağitçibaşı & Y. Poortinga (Eds.), *Families across cultures. A 30-nation psychological study* (pp.3-50). Cambridge: Cambridge University Press.

- Giddens, A. (1984). *The Constitution of Society. Outline of the Theory of Structuration*. Cambridge: Polity Press, p.374.
- Gillespie, R. (2003). Childfree and Feminine: Understanding the Gender Identity of Voluntary Childless Women. *Gender & Society*, 17, 122-136.
- Giorgi, A. (1985a). The phenomenological psychology of learning and the verbal learning tradition, In A. Giorgi (Ed.), *Phenomenology and Psychological Research* (pp. 23-85). Pittsburgh: Duquesne University Press.
- Giorgi, A. (1985b). Sketch of a Psychological Phenomenological Method. In *Phenomenology and Psychological Research* (pp. 8-22). Pittsburgh: Duquesne University Press.
- Giorgi, A., & Giorgi, B. (2006). Phenomenology, In J.A. Smith (Ed.), *Qualitative Psychology. A practical guide to research methods* (pp. 25-50). London: Sage Publications.
- Goldbatt, B. (2005). Gender and social assistance in the first decade of democracy: A case study of South Africa's Child Support Grant. *South African Journal of Political Studies*, 32 (2), 239-257.
- Goto, A., Yasmura, S., Yabe, J., & Reich, M.R. (2006). Addressing Japan's fertility decline: Influences of unintended pregnancy on child-rearing. *Reproductive Health Matters*, 14 (27), 191-200.
- Greene, J. C., & Caracelli, V. (1997). Defining and describing the paradigm issue in mixed method evaluation. *New Directions for Evaluation*, 74, 5-17.
- Guthrie, T. (2002). Family Social security benefits in South Africa. *Social Dynamics*, 28 (2), 122-145.
- Hallman, K. (2005). Gendered socioeconomic conditions and HIV risk behaviours among young people in South Africa. *African Journal of AIDS Research*, 4(1), 37-50.
- Hare-Mustin, R. T., & Marecek, J. (1990). Gender and the meaning of difference: postmodernism and psychology. In *Making a Difference: Psychology and the construction of Gender*, (pp. 22-64). New Haven: Yale University Press.
- Harrell, R., Kassner, E., & Figueiredo, C. (2011). *Multigenerational households are increasing*. Washington, D.C.: AARP Public Policy Institute.
- Harrison, D. (2008). *Three Ways to Reduce Teenage Pregnancy in South Africa*. Teenage Pregnancy Roundtable, Human Sciences Research Council. Retrieved from: <http://www.hsrc.ac.za/Document-2679.phtml>
- Hearn, J., Pringle, K., Muller, U., Oleksy, E., Lattu, E., Chernova, J., Ferguson, H., Holter, Ø., Kolga, V., Novikova, I., Ventimiglia, C., Olsvik, E., & Tallberg, T. (2002). Critical studies on men in ten European countries (1): The state of academic research. *Men and Masculinities*, 4, 380-408.
- Helleve, A. (2010). *Agents of change or reproducers of culture? A study of teachers' role in school based HIV prevention in South Africa and Tanzanian schools*. Doctoral dissertation. Faculty of Medicine, University of Oslo, Norway.
- Hendricks, L., Swartz, S., & Bhana, A. (2010). Why young men in South Africa plan to become teenage fathers: implications for the development of masculinities within contexts of poverty. *Journal of Psychology in Africa*, 20 (4), 527-536.
- Herzog, J. (2001). *Father hunger: explorations with adults and children*. Hillsdale, NJ: Analytic Press.

- Higson-Smith, C. (2006). Youth violence in South Africa. The impact of political transition. In C. Daiute, Z. Beykont, C. Higson-Smith, & L. Nucci (Eds.), *International Perspectives on Youth Conflict and Development*, (pp.177-193). New York: Oxford University Press.
- Hoffman, L.W., & Hoffman, M.L. (1973). The value of children to parents. In James T. Fawcett (Ed.), *Psychological Perspectives on Education*, (pp. 19-76). New York: Basic Books.
- Holborn. L., & Eddy, G. (2011). *First steps to healing the South African family*. Johannesburg: South African Institute of Race Relations.
- Horowitz, I. (2001). "Cultural Practices of Masculinity in Post-Apartheid South Africa", in B.Pease, & K. Pringle (Eds.), *A Man's World? Changing Men's practices in a Globalized World* (pp. 231-244). New York: Zed Books.
- Hutson, S. (2008). Gender oppression and discrimination in South Africa. *Essai*, 5, (1), 83-87.
- Inkeles, A. (1998). *One world emerging?: Convergence and divergence in industrial societies*. Boulder, CO: Westview Press.
- Jewkes, R. (2002). Intimate partner violence: causes and prevention. *The Lancet*, 359 1423-1429.
- Jewkes, R., Sikweyiya, Y., Morrell, R., & Dunkle, K. (2009). *Understanding men's health and use of violence: Interface of rape and HIV in South Africa*. Medical Research Council Policy Brief: Pretoria.
- Jobson, G. (2010). Changing masculinities: land-use, family communication and prospects for working with older men towards gender equality in a livelihoods intervention. *Culture, Health & Sexuality*, 12 (3), 233-246.
- Johnson, R.B., & Onwuegbuzie, A.J. (2004). Mixed Methods Research: A Research paradigm whose time has come. *Educational Researcher*, 33 (7), 14-26.
- Johnson, R.B., Onwuegbuzie, A.J., & Turner, L. A. (2007). Toward a definition of mixed methods research. *Journal of Mixed Methods Research*, 1 (2), 112-133.
- Jones, K.A., Kramer, T.L., Armitage, T., & Williams, K. (2003). The impact of father absence on adolescent separation-individuation. *Genetic, Social and General Psychology Monographs*, 129 (1), 73-95.
- Kağıtçıbaşı, C. (1982). Old-age security value of children: cross national socio-economic evidence. *Journal of Cross- Cultural Psychology*, 13, 145-157.
- Kağıtçıbaşı, C. (1996). *Family and human development across cultures: A view from the other side*. Hillsdale, NJ: Lawrence Erlbaum.
- Kağıtçıbaşı, C., & Ataca, B. (2005). Value of children and family change: A three-decade portrait from Turkey. *Applied Psychology*, 54 (5), 317-337.
- Kağıtçıbaşı, C. (2006). Theoretical perspectives on family change. In J. Georgas, J.W. Berry, F.J.R. Van de Vijver, C. Kağıtçıbaşı, & Y. Poortinga (Eds.), *Families across cultures. A 30-nation psychological study* (pp.72-89). Cambridge: Cambridge University Press.
- Kağıtçıbaşı, C. (2007). *Family, self, and human development across societies. Theories and applications*. New Jersey: Lawrence Erlbaum Associates.
- Kapinus, C. A., & Gorman, B.K. (2004). Closeness with parents and perceived consequences of pregnancy among male and female adolescents. *The Sociological Quarterly*, 45 (4), 691-717.

- Kaseke, E. (2010). The role of social security in South Africa. *International Social Work*, 53 (2), 159-168.
- Katz, I., & Low-Beer, D. (2008). Why has HIV stabilized in South Africa, yet not declined further? Age and sexual behavior patterns among youth. *Sexually Transmitted Diseases*, 35 (10), 837-842.
- Kaufman, C.E., Clark, S., Manzini, N., & May, J. (2004). Communities, opportunities, and adolescents' sexual behavior in KwaZulu-Natal, South Africa. *Studies in Family Planning*, 35 (4), 261-274.
- Kaufman, C.E., de Wet, T., & Stadler, J. (2000). Adolescent pregnancy and parenthood in South Africa. *Studies in Family Planning*, 32 (2), 147-160.
- Kelley, K., & Preacher, K. J. (2012). On Effect Size. *Psychological Methods*, 17 (2), 137-152.
- Kessy, A., & Rwabudongo, N. (2006). Utilization of modern family planning methods among women of reproductive age in a rural setting: the case of Shinyanga rural district, Tanzania. *East African Journal of Public Health*, 3(2) 26-30.
- Kim, U., Park Y.S., Kwon Y.E., & Koo, J. (2005). Values of children, parent-child relationship, and social change in Korea: Indigenous, cultural, and psychological analysis. *Applied Psychology*, 54 (3), 338-354.
- King, V., & Sobolewski, J.M. (2006). Nonresident fathers' contributions to adolescent well-being. *Journal of Marriage and Family*, 69 (3), 537-557.
- Kitayama, S., & Cohen, D. (2010). *Handbook of Cultural Psychology*, New York; Guilford Press.
- Krige, E.J. (1938). The place of the North- Eastern Transvaal Sotho in the South Bantu complex, *Africa: The Journal of the International Institute of African Languages and Cultures*, 11, 3, 265-293.
- Kroger, J. (2000). *Identity Development. Adolescence through Adulthood*. London: Sage Publication.
- Kuper, A. (1975). The social structure of the Sotho-speaking peoples of Southern Africa, Part II. *Journal of the International African Institute*, 45, 1, 139-149.
- Kvale, S. (1996). *Interviews. An Introduction to qualitative research interviewing*. London: Sage.
- Lampic, C., Skog Svanberg, A., Karlstrom, P., & Tyden, T. (2006). Fertility awareness, intentions concerning childbearing and attitudes towards parenthood among female and male academics. *Human Reproduction*, 21(2), 558-564.
- Langa, M. (2010). Adolescent boys' talk about absent fathers. *Journal of Psychology in Africa*, 20 (4), 519-526.
- Langdrige, D. (2007). *Phenomenological Psychology. Theory, research and method*. England: Pearson. Prentice Hall.
- Langeveld, M.J. (1983). The "Secret place" in the Life of the Child. *Phenomenology and Pedagogy*, 1 (2), 181-189.
- Larson, R. W., Wilson, S., & Rickman, A. (2009). Globalization, societal change, and adolescence across the world. In R. Lerner & L. Steinberg (Eds.), *Handbook of Adolescent Psychology*, 2, Third Edition, (pp. 590-622). New York: Wiley.
- Laszloffy, T. A. (2002). Rethinking family development theory: Teaching with the systemic family development (SFD) model. *Family relations*, 51 (3), 206-214.

- Lesch, E., & Kruger, L.M. (2005). Mothers, daughters and sexual agency in one low-income South African community. *Social Science & Medicine*, 61, 1072-1082.
- Lewis, C., & O'Brien, M. (1987). *Reassessing Fatherhood. New Observations on fathers and the modern family*. London: Sage Publications.
- Lubbe, C. (2007). Mothers, fathers, or parents: Same-gendered families in South Africa. *South African Journal of Psychology*, 37 (2), 260-283.
- MacFarlane, A. (1987). *The culture of capitalism*. Oxford, England: Basil Blackwell.
- Macleod, C. (1999). Teenage pregnancy and its "Negative" consequences: Review of South African Research – Part I. *South African Journal of Psychology*, 29 (1), 1-7.
- Macleod, R., Craufurd, D., & Booth, K. (2002). Patients' perception of what makes genetic counselling effective: An interpretative phenomenological analysis. *Journal of Health Psychology*, 7, 145-156.
- Macleod, C. (2003). Teenage pregnancy and the construction of adolescence: Scientific literature in South Africa. *Childhood*, 10, (4), 419-437.
- Madhavan, S., Townsend, N. W., & Garey, A. I. (2008). 'Absent Breadwinners': Father-Child Connections and Paternal Support in Rural South Africa. *Journal of Southern African Studies*, 34(3), 647-663.
- Madu, S. N., & Matla, M. P. Q. (2003). Illicit drug use, cigarette smoking and alcohol. Drinking behavior among a sample of high school adolescents in the Pietersburg Area of the Northern Province, South Africa. *Journal of Adolescence*, 26(1), 121-136.
- Maharaj, P. (2001). Male attitudes to Family Planning in the era of HIV and AIDS: Evidence from the KwaZuluNatal, South Africa. *Journal of Southern African Studies*, 27, (2) 245-257.
- Makiwane, M. (2010). The Child Support Grant and teenage childbearing in South Africa. *Development Southern Africa*, 27 (2), 193-204.
- Mamabolo, I. M., Langa, M., & Kiguwa, P. (2009). To be or not to be a mother: exploring the notion of motherhood among university students. *South African Journal of Psychology*, 39 (4), 480-488.
- Marais, L. (2005). *Housing in former homeland areas of South Africa: Delivery, issues, and policy in the Free state province*. Paper presented at the XXXIII IAHS World Congress on Housing, 27-30 September 2005, "Transforming Housing Environments through Design", University of Pretoria, South Africa.
- Mareš, P., & Možný, I. (2005). The Czech family, reproductive behavior, and the value of children in the Czech republic. *The Value of Children in Cross-Cultural Perspective. Case Studies from Eight Societies* (pp.67-90). Lengerich: Pabst Science Publishers.
- Markus, H.R., & Hamedani, M. G. (2010). Sociocultural Psychology: The dynamic interdependence among self systems and social systems. In S. Kitayama, & D. Cohen (Eds.), *Handbook of Cultural Psychology*, (pp. 3-39). New York: Guilford.
- Mayer, B., Albert, I., Trommsdorff, G., & Schwarz, B. (2005). Value of Children in Germany: Dimensions, comparison of generations, and relevance for parenting. *The Value of Children in Cross-Cultural Perspective. Case Studies from Eight*

- Societies* (pp. 43-66). Lengerich: Pabst Science Publishers.
- Maykut, P., & Morehouse, R. (1994). *Beginning qualitative research. A philosophical and practical guide*. London: The Falmer Press.
- Maynard-Tucker, G. (2000). Conducting focus groups in developing countries: skill training for local bilingual facilitators. *Qualitative Health Research*, 10 (3), 396-410.
- Mays, N., & Pope, C. (2000). Qualitative research in health care. Assessing quality in qualitative research. *Bio Medical Journal*, 320, 50-52.
- Mboya, M. M. (1998). Family relations and the self-concepts of African adolescents: gender-related differences. *Journal of Comparative Family Studies*, 29(1), 201-213
- Mboya, M. M., & Nesengani, R. I. (1999). Migrant labor in South Africa. *Adolescence*, 34(136), 763-767.
- McDevitt, T. A. (1996). *World Population Profile: 1996, with a special chapter focusing on adolescent fertility in the developing world*. US Census Bureau, Report WP/ 1996. Washington DC: US Government Printing Office.
- Mehlwana, A.M. (1996). Political violence and family movements: The case of a South African shanty town. In L.E. Glanz, & A.D. Spiegel (Eds.), *Violence and Family Life in a Contemporary South Africa: Research and Policy Issues*, (pp. 29-42). Pretoria: HSRC Publishers.
- Merleau-Ponty, M. (1962). *Phenomenology of Perception*. London: Routledge.
- Minister of Women, Children and People with Disabilities (2012). Women Empowerment and Gender Equality Bill. Republic of South Africa, Government Gazette, No. 35637.
- Minsky, R. (2000). Beyond nurture: finding the words for male identity. *Psychoanalytic Studies*, 2 (3), 241-254.
- Mkhwanazi, N. (2010). Understanding teenage pregnancy in a post-apartheid South African township. *Culture, Health & Sexuality*, 12 (4), 347-358.
- Moi, A.L., Vindenes, H.A., & Gjengedal, E. (2008). The experience of life after burn injury: A new bodily awareness. *Journal of Advanced Nursing*, 64, 278-86.
- Mojapelo-Batka, E.M., & Schoeman, J.M. (2003). Voluntary termination of pregnancy: Moral concerns and emotional experiences among black South African adolescents. *South African Journal of Psychology*, 33 (3), 144-153.
- Montgomery, C.M., Hosegood, V., Busza, J., & Timæus, I.M. (2006). Men's involvement in the South African family: engendering change in the AIDS era. *Social Science and Medicine*, 62, 2411-2419.
- Morrell, R. (2001). *Changing Men in Southern Africa*. Pietermaritzburg: Natal Witness Commercial Printers.
- Morrell, R. (2005). Men, movements, and gender transformation in South Africa. In L. Ouzgane, L., & R. Morrell, (Eds.), *African Masculinities. Men in Africa from the late 19th century to the present*, (pp.271-288). Durban: University of Kwa Zulu Natal Press.
- Morrell, R. (2006). Fathers, fatherhood and masculinity in South Africa. In L. Richter & R. Morrell, (Eds.), *Baba. Men and fatherhood in South Africa*, (pp.13-25). Cape Town: HSRC Press.

- Morrell, R. (2007). Do you want to be a father? School-going youth in Durban at the turn of the 21st century. In T. Shefer, K. Ratele, A. Strelbel, N. Shabalala, & R. Buikema (Eds.), *From boys to men: Social constructions in contemporary society* (pp. 63-81). Cape Town: University of Cape Town Press.
- Morrell, R. (2009). Gender and Violence: Thoughts from South Africa about what we know and what we don't know. *Paper presented to Annual Gender and Development Seminar*, University of Bergen, January 2009.
- Morrell, R., & Jewkes, R. (2011). Carework and caring: A path to gender equitable practices among men in South Africa? *Journal of Equity in Health*, 10 (17), 1-10.
- Morse, J.M.(2003). Principles of mixed methods and multimethod research design. In A. Tashakkori & C. Teddlie (Eds.), *Handbook of mixed methods in behavioural research* (pp. 189-208). Thousand Oaks, CA: Sage.
- Morse, J.M., & Niehaus, L. (2009). *Mixed method design: principles and procedures*. Walnut Creek, Calif: Left Coast Press.
- Mosikatsana, T. L. (1996). Is papa a rolling stone? The unwed father and his child in South African law – a comment on Fraser v Naude. *The Comparative and International Law Journal of Southern Africa*, 29 (2)152-167.
- Moultrie, T. A., & Timæus, I. M. (2003). The South African fertility decline: evidence from two censuses and a demographic and health survey. *Population Studies*, 57 (3), 265-283.
- Moultrie, T.A., & McGrath, N. (2007). Teenage fertility rates falling in South Africa. *South African Medical Journal*, 97 (6), 442-443.
- Moultrie, T.A., Hosegood, V., McGrath, N., Hill, C., Herbst, K., & Newell, M.-L. (2008). Refining the criteria for stalled fertility declines: An application to rural KwaZulu- Natal, South Africa, 1990-2005. *Studies in Family Planning*, 39 (1), 39-48.
- Mturi, A., Xaba, T., & Sekokotla, D. (2005) Assessment of circumstances facing contemporary families in South Africa. Research Report 66. Durban: School of Development Studies, University of Kwazulu-Natal.
- Munthre, C. (2009). *Life transitions of young women and the influence of older sisters: adolescent sexual behavior and childbearing in South Africa*. Partial fulfillment for the degree of Masters of Population Studies, Faculty of Humanities, Development and Social Sciences, University of KwaZulu-Natal. Durban, South Africa. Retrieved from: <http://hdl.handle.net/10413/361>
- Murdaugh, C., Baker Russell, R., & Sowell, R. (2000). Using focus groups to develop a culturally sensitive intervention for HIV-positive women. *Journal of Advanced Nursing*, 32 (6), 1507-1513.
- Murray, M. (2006). Narrative psychology, In J.A. Smith (Ed.), *Qualitative Psychology. A practical guide to research methods*, (pp. 111-131). London: Sage Publications.
- Muthwa, S. (1994). Female household headship and household survival in Soweto. *Journal of Gender Studies*, 3 (2), 165-175.
- Mönnig, H. O. (1967). *The Pedi*. Michigan: University of Michigan.
- Nama, N., & Swartz, L.(2002). Ethical and Social Dilemmas in Community-based Controlled Trials in Situations of Poverty: A View from a South African Project. *Journal of Community and Applied Psychology*, 12, 286-297.

- Nkosi, B., & Daniels, P. (2007). Family strengths: South Africa. *Marriage & Family Review*, 41 (1/2), 11-26.
- Nyasani, E., Sterberg, E., & Smith, H. (2009). Fostering children affected by AIDS in Richards Bay, South Africa: A qualitative study of grandparents' experiences. *African Journal of AIDS Research*, 8 (2), 181-192.
- O'Cathain, A., Murphy, E., & Nicholl, J. (2010). Three techniques for integrating data in mixed methods studies. *BioMedical Journal*, 341, 1147-1150.
- O'Regan, D. (2006). Botswana: *Men should be targeted in Aids fight*, Botswana Health Minister says. AllAfrica, 31 January, 2006. Retrieved from: <http://allafrica.com/stories/200601310167.html>
- Olivier, M.P. (2004). Social protection in SADC: Developing an integrated and inclusive framework: A rights-based framework, In M.P. Olivier, & E.R. Kalula (Eds.). *Social protection in SADC: Developing an integrated and inclusive framework*, (pp. 21-70). Cape Town: RAU and UCT.
- Ouzgane, L., & Morrell, R. (2005). *African Masculinities. Men in Africa from the late 19th century to the present*. Durban: University of Kwa Zulu Natal Press.
- Owens, M., Scofield, B.E., & Taylor, C.E. (2003). Incorporating mother-daughter groups within clinical settings to increase adolescent females' self-esteem. *Journal of Family Issues*, 24, 895-907.
- Parsons, T. (1965). The normal American family. In S.M. Farber (Ed.), *Man and civilization: The family's search for survival*, (pp. 34-36). New York: McGraw-Hill.
- Peacock, D., & Levack, A. (2004). The men as partners program in South Africa: Reaching men to end gender-based violence and promote sexual and reproductive health. *International Journal of Men's Health*, 3 (3), 173-188.
- Peltzer, K. (1999). Faith healing for mental and social disorders in the Northern Sotho Province (South Africa). *Journal of Religion in Africa*, XXIX, 3, 387-402.
- Penn, C., Watermeyer, J., MacDonald, C., & Moabelo, C. (2010). Grandmothers as gems of genetic wisdom: exploring South African traditional beliefs about the causes of childhood genetic disorders. *Journal of Genetic Counseling*, 19, 9-21.
- Pettifor, A. E., Measham, D. M., Rees, H. V., & Padian, N. S. (2004). Sexual power and HIV risk, South Africa. *Emerging infectious diseases*, 10(11), 1996.
- Pohl, K. (1995). *Design und Struktur des deutschen FFS. Materialien zur Bevölkerungswissenschaft: Familienbildung und Kinderwunsch in Deutschland (Heft 82a)*. Wiesbaden, Germany: Bundesinstitut für Bevölkerungsforschung.
- Posel, D. (2005). The scandal of manhood: 'Baby rape' and the politicization of sexual violence in post-Apartheid South Africa. *Culture, Health & Sexuality*, 7(3), 239-252.
- Posel, D., & Devey, R. (2006). The demographics of fatherhood in South Africa: an analysis of survey data, 1993-2002. In L. Richter, & R. Morrell (Eds.), *Baba. Men and Fatherhood in South Africa* (pp.38-52). Cape Town: HSRC Press.
- Potts, D., & Marks, S. (2001). Fertility in Southern Africa: the quiet revolution, *Journal of Southern African Studies*, 27 (2), 189-205).

- POWA, & ALN (2010). *Criminal injustice: violence against women in South Africa*, Shadow Report on Beijing, March 2010. Ford Foundation, Foundation for Human Rights, Oxfam Great Britain. Retrieved from: <http://www.powa.co.za/files/SouthAfricaShadowReportMarch2010.pdf>
- Pretorius, J. W., Ferreira, G. V., & Edwards, D. N. (1999). Crisis phenomena among African adolescents. *Adolescence*, 34(133), 139.
- Rabe, M. (2006). Being a father in a men's world: The experience of gold mine workers. In L. Richter & R. Morrell (Eds.), *Baba. Men and Fatherhood in South Africa* (pp. 250-264). Cape Town: HSRC Press.
- Ramarumo, M., Mudhovozi, P., & Sodi, T. (2011). Safe sex education for adolescent daughters: vhaVenda mothers' views. *Journal of Psychology in Africa*, 21 (1), 105-110.
- Ramphela, M. (2002). *Steering by the Stars: Being young in South Africa*. Cape Town: Tafelberg.
- Reid, G., & Walker, L. (2005). *Men behaving differently. South African men since 1994*. Cape Town: Double Story Books.
- Richter, L., & Morrell, R. (2006). *Baba. Men and fatherhood in South Africa*. Cape Town: HSRC Press.
- Richter, M.S., & Mlambo, G.T., (2005). Perceptions of rural teenage pregnancy. *Health SA Gesondheid*, 10, 61-69.
- Robson, C. (1993). *Real world research. A resource for social scientists and practitioner-researchers*. Massachusetts: Blackwell Publishers.
- Roy, K. (2008). A life course perspective on fatherhood and family policies in the United States and South Africa. *Fathering*, 6(2), 92-112.
- Sabatier, C., & Lannegrand-Willems, L. (2005). Transmission of Family Values and Attachment: A French Three-Generation Study. *Applied Psychology*, 54 (3), 378-395.
- Saez, M. (2012). Same sex marriage. In K. B. Brown, & D. V. Snyder (Eds.), *General Reports of the XVIIIth Congress of the International Academy of Comparative Law/Rapports*, (pp. 115-141). Netherlands: Springer.
- Sam, D. L., Amponsah, B., & Hetland, J. (2008). Values of children among Sub-Saharan African women: The case of Ghanaian women. *Journal of Psychology in Africa*, 18(4), 521-530.
- Sam, D.L., Peltzer, K., & Mayer, B. (2005). The changing values of children and preferences regarding family size in South Africa. *Applied Psychology*, 54 (3), 355-377.
- Scheper-Hughes, N. (1992). (M)Other love. Culture, scarcity and maternal thinking, In *Death without weeping. The violence of everyday life in Brazil* (pp. 340-399). London: University of California Press.
- Schatz, E. (2007). Taking care of my own blood: Older women's relationships to their households in rural South Africa. *Scandinavian Journal of Public Health*, 35 (69), 147-154.
- Schwartz, A., Peacock, N., McRae, K., Seymour, R., & Gilliam, M. (2010). Defining new categories of pregnancy intention in African- American women. *Women's Health Issues*, 20 (6), 371-379.

- Schwarz, J. (2011). *Research Methodology: Tools Applied Data Analysis (with SPSS). Lecture 03: Factor Analysis*. MSc Business Administration. Luzerne University of Applied Sciences and Arts.
- Seekings, J. (2003). Households and Families in Southern Africa: special issue of *Social Dynamics*, 29 (2), 1-4.
- Sharma, A., Feldman, J.G., Golub, E.T., Schmidt, J, Silver, S., Robison, E., & Minkoff, H. (2007). Live birth patterns among human immunodeficiency virus-infected women before and after the availability of highly active antiretroviral therapy. *American Journal of Obstetrics and Gynecology*, 196 (6), 541-546.
- Shinebourne, P., & Smith, J. A. (2009). Alcohol and the self: an interpretative phenomenological analysis of the experience of addiction and its impact on the sense of self and identity. *Addiction Research and Theory*, 17(2), 152–167.
- Shirani, F., & Henwood, K. (2011). Continuity and change in a qualitative longitudinal study of fatherhood: relevance without responsibility. *International Journal of Social Research Methodology*, 14 (1), 17-29.
- Shisana, O., Rehle, T., Simbayi, L.C., Zuma, K., Jooste, S., Pillay-van-Wyk, V., Mbelle N., Van Zyl, J., Parker, W., Zungu, N.P., Pezi, S., & the SABSSM III Implementation Team (2009). *South African national HIV prevalence, incidence, behaviour and communication survey 2008: A turning tide among teenagers?* Cape Town: HSRC Press.
- Silberschmidt, M. (1992). Have Men Become the Weaker Sex? Changing Life Situations in Kisii District, Kenya. *The Journal of Modern African Studies*, 30, (2) 237-253.
- Silberschmidt, M. (1999). *Women forget that men are the masters. Gender antagonism and socioeconomic change in Kisii district, Kenya*. Stockholm: Elanders Gotab
- Silitsky, C., & Jones, S.G. (2004). Mothers' voices: Enhancing mother-child communication for HIV prevention. *Journal of HIV and AIDS Prevention in Children and Youth*, 6 (2), 33-46.
- Slugoski, B.R., & Ginsburg, G. P. (1989). Ego identity and explanatory speech. In J. Shotter & K. J. Gergen (Eds.), *Texts of identity* (pp.36-55). Newbury Park, CA: Sage Publications
- Smit, R. (2006). The changing role of the husband/father in the dual-earner family in South Africa. *Journal of Comparative Family Studies*, 33, 401-415.
- Smith, J.A. (2006). Introduction. In J.A. Smith (Ed.), *Qualitative Psychology. A practical guide to research methods* (pp.1-4). London: Sage Publications.
- Smith, J.A., Flowers, P., & Larkin, M. (2010). *Interpretative phenomenological analysis. Theory, Method and Research*. London: Sage.
- Smith, P. B., & Schwartz, S. H. (1997). Values. In J.W. Berry, M. H. Segall, & C. Kagitcibasi (Eds.), *Handbook of cross-cultural psychology*, 2nd ed., Vol. 3 (pp. 77-118). Boston: Allyn & Bacon.
- Sokolowski, R. (2000). *Introduction to Phenomenology*. Cambridge: Cambridge University Press.
- Sonuga-Barke, E.J.S. (2008). Editorial: Mother and child: reflections on developmental science in the realm of practical politics. *Child Psychology and Psychiatry*, 49 (2), 113-114.

- South African Institute of Race Relations (SAIRR) (2011/2012). *South Africa survey*. Retrieved from: <http://www.sairr.org.za/services/publications/south-africa-survey/south-africa-survey-2012>
- Spjeldnaes, I.O., & Sotberg, H.E. (2002). *Experiences of empowerment in everyday life. The stories of Ugandan businesswomen*. Master thesis in Psychology, Faculty of Social Sciences, Norwegian University of Science and Technology, Trondheim, Norway.
- Sprey, J. (2000). Theorizing in family studies: discovering process, *Journal of Marriage and the Family*, 62, 18-31.
- Stats South Africa (Stats SA) (2009). *Community survey 2007. Basic results: Limpopo*. Pretoria: Statistics South Africa. Retrieved from: www.statssa.gov.za
- Stats South Africa (Stats SA) (2010a). *Mid-year population estimates*. Pretoria: Statistics South Africa. Retrieved from: www.statssa.gov.za
- Stats South Africa (Stats SA) (2010b). *Stats in Brief, 2010*. Pretoria: Statistics South Africa. Retrieved from: www.statssa.gov.za
- Stats South Africa (Stats SA) (2010c). *Estimation of fertility from the 2007 Community Survey in South Africa*. Pretoria: Statistics South Africa. Retrieved from: www.statssa.gov.za
- Stats South Africa (Stats SA) (2010d). *Monthly earnings of South Africans, 2010*. Pretoria: Statistics South Africa. Retrieved from: www.statssa.gov.za
- Swartz, L. (2009). Fertility transition in South Africa and its implications on the four major population groups. In United Nations, *Completing the fertility transition Population Bulletin of the United Nations Special Issue, Nos. 48/49* (pp.487-500). New York: Department of Economic and social affairs, Population Division, United Nations. Retrieved from: <http://www.un.org/esa/population/publications/completingfertility/bulletin-english.pdf>
- Sylvester, T., & Bojuwoye, O. (2011). Experiences of father absence in adolescents from a South African community. *Journal of Psychology in Africa*, 21 (1), 115-120.
- Target Group Index (TGI) (2007). TGI Database Survey for 2007 South Africa. Retrieved from: <http://www.tgi.co.za/demographics.htm>
- Tashakkori, A., & Teddlie, C. (1998). *Mixed Methodology: Combining qualitative and quantitative approaches*. Thousand Oakes, CA: Sage.
- Tashakkori, A., & Teddlie, C. (2003). The past and the future of mixed methods research: from data triangulation to mixed model designs. In A. Tashakkori. & C. Teddlie (Eds.), *Handbook of mixed methods in social and behavioral research* (pp.3-50). Thousand Oaks, SA: Sage.
- The CIA World Factbook (2012a). Retrieved from: <https://www.cia.gov/library/publications/the-world-factbook/geos/sf.html>
- The CIA World Factbook (2012b). Retrieved from: http://www.indexmundi.com/south_africa/total_fertility_rate.html
- The World Bank (2011). Retrieved from: <http://wdi.worldbank.org/table/2.17>
- Thompson, B., & Vidal-Brown, S. A. (2001). *Principal Components versus Principle Axis Factors: When Will We Ever Learn?* Paper presented at the Annual Meeting

- of the Southwest Educational Research Association (New Orleans, LA, February 1-3, 2001).
- Timæus, I. A., & Boler, T. (2007). Father-figures: the progress at school of orphans in South Africa. *AIDS*, 21(7), 83-93.
- Tomkins, L., & Eatough, V. (2010). Reflecting on the use of IPA with focus groups: pitfalls and potentials. *Qualitative Research in Psychology*, 7(3), 244-262.
- Townsend, N., S. Madhavan, S. Tollman, S.M., Garenne, M., & Kahn, K. (2002). Children's residence patterns and educational attainment in rural South Africa, 1997. *Population Studies*, 215-225.
- Triandis, H.C. (2007). Culture and psychology, In S. Kitayama, & D. Cohen (Eds.), *Handbook of Cultural Psychology*, (pp. 59-76). New York; Guilford Press.
- Triegaardt, J.D. (2002). Social policy domains: Social welfare and social security in South Africa. *International Social Work*, 45 (3), 325-336.
- Trommsdorff, G. (2001). *Values of Children and intergenerational relations: A cross-cultural psychological study*. University of Konstanz, Department of Psychology, Developmental and Cross-Cultural Psychology. Retrieved in 2002 from: <http://www.uni-konstanz.de/developmental-psychology/vocpsychologieaspoects>
- Trommsdorff, G., & Nauck, B. (2003). *Value of Children in six cultures: Eine Replikation und Erweiterung der "Value of Children Studies" in Bezug auf generatives Verhalten und Eltern-Kind-Beziehungen. Antrag an die DFG [Value-of- Children-in six cultures" with respect to generative behaviour and parent-child relationships. Proposal to the German Research Council (DFG)]*. Unpublished manuscript. University of Konstanz: Konstanz. Retrieved from: <http://www.uni.konstanz.de/developmental-pschology/vocpsychologieaspoects>
- Tshililo, A.R., & Davhana-Maselesele, M. (2009). Family experience of home caring for patients with HIV and AIDS in rural Limpopo Province, South Africa. *Nursing and Health Sciences*, 11, 135-143.
- Turnbull, T., Van Wersch, A., & Van Schaik, P. (2008). A review of parental involvement in sex education: The role of effective communication in British families. *Health Education Journal*, 67 (3), 182-195.
- Udjo, E.O. (2009). Trends in the age pattern of fertility, 1995-2005, in the context of the child support grant in South Africa. *Development Southern Africa*, 26 (2), 289-299.
- Umsobomvu Youth Fund & Human Sciences Research Council (2003). *The status of the Youth Report 2003*. Retrieved from: http://www.hsrc.ac.za/research/output/outputDocuments/3558_Richter_Youngpeople.pdf
- UNAIDS (2012). *Global Aids response. Progress Report 2012*. Republic of South Africa. Retrieved from: <http://www.unaids.org/en/regionscountries/countries/southafrica/>
- UNDP, (2010). *Republic of South Africa: Millennium Development Goals Country Report for 2010: concept paper*. Retrieved from: <http://webcache.googleusercontent.com/search?q=cache:SzJaSjyqbcJ:mdgs.un.org/+&cd=4&hl=en&ct=clnk&gl=no>
- UN, (1999). *Convention on the rights of the child; Article 12*. Retrieved from: www.unicef.org/crc/files/Rights_overview

- UNESCO (1994). *International Comparative Social Science Research. Ethical Guidelines*. Retrieved from: <http://www.unesco.org/most/ethical.htm>
- Varga, C.A. (2001). The forgotten fifty per cent: A review of sexual and reproductive health research and programs focused on boys and young men in sub-Saharan Africa. *African Journal of Reproductive Health*, 5 (3), 175-195.
- Videon, T.M. (2005). Parent-child relations and children's psychological well-being: Do dads matter? *Journal of Family Issues*, 26, 55-78.
- Walker, L. (2005). Negotiating boundaries in post-Apartheid South Africa. In G. Reid, & L. Walker (Eds.), *Men behaving differently* (pp. 161-182). Cape Town: Double Storey Books.
- Wamoi, J., Fenwick, A., Urassa, M., Zaba, B., & Stones, W. (2010). Parent-child communication about sexual and reproductive health in rural Tanzania: Implications for young people's sexual health interventions. *Reproductive Health*, 7(6), 1-18.
- Ward, C.L., Martin, E., Theron, C., & Distiller, G.B. (2007). Factors affecting resilience in children exposed to violence. *South African Journal of Psychology*, 37 (1), 165-187.
- White, A., Bushin, N., Carpena-Mendez, F., & Ni Laoire, C. (2010). Using visual methodologies to explore contemporary Irish childhoods. *Qualitative Research*, 10 (2), 143-158.
- Williams, L., Sobiesczyk, T., & Perez, A.E. (2001). Consistency between survey and interview data concerning pregnancy wantedness in the Philippines. *Studies in Family Planning*, 32 (3), 244-253.
- Willig, C. (2006). Discourse analysis, In J.A. Smith (Ed.), *Qualitative Psychology. A practical guide to research methods* (pp. 81-110). London: Sage Publications.
- Wittenberg, M., & Collinson, M.A. (2007). Household transitions in rural South Africa, 1996-2003. *Scandinavian Journal of Public Health*, 35 (69), 130-137.
- Wolf, S. (2005). *State-provided Family planning in Limpopo Province 1974-1984. Limpopo Histories. A research project on the history of the Limpopo Province in South Africa*. Basel: IG Afrikastudien. Retrieved from: www.unibas.ch/afrika/limpopo
- Woolley, C.M. (2009). Meeting the mixed method challenge of integration in a sociological study of structure and agency. *Journal of Mixed Methods Research*, 3 (1), 7-25.
- Zani, B. (1993). Dating and interpersonal relationships in adolescence. In S. Jackson, & H. Rodriguez-Tome (Eds.), *Adolescence and its social world*, (pp. 95-119). Hillsdale, NJ: Lawrence Erlbaum.
- Zheng, G., Shi, S., & Tang, H. (2005). Population development and the value of children in The People's Republic of China. In G. Trommsdorff, & B. Nauck (Eds.), *The value of children in cross-cultural perspective: Case studies from eight societies* (pp.239-281). Berlin: Pabst Science.
- Aarø, L.E., Flisher, A., J., Kaaya, S., Onya, H., Fuglesang, M., Klepp, K.I., & Schaalma, H. (2005). Promoting sexual and reproductive health in early adolescence in South Africa and Tanzania: Development of a theory- and

evidence-based intervention programme. *Scandinavian Journal of Public Health*, 34, 150-158.

Errata

Paper I, p. 860, p. 868, p.869. Reference reads “DSD, 2003”. This should be “Republic of South Africa, Department of Social Development (DSD), 2003”.

Paper I. “A.Diri” is mistakenly included in the following reference:

Kağıtçıbaşı ,C., Ataca, B. (2005). Value of children and family change: A three-decade portrait from Turkey. *Applied Psychology*, 54 (5), 317-337.

While writing Paper I, I only had a pre-published version of the article at hand, where A. Diri was noted as a co-author.

Paper II, p. 6. The year is missing in the reference to Swart. It should be 2001.

Appendices

Appendix 1

Overview of the interviews with experts in Limpopo from the fields of education, health and social work

2005

- Social worker (male) at the Health Centre at the University of Limpopo, working specifically with HIV and AIDS-related issues
- Nurse (female) at the Health Centre at the University of Limpopo
- Head-nurse (female) at the section for HIV and AIDS patients at Mankweng Hospital
- HIV and AIDS counsellor (male) at Mankweng Clinic
- Teachers (male) at the targeted secondary school in Mankweng
- The principal (male) at the targeted secondary school in Mankweng

2007

- Teacher (male) at the University of Limpopo
- Retired principal (male) from a secondary school in Mankweng
- Norwegian HIV and AIDS researcher (female) doing fieldwork in Limpopo
- Two professors (males) at the University of Limpopo
- Traditional healer (female) in the rural area of Limpopo

Appendix 2

November 1, 2001

Prof. Dr. Bernhard Nauck, Chemnitz University, Germany

Prof. Dr. Gisela Trommsdorff, Konstanz University, Germany

COLLABORATOR'S AGREEMENT

This document sets forth terms which must be agreed to for participation as a Collaborator in the "Value of Children and Intergenerational Relations" (hereafter: VOC) Study. This document details the obligations and rights of the Principal Investigators (hereafter: P.I.) and Collaborators.

I. Goals, Design, Questionnaires, and Procedure

1. The purpose of the research project is the realization of a cross-cultural comparison of the "Value of Children and Intergenerational Relations".
2. The realization of such a project requires the use of a uniform and obligatory research design with comparable samples and the use of research instruments which are equivalent in terms of measurement techniques and adapted as far as language and culture are concerned.
3. Modifications to the VOC questionnaires of any kind (e.g., shortening, substitution) require the prior consent of the P.I.
4. In the interest of linguistic comparability, the questionnaires translated by the Collaborators must be back-translated. Thus, the translated as well as the back-translated questionnaires must be sent to the P.I. before data collection takes place.
5. Country-specific supplements to the VOC questionnaires are permissible, but they should not diminish the quality of the data with respect to the main purpose of cross-cultural comparison. Country-specific supplements to the VOC questionnaires also require the prior consent of the P.I.

II. Organization and Distribution of Collected Data

1. For organizational reasons, the P.I. are in charge of the distribution of data. Therefore, the collected data – i.e., the filled out questionnaires – must be sent to the P.I. The P.I. will enter the data as well as screen and integrate the data files. When this is completed, the P.I. will provide the Collaborators with the entire data set (i.e., the data collected in all cultures) in the form of an SPSS data file with documentation. If a Collaborator wishes to enter his/her data him/herself, he/she should request a data file with labeled variables from the P.I. After entering his/her data, a copy of the data file (softcopy and hardcopy) must be sent to the P.I. along with the filled out questionnaires.
2. The transmission of any data collected using the instruments employed in the VOC study to a third party is only permissible with the consent of the P.I., who are owners of the data, as specified in the regulations of the funding organization, the Deutsche Forschungsgemeinschaft (DFG).
3. The P.I. have agreed to the DFG's request that the Central Archive for Empirical Social Research (University of Cologne, Germany) be provided with all data from the VOC study after the first analysis is completed and published, so that the data can be made accessible to other researchers.

III. Copyright and Publication of Data

1. All Collaborators shall realize that they are participants in an academic enterprise and, therefore, recognize the originality of each individual collaborator's contribution to the VOC project. Accordingly, in any presentation or publication that refers to data and/or results collected in the framework of the VOC study, the funding organization (Deutsche Forschungsgemeinschaft, DFG), the names of the P.I., and the names of the Collaborators in charge of the countries whose data are referred to should be mentioned in a footnote.
2. The P.I. hold the copyright on the compilation of research instruments. This does not bear upon the copyrights of the authors of individual measures that have been included in the questionnaires – either in their entirety, or in a partial or modified form – with the consent of the respective authors. Explicit information concerning the authorship of individual measures may be found in the Report on Selected Instruments. Moreover, as the P.I. regard the questionnaires and Report on Selected Instruments as an entity, they must not be circulated separately.
3. Collaborators are at liberty to perform any and all analyses of the data collected in their own countries. However, the first publication of cross-cultural analyses will be a joint publication by all Collaborators. The Collaborators are not to publish any comparative analyses before this publication has been completed. After the joint publication has appeared in print, the P.I. expect to receive a copy of any paper (both as softcopy and as hardcopy) that makes use of data from the VOC study. This will ensure that all Collaborators as well as the scientific public remain fully informed (e.g., from a VOC project homepage on the internet), even after the research project is concluded.

IV. Adjunct Projects

Apart from the Collaborators whose work on the VOC project is being funded by the DFG, other Collaborators have obtained funding for their work on the project on their own (“adjunct projects”). The following additional regulations hold for these collaborators, who are also welcome to participate:

1. Researchers undertaking an adjunct project should create a research design and select their instruments in such a way as to provide for the comparability of their data with that of the other Collaborators.
2. Researchers undertaking an adjunct project may participate in the main comparative project to the extent to which they follow the regulations listed above under I–III. As is the case for the other Collaborators, modifications to the VOC questionnaires of any kind (e.g., shortening, substitution) require the prior consent of the P.I.
3. Researchers undertaking an adjunct project may obtain data to the extent to which they contribute to the data set as a whole. In other words, if the complete research design is utilized and all regulations followed, these projects achieve the status of full collaboration and the P.I. will provide them with the entire data set. Otherwise, only specific data modules may be obtained.
4. The P.I. will support the realization of the adjunct projects as much as possible.

Appendix 3

1. When were you born? (What year and month?) Year _____ Month _____
2. How many years of school have you completed so far? _____ years
3. Do you go to school now?
 - () yes-> go to question 4
 - () no -> go to question 5
4. What kind of school do you go to now?
5. What is the highest level of education that you have obtained so far?

- () 1 No schooling
- () 2 Incomplete primary education
- () 3 Completed primary education
- () 4 Some secondary school (Incomplete: no certificate/diploma)
- () 5 Secondary school, vocational qualification (Completed)
- () 6 Secondary school, academic certificate (Completed)
- () 7 Some trade/technical/vocational/business school (Incomplete: no certificate/degree)
- () 8 Some college/university education (Incomplete: no degree)
- () 9 2-yr. technical/trade/vocational/business school (Completed)

6. What is the highest-level diploma or certificate or degree that you intend to obtain?
(put in country-specific list, with breakdown similar to the following:)

- () 1 I am satisfied with the diploma/school-leaving certificate I have.
- () 2 Completed primary education
- () 3 Secondary school, vocational qualification
- () 4 Secondary school, academic certificate (diploma)
- () 5 2-yr. technical/trade/vocational/business school certificate/degree
- () 6 College/university degree (BA, BS)
- () 7 Post-graduate degree (MA, MS, MBA, etc.)
- () 8 Doctoral degree (PhD, EdD, etc.) or Professional degree (MD, DDS, JD)

7. Are you currently doing anything to earn money?
 () yes, full-time job () yes, part-time job () no -> go to question 9

8. How many hours per week do you work to earn money? _____ hours/week

9. Compared to others living here in South Africa: What economic status do you consider yourself to have? Where would you put yourself on this scale?

1	2	3	4	5
Low	Lower middle	Middle	Upper middle	Upper

16. Do you want to have children some day?
 () 1 yes/probably
 () 2 no/probably not -> go to question 21

() 3 I don't know -> go to question21

17. If yes: How many? _____

18. How old do you think you'll be when you have your first child? about _____ years old

19. If you had exactly one child, would you prefer it to be a boy or a girl?

() 1 a boy

() 2 a girl

() 3 does not matter

20. In your opinion, what are the most important reasons for this preference?

21. Here is a list of reasons people may give for **wanting to have children** in general. Using the following scale as a guide, please indicate how *important* the following reasons for **wanting to have children** are to you personally.

1	2	3	4	5
Not important at all	Not very important	Moderately important	Important	Very important

21.1 Because a child helps around the house.	1 - 2 - 3 - 4 - 5
21.2 Because any new family member makes your family more important.	1 - 2 - 3 - 4 - 5
21.3 Because having children increases your sense of responsibility and helps you to develop.	1 - 2 - 3 - 4 - 5
21.4 Because it is a joy to have a small baby.	1 - 2 - 3 - 4 - 5
21.5 Because it is fun to have young children around the house.	1 - 2 - 3 - 4 - 5
21.6 Because of the pleasure you get from watching your children grow.	1 - 2 - 3 - 4 - 5
21.7 Because of the special feeling of love that develops between a parent and a child.	1 - 2 - 3 - 4 - 5
21.8 Because parenthood improves your standing and betters your reputation among your kin.	1 - 2 - 3 - 4 - 5
21.9 Because people with children are less likely to be lonely in old age.	1 - 2 - 3 - 4 - 5
21.10 Because raising children helps you to learn about life and yourself.	1 - 2 - 3 - 4 - 5
21.11 Because some of your older relatives feel that you should have more children.	1 - 2 - 3 - 4 - 5
21.12 Because your life will be continued through your children.	1 - 2 - 3 - 4 - 5
21.13 To be sure that enough children will survive to adulthood.	1 - 2 - 3 - 4 - 5
21.14 To carry on the family name.	1 - 2 - 3 - 4 - 5
21.15 To have one more person to help your family economically.	1 - 2 - 3 - 4 - 5
21.16 To have someone to love and care for.	1 - 2 - 3 - 4 - 5
21.17 When it is a duty to have children according to your belief.	1 - 2 - 3 - 4 - 5
21.18 Your children can help you when you're old.	1 - 2 - 3 - 4 - 5

22. Now, here is another list, this time of reasons people may give for **not wanting to have children**. Using the following scale as a guide, please indicate how *important* the following reasons for **not wanting to have children** are to you personally.

1	2	3	4	5
---	---	---	---	---

Not important at all	Not very important	Moderately important	Important	Very important
----------------------	--------------------	----------------------	-----------	----------------

22.1 Because a child is a lot of work and bother.	1 – 2 – 3 – 4 – 5
22.2 Because children are hard to discipline and control.	1 – 2 – 3 – 4 – 5
22.3 Because children create problems with neighbors and in public.	1 – 2 – 3 – 4 – 5
22.4 Because having children is a financial burden for the whole family.	1 – 2 – 3 – 4 – 5
22.5 Because it is hard to take proper care of both family and household.	1 – 2 – 3 – 4 – 5
22.6 Because it is harder to hold a job.	1 – 2 – 3 – 4 – 5
22.7 Because large families are not well accepted in society.	1 – 2 – 3 – 4 – 5
22.8 Because of fear of pregnancy and childbirth.	1 – 2 – 3 – 4 – 5
22.9 Because of the worries children cause when they are ill.	1 – 2 – 3 – 4 – 5
22.10 Because you are not as free to do what you want.	1 – 2 – 3 – 4 – 5
22.11 Because you are too concerned about the kind of future your children will have.	1 – 2 – 3 – 4 – 5
22.12 Because you lose contact with your friends.	1 – 2 – 3 – 4 – 5
22.13 When being a mother is not well recognized by the people you deal with.	1 – 2 – 3 – 4 – 5

In the following, I'd like to ask about your beliefs and values.

23 What religions or beliefs do you hold, if any?

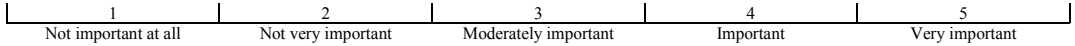
Interviewer: More than one answer possible. Do not go through the entire list with the respondent. Just let her respond freely and mark her answer(s) in the table below.

23.1 Agnosticism/Atheism	()
23.2 Animism	()
23.3 Buddhism, please specify (e.g., Nichiren, Tibetan, Zen, etc.): _____	()
23.4 Communism/Socialism	()
23.5 Confucianism	()
23.6 Hinduism	()
23.7 Islam, please specify (e.g., Sunni, Shiite): _____	()
23.8 Judaism, please specify (e.g., Liberal, Orthodox, Reform): _____	()
23.9 Orthodox Christian Church, please specify (e.g., Greek Orthodox, Russian Orthodox, Serbian Orthodox, etc.): _____	()
23.10 Protestantism, please specify (e.g., Anglican, Baptist, Calvinist, Lutheran, Methodist, etc.): _____	()
23.11 Roman Catholicism	()

23.12 Shintoism	()
23.13 Taoism	()
23.14 Other, please specify: _____	()
23.15 No religion or belief	()

*(Interviewer: Show respondent **Scale A**)* Using this scale as a guide, please tell me how important (*this belief is/these beliefs are*) to you. Please select only one number (from 1 to 5).

Interviewer: Read either “this belief is” or “these beliefs are”, whichever corresponds to respondent’s answer(s) to item 30.



November 1, 2001

**Value of Children Project:
Questionnaire for Mothers with an Adolescent Target Child
The questions of relevance to this study included.**

Suggested introduction:

First of all, thank you very much for offering to participate in our study.

The purpose of the study is to explore why some people want to have children and others do not and how people think about certain topics like child rearing, family, and their relationship with other people.

Since we would like to find out if younger people think differently about these topics than older people do, we will be asking your child (*and your mother*) about (*his/her/their*) opinions, too.

We also would like to find out if people in different countries have different opinions and what kinds of differences there are. Therefore, these questions are being asked in a number of other countries as well.

So let's start the interview.

Listen to each question carefully. If you have any problems understanding a question, please feel free to ask me to repeat the question or explain what I mean by it.

Always keep in mind that there are no "right" or "wrong" responses. Just give me your personal opinion.

Interviewer No. _____

Respondent No. _____

Subsample _____

Date of interview:

(day)

(month)

(year)

When were you born? (What year and month?)

Year 19 _____

Month _____

¹ Konstanz University

² Chemnitz University

24 Approximately how many years of schooling did you complete?

_____ years

25 What is the highest level of education that you attained?

(put in country-specific list, with breakdown similar to the following:)

- 1 No schooling -> go to question 27
- 2 Incomplete primary education
- 3 Completed primary education
- 4 Some secondary school (Incomplete: no certificate/diploma)
- 5 Secondary school, vocational qualification (Completed)
- 6 Secondary school, academic certificate (Completed)
- 7 Some trade/technical/vocational/business school (Incomplete: no certificate/degree)
- 8 Some higher (college/university) education (Incomplete: no certificate/degree)
- 9 2-yr. technical/trade/vocational/business school (Completed)
- 10 Higher education, tertiary degree (Completed: BA, BS, etc.)
- 11 Some post-graduate study (Incomplete: no degree)
- 12 Post-graduate degree (Completed: MA, MS, MBA, etc.)
- 13 Doctoral degree (Completed: PhD, EdD, etc.) or Professional degree (Completed: MD, DDS, JD)

26 When did you attain this level of education? (What year was that?)

19__ or 20__

27 Are you a member of a minority ethnic group?

Now I'd like to ask some questions about your children.

28 How many children have you ever had? Please include *all* children, that means also children who have died, who don't live here any longer, children who are not your natural children, like adopted children, stepchildren (children your husband might have brought into your marriage), or foster children.

_____ children

28.5 Would you please tell me your children's names (and please include children who have died, adopted children, stepchildren, and foster children)?

28.6 Is (*child's name*) male or female?

28.7 When was (*child's name*) born? What month

28.8 and what year?

28.9 Is (*child's name*) your natural child, stepchild, foster child, or adopted child?

Interviewer: If the child is the respondent's natural child, ask:

Is your husband (*child's name*)'s biological father?

28.10 Is (*child's name*) still alive?

If yes → go to question 28.11

If no → continue with next child

28.11 Does (*child's name*) live with you?

28.12 Is (*child's name*) single, married, widowed, separated, or divorced?

29 Which of these children is the child we are including in our survey?

Child No.: _____

In the following, I'd like to ask about your beliefs and values.

30 What religions or beliefs do you hold, if any?

Interviewer: More than one answer possible. Do not go through the entire list with the respondent. Just let her respond freely and mark her answer(s) in the table below.

30.5 Agnosticism/Atheism	()
30.6 Animism	()
30.7 Buddhism, please specify (e.g., Nichiren, Tibetan, Zen, etc.): _____	()
30.8 Communism/Socialism	()
30.9 Confucianism	()
30.10 Hinduism	()
30.11 Islam, please specify (e.g., Sunni, Shiite): _____	()
30.12 Judaism, please specify (e.g., Liberal, Orthodox, Reform): _____	()
30.13 Orthodox Christian Church, please specify (e.g., Greek Orthodox, Russian Orthodox, Serbian Orthodox, etc.): _____	()
30.14 Protestantism, please specify (e.g., Anglican, Baptist, Calvinist, Lutheran, Methodist, etc.): _____	()
30.15 Roman Catholicism	()
30.16 Shintoism	()
30.17 Taoism	()
30.18 Other, please specify: _____	()
30.19 No religion or belief	()

31 (*Interviewer: Show respondent **Scale A***) Using this scale as a guide, please tell me how important (*this belief is/these beliefs are*) to you. Please select only one number (from 1 to 5).

Interviewer: Read either "this belief is" or "these beliefs are", whichever corresponds to respondent's answer(s) to item 30.

1	2	3	4	5
Not important at all	Not very important	Moderately important	Important	Very important

Now I'd like to ask some questions about your attitudes towards children.

But first, let's talk about your desire to have children.

32 As far as you know, are you and your husband physically able to have another child?

() 1 yes

() 2 no -> go to question 42

() 8 don't know

- 33 Are you pregnant now?
 1 yes
 2 no -> go to question 38
 8 don't know -> go to question 38
- 34 Do you already know this baby's sex?
 1 male 2 female 8 don't know
- 35 Would you like to have any more children after this baby?
 1 yes
 2 no -> go to question 42
- 36 How many more children would you like to have (not counting this pregnancy)?
 ____ more children
 no more children -> go to question 42
- 37 How old would you like to be when your next child is born, after the one you are expecting?
 ____ years -> go to question 41
- 38 Would you like to have any more children?
 1 yes
 2 no -> go to question 42
- 39 How many more children would you like to have? ____ more children
- 40 How old would you like to be when your next child is born? ____ years
- 41 Would you prefer your next child to be a boy or a girl or is it all the same to you?
 1 boy 2 girl 3 all the same
- 42 We often talk about small and large families, but people have different ideas about what that means. How small is a "small family" in your opinion? In other words, how many children are in a "small family"? _____ children
- 43 How large is a "large family" in your opinion? In other words, how many children are in a "large family"? _____ children
- 44 And what is the "ideal family size" in your opinion? In other words, how many children are in an "ideal family"? _____ children
- 45 If you had exactly one child, would you prefer it to be a boy or a girl or is it all the same to you?
 1 a boy 2 a girl 3 all the same
- 46 I have a list here of reasons people may give for **wanting to have children** in general. (*Interviewer: Show respondent **Scale A***) Please use this scale as a guide. Think about *your* experience with your own (*child/children*) and tell me how important the following reasons for **wanting to have children** are to you personally.

1	2	3	4	5
Not important at all	Not very important	Moderately important	Important	Very important

46.5	Because a child helps around the house.	1 - 2 - 3 - 4 - 5
46.6	Because any new family member makes your family more important.	1 - 2 - 3 - 4 - 5
46.7	Because having children brings your husband and you closer together.	1 - 2 - 3 - 4 - 5
46.8	Because having children gives your husband/you more reason to succeed in his/your work.	1 - 2 - 3 - 4 - 5
46.9	Because having children increases your sense of responsibility and helps you to develop.	1 - 2 - 3 - 4 - 5

46.10 Because having children intensifies contacts and communication with your kin.	1 – 2 – 3 – 4 – 5
46.11 Because it is a joy to have a small baby.	1 – 2 – 3 – 4 – 5
46.12 Because it is fun to have young children around the house.	1 – 2 – 3 – 4 – 5
46.13 Because of the pleasure you get from watching your children grow.	1 – 2 – 3 – 4 – 5
46.14 Because of the special feeling of love that develops between a parent and a child.	1 – 2 – 3 – 4 – 5
46.15 Because parenthood improves your standing and betters your reputation among your kin.	1 – 2 – 3 – 4 – 5
46.16 Because people with children are less likely to be lonely in old age.	1 – 2 – 3 – 4 – 5
46.17 Because raising children helps you to learn about life and yourself.	1 – 2 – 3 – 4 – 5
46.18 Because some of your older relatives feel that you should have more children.	1 – 2 – 3 – 4 – 5
46.19 Because you can make new friends through your children.	1 – 2 – 3 – 4 – 5
46.20 Because you want to share what you have with children.	1 – 2 – 3 – 4 – 5
46.21 Because your life will be continued through your children.	1 – 2 – 3 – 4 – 5
46.22 To be sure that enough children will survive to adulthood.	1 – 2 – 3 – 4 – 5
46.23 To have a girl/another girl.	1 – 2 – 3 – 4 – 5
46.24 To carry on the family name.	1 – 2 – 3 – 4 – 5
46.25 To have one more person to help your family economically.	1 – 2 – 3 – 4 – 5
46.26 To have someone to love and care for.	1 – 2 – 3 – 4 – 5
46.27 To provide a companion for your child/children.	1 – 2 – 3 – 4 – 5
46.28 To have a boy/another boy.	1 – 2 – 3 – 4 – 5
46.29 When it is a duty to have children according to your belief.	1 – 2 – 3 – 4 – 5
46.30 When your husband wants more children.	1 – 2 – 3 – 4 – 5
46.31 Your children can help you when you're old.	1 – 2 – 3 – 4 – 5

Interviewer: Thank the respondent for participating in the interview!

**Value of Children Project:
Questionnaire for Grandmothers**

The questions of relevance to this study included.

Suggested introduction:

First of all, thank you very much for offering to participate in our study.

The purpose of the study is to explore why some people want to have children and others do not and how people think about certain topics like child rearing, family, and their relationship with other people.

Since we would like to find out if younger people think differently about these topics than older people do, we are including three generations. Therefore, as you know, we will be asking your daughter and your grandchild about their opinions, too.

We also would like to find out if people in different countries have different opinions and what kinds of differences there are. Therefore, these questions are being asked in a number of other countries as well.

So let's start the interview.

Listen to each question carefully. If you have any problems understanding a question, please feel free to ask me to repeat the question or explain what I mean by it.

Always keep in mind that there are no "right" or "wrong" responses. Just give me your personal opinion.

¹ Konstanz University

² Chemnitz University

Interviewer No. _____

Respondent No. _____

Subsample _____

47 Date of interview: _____
(day) (month) (year)

First of all, I'd like to ask you some questions about you and your family.

48 When were you born? (What year and month?)

Year 19 _____

Month _____

49 Approximately how many years of schooling did you complete?

_____ years

50 What is the highest level of education that you attained?

(put in country-specific list, with breakdown similar to the following:)

- 1 No schooling -> go to question 52
- 2 Incomplete primary education
- 3 Completed primary education
- 4 Some secondary school (Incomplete: no certificate/diploma)
- 5 Secondary school, vocational qualification (Completed)
- 6 Secondary school, academic certificate (Completed)
- 7 Some trade/technical/vocational/business school (Incomplete: no certificate/degree)
- 8 Some higher (college/university) education (Incomplete: no certificate/degree)
- 9 2-yr. technical/trade/vocational/business school (Completed)
- 10 Higher education, tertiary degree (Completed: BA, BS, etc.)
- 11 Some post-graduate study (Incomplete: no degree)
- 12 Post-graduate degree (Completed: MA, MS, MBA, etc.)
- 13 Doctoral degree (Completed: PhD, EdD, etc.) or Professional degree (Completed: MD, DDS, JD)

51 When did you attain this level of education? (What year was that?)

19__ or 20__

52 Are you a member of a minority ethnic group?

53 Do you live together with a partner?

- 1 yes
- 2 no -> go to question 56

Interviewer: The question refers to the respondent's current husband/partner.

Year 19 _____ or 20 _____

Month _____

54 Did you have a job at that time?

- 1 yes
- 2 no

Now I'd like to ask some questions about your children.

55 How many children have you ever had? Please include *all* children, that means also children who have died, who don't live here any longer, children who are not your natural children, like adopted children, stepchildren (children your husband might have brought into your marriage), or foster children.

_____ children

55.5 Would you please tell me your children’s names (and please include children who have died, adopted children, stepchildren, and foster children)?

Interviewer: Write the names in the table below (under 55.5).

“Are you sure that you haven’t omitted any children: for example, children who have died or who are not your natural children?”

55.6 Is (*child’s name*) male or female?

55.7 When was (*child’s name*) born? What month

55.8 and what year?

55.9 Is (*child’s name*) your natural child, stepchild, foster child, or adopted child?

Interviewer: If the child is the respondent’s natural child, ask:

Is your husband (*child’s name*)’s biological father?

55.10 Is (*child’s name*) still alive?

If yes → go to question 28.11

If no → continue with next child

55.11 Does (*child’s name*) live with you?

55.12 Is (*child’s name*) single, married, widowed, separated, or divorced?

56 Which of these children is the child we are including in our survey?

Now I have some questions about your grandchildren.

57 How many grandchildren do you have? _____ grandchildren

Which of your children are parents themselves?

Interviewer: Record the responses in the table below (under for each grandchild listed under)

Interviewer: Now repeat this procedure for the children of three more of the respondent’s children:

58 Which of these grandchildren is the child we are including in our survey?

Grandchild: _____

Now let’s turn to the rest of the people in your household.

59 Besides yourself and the children we just talked about: how many *other* people live in this household?

_____ people

In the following, I’d like to ask about your beliefs and values.

60 What religions or beliefs do you hold, if any?

Interviewer: More than one answer possible. Do not go through the entire list with the respondent. Just let her respond freely and mark her answer(s) in the table below.

60.5 Agnosticism/Atheism	()
60.6 Animism	()
60.7 Buddhism, please specify (e.g., Nichiren, Tibetan, Zen, etc.): _____	()
60.8 Communism/Socialism	()
60.9 Confucianism	()
60.10 Hinduism	()
60.11 Islam, please specify (e.g., Sunni, Shiite): _____	()
60.12 Judaism, please specify (e.g., Liberal, Orthodox, Reform): _____	()
60.13 Orthodox Christian Church, please specify (e.g., Greek Orthodox, Russian Orthodox, Serbian Orthodox, etc.): _____	()
60.14 Protestantism, please specify (e.g., Anglican, Baptist, Calvinist, Lutheran, Methodist, etc.):	()

60.15 Roman Catholicism	()
60.16 Shintoism	()
60.17 Taoism	()
60.18 Other, please specify: _____	()
60.19 No religion or belief	()

61 (Interviewer: Show respondent **Scale A**) Using this scale as a guide, please tell me how important (*this belief is/these beliefs are*) to you. Please select only one number (from 1 to 5).

Interviewer: Read either "this belief is" or "these beliefs are", whichever corresponds to respondent's answer(s) to item 60.

1	2	3	4	5
Not important at all	Not very important	Moderately important	Important	Very important

Now I'd like to ask some questions about your attitudes towards children.

62 We often talk about small and large families, but people have different ideas about what that means. How small is a "small family" in your opinion? In other words, how many children are in a "small family"?

63 How large is a "large family" in your opinion? In other words, how many children are in a "large family"?

64 And what is the "ideal family size" in your opinion? In other words, how many children are in an "ideal family"?

65 If you had exactly one child, would you prefer it to be a boy or a girl or is it all the same to you?

() 1 a boy () 2 a girl () 3 all the same

66 I have a list here of reasons people may give for **wanting to have children** in general. (*Interviewer: Show respondent **Scale A***) Please use this scale as a guide. Think about *your* experience with your own (*child/children*) and tell me how important the following reasons for **wanting to have children** are to you personally.

1	2	3	4	5
Not important at all	Not very important	Moderately important	Important	Very important

66.5 Because a child helps around the house.	1 – 2 – 3 – 4 – 5
66.6 Because any new family member makes your family more important.	1 – 2 – 3 – 4 – 5
66.7 Because having children brings your husband and you closer together.	1 – 2 – 3 – 4 – 5
66.8 Because having children gives your husband/you more reason to succeed in his/your work.	1 – 2 – 3 – 4 – 5
66.9 Because having children increases your sense of responsibility and helps you to develop.	1 – 2 – 3 – 4 – 5
66.10 Because having children intensifies contacts and communication with your kin.	1 – 2 – 3 – 4 – 5
66.11 Because it is fun to have young children around the house.	1 – 2 – 3 – 4 – 5
66.12 Because of the pleasure you get from watching your children grow.	1 – 2 – 3 – 4 – 5
66.13 Because of the special feeling of love that develops between a parent and a child.	1 – 2 – 3 – 4 – 5
66.14 Because parenthood improves your standing and betters your reputation among your kin.	1 – 2 – 3 – 4 – 5
66.15 Because people with children are less likely to be lonely in old age.	1 – 2 – 3 – 4 – 5

66.16 Because raising children helps you to learn about life and yourself.	1 – 2 – 3 – 4 – 5
66.17 Because you can make new friends through your children.	1 – 2 – 3 – 4 – 5
66.18 Because you want to share what you have with children.	1 – 2 – 3 – 4 – 5
66.19 Because your life will be continued through your children.	1 – 2 – 3 – 4 – 5
66.20 To be sure that enough children will survive to adulthood.	1 – 2 – 3 – 4 – 5
66.21 To have a girl/another girl.	1 – 2 – 3 – 4 – 5
66.22 To carry on the family name.	1 – 2 – 3 – 4 – 5
66.23 To have one more person to help your family economically.	1 – 2 – 3 – 4 – 5
66.24 To have someone to love and care for.	1 – 2 – 3 – 4 – 5
66.25 To have a boy/another boy.	1 – 2 – 3 – 4 – 5
66.26 When it is a duty to have children according to your belief.	1 – 2 – 3 – 4 – 5
66.27 Your children can help you when you're old.	1 – 2 – 3 – 4 – 5

67 Have you lived in this (*village/town/city*) your whole life?

Interviewer: Please select the appropriate option: village or town or city.

1 yes -> go to question71

2 no -> go to question68

68 Since when have you lived in this (*village/town/city*)? (Since what year?)

Interviewer: Please select the appropriate option: village or town or city.

Year 19 ____ or 20 ____

69 Where did you live when you were in school? In a village, a town, a city, or a metropolis?

1 village 2 town 3 city 4 metropolis

70 **If respondent has no husband or partner:** go to question 61

If respondent is married: Where did you live directly after getting married? Was it in a village, a town, a city, or a metropolis?

If respondent is remarried: Where did you live directly after getting married to your current husband? Was it in a village, a town, a city, or a metropolis?

If respondent has no husband, but has a partner: Where did you and your current partner first live as a couple? Was it in a village, a town, a city, or a metropolis?

1 village 2 town 3 city 4 metropolis

71 Are you currently doing anything to earn money?

1 yes -> go to question73

2 no -> go to question72

72 Aside from keeping house, do you do any unpaid work?

1 yes -> go to question73

2 no -> go to question **Error! Reference source not found.**

73 Do you work mostly at home or outside the home?

1 mostly at home 2 mostly outside the home

74 Are you paid mostly in money (e.g., cash, or bank transfer, or paycheck) or in kind (e.g., food, lodging, clothing, goods and/or services) or not at all?

1 money

2 pay-in-kind (e.g., food, lodging, clothing, goods and services)

3 not paid

75 What kind of job do you have? Is it

1 in agriculture?

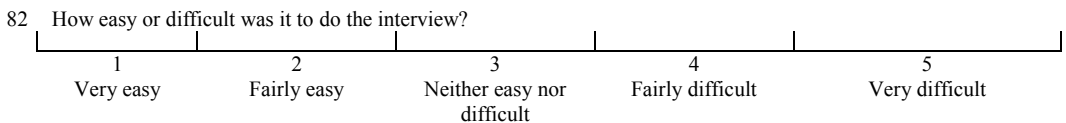
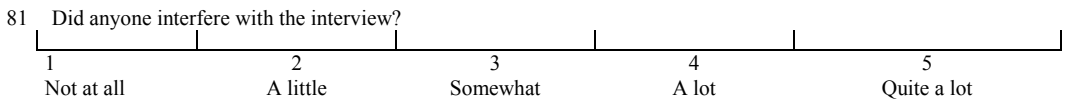
2 a craft or trade?

- 3 in industry (manufacturing)?
 - 4 in commerce (retail/wholesale trade)?
 - 5 in financial services (banking, insurance, real estate)?
 - 6 in the public sector (local, state, and federal government)?
 - 7 in another sector or freelance?
- 76 In your job, are you ...
- 1 assisting a family member within a family business?
 - 2 a blue-collar worker, laborer, manual worker?
 - 3 a white-collar worker, clerk, managerial staff member?
 - 4 a free-lance tradesperson?
 - 5 another kind of free-lancer (e.g. writer, photographer, computer programmer, etc.)?
 - 6 self-employed (e.g., doctor, lawyer, artist)?
- 77 Do you work on a full-time or part-time basis?
- 1 full-time
 - 2 part-time
- Interviewer: Thank the respondent for participating in the interview*

Interviewer rating (was used in all three questionnaires for adolescents, mothers and grandmothers)

Interviewer: Please provide the following information about the respondent and the interview situation.

- 78 Where does the respondent live?
- 1 village
 - 2 town
 - 3 city
 - 4 metropolis
- 79 Where did the interview take place?
- 1 in the respondent's home
 - 2 elsewhere
- 80 Was anyone else present? (*More than one answer possible*)
- 80.5 Nobody 1 Yes 2 No
 - 80.6 Child/Children 1 Yes 2 No
 - 80.7 Husband/Partner 1 Yes 2 No
 - 80.8 Relatives 1 Yes 2 No
 - 80.9 Neighbor 1 Yes 2 No
 - 80.10 Someone else (e.g., friend/s, city official, child's teacher) 1 Yes 2 No



- 83 How often did you have to contact the respondent until the interview was completed? _____ times
- 84 How long did the entire interview take? _____ minutes
- 85 When did the interview take place?
- a) Day _____
 - b) Month _____
- 86 When did the interview begin? (What time?)
- _____ : _____ a.m./p.m. (*please circle correct time of day*)
- 87 When did the interview end? (What time?)

_____:____ a.m./p.m. (please circle correct time of day)

88 Your age _____ years

89 Your sex
 1 male 2 female

Appendix 4

FOCUS GROUP TOPIC GUIDES 2005 AND 2007

2005

1. Focus group. Reproduction: experiences and attitudes

(separate groups for male and female participants)

Language: Mainly SePedi

Moderator of the session: Male research assistant in boys' group and female research assistant in girls' group.

Observer/tape-recording/practicalities/serving fruits and drinks: Ingrid

Venue: Classroom after school hours

Introduction:

Research assistant and Ingrid repeat the information about the aim and ethics of the study given orally in the information meeting a few weeks earlier and written in the information letter.

Mainpoints: The aim of the research is to learn more about the views of young people in this area on family life and your future aspirations. This information is important to map the situation of young people and families in Limpopo. The information you give shall be confidential, and you will not be personally identified in any publication or presentation of this study. The tape and transcripts will be kept in a locked drawer and destroyed when the study is completed. It is vital that no one reveals anything about what is being said in this group when the session is finished. Participation is totally voluntary and you have the right to deny answering any question and withdraw from the group discussion at any point. In a group discussion it is important to pay respect to other participants' opinions. It is not a goal to reach any agreement in such a discussion. The aim is to listen to the various thoughts you may have on the issue. Before we start, we want to ask whether you allow us to tape-record the discussion.

Present the topic of the discussion: Today, we would like to hear your views about the issue of having children...

Questions (the use of probes important):

- Would you say that it is common among people your age in this area to have a child?
- What do you think when others your age get children?
- What do you think if you meet people in their thirties who do not have any children?
- What do you think makes people desire children?
- Can you give me some reasons for why people may not want to have children?
- Imagine you were in the position to suggest a new law concerning childbirth and families in South Africa – what kind of a suggestion would you make?
- What do you know about the “Government money” that women receive when they give birth?
- What do you think about “The Golden Key”? Is that important to you?
- Do you wish to have a child in the future?
- When would you prefer having your first child?

- How many children would you like to have?
- If you want to have children in the future, would you prefer a son or a daughter?
- In your opinions, what does it mean to take proper care of your child?
- What do you think is most important in raising a child?
- Imagine that you have been married for about 5 years, you have not used any protection, your relatives start asking about children, what will you think?

Rounding up the focus group: Summarize what the discussion in terms of the various views, and ask whether they have more input and questions regarding the topic or their participation in the group session..

Thank you for participation!

2. Focus group. Reproductive health (separate groups for male and female participants)

Language: Mainly SePedi

Moderator of the session: Male research assistant in boys' group and female research assistant in girls' group.

Observer/tape-recording/practicalities/serving fruits and drinks: Ingrid

Venue: Classroom after school hours

Introduction:

Research assistant and Ingrid repeat the information about the aim and ethics of the study given orally in the information meeting a few weeks earlier and written in the information letter.

Mainpoints: The aim of the research is to learn more about the views of young people in this area on family life and your future aspirations. This information is important to map the situation of young people and families in Limpopo. The information you give shall be confidential, and you will not be personally identified in any publication or presentation of this study. The tape and transcripts will be kept in a locked drawer and destroyed when the study is completed. It is vital that no one reveals anything about what is being said in this group when the session is finished. Participation is totally voluntary and you have the right to deny answering any question and withdraw from the group discussion at any point. In a group discussion it is important to pay respect to other participants' opinions. It is not a goal to reach any agreement in such a discussion. The aim is to listen to the various thoughts you may have on the issue. Before we start, we want to ask whether you allow us to tape-record the discussion.

Present the topic of the discussion: Today, we would like to hear your views about reproductive health.....

Questions (the use of probes important):

- In this community, how and where do youth get infected by STDs including HIV/AIDS?

- From where did you learn what you know about pregnancy, contraceptives, and STDs including HIV/AIDS?
Probes:
 - School?
 - Youth groups?
 - Friends?
 - Health station?
 - Parents/family?
- In your community, at what age do people start having sexual relationships?
 - Have anyone of you ever had a boyfriend/girlfriend?
 - Do you know about people your own age who has been involved in sex?
 - Do they use contraceptives?
 - When do you use contraceptives and when do you not use it?
 - What kinds of contraceptives do you think are most common?
 - If you have ever used contraceptives, from where did you get that?
- Abortion is legalised in this country. Therefore, I want to ask whether you know anyone who has gone through an abortion?/how do you understand abortion?

Rounding up the focus group: Summarize what the discussion in terms of the various views, and ask whether they have more input and questions regarding the topic or the group session..

Thank you for participation!

3. Focus group. Having children and reproductive health (separate groups for male and female participants)

Language: Mainly SePedi

Moderator of the session: Male research assistant in boys' group and female research assistant in girls' group.

Observer/tape-recording/practicalities/serving fruits and drinks: Ingrid

Venue: Mankweng health clinic

Introduction:

Research assistant and Ingrid repeat the information about the aim and ethics of the study given orally in the information meeting a few weeks earlier and written in the information letter.

Mainpoints: The aim of the research is to learn more about the views of young people in this area on family life and your future aspirations. This information is important to map the situation of young people and families in Limpopo. The information you give shall be confidential, and you will not be personally identified in any publication or presentation of this study. The tape and transcripts will be kept in a locked drawer and destroyed when the study is completed. It is vital that no one reveals anything about what is being said in this group when the session is finished. Participation is totally voluntary and you have the right to deny answering any question and withdraw from the group discussion at any point. In a group discussion it is important to pay respect to other participants'

opinions. It is not a goal to reach any agreement in such a discussion. The aim is to listen to the various thoughts you may have on the issue. Before we start, we want to ask whether you allow us to tape-record the discussion.

Present the topic of the discussion: Today, we would like to hear more about your views related to the issues of having children and reproductive health...

Questions (the use of probes important):

- Would you say that it is common among people your age in this area to have a child?
- Do you know anyone your age who is a parent?
- Does anyone in this school have children? Age of that person? Many persons?
- What do you think when others your age get children?
- What do you think if you meet people in their thirties who do not have any children?
- In your opinion, what does it mean to take proper care of your child?
- What do you find important in raising a child?
- Describe to us what kind of fathers you would like to be for your children.
(ask follow-up questions leading to whether they would like to teach their sons about sexuality, reproductive health issues)

- Does it differ or not from how your own fathers have raised you?
(ask follow-up questions on how it differs how it is similar, ask about what role the father has played in raising them)

- How would you like your relationship with your father to be different?
- Tell us what you know about sexual transmitted diseases.
(ask follow-up questions; can someone tell us how HIV transmit? Can someone tell us what they know about HIV?)

- Do you think other boys your age know what you told me about HIV?
- If most people know how HIV transmits, and know that it is fatal, how come so many people be infected by the virus? Could you think of some explanations?
(if they say that people are “ignorant”, ask follow-up questions on why they are “ignorant”)

- Since you are a group of young boys representing this community, we would like to know what suggestions you may have to improve this situation of so many young people infected by HIV.

Rounding up the focus group: Summarize what the discussion in terms of the various views, and ask whether they have more input and questions regarding the topic or their participation in the group session..

Thank you for participation!

2007

Focus groups Family life in Mankweng (mixed gender groups)

Language: Mainly SePedi

Moderator of the session: Male research assistant (mixed gender groups)

Observer/tape-recording/practicalities/serving fruits and drinks: Ingrid

Venue: Mankweng health clinic

Introduction:

Research assistant and Ingrid repeat the information about the aim and ethics of the study given orally in the information meeting a few days before and written in the information letter.

Mainpoints: The aim of the research is to learn more about the views of young people in this area on family life and your future aspirations. This information is important to map the situation of young people and families in Limpopo. The information you give shall be confidential, and you will not be personally identified in any publication or presentation of this study. The tape and transcripts will be kept in a locked drawer and destroyed when the study is completed. It is vital that no one reveals anything about what is being said in this group when the session is finished. Participation is totally voluntary and you have the right to deny answering any question and withdraw from the group discussion at any point. In a group discussion it is important to pay respect to other participants' opinions. It is not a goal to reach any agreement in such a discussion. The aim is to listen to the various thoughts you may have on the issue. Before we start, we want to ask whether you allow us to tape-record the discussion.

Present the topic of the discussion: Today, we would like to follow-up on some issues related to family life in Mankweng that we discussed in 2005.

Questions (the use of probes important):

- How do you view a common family in Mankweng today?
- What kind of responsibilities do the various people in a family have in Mankweng?
- Where are the different members of a family normally living in Mankweng?
- We would like to provoke you a bit by picturing yourself this scenario:
If your mother brought home a lover while your father is working far away, how do you think you would react?
- This presents another scenario in a family:
Your father is working far away and is coming home only from time to time. One day you realise that your father has got another family in the town where he is working. How do you think you would react?

Rounding up the focus group: Summarize what the discussion in terms of the various views, and ask whether they have more input and questions regarding the topic or their participation in the group session.. **Thank you for participation!**

Appendix 5

INTERVIEW GUIDES SEMISTRUCTURED INTERVIEWS 2005 AND 2007

2005

Language: SePedi, English or mix of both

Interviewer: Male/female research assistant and/ or Ingrid

Tape-recording/practicalities/serving fruits and drinks: Interviewer/Ingrid

Venue: Classroom after school hours or Mankweng health clinic

Introduction:

The interviewer repeats the information about the aim and ethics of the study given orally in the information meeting and written in the information letter.

Mainpoints: The aim of the research is to learn more about the views of young people in this area on family life and your future aspirations. This information is important to map the situation of young people and families in Limpopo. The information you give shall be confidential, and you will not be personally identified in any publication or presentation of this study. The tape and transcripts will be kept in a locked drawer and destroyed when the study is completed. Participation is totally voluntary and you have the right to deny answering any question and withdraw at any point. There are no right or wrong answers we are only interested in your personal opinions. Before we start, we want to ask whether you allow us to tape-record the interview.

Who you are and people around you

First I would like to ask you whether you will show your photos to me and tell me about them?

- Who are important to you?
- What kind of relationship do you have to these persons?

- Mapping the family situation in detail and get description of relationship with those people who raised you, and the relationship with mother and father:

With whom did you live together when you grew up?
Mother? Father? Grandparents? Siblings?

- Where and with whom do you live now?
Living with your parents?

- How old are you?
- Which level in school do you attend?

Daily life

- Tell me about your diary! Why did you write (specific questions for each one of the informants according to what they wrote in their diaries).

The following questions are to be asked if they were not already answered in the above questions:

- Were you involved in any income generating activities?
What kind of income generating activity?
- What about domestic work?
- What did you do in your spare time (if any spare time)?
Did you spend time with friends, neighbours, family? What did you do together?

Reproduction: experiences and attitudes

Now, I would like you to tell me about your personal thoughts and experiences with having children and not having children.

- Could you tell me about your situation today - whether you have children or not, or whether you are planning to have children in the near future (already pregnant/pregnant partner)?

The following questions are for those teenagers who already have given birth to a child/are pregnant (have a pregnant partner):

- When did you get your child? /When will you/your partner get the baby that you/your partner are carrying?
- How many children do you have?
- Do you have son(s)/daughter(s)?
- Do you live together with the mother/father of your child?
- Thinking back at the time you got pregnant/your partner got pregnant – what was your reaction while realizing that you were going to be a parent?
- Have you received any kind of support from the local health station when having your baby?
- Do you have the overall caring responsibility for any child who is born by other than yourself?

The following questions are for those teenagers who answered “yes” on the above question:

- What is your relation to the biological parent of this child?
- Why do you have the caring responsibility for this child?

The following questions are asked both to those who have a child and those who do not have a child:

- How many teenage mothers and fathers do you know of?
- What do you think when others your age get children?
- How would you react if you realized you/your girlfriend were pregnant now?
- What do you think if you meet people in their thirties who do not have any children?
- Do you want to have a child some time in your life? Why? When? How many? Boy/girl?
Why?
- Could you think of any reason for you that you don't want to have children?
- Imagine you were in the position to suggest a new law concerning childbirth and families in South Africa – what kind of a suggestion would you make?

Reproductive health

I would like to ask you some questions concerning health and relationship with a boyfriend/ girlfriend. You may find some of the questions very personal, and I will remind you that all you are saying will be handled with the strictest confidentiality. Meaning that your words will only be used for the purpose of this research, and it will not be possible for anyone to trace your words back to you. And remember- if you do not want, you don't have to answer the question.

- How is your health?
- Are your friends in good health?
- What do you know about pregnancy and contraceptives?
- As far as I have understood it, abortion is legalised in this country. Therefore, I want to ask whether you know anyone who has gone through an abortion? /how do you understand abortion?
- Can you think of any reason for why so many people are infected by STDs including HIV/AIDS in this community?
- Where have you learnt what you know about pregnancy, contraceptives, and STDs including HIV/AIDS?
 - School?
 - Youth groups?
 - Friends?
 - Health station?
 - Parents (mother or father) /family?
- In your community, at what age do people start having sexual relations?
 - Do you have a boyfriend/girlfriend? (if not answered this already)
 - Have you ever been involved in sex?
 - If so, when was your first time?
 - Do you use contraceptives?
 - When do you use contraceptives and when do you not use it?
 - What kind of contraceptives do you use?
 - If you have ever used contraceptives, from where did you get that?
 - if you have never been involved in sex, why? When would you prefer start? When do you think you will start?

Subjective well-being and perceptions on their future life

People have so many views on what they value as a good and happy life. This is very individual. Therefore, I am very much interested in your personal opinion of how you will describe a happy, satisfactory life...

- What makes you happy or content in your everyday life?
- What do you like about your everyday life?
- In what way would you like your life to be different?
- Could you describe the difficulties that you may face in your everyday life?
- Perceived difficulties and joys of giving birth and raise children.

- What do you like about being a mother/father? (for those who are already a parent)
- What kind of support do you receive formally and/or informally in raising your child? (for those who are already a parent)

Now, I would like to hear more about what you think about your future life....

- What do you think of your future life in terms of getting married, or having a partner, or not having a partner?
- Tell me about what kind of a mother/ father you want to be?
Does this differ from how your own mother and father raised you? How?
- How do you picture yourself in 5 and 10 years from now on?
- You have told me about your future aspirations of family life, education and employment (or other things they may have talked about), how do you look upon the opportunities to realize your goals?

Rounding up the focus group: Summarize and ask whether they have more input or questions regarding the topic or their participation in the study...

Thank you for participation!

May 2007

Language: SePedi or mix of both

Interviewer: Male/female research assistant

Tape-recording/practicalities/serving fruits and drinks: Interviewer

Venue: Mankweng health clinic or in research assistants' home

Introduction:

The interviewer repeats the information (in SePedi) about the aim and ethics of the study that was at the information meeting in 2005. The participants are also provided with a written letter about the progress of the research and further plans, methods, and ethics of the study.

Mainpoints: The aim of the follow-up study is to clarify and deepen some of the issues we discussed in the first round of data collection in 2005. The overall aim of this research is to learn more about the views of young people in this area on family life and your future aspirations. Your views are important to map the situation of young people and families in Limpopo. The information you give shall be confidential, and you will not be personally identified in any publication or presentation of this study. The tape and transcripts will be kept in a locked drawer and destroyed when the study is completed. Participation is totally voluntary and you have the right to deny answering any question and withdraw at any point. There are no right or wrong answers we are only interested in your personal opinions. Before we start, we want to ask whether you allow us to tape-record the interview.

The interview guide May 2007 is adjusted to the individual participant. The questions below show an example.

Questions:

- Could you please tell me about your relationship with your mother?
 - With whom did you live together with during your childhood?
 - Have you always lived with your mother?
 - Do you live with your mother now?
 - What kind of things do you do when you are together with your mother?
 - What kind of things do you talk about with your mother?
 - Could you tell me about how you feel about the relationship with your mother today?
 - Could you tell me about your relation with your mother while growing up?

- Can you tell me about what you have learnt from your mother about life?

- Could you please tell me about your relationship with your father?
 - Have you always lived with your father?
 - Where did your father work when you grew up? How often did you see him?
 - Do you live with your father now?
 - What do you father do? (work, unemployed,)
 - How often do you see your father?
 - What kind of things do you do when you are together with your father?
 - What kind of things do you talk about with your father?
 - Could you tell me about how you feel about the relationship with your father today?
 - Can you tell me about what you have learnt from your father about life?
 - What should a father be like, do you think?
 - Do you think your father is like that?

Rounding up the focus group: Summarize and ask whether they have more input or questions regarding the topic or their participation in the study...

Thank you for participation!

October 2007

Language: SePedi, English or mix of both

Interviewer: Male/female research assistant or Ingrid

Tape-recording/practicalities/serving fruits and drinks: Interviewer and /or Ingrid

Venue: Mankweng health clinic

Introduction:

The interviewer repeats the information (in SePedi and English) about the aim and ethics of the study that was given at the information meeting a few days earlier, and also stated in the information letter.

Mainpoints: The aim of the follow-up study is to clarify and deepen some of the issues we discussed in the first round of data collection in 2005. The overall aim of this research is to learn more about the views of young people in this area on family life and your future aspirations. Your views are important to map the situation of young people and families in Limpopo. The information you give shall be

confidential, and you will not be personally identified in any publication or presentation of this study. The tape and transcripts will be kept in a locked drawer and destroyed when the study is completed. Participation is totally voluntary and you have the right to deny answering any question and withdraw at any point. There are no right or wrong answers we are only interested in your personal opinions. Before we start, we want to ask whether you allow us to tape-record the interview.

Questions:

Realities and ideals in daily life:

- Who are the people you spend time with? (age, gender, position/power)
- Who can you trust in your life?
- Who do you feel close to?
- Which persons do you look up to?
- Who are your ideals?
- Whom do you want to become like?
- Who do you respect?
- Who decides over you? Who do you get instructions from?
- What does it mean to misbehave?
- If you do something wrong, who punishes you? How?
- From whom do you learn most about life?
- How do you consider the role of mother/father in passing over knowledge on reproductive health and sexuality? Who starts talking about this – your mother/father or yourself? What about peers? What is your main source of information?

Future aspirations:

- What do you want in your future? (Family, Career...)
- Can you please describe how you think your future household will look like? (who will live there, who will not live there, who will decide what in the household of husband/wife)
- Who will raise the children in your future family? -You/your husband/wife/others.
- How do you think you/your husband/wife/others will raise your children?

Rounding up the focus group: Summarize and ask whether they have more input or questions regarding the topic or their participation in the study...

Thank you for participation!

Appendix 6

WHAT TO WRITE IN THE DIARY 2007

This is a follow-up of the research project about reproductive health and family relations that was initiated October 2005 in Limpopo. The purpose of the study is to learn more about young people's values related to family life and future aspirations. This information is important to map the situation of young people and families in Limpopo. We would like to ask you whether you want to write a diary for the purpose of this research?

The information you give shall be confidential, and will be used only for the purpose of this research. You will not be personally identified in any publication or presentation of this study. Ingrid will personally hand in the diaries, and keep them in a locked drawer and maculate them when the study is finished.

The writing of a diary is totally voluntary and you may deny answering any question and may withdraw from writing the diary at any time.

In this follow-up study, we would like to learn more about your relationship with a father or any father-figure you may have, such as stepfather, uncle or grandfather. We want to ask you to pay attention to the following issues and make notes about that in your diary for the next six months:

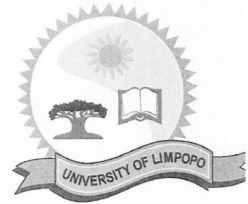
- Make a note including the date each time you are in contact with your father.
- What kind of contact is it? (face-to-face, telephone, e-mail)
- What did you do when you meet?
- What did you talk about?
- What do you think about the contact with your father?
- What do you feel about the contact with your father?
- What do you think about the contact between your mother and father?

You may contact Mpho Sebola 0732428716 for questions, or Ingrid Spjeldnæs ingridspjel@gmail.com

THANK YOU FOR PARTICIPATION!!

Appendix 7

UNIVERSITY OF LIMPOPO
Medunsa Campus



MEDUNSA RESEARCH & ETHICS COMMITTEE

CLEARANCE CERTIFICATE

P O Medunsa
Medunsa
0204
SOUTH AFRICA

MEETING: 04/2008

Tel: 012 - 521 4000
Fax: 012 - 560 0086

PROJECT NUMBER: MREC/H/48/2008: PG

PROJECT :

Title: Reproductive behavior, transmission of values and their influence on health and quality of life in South African families
Researcher: I.O. Spjeldnaes (Bergen University College, University of Bergen, Norway)
Supervisor: Prof DL Sam (Faculty of Psychology, Bergen University College, University of Bergen, Norway)
Co-Supervisors: Prof J. Harris (Center of Evidence-Based Practice, Bergen University College, University of Bergen, Norway)
Prof KM Moland (Bergen University College and Center of International Health, University of Bergen, Norway)
Other Involved H.O.D's: Mr H Onya (Center for Health Promotion, University of Limpopo, South Africa.
Department: Health Promotion
School: Health Care Sciences
Degree: PhD

DECISION OF THE COMMITTEE:

MREC approved the project.

DATE: May 07, 2008




PROF GA OGUNBANJO
DIRECTOR: RESEARCH & CHAIRPERSON MREC

Note:

- i) Should any departure be contemplated from the research procedure as approved, the researcher(s) must re-submit the protocol to the committee.
- ii) The budget for the research will be considered separately from the protocol. PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES.

Appendix 8

UNIVERSITY OF LIMPOPO

Private Bag X1106
SOVENGA
0727
SOUTH AFRICA
Tel: + 27 – 15 – 263 6129
Fax: + 27 – 15 – 263 6432
E-mail: onya@pixie.co.za
Web: www.ul.ac.za



**FACULTY OF HEALTH SCIENCES
HEALTH PROMOTION UNIT
(Affiliated to the School of Public Health)**

Date: 06-12-2007

TO WHOM IT MAY CONCERN:

This is to confirm that Ms Ingrid O. Spjeldnaes did the first phase of her field work (data collection) towards a PhD project titled ***“Reproductive behaviour, transmission of values and their influence on health and quality of life among South African women and adolescents”*** with the Health Promotion Unit of this University from 3rd October 2005 to 30th November 2005.

Ms Spjeldnaes’ work was integrated into the Unit’s Research project titled: ***“Promoting Adolescents Sexual and Reproductive Health: HIV and AIDS intervention in Sub-Saharan Africa (SATZ)”***. This was implemented by the SATZ Consortium led by the Centre for Health Promotion Research of the University of Bergen, Norway.

The project that was approved by the Ethics Committee of this University of the North (now University of Limpopo) and by the Limpopo Provincial Department of Health and Social Development, Polokwane, South Africa..

We will continue to provide any further assistance that Ms Ingrid O. Spjeldnaes may require throughout the duration of her study.

Yours sincerely,

Dr. Hans Onya
DIRECTOR

Appendix 9



UNIVERSITY OF BERGEN



Research Centre for Health Promotion
The Psychology Faculty

WHO Collaborating Centre
International Union for Health Promotion and Education

29/10/2007

TO WHOM IT MAY CONCERN

This is to certify that **Ingrid Spjeldnæs'** PhD project:

“Reproductive behaviour, transmission of values and their influence on health and quality of life in South African families”

is being undertaken under the umbrella of the attached Memorandum of Understanding between the University of Limpopo and the University of Bergen. Also attached is a brief description of her research project.

Sincerely,

Maurice B. Mittelmark
Vice-Director
Research Centre for Health Promotion



UNIVERSITY OF BERGEN
Department of Research Management

Professor Hans Onya
Director, Health Promotion
Faculty of Health Sciences
University of Limpopo
Turfloop Campus
Private Bag X1106
Sovenga 0727
SOUTH AFRICA

Bergen, 11 September 2007

Our ref.: 07/12465/BJAN

Memorandum of Understanding

Dear Professor Hans Onya,

Please find enclosed duly signed *Memorandum of Understanding* for collaboration between

University of Limpopo, South Africa
and
University of Bergen, Norway

We kindly ask your assistance to forward the agreement to proper authority at the University of Limpopo in accordance with the university's procedure for signing of bilateral agreements.

If you have any questions regarding this agreement, please do not hesitate to contact our office.

May I also use this occasion to thank you personally for your kind assistance in getting this MoU finalised.

Sincerely yours

Bjørn Erik Andersen
Advisor for International Relations

Enclosure.

Mailing address:
PO Box 7800
5020 BERGEN
NORWAY

Visiting address:
Prof. Keyersgt. 8
5007 Bergen
NORWAY

Telephone: +47 55 58 49 85
Telefax: +47 55 58 49 81

WWW: <http://www.uib.no/fa/>
E-mail: Bjom.Andersen@fa.uib.no

Memorandum of Understanding

between

University of Limpopo, South Africa

and

University of Bergen, Norway

Whereas the two institutions recognise

1. Directions and interests of their scientific research and teaching are close;
2. Each institution is recognised as being a leader in higher education, teaching and research within its respective country;
3. Mutual co-operation in research and teaching activities will be helpful to both sides;
4. A Memorandum of Understanding would be of mutual benefit and would serve as an indication of continued interest in co-operation.

In view of the above statements the two institutions have as a common aspiration to sign this Memorandum as follows:

1. The institutions agree to encourage and promote collaborative research activities between the two institutions when mutual interests are served by such activities. Furthermore, the institutions agree to actively seek sponsorship in support of such projects. The institutions will exchange relevant materials and information as an integral part of collaborative projects and work together to produce, publish and market material appropriate to, or resulting from, any collaborative projects;
2. Each institution will promote the exchange of faculty, research scholars, and students for conducting teaching and collaborative research;
3. Each institution will promote the exchange of qualified students. These students will be subjected to the admission requirements, tuition and fees of the host institution;
4. Collaborative research may be carried out separately in the two institutions or in one institution;
5. Any expenses incurred by each institution under this Memorandum will be subjected to individual agreements on a case-by-case basis;

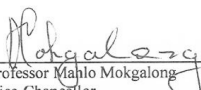


6. This memorandum of Understanding shall become effective on the date of the final signing and will be renewed every 5 years upon mutual consent of the two institutions. This Memorandum may be amended or further developed by means of common written consent on the part of the signatories or their designated representatives.

Signatures


Date: 22/08/2007

For the University of Limpopo:


Professor Mahlo Mokgalong
Vice-Chancellor

Date: 07/09/2007

For the University of Bergen:


Professor Sigmund Grønmo
Rector



Appendix 10

Consent Form

**UNIVERSITY OF LIMPOPO
ETHICS COMMITTEE**

PROJECT TITLE: “Reproductive behaviour, transmission of values and their influence on health and quality of life among South African women and adolescents”

PROJECT LEADER: Professor David L. Sam, University of Bergen, Norway.

CONSENT FORM

I, _____ hereby voluntarily consent for my learners at this school P to participate in the following project: “Reproductive behaviour, transmission of values and their influence on health and quality of life among South African women and adolescents” SEC. SCHOOL

I realise that:

1. The study deals with adolescent reproductive attitudes and behaviour in the Limpopo Province, South Africa.
2. The Ethics Committee has approved that individuals may be approached to participate in the study.
3. The experimental protocol, i.e. the extent, aims and methods of the research, has been explained to me;
4. The protocol sets out the risks that can be reasonably expected as well as possible discomfort for persons participating in the research, an explanation of the anticipated advantages for myself or others that are reasonably expected from the research and alternative procedures that may be to my advantage;
5. I will be informed of any new information that may become available during the research that may influence my willingness to continue my pupils' participation;

6. Access to the records that pertain to my participation in the study will be restricted to persons directly involved in the research;
7. Any questions that I may have regarding the research, or related matters, will be answered by the researchers;
9. If I have any questions about, or problems regarding the study, or experience any undesirable effects, I may contact a member of the research team;
10. Participation in this research is voluntary and I can withdraw my pupils' participation at any stage;
11. I indemnify the University of Limpopo and all persons involved with the above project from any liability that may arise from my participation in the above project or that may be related to it, for whatever reasons, including negligence on the part of the mentioned persons.

SIGNATURE OF Prin

Signed at MANKWENG Date 10/11/2025

Appendix 11

UNIVERSITY OF LIMPOPO (Medunsa Campus) CONSENT FORM

Statement concerning participation in a Project.

Name of Project: **“Values of Children”**

I have read the information on the aims and objectives of the proposed study and was provided the opportunity to ask questions and given adequate time to rethink the issue. The aim and objectives of the study are sufficiently clear to me. I have not been pressurized to participate in any way.

I understand that participation in this Project is completely voluntary and that I may withdraw from it at any time and without supplying reasons.

I am fully aware that the results of this Project will be used for scientific purposes and may be published. I agree to this, provided my privacy is guaranteed.

I hereby give consent to participate in this Project.

.....

Name of patient/volunteer

Signature of patient or guardian.

.....

Place.

Date.

Witness

Statement by the Researcher

I provided verbal and written information regarding this Project

I agree to answer any future questions concerning the Project as best as I am able.

I will adhere to the approved protocol.

.....

Name of Researcher

Signature

Date

Place

Appendix 12



Saksbehandler: Hege Konglevoll
hko@hib.no 55585596

Vår dato: 30.10.2007
Deres dato:

Vår ref. 2007
Deres ref.:

Information about the research project "Values of Children":

This research project is called "Values of Children", and focuses on family relations and future aspirations in generations of South African families in the Limpopo Province. The study aims to identify continuity and change in family values. Therefore, the study includes both quantitative data of 300 women from three generations, and qualitative data including interviews with 20 teenage boys and girls. The point of departure is the young generation and their experiences as teenagers in a family and their future aspirations for family and career. These issues are explored on the backdrop of the social and health changes in South Africa, and from a social psychological perspective. It is indeed important to identify the views of the first generation growing up in the post- Apartheid era, as this may throw light on what one may expect of demographic changes in the years to come. In the times of establishing a post-Apartheid nation, it is important to listen to the future aspirations of the young generation.

This is a follow-up study of the 2005 data collection, which had ethical approval through the SATZ project. This follow-up study aims to deepen issues already raised in the previous interviews. What we would like to know more about are as follows;

Who are the significant people around you - and - what do you expect of your future.

First, we would like to inform you that participation in this research project is totally voluntary and you may withdraw from the interview/focus group discussion at any time or deny answering any question. You do not need to give a reason for this.

Second, we want to assure you that what you say during the interviews/ focus groups will be handled with the strictest confidentiality. What you tell us will be used only for the purpose of this research project and will not be disclosed to a third party in its original form.

Third, as our research aim is to report the situation of Limpopo families as teenagers experience it, it is extremely important that you tell us your true views on the questions posed. Remember – there are no right or false answers to our questions. Your personal experiences, thoughts, feelings, aspirations, attitudes, views are what is important for us to understand.

Fourth, we would like to ask you whether we may use a tape recorder or not during the interview.

Fifth, if you have any kinds of questions to us after being interviewed, you may contact

Mpho Sebola: 0732428716 -or-
Ingrid Spjeldnes: ingridspjel@gmail.com / 0761053170