

## EFFECTIVENESS OF PEER COUNSELLING IN MANAGEMENT OF TEENAGE PREGNANCY IN SECONDARY SCHOOLS

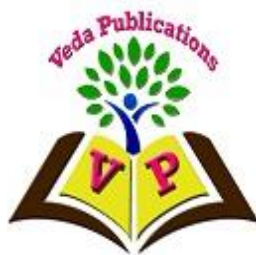
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### Abstract



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The role of Guidance and Counselling in making informed choices among learners cannot be overemphasized. Although institutional-based Guidance and Counselling was introduced in Kenya to equip learners with the skills of making informed decisions so as to reduce risky sexual behaviours and teenage pregnancies. The numbers of teenage pregnancies are on the rise in Siaya County especially Ugenya Sub County in Kenya. The aim of this study was to assess the effectiveness of peer counselling in management of teenage pregnancy among girls. The study utilized a Concurrent Triangulation Design within the Mixed Method Approach. Rational Emotive Behaviour Therapy theory informed the study. Purposive sampling technique was used to sample 15 Principals and 15 Teacher Counsellors. Kerlinger formula was employed to determine and select 347 teenage girls in Form 2 and 3 to participate in the study, while 50 Peer Counsellors were selected to participate in the study using stratified random sampling. Data for the study was collected using questionnaires, structured interview schedules and Focus Group Discussions. Data collected from the questionnaires was edited, coded and analyzed through descriptive statistics as well as Pearson Correlation analysis using SPSS version 23. Thematic Analysis was used to analyse qualitative data. The findings indicated that there was a strong and positive correlation ( $r = .675$ ) between peer counselling and the management of teenage pregnancy at  $p < 0.05$ . The Ministry of Education should emphasize more diverse training of Guidance and Counselling teachers on varied therapies for them to be effective in schools. In addition, the policy makers in education should also come up with various training programs meant for peer counsellors to assist in therapy programmes in their respective secondary schools, since students preferred seeking counselling services from their peer counsellors.

**Keywords:** *Peer counselling, teenage pregnancies, secondary schools*

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## 1.0 INTRODUCTION

In schools, guidance and counseling are often seen as helpful in assisting students to solve their difficulties. According to the United Nations Educational, Scientific, and Cultural Organizations UNESCO (2021) Report, the worldwide trend in giving advice and counseling has shifted from a casework and remedial strategy to a preventative, developmental approach. According to Kost, Henshaw, and Carlin (2017), the school counselling profession in the United States of America originated as a vocational guidance movement at the beginning of the 20th Century, when a systematic school guidance program was devised and made available to schools. Personal, social, and emotional changes are emphasized by the vocational guidance movement in order to build and enhance students' character and prevent behavioral disorders. In Japan, the objective of high school guidance counselling services is to assist each student in developing self-awareness, decision-making, life planning, and action-taking skills in order to adapt socially and emotionally (Shoffner, & Williamson, 2018). The notion of guidance and counseling has been accepted throughout Africa. Education policymakers in Kenya have endorsed a whole school approach to guidance and counselling as a model of excellent practice for assisting learners and students with diverse challenges (Osodo, Osodo, Mito, Raburu, & Aloka, 2016). These include emotional and psychological disturbances, career decisions and growth, family concerns, and alternatives to corporal punishment. According to the Basic Education Act (2013) guidance and counseling is the process of identifying and meeting the developmental needs of students through public lectures, peer counseling, group counseling, and individual counseling (Kilonzo, 2017). Similarly, Nyaga (2018) and Hossain & Faisal, (2018) asserts that peer counseling services are routinely provided to secondary school students and are procedures whereby exemplary students are taught in counselling in order to provide services to their peers.

Teenage pregnancy is a universal public health and social economic challenge affecting millions of school-going girls worldwide, hence attracting attention among researchers, educationists, public health experts and policy makers in the past two or so decades (Odimegwu, Amoo, and De Wet, 2018). It is an area of concern by the fact that teenage pregnancy reflects a pattern of sexual activity that puts teenagers both at risk of pregnancy and infection by Sexually Transmitted Infections (STIs) including the Human Immunodeficiency Virus (HIV). This includes religious circles where teenage pregnancy has

been identified as a societal and moral problem that needs to be dealt with (Albert, Chein, & Steinberg 2018). Birungi (2017) asserts that this concern is attributable to the worldwide studies that indicate that annually, as many as 50% of adolescent mothers ages 15 to 17 are usually forced to drop out of high school and do not return. According to World Health Organization (WHO, 2020), teenage pregnancy are incidences of unintended pregnancies occurring to girls aged between 13 and 19 years. as United Nations Children Education Fund (UNICEF, 2019) observes, the vice is universally common with as many as 13 million births being reported annually to girls in this age bracket in both high and low-income states. Interestingly, Hossain, and Faisal, (2018) emphasises that the Sub Saharan Africa has the highest incidence in teenage pregnancy as it is responsible for more than 90% of all the reported annual teenage global births.

Globally, teenage pregnancy has remained persistent due to various contributing factors, which also impacts negatively on the life of the teenagers involved. According to the National Campaign to Prevent Teen and Unplanned Pregnancy (NCPTP, 2020), reduction of pregnancies among adolescent females is listed by the Centre for Disease Control and Prevention (CDC) as a critical health objective for adolescents. Although many gains have been made since the programme was initiated, the USA still has one of the highest pregnancy rates compared to other industrialized nations. Kost, Henshaw and Carlin (2017) suggest after 15 years of steady decline, teen birth rates are now on the rise once again and it is conservatively estimated that births to teen parents cost taxpayers in the US approximately \$9.1 billion annually in health care, foster care, incarcerations of children of teen parents and public assistance. Although many disadvantages may exist before a teenage pregnancy occurs, factors such as school failure, single parenthood, and poverty are compounded and perpetuated in families with teenage parents (Nichols, Javidani, Rodriguez, Emerson, & Donenberg, 2016).

In South Africa, teenage pregnancy has become a focus of discussion partly because of an unfolding longitudinal case that involves school policy on pregnant learners. Ralph, Foster, Barar & Rocca, (2020) also explains that a teenage pregnancy victim may have unwillingly become pregnant after being coerced into sex by means of physical force, economic background or peer pressure. The father may be a schoolboy, a teacher, a man old

enough to be the girl's father or even a close relative. The question is what the premature pregnancy will mean for the victim's future because such pregnancies change a teenager's life forever and mostly negative in a negative way. Tsebe (2010) also documents that becoming a parent is a leading cause of dropping out of school among girls in South Africa and as posited by Runhare and Vandeyar (2012), teenagers who become pregnant are more likely to drop out of school and become pregnant again. Malahlela (2012) goes on to postulate that teenage pregnancy affects the emotional behaviour of the teenagers and economic deprivation, sex inequalities and mobility, including social disruption, are all important outcomes of teenage pregnancy that victims are constantly forced to endure. However, studies by Tsebe (2010), Runhare and Vandeyar (2012) and Malahlela (2012) only highlights effects of teenage pregnancies on education and emotional strength of a child but not how counselling types are effective in managing the pregnancies. Therefore, it would be important to assess the effectiveness of counselling types in management of teenage pregnancies in secondary schools. A study by Odimegwu, Amoo and De Wet (2018) in all nine South African provinces also reveals that as many as 80% of teenage pregnancy victims end up living in poverty and children born to them have more health and school problems and are at a greater risk of falling victim to abuse and neglect. Societal factors that facilitate the spread of HIV and STI are also well documented amongst teenage pregnancy victims in the Republic of South Africa (Yakubu, and Salisu, 2018).

Kenya has a population of slightly over 40 million (Benyawa, 2013). Out of which, 42% are under 14 years, 55.2% is between 15 and 64 years while 2.6% are over 65 years old. These statistics clearly show that the percentage of the population under the age of fourteen is undeniably large. According to the United Nations Population Fund (2019) nearly 378,400 adolescent girls in Kenya aged between 10 and 19 years became pregnant between July 2016 and June 2017. A total of 28,932 girls aged between 10 and 14 years were impregnated, while 349,465 girls were between 15 to 19 years. Another study by United Nations Educational, Scientific and Cultural Organization (2021) indicates an upward trend in cases of teenage pregnancy in Kenya as shown in Table 1.

**Table 1** 2015 to 2020 Trends in Teenage Pregnancy in Ages 15 to 19 in Kenya

Age	2015	2016	2017	2018	2019	2020
15	1.0	1.7	3.4	2.4	2.6	5.0
16	8.2	4.3	3.1	5.3	6.0	18.6
17	13.0	14.1	10.5	12.0	19.1	21.4
18	21.6	26.2	27.7	30.4	33.2	44.7
19	30.0	39.5	39.5	39.4	38.1	48.6
<b>National % Av.</b>	<b>14.8</b>	<b>17.2</b>	<b>16.8</b>	<b>17.9</b>	<b>19.8</b>	<b>27.7</b>

*Source: UNESCO (2021)*

Table 1 shows trends of teenage pregnancy with respect to age from 15 to 19, from 2015 to 2020. The trends are illustrated in terms of percentages of teenage mothers. The table shows that the national average of teenage pregnancies increased from 14.8% in 2015 to 17.9% in 2020. In 2020, the percentage of teenage pregnancy shot up significantly due to Covid-19 pandemic that forced all the learners to be out of school at its onset. For instance, in Siaya County in which Ugenya Sub-County is part of, almost 5,000 girls below the age of 18 years fell pregnant in a span of 3 months, compared to 2100 the previous year (UNESCO, 2021).

A study by Taffa and Matthews (2011) shows that teenage pregnancy and subsequent dropouts is one of the most significant challenges to attaining the Education for All (EFA) goals and the achievement of education for girls in Kenya. As a result, these girls lose their already low opportunity of continuing their education and being gainfully employed when unable to return to school and eventually (N'Tonjira, 2016). The rampant dropout situation also causes financial and wastage when the country loses billions of shillings annually in financial, policy and man power investment (Mwangi, 2015). Teenage pregnancies have been linked to poverty (Moturi, 2018). Many studies have also found that girls in poverty engage in “transactional” sex to meet basic needs while other studies have blamed “absentee parents” or a lack of parental guidance for the spiralling teenage pregnancy situation in the country (UNAIDS, 2018). In another study by Achieng (2015), some people have taken advantage of the naivety and innocence of the girls to push them into risky sexual behaviour that puts them at the risk of getting pregnant. A study undertaken by KDHS (2019) found that Nyanza and

Coast have some of the highest numbers of teenage pregnancies in Kenya with an estimated 27% of teenage girls falling pregnant annually. That 90% of these are already in marriage clearly demonstrates that girls in the region are leaving school and being married at very tender ages due to teenage pregnancy. Table 2 is a representation of annual percentage of teenage pregnancies in Kenya.

**Table 1:** *Annual Percentage of Teen Pregnancies in Kenya*

Province	% of Teenage Pregnancies
Central	16.2
Coast	26.9
Eastern	17.1
Nairobi	10.5
North Eastern	9.8
Nyanza	27.1
Rift Valley	13.0
Western	20.5

***Adopted from KDHS, 2018***

From Table 2, the latest survey carried by (2019), Nyanza had the highest number of teenage pregnancies at 27.1% followed closely by coast at 26.9%. According to the County government of Siaya under the department of health, teenage pregnancy has increased from 17% (2014) to the current 35% in 2020, which was largely occasioned by the Covid-19 pandemic that forced learners to be out of schools for the better part of the year 2020. For instance, in Siaya County in which Ugenya Sub-County is part of, almost 5,000 girls below the age of 18 years fell pregnant, compared to 2100 the previous year (UNESCO, 2021). Similarly, a survey carried out byNCPD (2020) in Siaya County shows regional distribution of teen pregnancy across the Sub Counties.

**Table 2** *Percentage of Teen Pregnancies in Siaya County*

Sub County	Bondo	Gem	Rarieda	Alego	Ugenya	Ugunja
<b>% of Teenage Pregnancies</b>	4.48	4.32	4.45	4.11	4.90	4.50

*Adopted from NCPD, 2020*

Table 3 is a representation of trends in the percentage of teenage pregnancies in Siaya County with Ugunja and Ugenya Sub- Counties recording the highest cases of teenage pregnancies at 4.50 and 4.90% respectively. These statistics support findings by UNESCO (2021) revealing a high prevalence of teenage pregnancy in Ugenya Sub County and indicating that school going teenage girls were at risk of getting pregnant and dropping out of school early. The study cites teenage pregnancy, early marriage, low academic achievement, poverty and indiscipline as factors that caused dropout among boys and girls in secondary schools in Siaya County. Sadly, the study found that more girls dropped out of school than boys. A similar study was carried out by the Ugenya Sub County Education Office in 2021. The study reported incidences of teenage pregnancy across the 23 secondary schools in the Sub County, 1075 such cases having been reported between 2019 and 2020, which signifies an existence of relatively weak management strategies for dealing with teenage pregnancy among school going teenage girls in Ugenya Sub-County. It also implies that school going teenage girls in the Sub County are continuously at risk of getting pregnant and dropping out of school and might develop psychosocial problems due to their unpreparedness to handle the predicament of being a school going teenage mother.

**Table 3** *Trends in Number of Teen Pregnancies in Ugenya Sub County*

Year	2015	2016	2017	2018	2019	2020
<b>Number of teenage</b>	218	242	250	265	400	675

**Source: Ugenya Sub County Education Office, 2021**

Table 4 is a representation of trends in the prevalence of teenage pregnancies in Ugenya Sub County. It indicates that the number of teenage pregnancies has been slowly but steadily rising from 218 in 2015 to 675 in 2020. As for the government policy on readmission and retention of pregnant school girls to school, a study by Opondo, Raburu and Aloka (2017) on influence of age on adjustment of readmitted teenage mothers in secondary schools Kenya, the study found a significant influence of age on adjustment of pregnant girls who are

readmitted to school. The study reports that compared to older readmitted teen mothers, young teen mothers encountered far more difficulties in adjusting to school life on return to school, which reinforces the fact that despite various interventions being undertaken by teachers, parents, the government and other stakeholders to upsurge school enrolment and retention of learners in schools, teenage mothers in Ugenya Sub County were still experiencing stigma and other negative consequences of school readmission. The study recommended strengthening of guidance and counselling departments at the school level so as to offer quality services that may lead to more responsible behaviours. Following these recommendations, the researcher sought to study the effectiveness of counselling types on management of teenage pregnancy in secondary schools in the sub county.

## 2.0 LITERATURE REVIEW

Harper, Rocca, and Thompson, (2018) carried out a qualitative study of the relationship between alcohol consumption and risky sex in adolescents in East Sussex, England. The results found that young people consumed alcohol in peer group and alcohol consumption affected one's assessment of sexual attractiveness, was used as an excuse for socially unacceptable behavior and impaired judgment in recognizing and controlling potential risky situations. The study concluded that participants indulging in peer groups and alcohol consumption reported engagement in both risky and non-risky sexual. Harper, Rocca, and Thompson, (2018) reviewed study employed a qualitative survey design and not a Concurrent Triangulation Design. Thus, the reviewed study had a methodological gap given that it only used qualitative approach to explore the relationship between alcohol consumption and risky sex in adolescents in East Sussex, England. Besides, the study was based in England and not Kenya hence contextual gap. The present study added on the quantitative aspect to explore the effectiveness of peer counselling services in managing teenage pregnancies secondary schools in Ugenya sub county Kenya, thereby expanding and strengthening the conclusions drawn.

In another study, Gipalen, and Madrigal, (2021) assessed the Implementation and Challenges of Basic Guidance Services in Selected Philippine Diocesan Catholic Schools. The study applied a descriptive method using both quantitative-qualitative designs. Data for the study was analysed using simple mean and descriptions. Results revealed that students



have positive perceptions towards the guidance programme provided by peers at the University. They perceived that guidance staff has been of help to them especially in improving themselves. The study suggested some improvements for the guidance programmes offered by the University. The present study went further to study the effect of peer counselling specifically in the management of teenage pregnancy focusing on female high school learners who were more vulnerable to engaging in risky sexual behaviour given their experimental age.

In a separate research, Mghweno, Mghweno, and Baguma (2014) analyzed the impact of secondary school students' access to G&C services on school life, attitude toward academics, and career choices in Same District, Tanzania. Access to individualized G&C services has an influence on students' attitudes regarding their academics and job choices, according to the data. Mghweno, Mghweno and Baguma (2014) examined the impact of students' access to G&C services on school life and found that it influenced students' attitudes toward academics and job selection. This study contributes to the existing literature by concentrating on the efficacy of peer counseling programs in the treatment of adolescent pregnancies in Kenya. Chireshe (2013) wanted to determine the perceptions of school instructors on the status of peer counseling in secondary schools in Zimbabwe. The research employed a qualitative methodology. The results indicated that the majority of secondary schools from which the respondents came lacked peer counselors, although some cited peer counselors in the form of visiting peer educators from HIV and AIDS-related organizations or NGOs. However, Chireshe (2013) study relied solely on qualitative data for its conclusions, making its assessment of the status of peer counseling in secondary schools inadequate. To overcome these gaps, the present study employed both quantitative and qualitative data approaches to comprehensively examine the efficacy of peer counseling in managing adolescent pregnancies in secondary schools in the Ugunja Sub County of Kenya.

Atieno, Odongo, Mobegi, Aloka, and Ongoro (2016) conducted a research to determine the effect of training on the efficacy of peer counselors in addressing hazardous sexual behavior among students in public secondary schools in Kisii Central Sub-County. The results of the study demonstrated a correlation between peer counselor training and sexually hazardous behavior among adolescents in public secondary schools. The survey also

revealed that peer counselors thought they had the ability to affect the views of many learners on issues that expose them to unsafe sexual practices. The research advised that school administrators provide the necessary resources and training for peer counselors, particularly in the area of reproductive health. Atieno et al. (2016) focused on the role of peer counselor training on their efficacy in addressing hazardous sexual behaviors among students, rather than the efficacy of counseling program types in the treatment of teen pregnancies. The present study looked at the effectiveness of peer counselling in management of teen pregnancies in secondary schools. Bett and Maite (2017) also conducted a research to compare the perspectives of Headteachers and Teacher Counselors about the efficacy of peer counseling in Kenyan public secondary schools in the Sub-County of Molo. A descriptive survey design was utilized. The study found out that Headteachers and Teacher Counselors both viewed peer counseling as an effective avenue for managing student's behavior in schools.

In addition, Osodo, Mito, Raburu, and Aloka (2016) examined the effect of peer counseling in encouraging discipline among secondary school students in the Ugunja Sub-County of Kenya. The research employed a descriptive survey design using quantitative data collection methods. Using person correlation analysis of quantitative data, the study demonstrated that peer counseling has a substantial influence in encouraging discipline among secondary school students in public schools. However, the reviewed work by Osodo et al. (2016) relied solely on quantitative data analyzed using inferential statistics. Quantitative techniques and inferential statistics alone cannot provide a comprehensive analysis and coverage of the topic under investigation. The present study included both quantitative and qualitative methods, as well as descriptive and inferential statistics, to provide an in-depth investigation of the efficacy of peer counseling in managing adolescent pregnancies in secondary schools. Similar to the use of both descriptive and inferential statistics, concurrent triangulation enables quantitative and qualitative methods to complement one another and to account for each other's weaknesses.

### 3.0 METHODOLOGY

#### 3.1 Research design

The study adopted a concurrent triangulation design within the Mixed Methods Approach. This design fits the characteristics of the sample given the mixed nature of the target population in terms of characteristics of each category (school principals, teacher counsellors and peer counsellors) (Creswell, 2014). This paradigm often employs distinct quantitative and qualitative techniques to compensate for the inherent flaws of one method with the strengths of the other (or vice versa, the strength of one method enhances the strength of the other) (Creswell, 2018). The design also helps the researcher to take a shorter time to collect data thus a very short period of interruption of the school programs or none at all since the researcher organized with the Guidance and Counselling department to integrate the research into their programs. According to Tashakkori and Teddlie (2010), concurrent triangulation design helps in collecting, analysing and integrating quantitative and qualitative research. Moreover, only one data collection phase is used, during which quantitative and qualitative data collection and analysis are conducted separately yet concurrently. Equal priority is given to both types of research and Creswell (2014) further describes Concurrent Triangulation Design as an approach where data that is of qualitative (QUAL) and quantitative (QUAN) nature are concurrently collected, analysed and used to confirm, cross-validate, or corroborate findings within a study. The design is chosen for the present study because it helps in expanding quantitative data through collection of open-ended qualitative data and by mixing both quantitative and qualitative research and data, the researcher gains the depth and breadth of understanding and corroboration, while offsetting the weakness inherent in using each approach by itself.

#### 3.2 Target Population

The target population of the study was public mixed and girls' secondary schools, school principals, teacher counsellors and heads of guidance and counselling in these secondary schools and teenage female students in form 2 and 3. There are 30 secondary schools in Ugenya Sub County that are either girls' only or mixed spread across its 5 zones. This implies that the study also targeted 15 school Principals, 15 teacher Counsellors; specifically heads or acting heads of the G&C department and 3470 teenage girls in Form 2

and 3 in the 30 secondary schools in Ugenya Sub County. The form 2 and 3 were used in the study because they were deemed to have been taken through the G&C programme for a period that would enable them to make wise and firm decisions unlike the form 1 class that had just come in to school. Secondly, they are quite vulnerable because many of them are in mid teenage years. Therefore, they were less likely to engage in risky behaviour. According to Sim et al., (2018), the target population is the specific population about which data for a study is being sought. It is defined in terms of people, services, elements, events, group of things or households that are being investigated.

### 3.3 Sample size and Sampling Procedure

#### 3.3.1 Sampling of the Sample for Schools, Principals and Teacher Counsellors

The study employed census and purposive sampling technique to include all the 30 secondary schools, 30 Principals and 30 heads of the Guidance and Counselling department given that the number was small and if reduced any further would compromise the generalizability of the results This is justified by Etikan & Babtope (2019) who also explains that when the target population is small of 30 subjects or less, then the whole population can be involved in the study to their small number. Cresswell, (2014) highlights that, purposive sampling technique allows the researcher to use cases that have the required information with respect to the objectives of his or her study.

#### 3.3.2 Sampling of the Sample for Teenage Girls in Form 2 and 3

In order to obtain the sample size for the study, the researcher employed Kerlinger (1986) method of determining sample size to calculate a sample size of 347 respondents from the study population of 3470 teenage girls in Form 2 and 3 based on the following formula:

$$\frac{10}{100} \times N = n = \frac{10}{100} \times 3470 = 347$$

Where:  $N$  = Study Population; and  $n$  =Sample Size

This translates to a sample of 10% of the entire population of 3470 Teenage Girls in Form 3 and 4. Kerlinger (1986) also explains that 10% to 30% of the accessible population is deemed

fit in studies of this nature. Using simple random sampling technique, the study randomly selected 12 form two and three female students from every school, until the sample size was reached. Simple random sampling technique was conducted by marking yes and no on papers and then allowing the students to pick, only those that picked yes were allowed to participate in the study. Simple random sampling technique is preferred because it gives respondents equal chance of being selected.

### **3.3.3 Sampling of peer counsellors**

The study employed purposive and stratified random sampling techniques to identify peer counsellors for focus group discussions. The researchers purposed to identify schools that had not less than 10 peer counsellors as this would form the size of a Focus Group Discussion as indicated in (Bryman and Bell, 2015). The strata were of three categories. The first category was the 5 zones to ensure even distribution of the schools. The second was school categories so that the research would be representative of learners from all levels. Finally the both classes (form 2 and 3) were considered to ensure an even representation of the whole population. According to Bhardwaj (2019), stratified sampling guarantees good representation of the study population.

### **3.3.4 Distribution of Target Population and Sample Size of the Respondents**

The distribution of respondents on the sampling frame is represented on Table 5 The table also shows the distribution of sampling sizes and sampling techniques used for sampling schools, Teacher Counsellors, School Principals, Teenage Girls in Form 2 and 3 and Peer Counsellors

**Table 5** *Distribution of the Respondents on the Sampling Frame*

Target Group	Population	Sampling Technique	Sample Size	%
Schools	30	Census	30	100
Teacher Counsellors	30	Purposive and Saturation	30	100
School Principals	30	Purposive and Saturation	30	100
Teenage Girls in Form 2 and 3	3470	Kerlinger (1986) formula	347	10
Peer Counsellors	504	Purposive and stratified random sampling	50	10

Source: Researcher (2022)

### 3.4 Research Instruments

In the present study, the researcher utilized a self-administered questionnaire, two sets of interview schedules, and a Focus Group Discussion to collect the opinions of adolescent girls in Forms 2 and 3, Teachers Counselors, School Principals, and peer counselors. According to Liamputtong, (2019), research tools are employed to gather data in a quick and efficient manner. Cohen, Manion, & Morrison (2007) say that these instruments are also perfect for assessing information on respondents' emotions, motives, attitudes, achievements, and experiences, and are inexpensive in terms of time, money, and effort.

#### 3.4.1 Questionnaire for Teenage Girls in Form 2 and 3

Questionnaire for Teenage Girls in Form 2 and 3 sought teenager's opinion on how effective the counselling types are in managing teenage pregnancy in their school. The self-administered questionnaire for teenage girls in Form 2 and 3 was structured in a 5-point Likert scale, in which 347 questionnaires were distributed to the respondents having explained to them the intention of the study, sought their consent after having them filled the consent form, and also factoring in the ethical considerations such as confidentiality of their information, anonymous filling of the questionnaires and the right to withdraw from participating at any given time.

### 3.4.2 Interview Schedule for School Principals

The researcher used Interview Schedule guide questions to have an interview session with the 15 school principals for qualitative data. This was in line with Weller et al., (2019) who recommended 20 respondents maximum for interview session. They were given the opportunity to determine the time and place convenient to them to respond to the questions. The interviewee was taken through the objectives and significance of study. The researcher then sought consent to participate in the session assuring the respondent of confidentiality. The interview took approximately 40 minutes. The Schedule consisted of 3 sections. Section 1 and 2 were introductory seeking a general view of Guidance and Counselling programs and the management of pregnancy in the school while section 3, sought the respondent's views on the most effective counselling types in managing teenage pregnancy in secondary schools.

### 3.4.3 Interview Schedule for Teacher Counsellors

The researcher used a structured Interview Schedule for 15 Teacher Counsellors. This was in line with Weller et al., (2019) who recommended 20 respondents maximum for interview session. The heads of department of teachers in charge of guidance and counselling in the sampled schools were interviewed. They determined the time and place convenient to them to respond to the questions. The interviewee was taken through the objective and significance of study after which the researcher sought consent to participate in the session assuring the respondent of confidentiality of information, withholding their identity and giving them right to withdraw from the session. The sessions lasted for approximately 45 – 60 minutes. The Interview Schedule consisted of six questions, which were basically soliciting for the same information from the respondents. Section 1 and 2 were introductory; seeking a general view of Guidance and Counselling programs and the management of pregnancy in the school. Section 2, sought an explanation of how the department handles guidance and counselling programs and teenage pregnancy. Section 3 required the respondents to state their views on the effectiveness of G&C programs in the school. In section 4, respondents were asked to give their opinion on which of the methods they use is the most effective in dealing with teenage pregnancy. Section 5 sought to know which class usually experiences the highest number of pregnancy and a possible explanation for the same.

Section 6 sought the respondent's recommendations on how best to manage teenage pregnancy in secondary schools.

### 3.4.5 Focus Group Discussions for Peer Counselors

Focus Group is a type of in-depth interview accomplished in a group, whose meetings present characteristics defined with respect to the proposal, size, composition, and interview procedures. The focus or object of analysis is the interaction inside the group (Lokanath, 2016). A Focus Group Discussion is a form of group interviewing in which a small group usually 5 to 12 people is led by a moderator (interviewer) in a loosely structured discussion of various topics of interest (Bryman and Bell, 2015). The course of the discussion was planned in advance and researcher herself moderated each group to ensure that all topics of interest were covered. A total of 5 FGDs were conducted, one in each of the selected locations. Each FGD was facilitated by the researcher, lasted for one hour, and had between eight and twelve discussants, based on Liamputtong, (2019) who proposed that on average, 10 (ten) participants who belong to a pre-existing informal or formal group of respondents with similar characteristics. All FGDs were conducted in a conducive environment, whereby discussants were encouraged to participate freely without fear. The researcher reassured all participants of their anonymity and confidentiality, and moderated the discussions to ensure that each participant got an opportunity to contribute. The researcher recorded the proceedings at each FGD with consent of the study participants.

Focus Group Discussions can lead to a wealth of detailed information and deep insights. Therefore it will be important to select participants that will provide the richest information leading to high quality data in a social context that will aid in understanding further the problem at hand from the view point of the study participants (Belotto, 2018). One of the most reliable ways is to interview people who will be affected by the decision. It is because they have an interest in the question (Bryman and Bell, 2015). In present study, the participants were drawn from the body of Peer Counselors in the schools. There were 5 Focus Group Discussions (FGDs), one in each zone within the Sub-County. Each FGD had 10 students and each session lasted for one hour. All the participants of the FGD were assured of confidentiality of information and anonymous participation and reporting.



### 3.5 Data Analysis Procedures

#### 3.5.1 Quantitative Data Analysis

In this study, quantitative data collected using the questionnaires was analysed by both descriptive and inferential statistics. Participant characteristics were presented by use of frequencies and percentages for categorical variables. Variables would be considered statistically significant if  $p\text{-value} \leq 0.05$ . Descriptive statistics such as percentages and frequencies were used to analyse data. Inferential statistics such as Pearson correlation was also used to analyse to look at the correlation between counselling and the outcome of pregnancy management where the  $r$  value was used to determine the correlation. Data analysis was done using SPSS Version 23.

#### 3.5.2 Qualitative Data Analysis

Using thematic framework, qualitative data analysis was conducted (Neville & Whitehead, 2020). Thematic analysis is described as the ways of detecting, analyzing, and reporting patterns or themes within data and interpreting various elements of a study issue. This involves reading and re-reading the entire set of data to look for patterns of meanings and issues of potential interest before, during or even after analysis

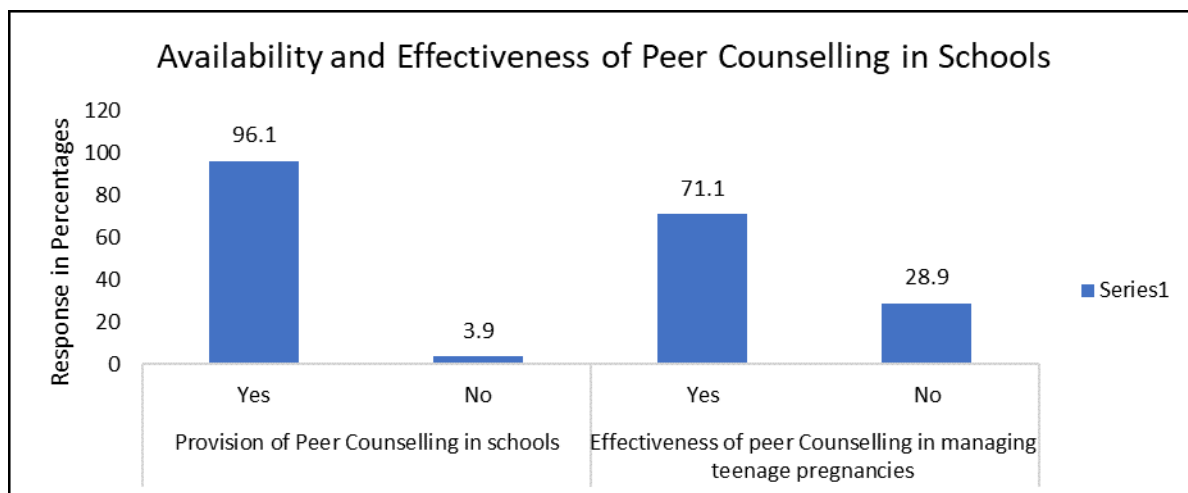
## 4.0 RESULT FINDINGS

### 4.1 Effectiveness of Peer Counselling and management of teenage pregnancy

Peer counselling is a helping process that involves one-on-one interaction or interaction between an appointed student leader or peer counsellor and a fellow student. The aim is to exchange ideas and explore thoughts, feelings, issues and concerns, with the hope of reaching a clear understanding and make informed decisions. The study sought to determine the effectiveness of peer counselling in management of teenage pregnancy in secondary schools. Peer counselling and its effectiveness in managing teenage pregnancy were assessed using a five-point Likert. The quantitative data illustrated frequency occurrence of every response and also percentages.

#### 4.1.2 Availability and Effectiveness of Peer Counselling in Schools

Respondents were probed to indicate whether peer counselling take place in their schools and whether the program was effective in preventing teenage pregnancies in schools. Figure 1 shows the response



**Figure 1** Availability and Effectiveness of peer counselling in schools

The study established that majority of the respondents at 96% confirmed that peer counselling programs were provided in their schools, while only 4% indicated otherwise. On effectiveness, the study found that majority of the respondents at 71.1% indicated that peer counselling in secondary schools were helpful and effective in controlling teenage pregnancies among the female students in school.

Peer counselling in schools and its effectiveness in management of teenage pregnancies was also evaluated basing on a 7- item five level scale. Thus, the emerging data was summarized and aggregated in terms of response frequency and corresponding percentage with reference to each item. Respondents (female students) were asked to tick the ones that applied to them using SA for Strongly Agree, A for Agree, N Neutral, D for Disagree and SD for Strongly Disagree. Table 6 shows the response

**Table 6** *Peer Counseling and Teenage pregnancy management*

Statement	SA	A	N	D	SD
Peer counselling has helped me feel attractive	187 (56.3%)	96 (28.9%)	29 (8.7%)	11 (3.3%)	9 (2.7%)
Peer counselling has helped me to attain confidence in my studies	169 (50.9%)	107 (32.2%)	41 (12.3%)	8 (2.4%)	7 (2.1%)
Peer counselling has helped do better in the class	213 (64.2%)	89 (26.8%)	25 (7.5%)	2 (0.6%)	3 (0.9%)
Peer counselling has helped me to be happy	182 (54.8%)	93 (28.0%)	43 (13.0%)	9 (2.7%)	5 (1.5%)
Peer counselling has helped me to solve difficult problems as an adolescent girl	186 (56.0%)	84 (25.3%)	51 (15.4%)	7 (2.1%)	4 (1.2%)
Peer counselling has helped me get means and ways of getting what I want	191 (57.5%)	91 (27.4%)	40 (12.0%)	6 (1.8%)	4 (1.2%)
Peer counselling has enabled me stick to my aims and accomplish my goals	184 (55.4%)	88 (26.5%)	54 (16.3%)	4 (1.2%)	2 (0.6%)
Peer counselling has made me confident to deal efficiently with an expected event such as boyfriend dynamics	191 (57.5%)	97 (29.2%)	36 (10.8%)	5 (1.5%)	3 (0.9%)

On whether peer counselling has helped the female students in feeling attractive, 56.3% of the students strongly agreed, 28.9% agreed, 8.7% remained neutral or were undecided, 3.3% disagreed, while 2.7% strongly disagreed. This translated to a majority at 85.2% of the respondents supporting the statement while only 6.0% refuting it. This implies that peer counselling in secondary schools has helped most of the female students feel attractive and boost their self-esteem.

The study also found that 50.9% of the students strongly agreed with the statement that peer counselling has helped female students in secondary schools attain confidence in their studies, 32.2% agreed, 12.3% remained neutral, 2.4% disagreed while 2.1% strongly disagreed. Generally, most of the respondents at 83.1% supported the statement, while only 2.5% indicated otherwise. This shows that peer counselling in secondary schools has helped in boosting self-confidence for good academic performance, given that it help in the students

in social uprightness, dealing with their daily life challenges, academic work and other social issues. This finding agrees with Piquero, Gover, MacDonald and Piquero (2005) which reported that delinquent peer association is an important predictor of delinquency generally, although its effect varies across gender. Similarly, Balot, Garcia and Ancheta (2016) revealed that students have positive perceptions towards the guidance programme provided by peers at the University. They perceived that guidance staff has been of help to them especially in improving themselves.

## 4.2 Thematic Analysis of Qualitative Data

Qualitative data was obtained using interview schedule for Principals, Teacher Counsellors and Focus Group Discussions for peer counsellors. On the effectiveness of peer counselling in management of teenage pregnancy, the findings revealed that, there are themes which emerged on peer counselling effectiveness including lateral social comparison, increased self-confidence and role models

### 4.2.1 Lateral Social Comparison

Peer counselling enabled lateral social comparison among the female students as they were able to share their views and knowledge on how to avoid teenage pregnancies (Gilbride, Goodrich & Luke 2021). Hence in lateral social comparison, students would tend to compare themselves most often with their peers. Some participants indicated that they shared their experiences with other students of similar ages and classes and were able to utilize their ideas that they obtained. Some interview results from participants are presented as follows:

*“the girls share from peer counsellors and they trust them because they view them as age mates and this makes information sharing to very easy among our students. This has helped us to manage teenage pregnancies very well in our school”* (Principal, 1)

These statements by the school principals were also echoed by the teacher counsellors when one of them said that;

*“it’s easy for girls to obtain information from fellow girls who are peer counsellors. They are likely to share very close information that helps*

*them to avoid teenage pregnancy. Most girls trust peer counsellors since they compare their views on how to avoid teenage pregnancy” (TC, 2).*

Similarly, during the Focus Group Discussion, one of the peer counsellor had this to say;

*“when students consult peer counsellors who are their fellow students, it’s easy to tell them anything because we don’t fear. This has helped many girls to avoid teenage pregnancy because we get very adequate information which helps us to take care of ourselves very well” (PC, 2)*

From the interview excerpts, the study concluded that peer counsellors enhanced lateral social comparison which made it easy for the female students to share information with the peer counsellors and hence it reduced the incidences of teenage pregnancy. The lateral social comparison enhanced the effective management of teenage pregnancy among the female students due to peer counselling programs. Similarly, in a study conducted by Atieno, et al., (2016), in Kisii County, Kenya, concluded that peers exerted great influence on the adolescent through exposure to pornographic films and magazines, romantic novels and discussion of sexual issues as they grew older.

On whether peer counselling has helped female students do better in the class, majority of the student at 64.2% strongly agreed with the statement, 26.8% agreed, 7.5% were undecided, 0.6% disagreed, while 0.9% strongly disagreed. Overall, majority of the respondents at 91.0% supported the statement, while only 1.5% disagreed with it. This shows that peer counselling in school helped in promoting academic performance in schools. The study also found that 54.8% of the respondents strongly agreed with the statement that peer counselling has helped students to be happy in schools, 28.0% agreed, 13.0% were neutral, 2.7% disagreed while 1.5% strongly disagreed. This translates to majority of the respondents at 82.8% agreeing with the statement, while only 4.2% refuting it, which indicates that offering peer counselling in secondary school also help in promoting cheerful behaviour among the students. Similarly, a study by Nyaga, (2018) conducted among the Kenyan private and public universities concluded that peer group pressure was the major contributing factor in the problem of drug abuse since the drug abusers longed to be accepted by their peers. Another theme which

emerged from the qualitative findings on the effectiveness of peer counselling is increased self-confidence.

#### 4.2.2 Increased Self-Confidence

The findings also reported that peer counselling led to increased self confidence among the girls and this enhanced the management of teenage pregnancy. The girls received confidence from seeking therapy from peer counsellors who were students like themselves. The increased confidence influenced many girls to manage teen pregnancies and factors which would lead to pregnancies very adequately. Some respondents reported increased confidence from the peer counselling services and it was reported that:

*“most of our girls have increased self-confidence in themselves because they have been counselled by peer counsellors in school. Most girls are free with peer counsellors as compared to other counselling techniques or forms that we have. This has had positive impact on how our girls manage sex related matters within and without school”* (Principal, 10).

The above statements by the school principal was also supported by one of the teacher counsellors when she said that;

*“With our peer counsellors, our girls have gained lots of self-confidence in themselves in their capability of handling teenage pregnancies. Most girls trust their fellows and its very easy for them to share with other girls who are experts and have undergone training on counselling”* (Teacher Counsellor, 12)

Similarly, one of the peer counsellors had this to say;

*“in most cases, peer counsellors are consulted on matters related to sex and this leads to gains in lots of information from them. Am very confident now, I know I cannot be pregnant and I can advise other girls who are sexually active on how to handle themselves as well to be safe and finish their education”* (Peer Counsellor 6, FGD, 1)

From the interview results above, it can be concluded that peer counselling enhanced confidence among girls and this led to effective management of teenage pregnancies in schools. From the results, it is evident that most girls have trust on fellow students with whom they can share close guarded information on sex related matters affecting their lives within and outside school life. This finding agrees with Mghweno, Mghweno and Baguma (2014) study that was conducted in Kampala Uganda, which revealed that accessing individualised G&C services had an effect in shaping students' attitude towards studies and career choice.

The study also found that 56.0% of the students agreed with the statement that peer counselling has helped them in solving difficult problems as an adolescent girl, 25.3% agreed, 15.4% were undecided in this statement, 2.1% disagreed while 1.2% strongly disagreed. Generally, majority of the respondents at 81.3% agreed with the statement, while only 3.3% disagreed. This implies that peer counselling in secondary schools helps adolescents in managing their social and emotional challenges. On whether peer counselling has helped female students get means and ways of getting what they wanted, 57.5% strongly supported the statement, 27.4% agreed, 12.0% remained undecided, 1.8% disagreed, while 1.2% strongly disagreed. This shows that majority of the respondents at 84.9% supported the statement, while only 3.0% indicated otherwise. This implies that offering peer counselling in schools help the students access means and ways of getting whatever they wanted. The study found that 55.4% strongly agreed with the statement that peer counselling has enabled the students stick to their aims and accomplish their goals, 26.5% agreed with the statement, 16.3% remained neutral, and 1.2% disagreed while 0.6% strongly disagreed with the statement. In general, majority of the respondents at 81.9% supported the statement while 1.8% disagreed with the statement. This shows that peer counselling in schools helps the students accomplish both their academic and social goals. This finding corroborates the findings of Filade et al., (2019) in their study on Peer Group Influence on Academic Performance of Undergraduate Students in Babcock University of Nigeria, where they also found that peer counseling had a positive and significant contribution on the student's academic life. Another theme which emerged from the qualitative findings on the effectiveness of peer counselling is role models.

### 4.2.3 Role Models

The findings also indicated that another theme which emerged from peer counsellors was the role models in school. It was reported that there were role model peer counsellors who provided support to other girls sharing their own live experience on how they handled teen pregnancies and other sex related matters. Some respondents reported that some peer counsellors acted as role models to the girls on ways in which they handled themselves. Some interview excerpts regarding the role models were shared as:

*“we have peer counsellors who are like role models because some had been teen mothers and returned to school and now they are doing very well. We decided to appoint such girls as peer counsellors because they would be a source of encouragement to other girls who are facing similar issues”* (Principal, 7)

These statements have also been voiced by Teacher counsellor when he said that;

*“having role models among peer counsellors has really helped our girls in school. We have several cases of girls who were pregnant and became teen mothers but later they returned to school and they provide education to other girls on how to take care of themselves so that they avoid pregnancies. This has helped our school so much”* (Teacher counsellor, 12).

These statements have also been corroborated by one of the peer counsellors during the Focus Group Discussion when she said;

*“we have role models among peer counsellors who are living examples to girls within school. There are peer counsellors who have had lots of challenges but have remained steadfast in their academic work and social lives and have made it to the universities”* (Peer Counsellor, 9, FGD, 3)

From the interview results, it can be concluded that peer counsellors acted as role models to other girls in school and this has enabled girls to manage teen pregnancy related issues. The role models are providing living examples to other girls on how to manage their sex lives and



this has proved to be very fruitful in schools. In agreement, Atieno, Odongo, Mobegi, Aloka and Ongoro (2016) also found out that peer counsellors believed that they could influence many students to change their attitudes on issues that expose them to risky sexual activities.

On whether peer counselling has made female students confident to deal efficiently with an expected event such as boyfriend dynamics, 57.5% strongly agreed with the statement, 29.2% agreed with the statement, 10.8% were neutral, 1.5% disagreed while 0.9% strongly disagreed. Overall, majority of the respondents at 86.7% supported the statement, while only 2.4% indicated otherwise. This shows that peer counselling increase self confidence among the female students to manage efficiently with an expected event such as boyfriend dynamics. This finding agrees with that of Mboya, Gori & Kimani (2017) when studying effect of Peer Counseling On Self Esteem of Learners with Behavioural and Emotional Difficulties in Primary Schools in Nakuru-Sub County, and similarly found that to a large extent peer counseling offered in many primary schools in Nakuru Sub County promoted self-esteem of learners with emotional and behavioral difficulties thus enhancing their self-esteem and self-confidence.

#### **4.3. Pearson Correlation Analysis of Peer Counselling and Management of Teenage Pregnancy**

To determine the effectiveness of peer counselling in management of teenage pregnancy in secondary schools, a Pearson Correlation test was carried out for the two variables. Since data for peer counselling and teenage pregnancy among female students were assessed through Likert level for each item, it was meaningful to convert the data into continuous data to allow for the performance of correlation analysis. Therefore, sum of scores for every respondent was drawn from the two scales. The Pearson correlation test was done at 0.05 significance. Table 15 shows the results

**Table 7** Correlation output for peer counselling and management of teenage pregnancy

		Peer Counselling	Management of Teenage pregnancy
<b>Peer Counselling</b>	Pearson Correlation	1	.675**
	Sig.		.00
	<i>n</i>	332	332
<b>Management of teenage pregnancy</b>	Pearson Correlation	.675**	1
	Sig.	.00	
	<i>n</i>	332	332

\*\* . Correlation significant at the 0.05 level (2-tailed).

Table 7 depicts a strong positively correlation ( $r = .675$ ) between peer counselling and the management of teenage pregnancy at  $p < 0.05$ . This implies that statistically the more peer counselling programs are implemented in school, the more likely effective management of teenage pregnancies among the individual female students would be, given that they would less likely engage in sexual activities that result into teenage pregnancies. This finding agrees with Osodo, Mito, Raburu and Aloka (2016) study which reported that peer counselling has a significant role in promoting discipline among students in public secondary schools. On the contrary, Sigilai and Bett (2013) found that Headteachers and Teacher Counselors negatively perceived the effectiveness of peer counselling among their learners.

## 5.0 Conclusion

On the effectiveness of peer counselling in management of teenage pregnancy in secondary schools, it can be concluded that the more peer counselling programs are implemented in school, the more likely effective management of teenage pregnancies among the individual female students would be, given that they would less likely engage in sexual activities that result into teenage pregnancies. Moreover, peer counsellors enhanced lateral social comparison which made it easy for the female students to share information with the peer counsellors and hence it reduced the incidences of teenage pregnancy. The lateral social comparison enhanced the effective management of teenage pregnancy among the female students due to peer counselling programmes. In addition, peer counselling enhanced confidence among girls and this led to effective management of teenage pregnancies in

schools. It can be concluded that peer counsellors acted as role models to other girls in school and this has enabled girls to manage teen pregnancy related issues. The role models are providing living examples to other girls on how to manage their sex lives and this has proved to be very fruitful in schools.

## 6.0 Recommendations

The Ministry of Education should emphasize more diverse training of teachers on varied therapies for them to be effective in schools. This is because as indicated, not one therapy mode would handle students' issues appropriately. The school principals should train more peer counsellors to assist in therapy programmes in their respective secondary schools. This is because the study reported that students preferred to seek counselling services from the peer counsellors.

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## REFERENCES

- Achieng, E.B. (2015). Factors contributing to high prevalence of teenage pregnancy in Rachuonyo district, Kenya. *Journal of Health and Social Behaviour*. Vol 50, 301-326.
- Albert D, Chein J., & Steinberg L. (2018). Peer influences on Adolescent Decision Making. *Current Directory psychological Science* (2); 114 – 120
- Atieno, B.K., Odongo, B.C., Mobegi C.O., Aloka, P.J. and Ongoro, B.N. (2016). The Influence of Peer Counsellors Training on Their Effectiveness in Addressing Risky Sexual Behaviours Among Students in Public Secondary Schools in Kisii Central Sub County. *International Journal of Arts and Commerce*. Vol. 5 No. 5 (2016).
- Belotto, M. J. (2018). Data analysis methods for qualitative research: Managing the challenges of coding, interrater reliability, and thematic analysis. *Qualitative Report*, 23(11).
- Benyawa, L. (2013). Survey: Nyanza ahead in Teenage Pregnancies. Standard Digital. Nairobi: Standard Media Group. Available on the Internet at: <http://www.standardmedia.co.ke/?articleID=2000089296> on 19/11/13.
- Bester, G. (2014). Irrational beliefs of adolescents who experience group pressure. *Tydskrif vir Geesteswetenskappe*. 54. 304-323.

- Bett, J.C. and Maite, R. (2017). Difference in Perceptions between Head Teachers and Teacher Counsellors of the Effectiveness of Peer Counselling Among Students in Public Secondary Schools in Molo Sub-County, Kenya. *International Journal of Humanities and Social Science* Vol. 3 No. 10 [Special Issue – May 2013] 137
- Bhardwaj, P. (2019). Types of sampling in research. *Journal of the Practice of Cardiovascular Sciences*, 5(3), 157.
- Birungi, H. (2017). HIV/AIDS Programming and Sexuality of Young People Perinatally Infected with HIV. Nairobi: Population Council.
- Bryman, A., and Bell, E., (2015) *Business research Methods* Oxford: Oxford University Press
- Cohen, L., Manion, L. and Morrison, K. (2007). *Research Methods in Education*. (6th Ed). London: Routledge.
- Creswell, J.W. (2014). *Qualitative, quantitative and mixed methods approaches*. (2nd ed). Thousand Oaks, CA: Sage Publications.
- Creswell, J.W. (2018). *Mixed Research Methods Approaches*. (3rd ed). Thousand Oaks, CA: Sage Publications.
- Etikan, I., & Babetope, O. (2019). A basic approach in sampling methodology and sample size calculation. *Med Life Clin*, 1(2), 1006.
- Filade, B. A., Bello, A. A., Uwaoma, C. O., Anwanane, B. B., & Nwangburka, K. (2019). Peer Group Influence on Academic Performance of Undergraduate Students in Babcock University, Ogun State. *African Educational Research Journal*, 7(2), 81-87.
- Gilbride, D., Goodrich, K., & Luke, M. (2021). The professional peer membership of school counselors and the resources used within their decision-making.
- Gipalen, G. E., & Madrigal, D. V. (2021). Assessment of the Implementation and Challenges of Basic Guidance Services in Selected Philippine Diocesan Catholic Schools. In *Annual SEAAIR Conference Proceedings* (p. 216).
- Harper, C.C, Rocca, CH, and Thompson, K.M (2018). Qualitative study of the relationship between alcohol consumption and risky sex in adolescents in East Sussex, England, *J Adolesc Health*. ; 54(2):169-175.
- Hossain, S., & Faisal, R. A. (2018). Guidance and counselling services in schools of developing countries: An exploratory study. *International Journal of Science and Research (IJSR)*, 2 (10), 132-138.
- KDHS (2019). *Kenya Health and Demographic Survey 2014*. Nairobi: Kenya Demographic and Health Survey.
- Kerlinger, F.N. (1986) *Foundations of Behavioral Research*. Orlando: Holt, Rinehart and Winston publishers.
- Kilonzo, G. (2017). *Guidance and Counselling in Kenya*, Seminar Paper No. 2046. Nairobi: Kenyatta University
- Kost K, Henshaw S, Carlin L. (2017). *US Teenage Pregnancies, Births and Abortions: National and State Trends and Trends by Race and Ethnicity, 2010*. New York: Guttmacher Institute.
- Kothari C, R (2008). *Research Methodology and Techniques*, 2nd edition, New Delhi, New Age International (P) Ltd Publisher.
- Liamputtong, P. (Ed.). (2019). *Handbook of research methods in health social sciences*. Singapore:: Springer.

- Lokanath Mishra (2016). Focus Group Discussion in Qualitative Research. *Techno LEARN* Vol. 6: No. 1: p. 1-5.
- Malahlela, M.K. (2012). The effect of teenage pregnancy on the behaviour of learners at secondary schools in the Mankweng Area, Limpopo. Unpublished MEd Dissertation. Pretoria: UNISA.
- Mboya E.O, Gori, J., Kimani, M. (2017). Effect of Peer Counseling On Self Esteem of Learners with Behavioural and Emotional Difficulties in Primary Schools in Nakuru-Sub County
- Mghweno, E, Mghweno, L & Baguma, P. (2014). Access to guidance and counseling services and its influence on Students' school life and career choice among students in Kampala Uganda. *African Journal of Guidance and Counselling*. 1. 2142-6785.
- Mghweno, P.E., Mghweno, L.R. and Baguma, P. (2014). Access to guidance and counselling services and its influence on Students' school life and career choice. *African Journal of Guidance and Counselling*, Vol. 1 (1), pp. 007-015, March, 2014.
- Moturi, M.F. (2018). Determinants of Teenage Pregnancies in Narok County. Unpublished MSc. Research Project University of Nairobi, Kenya.
- Mwangi, T.M. (2015). Determinants of Wastage in Public Primary Schools in Starehe District, Nairobi County, Kenya. Unpublished Master of Education Thesis, Kenyatta University, Kenya.
- N'tonjira, M. (2016). The Factors Influencing High Drop Out Rates in Kenyan Secondary Schools: A Case Study of Secondary Schools in Igembe North, Meru County. Unpublished PGDE Thesis, University of Nairobi.
- National Campaign to Prevent Teen and Unplanned Pregnancy (NCPTP) (2020). Fast facts: Teen pregnancy in the United States. Washington, DC: NCPTP.
- Neville, S., & Whitehead, D. (2020). Analysing data in qualitative research. *Nursing and Midwifery Research Methods for Appraisal for Evidence-based Practice 6th ed. Chatswood: Elsevier*, 136-155.
- Nichols, S., Javdani, S., Rodriguez, E., Emerson, E., & Donenberg, G. (2016). Sibling teenage pregnancy and clinic-referred girls' condom use: The protective role of maternal monitoring. *Journal of Child and Family Studies*, 25(4), 1178–1187.
- Nyaga, V.K. (2018). Effectiveness of Guidance and Counselling Services on University students' development of academic, social and personal competences: A comparative study of public and private Universities in Kenya, Unpublished PhD Thesis, Chuka University College.
- Odimegwu, C.O., Amoo, E.O. and De Wet (2018). Teenage pregnancy in South Africa: Where are the young men involved? *South African Journal of Child Health*, [Special Issue], p. 44-50, Sep. 2018.
- Opondo, C.M., Raburu, P.A. & Aloka, P.J.O. (2017). Influence of Age on Adjustment of Readmitted Teenage Mothers in Secondary Schools Kenya: A Case Study of Ugenya Sub County. *International Journal of Current Research* Vol. 9, Issue, 11, pp. 60812-60818.
- Osodo, J.M., Osodo, J., Mito, J.W. Raburu, P. & Aloka, P.J.O. (2016). The Role of Peer Counselors in the Promotion of Student Discipline in Ugunja Sub-County, Kenya. *Asian Journal of Education and Training*, 2(2): 63-69.

- Ralph, L. J., Foster, D. G., Barar, R., & Rocca, C. H. (2020). Home pregnancy test use and timing of pregnancy confirmation among people seeking health care. *Contraception*, 107, 10-16.
- Runhare, T and Vandeyar, S. (2012). Perceptions of policy duty bearers on the inclusive education policy for pregnant teenagers in South Africa. *Journal of Social Sciences*, 31 (1): 51-62.
- Shoffner, M. & Williamson, R. (2018). Engaging school counselors and Principals in dialogue and collaboration. *Counselor Education and Supervision*, 40, 128-140
- Sigilai, R.M., & Bett, J.C. (2013). Effectiveness of head teachers' leadership styles on the management of public primary school curriculum implementations in Bomet County, Kenya. *Journal of Emerging Trends in Educational Research and Policy Studies*, 4, 375-382.
- Sim, J., Saunders, B., Waterfield, J., & Kingstone, T. (2018). Can sample size in qualitative research be determined a priori?. *International Journal of Social Research Methodology*, 21(5), 619-634.
- Taffa, N., & Matthews, Z. (2011). Teenage pregnancy experiences in rural Kenya. *International Journal of Adolescent Medicine and Health*, 15(4), pp. 331-340.
- Tashakkori, A. and Teddlie, C. (Eds.) (2010) *Handbook of Mixed Methods in Social and Behavioral Research*. (2nd Edn). Thousand Oaks, CA: Sage.
- Tsebe, N.L. 2010. Factors contributing to teenage pregnancy as reported by learners at Mpolokong high school in the North-West province. Unpublished MPH dissertation. Medunsa: University of Limpopo.
- UNAIDS (2018). *Transactional sex and HIV risk: from analysis to action*. Geneva: Joint United Nations Programme on HIV/AIDS and STRIVE; 2018.
- UNESCO (2021). *Situation Analysis of teenage pregnancy in Kenya 2015-2020 Our Children, our Future*. UNESCO, Kenya
- UNICEF (2019). *Situation Analysis of Children and Adolescents in Kenya 2019 Our Children, our Future*. UNICEF Kenya.
- Weller, S. C., Vickers, B., Bernard, H. R., Blackburn, A. M., Borgatti, S., Gravlee, C. C., & Johnson, J. C. (2018). Open-ended interview questions and saturation. *PloS one*, 13(6), e0198606.
- WHO (2020). *World Health Statistics 2015-2019*. Paris: World Health Organization.
- Yakubu, I., and Salisu, W. J. (2018). Determinants of adolescent pregnancy in sub-Saharan Africa: a systematic review. *Reproductive health*, 15(1), 1-11