

POST- NATAL DAILY LIVING EXPERIENCES OF UNMARRIED TEENAGE MOTHERS: A PHENOMENOLOGICAL STUDY IN ENYAN DENKYIRA, GHANA

ABSTRACT

Aim

This study explored the post-natal daily living experiences of teenage mothers in Enyan Denkyira, Ghana.

Method

The study employed the phenomenological research design, and utilized the snowballing sampling technique to recruit 15 teenage mothers. Data for this research were gathered via in-depth interviews, and they were analysed thematically.

Results

According to the findings, these mothers faced hunger and nutritional deficiencies due to financial difficulties, and this subsequently compromised their health. Furthermore, majority of the adolescent mothers were dropouts who had failed to learn any vocation to enable them earn income, as well as enhance their self-esteem.

Conclusion

In light of the findings, the paper recommends for the establishment of interventions that would provide teenage mothers some income support, as well as opportunities for education and microenterprise development. These interventions could help enhance their wellbeing.

1. INTRODUCTION

Globally, about 12 million girls whose ages range from fifteen to nineteen years, and a minimum of 777,000 girls under fifteen years give birth annually in developing countries (WHO, 2020). In Ghana, about 14% of adolescent females aged 15 to 19 years have started giving birth, with about 11% live birth rate (Asare et al., 2018). In 2018, a total of 86,044 pregnant women were recorded in health facilities in the Central Region of Ghana. Out of this total, teenagers accounted for 13.2% (Ghana Health Service, Central Region Annual report, 2018). The report further revealed that out of the 20 districts in the Central Region, the Ajumako Enyan Essiam District, where this study was conducted, accounted for 5.4% of the region's 11,350 teenage conceptions. This record of teenage pregnancy in the District is considered as an issue that requires immediate redress.

Several studies have documented that the contributory factors of teenage pregnancy include poverty, sexual assault, societal norms like early marriage, peer influence, and low levels of education (Alabi & Oni, 2017; Yakubu & Salisu, 2018). Furthermore, sexual behaviours, such as unprotected intercourse and early sexual adventures are reported as risk factors of teenage pregnancy (Ochen et al., 2019). Teenage motherhood is a complicated phenomenon underlined by a variety of economic, educational, psychological, and behavioral problems (Hamburg, 2017; Mangeli et al., 2017). These issues are losses that can have adverse implications for teenage mothers, with indications and symptoms that might jeopardize a healthy motherhood experience (Hodgkinson et al., 2014). A study conducted by Vincent and Alemu (2016) revealed that some teenage mothers are compelled to quit school or forgo employment opportunities in order to take care of their child. They are also likely to suffer psychological issues, such as depression (Hodgkinson et al., 2014), which could be due to economic difficulties, immature parenting, and low maternal competency.

Teenage parenthood is also tied with certain social disadvantages that eventually leads to marginalization. It is reported that teenage mothers are likely to become victims of social discrimination that are usually influenced by strong cultural and religious (Jones et al., 2019). In Ghana, some female adolescents may face difficulties in making decisions regarding unintended pregnancies due to existing socio-cultural norms that abhor teenage pregnancy (Bain et al., 2019). The prevalence of social prejudice against teenage mothers only exacerbates social exclusion, impedes their wellbeing enhancements, and worsens teenage adjustment issues (Adamecz-Völgyi, & Scharle, 2020).

While teenage mothers may have to make certain adjustments to overcome the adversities of teenage motherhood, these vulnerable individuals are largely ill-equipped to do so and this makes life difficult for them (Jakoby, 2012). Consequently, the promulgation of appropriate interventions are required to help alleviate the negative impacts of adolescent motherhood experiences that impede their subsequent achievement of good quality of life. While it is noted that teenage parenting presents some adverse implications for mothers and children in sub-Saharan Africa region (Gunawardena et al., 2019; Hall et al., 2018), only few studies have been conducted to explore the lived experience of teenage mothers after giving birth in the region, notably Ghana. Moreover, despite the fact that teenage pregnancy has gotten a lot of scientific attention around the world, the focus of majority of research has been on preventing the problem (Bhan, 2019; Menon et al., 2018), with little attention paid to threats faced by teenage mothers, especially in light of the socioeconomic position of both the teenager and the infant. It

is critical to raise public awareness about the potential issues, hardships, stressors, and obstacles that teenage mothers face when having a child at such a young age, and it is for this reason that this study was conducted to explore the post-natal experiences of teenage mothers in Enyan Denkyira in Ghana's Central Region to help fill this crucial gap in literature.

2. METHODOLOGY

A qualitative research approach was utilized to conduct this study. Specifically, phenomenological design was the type of qualitative approach that was employed. This research design was appropriate it allowed researchers to dig deeper and focus on participants' subjective interpretations, metaphors, definitions, symbols, and descriptions regarding their post-natal experiences as teenage mothers (Mohajan, 2018).

The population included all unmarried teenage mothers who were in 10 purposively selected churches in Enyan Denkyira. These churches included the Roman Catholic, Methodist, Presbyterian, Christian Faith, Musama International Church and Christ Apostolic, Seventh Day Adventist, The Church of Pentecost, Apostolic Church and Assemblies of God. Church leaders from the 10 selected churches within the Ajumako Enyan Essiam District were also involved in the study. These churches were selected because they serve as organized institutions with cross-section of all manner of persons with different backgrounds and challenges. Among such persons in these churches are the teenage mothers who come to seek for joy and other personal assistance to cope with the challenges that come with teenage motherhood. In our view, churches are a natural sampling of society since they contain people with a variety of cultural, economic, psychological, and emotional issues who can help with the study. Because of their accessibility, the researchers chose the participants from these churches.

For this study, a total of 15 unmarried teenage mothers were chosen using the Snowballing technique. The researcher chose 15 teen mothers from the ten churches to participate in three focus groups, each with five members. The researchers contacted these 5 teenage mothers in other churches, who, through a snowball effect, guided the researcher to the other 10 teenage women who had been suspended from their churches due to pregnancy. The in-depth interviews included all 15 of the selected teenage mothers. This was done to ensure that the teenage mothers express their concerns which they may feel reluctant to share during the Focus Group Discussions. When data saturation was reached, this sample size was determined. As a result, the researchers were able to collect data from one or more predetermined groups. One of the first things the researchers performed was double-check that the individuals met the requirements for inclusion in the sample (Palinkas et al., 2015).

The researcher ensured that the participants met the following inclusion criteria: availability and willingness to engage in the study, inhabitants of Enyan Denkyira, members of any of the

10 community churches, and being between the ages of 11 to 19 years old. Furthermore, the participants were given advance notice of the dates and times for the interviews and focus group discussion. The researchers confirmed these plans a day ahead of time to ensure that the participants would be accessible for the interviews and discussions.

Because some of the participants lived with their children, it was critical to guarantee that the settings were appropriate and that there would be no disruption during the interviews. There were three sections of focus groups, each with five members, consisting of 15 teenage mothers. All 15 adolescent participants were involved in the focus group discussions and the one-on-one interview. All of the interviews were audio-taped with the participants' agreement. The interviews were audiotaped so that the phrases used by the participants could be preserved. The researchers had the opportunity to explore during the one-on-one interview. Each participant's interview session lasted around two hours. Each participant gave their permission for the researchers to record the interview conversations. Field notes were taken to supplement the information gathered during the interviews. To allow for a free flow of conversation, all discussions were held in Fante and Twi. The participants were able to provide extensive accounts of their experiences by using their "mother tongue," which they would not have been able to do if they had to use English. The audio tapes were individually transcribed verbatim and re-translated to English by the researchers, after which the transcripts were compared to determine their accuracy. This exercise minimized the risk of losing data in the translation phase.

Participants were informed that they had the right to refuse to answer any questions they considered uncomfortable. It was also made clear to the participants that their participation was voluntary, hence, they were free to withdraw from the research if they wanted. In terms of potential emotional harm, the researcher informed the participants that the information gathered would not be used to directly enhance their lives as the project was for academic purposes. This information was communicated to them prevent instilling false hope in the research participants. During the interviews the researchers intervened when participants became distressed during the course of the interview session. Specifically, periodic breaks to help the participant calm down. Also, words of encouragement were shared with some participants to help them overcome their distress during the interviews. After collecting data, research participants were given an opportunity to reflect on their experiences during the research process, talk about their experiences, challenges they went through as well as their overall feelings about the research. This added a significant amount of rich information to the data. Braun and Clarke's (2006) approach to thematic analysis was used by the researchers. It outlines a six-step qualitative data analysis process that includes familiarizing with the data, generating initial codes, identifying themes that reflect, collecting codes, reviewing data for "internal homogeneity and external heterogeneity" (Braun & Clarke, 2006, p.91) to understand

and explain the meaning and dynamics of themes, refining themes, and writing up the report. In the report, the identities of participants were kept confidential. Instead of using their true names, they were replaced with pseudonyms. Finally, the study was assessed using Guba and Lincoln's (1985) criteria for determining the reliability of qualitative data collected: credibility, dependability, transferability, and conformability.

3. FINDINGS AND DISCUSSIONS

Table 1 shows that a relatively high percentage of 80 were aged between 17 and 19 years. The least reported age cohort was found to be those teenage mothers aged between 11 - 13 and 14-16 years representing 6.7 and 13.3 percent respectively. The table primarily displays result on two categories of educational level of participants. It was evident from the table that 3(20%) participants had Senior High School education and 12(80%) of the participants had Primary and Junior High School education. This shows that most of the teenage participants had dropped out from school due to their situations which has affected education level and which will consequently affect their employment status and consequently their income levels. It indicates that an overwhelming 12 (80%) participants were unemployed. This is equally followed by a relatively small proportion of 3 (20%) of the participants who were found to be engaging in petty trading, such as the selling of tiger nuts and fetching of water for construction works. The

implication of this was that the teenage mothers could lack adequate income since they had no reliable source of income to better their situations.

Table 1: Demographics of Teenage Participants

Age (in years)	Frequency (N)	Percent (%)
11-13	1	6.7
14-16	2	13.3
17-19	12	80
Total	15	100

Educational Characteristics	Frequency (N)	Percent (%)
Basic (Primary and Junior High School)	12	80
Senior High School	3	20
Total	15	100

Occupational Status	Frequency (N)	Percent (%)
Unemployed	12	80
Petty Trading	3	20
Total	15	100

Source: Field Data, 2019

The focus group discussions and in-depth interviews generated some viable results regarding the post-natal experiences of the research participants. They had some viable viewpoints to share results that emerged from the analysis have been presented and discussed under the following themes: Social neglect, regret, feeling devalued, financial challenges, health challenges, hunger and inadequate nutrition, and loneliness.

3.1 Social neglect

The teen mothers spoke about how their lives had become miserable due to the neglect they faced from parents, love ones and friends after giving birth. Majority of the participants admitted that they were suspended from their churches for becoming pregnant. Some of the participants admitted that their close friends shunned their company and were no longer associating themselves with them. Moreover, family members, especially parents and siblings

who were supposed to give them comfort and support also started withdrawing themselves from them. The participants share their life experiences in the following ways:

Participant 1, a 16 year old teenage mother opined that, because she became pregnant and had no reliable source of income and her parents and closest friends deserted her, life had become miserable for her. She admitted that, even though she had elder siblings, none of them is taking care of her since they think she had disappointed them.

“...my whole family deserted me since I became pregnant till birth. Even my elder siblings who were caring for me before do not even respond to my calls any longer. All my friends disassociated themselves from me with the exception of one friend”.

She further added that it was only one of her friends that showed concern for her plight by giving her occasional support. Even her friend whom she followed her lifestyle and became pregnant does not even want to see her.

Participant 5, a 19 year old teenage mother also lamented that, since she became pregnant while in Senior High School, her parents became angry and decided to withdraw their support for her. This had made life difficult for her to cope with, especially in terms of finances. She commented that even though she tried her best to sell tiger nuts, the income she receives is meagre. She further lamented that the government had also neglected them since there is no available opportunities created by government for teenage mothers in the district. She complained that:

“...I have been neglected by family and friends because I became pregnant. Even though my mother at times assists me it is not enough as compared to the time I was in school. The government doesn't care about teenage mothers. We don't benefit from the government. In fact I have been neglected.”

In order to find out how the church has been instrumental in the lives of the teenage mothers, the researchers interviewed the church leaders. All the church leaders admitted that it is the practice of the church to suspend teenage mothers give birth without marriage from the church. This is done in to ensure discipline in the church and to promote good moral principles. All the church leaders admitted that their actions may pose some social neglect and emotional distress and complicate the situations of the teenage mothers.

The experiences from the lives of the research participants reveal how teenage motherhood could contribute to social neglect. Their experiences reveal the importance of family, friends and government support in the life of the teenage mothers. Since some of these teenage mothers depend on family and community support systems, they feel neglected in the absence of these. This is consistent with the study conducted by Miller (2008) which revealed that teenage mothers are often denied access to full participation in the same society that failed to provide them with adequate social support. Some teenage mothers also feel devalued, neglected and are bound to deal with people perceiving them as being bad mothers just because they are teenagers and not fulfilling the contemporary social norms of motherhood (Kramer & Lancaster, 2010).

3.2 Regret

Regret also emerged as one of the themes during the focus group discussions and the one-on-one interview with the teenage mothers. Fourteen of the participants admitted that, they felt very bad about their situations and regretted becoming pregnant. They expressed their desire to continue schooling or learn a vocation, and wished they did not get pregnant. Only one participant indicated that she doesn't feel bad about her situation and doesn't regret. Participant 4, an 18 year old teenage mother revealed that, even though she felt happy when playing with her child, she sometimes wished she had not given birth:

“...yes, I regret becoming a mother at this stage because, even getting food for my child to eat is difficult. How I wished I was working and to receive enough income to enable me take better care for my child and myself. I always use the little money I received from passers-by to pay for my child's hospital bills”.

She complained that since she did not have a husband, she had been using the little money she receives from some benefactors who are mostly passers-by, to send her child to the hospital.

Participant 5, a 15 year old teenage mother also expressed similar concerns by lamenting that:

“...yes, I wish I am not in this situation. This is because I thought of waiting for a man to perform all marriage rites before birth”.

Participant 7, a 19 year old teenage mother had this to say:

“...yes, I wish I was still at School. I become sad anytime I see my mates in school uniform”

The experiences of the teenage mothers clearly show that, most of them have regretted giving birth at that tender age. This is because they are unable to bear the responsibilities associated with giving birth at that tender age. Due to this they are unable to seek medical treatment for themselves and their kids due to their inability to settle their hospital bills. The inability of these teenage mothers to get support in carrying out their day to day activities make them regret giving birth. This supports the findings of Hodgkinson et al. (2014) which indicated that social isolation and regret were associated with depression in teenage mothers. This also supports the fact that stress of teenage motherhood has negative impact on the psycho-social health of teenage mothers (Adamecz-Völgyi, & Scharle, 2020). Teenage mothers in this study in Enyan Denkyira always regret due to poor family relations which leads to psychological health and socio-emotional problems such as low self-esteem and depression.

3.3 Feeling devalued

The feeling of been devalued also emerged as one of the themes during the focus group discussions and the one-on-one interviews with the teenage mothers. Ten participants admitted to feeling disappointed anytime they compared themselves to their peers who were in school. They expressed that since their peers attended school and received proper parental care, it always made them feel alienated and shy. Moreover, they admitted that the reactions of their peers and some people in the community and their churches towards them made them worry and felt devalued. Participant 4, an 18 year old teenage mother said:

"...hmmm, sometimes I feel devalued and lack confidence in myself. This is because when I compare myself with my reference group, they are in school and they are doing better. Due to this I always don't see my worth. I don't think I can ever make it in life again because of my situation."

Participant 7, a 19 year old teenage mother also said this:

"...at times when the few friends who care even try to associate themselves with me, I find it difficult to mingle with them. This is because when I compare myself with them now, I can see that they are living happy lives and are doing well in school. I don't deserve to even mingle with them anymore. That is how I see it. I don't deserve to be mingling with them."

Participant 3, a 16 year old had this to say:

"...yes, I regret becoming a mother at this stage because; some of my friend's reaction towards me is so bad. My best friends have even rejected me when they saw me with my baby. Some look down on me all because of this. But I don't blame them. That's why I always coil into my shell."

The experiences of the teenage mothers clearly showed that, most of them had developed low self-esteem since they felt devalued. In addition, this had affected their self confidence level. This finding is consistent and supports the findings of Ruzibiza (2021) that some teenage mothers experience stigma and feel devalued by their society. The teenage mothers in Enyan Denkyira were accused of deliberately becoming pregnant to reap the financial benefits. Majority of these teen mothers are denied access to full participation in the same society that failed to provide them with full social support. This is again confirmed by Kramer and Lancaster (2010) that some teenage mothers reported the feeling of being devalued and having to cope with people perceiving them as being bad mothers.

The subsequent themes presented in this article contains information on some of the challenges teenage mothers are confronted with, as well as their impacts on them and their children. From the responses of the focus group discussions and the one-on-one interviews, all the 15 participants admitted that they faced various challenges. The themes have been discussed as follows:

3.4 Financial challenges

All the 15 participants spoke about how their lives had become miserable due to lack of money to care for the kids, buy food, buy clothing for themselves and their children, send their children to proper school and to settle their medical bills and to run their day to day activities. This was made evident because most of the participants admitted that they were unable to do any work which could generate income for them. Moreover, family members, especially mothers, fathers, siblings and their partners who were supposed to give them money were also not assisting since they claimed they do not have. The participants shared their life experiences in the following ways:

Participant 7, a 19 year old teenage mother opined that, because she lacked money and had no reliable source of income, life had become miserable for her. She admitted that, even though she had family members, none of them is taking care of her. She said only one of her siblings' showed concern for her plight by giving her little support but she is jobless. She revealed that, she wished to be sent to school or learn a vocation but due to her financial predicaments she is still at home.

"...I have really regretted giving birth at this stage, I want to go back to school but the financial support I received before dropping out of school is no longer coming. I fear I will be left behind in life without education or any vocation."

Participant 3, a 16 year old also lamented that, since the death of her parents she had been staying with her grandmother and has been finding it difficult to cope with life especially in terms of finances. She complained that she had no money and that she has no one who would assist her with money. She commented that even though she tried her best to fetch water for construction works, she had to stop due to the absence of a caregiver to take care of her child in her absence. She complained that since she has no money, she has not been able to cater for her child's bills. She said:

"...sometimes I even can't afford meals for myself and the children. My second born usually falls sick. I have not been able to even take him to the hospital. He has no insurance. My child's father does not give me money too."

Participant 12, a 16year old teenage said:

"...in fact, I have serious financial challenges. I can't even afford two square meals a day all because I don't have money. I at times decide to borrow money but since I am unable to redeem it I am always denied."

The experiences from the lives of these teenage participants revealed how poverty has contributed to their plight. This was because most of them did not have any reliable job to do. It was also evident that, the boys who got these girls pregnant were unable to take care of them since they did not claim the paternity of the children. This had led to the situation where these teenage mothers faced economic hardship. From the findings, it was clear that, all the teenage mothers encountered financial challenges since they did not have any secured source of income support. They rather depended on unreliable support or gifts from other sources. It was evident that, for all the 15 participants, only one of them depended on the assistance of a relative which was not frequent. This presupposed that, the teenage mothers did not have any social security to depend on. This situation had lowered their standard of living thereby making majority of them becoming poorer and vulnerable. This is consistent with the study conducted by Twum-Barima (2014) that, in Sub-Saharan Africa, comprehensive social security programs do not exist thereby making living conditions of majority becoming vulnerable and poorer.

The findings of the study also revealed that, poverty and lack of secured job facilitated the stress that teenage mothers faced and this corroborates existing findings (Huang et al., 2014). This also is consistent with existing evidence which indicated that teenage mothers often experience multiple stressors, including decreased financial resources, physical exhaustion, task overload, role restriction and confusion, social isolation and depression symptoms (Tirgari et al., 2020). The prevalence of poverty among teenage mothers in Enyan Denkyira could also linked to education or literacy levels since most of them were school drop-outs. This is

consistent and confirmed the study conducted by Ahn and Kim (2004), that poverty and powerlessness create circumstances that predispose individuals to the highest incidence of social dysfunction, higher rates of morbidity and mortality and lowest access to primary care.

3.5 Health challenges

Health problems also emerged as one of the themes during the focus group discussions and the one-on-one interviews with the teenage mothers. Seven participants admitted that, they were facing infirmities of various kinds which had worsened their situation. These participants revealed that they were unable to go to hospital and also send their wards to hospital. Their health had been deteriorating due to their inability to afford their hospital bills.

Participant 12, a 16 year old teenage mother confessed that she was sick and her child had also been sick. She noted that, even though her sickness worsened on daily basis, she had been unable to visit the hospital due to lack of money and the absence of a volunteer who would foot her hospital bill. This had worsened her plight. She confirmed that even though she had been using the little money she received from some benefactors, who were mostly passers-by to visit the hospital, it was not sufficient. She complained that:

“...my child usually falls sick and I am not able to take him to the hospital since I am not working. Again, I have no money to register for the National Health Insurance Scheme.”

Participant 14, a 17 year teenage mother wept as she recounted her ordeal:

“...my child’s father died when I was three months pregnant, and I have no one to care for him. The little boy is suffering from hernia but how do I get the money for the surgery at the hospital.”

The experiences of the teenage mothers suggests that, most of them were unable to send their children or themselves to visit the hospital to treat their infirmities due to their inability to settle their hospital bills. This revealed that pregnancy and childbirth during the teenage years were found to increase the risk of poor health and wellbeing for both the mother and the baby (Marino et al., 2016). For example, there was a greater incidence of pregnancy and birthing complications, including, maternal morbidity and mortality, premature and/or low birth weight babies (Casterl et al., 2013). This also is consistent with existing evidence that indicate that teenage mothers are at a greater risk of psychological problems compared to non-parenting teenagers and older mothers (Hodgkinson et al., 2014).

3.6 Hunger and inadequate nutrition

Another theme which emerged from the data was that the teenage mothers found it difficult to have access to nutritional food and determine the food they wished to eat. This problem was prevalent because most of the teenage mothers admitted that they depended on benevolent people for their daily meal. Some even admitted that they even slept without food. Due to this, they did not have a choice in determining the kind of food they would have loved to eat. The participants expressed their sentiments in the following ways:

Participant 2 is a 19 year old teenage mother. She commented that, she received her daily meal from benevolent sympathisers. She opined that, even when people especially men helped her, they wanted to sleep with her. She explained that as a result of her vulnerability, she sometimes had no option than to oblige. She said:

“...sometimes, things become too difficult that I fall on these benevolent sympathisers who are mostly men to get food for myself and my child. But you know some of these men, they never offer gifts without exchange for sex. I give them what they want for what I want.”

Participant 7 also expressed similar concern:

“...at times I do not get what I want to eat but I am compelled to eat because I do not have a choice. I have problems with food. If I have money, I would have had the best nutritional food to eat but in this time that there is no money what can I do? I sleep without food sometimes.”

The experiences of the teenage mothers showed that, financial constraints had influenced the choice and kind of food they ate. This has resulted in a situation where they were unable to acquire well-balanced diet. Some of them sometimes slept without food. All these had worsened their situations and had consequently affected their health and that of their children. This showed that the teenage mothers in Enyan Denkyira suffered from hunger and unbalanced food which had affected the health of their children and the teenage mothers themselves. This was because some of them slept without food and even the food they sometimes had access to, lacked the adequate nutritional quality. This had led to the situation where most of them suffered illness. Unfortunately, however, most of them were unable to visit the hospital due to their inability to secure money to settle their hospital bills. This confirmed the study of Agyemang (2012), which reported that, people’s inability to access healthcare in Africa has been attributed to their low-income levels. The health of teenage mothers and their children is likely to deteriorate if they do not have access to adequate nutritious food. This could make them vulnerable to all kinds of diseases.

3.7 Loneliness

Loneliness was one of the major concerns expressed by the participants as one of the emotional effects of their challenges. Thirteen of the participants complained that, since they did not have their partners to assist them and did not have their family members assisting, they always felt lonely. Two of the participants revealed that, they always felt unhappy when people shunned their company.

Participant 8, a 17 year old teenage mother said:

"...there is no one to talk to at times. I feel lonely especially when I don't have any husband or any family member who cares. I don't also have anything in my room such as radio or television to entertain myself. I always feel lonely. It is my child who makes me laugh at times."

Participant 12, a 16 year old teenage mother also indicated that:

"...hmmmm it is not easy to be in this situation alone. People always shun your company. They don't want to talk to you because they see you to be a social deviant."

The experiences of the teenage mothers showed the importance of family members and friends in the life of these neglected mothers. The presence of members of society in their lives provided them with some sense of belongingness as well as affection. This to a large extent affected the psychological well-being of these teenage mothers. This is consistent and supports the study of Buchanan and McConnell (2017) that the family is the most important source of support. The role of the family as the basic unit of society is therefore noted to be a very vital ingredient in the accomplishment of the social integration process of these teenage mothers. But, the weakening of the traditional family structure from the nuclear and extended families poses a threat to the harmonious living of teenage mothers.

The situation on the ground points to the fact that, the family is generally incapable of providing comfort to the teenage mothers. That is, ideally the family is often regarded as the basic institution where the norms of behaviour are inculcated into the child about care and effective living with others. These societal values and customs are therefore passed on through the family system in which respect for one another is propagated. The seeming breakdown in the bond of relationship between parents and their children has resulted in the weakening of the traditional filial piety of individuals towards the teenage mothers in most families. This is also consistent with Mangeli et al. (2017) which indicated that, many teenage mothers today

may face the challenges of loneliness, abandonment, status change, and financial insecurity due to the family's inability to provide the needed care for these teenage mothers. The teenage mothers continue to be vulnerable and face challenges because both their nuclear and extended families are unable to render support to them.

4.0 CONCLUSION AND RECOMMENDATIONS

The study sought to explore the daily living experiences of teenage mothers in Enyan Denkyira in the Central Region of Ghana as well as how the challenges faced affect their lives. The study had established that teenage mothers in Enyan Denkyira suffered various challenges since most of them did not have any reliable job. The teenage mothers suffered challenges due to their lack of awareness of government institutions and the insufficient government support to strengthen social welfare services in the community. The study therefore concludes that the destiny of these teenage mothers in Enyan Denkyira will continue to be in the hands of irresponsible men in the community as long as the teenage mothers do not have any business on which they can depend. In the same vein, if the family of these teenage mothers, government and non-governmental institutions do not put in place the support and provide the needed services to these teen mothers, this menace will continue to hurl its wings among the teenage mothers of Enyan Denkyira.

It is therefore recommended that Counsellors are pivotal in ensuring the psychological, social, emotional and personal development of individuals irrespective of their challenges. In view of this, counsellors are obliged to intervene for the betterment of the plights of teenage mothers since they work as educators, advocates and clinicians. Church counsellors should become familiar with the challenges and needs of teenage mothers by assisting them to identify and clarify their problems as well as assisting in mapping strategies and interventions to promote their wellbeing. Since majority of the teenage mothers encounter financial challenges it is recommended that the Ajumako Enyan Essiam District should create a "Teen Fund" to support the teenage mothers, who are prone to health, social, financial and or other challenges that could make them vulnerable.

In addition, the general public and other Non-Governmental Organizations (NGOs) could contribute to the "Teen Fund" as part of their social responsibilities to the society. In view of the fact that most of the teenage mothers are school drop outs and have regretted becoming pregnant at that age, there should be more sensitization for in-school teenagers in the community by National Commission for Civic Education (NCCE), Planned Parenthood Association of Ghana (PPAG) and other relevant agencies on the dangers of teenage pregnancy as well as the social interventions in place for the victims. This will help the youth in the community to be aware of the dangers and challenges associated with teenage pregnancies. As most of the teenage mothers have been neglected and suffer from loneliness which has

affected their self-esteem and income levels, it is recommended that the Ministry of Gender and Social Protection should provide and advocate for community-based teenage facilities in the District. These include rehabilitation centres which will accommodate teenage mothers who are neglected and need immediate assistance. This will help provide an alternative to the weakened family and social care systems in Enyan Denkyira. Since most of the teenage mothers are school dropouts and depended on sympathisers, borrowing and engaging in menial jobs for their livelihood, the government of Ghana through the Ministry of Gender and Social Protection should also make scholarships available for the teenage mothers who want to further their education or learn a vocation. Families should also up their game in taking care of their wards to protect them from falling prey to activities that expose them to teenage pregnancy in order to reduce or prevent the canker of teenage pregnancy.

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