



Parenting Too Soon: Education and Child Care Concerns of College Student Mothers in the Cordillera Administrative Region

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Abstract

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This study aimed to come up with a description of the common, as well as unique, experiences and outlook of student mothers regarding their multiple roles as parents and college students. It further looked into the coping strategies of the student-mothers related to their reproductive health needs and to identify sources of support for the student-mothers in relation to the above concerns. The research partners of the study include 10 student mothers enrolled in Benguet State University (BSU) and the Mountain Province State Polytechnic College (MPSPC) for the School Year 2013-2014. These participants were selected through purposive sampling. Face-to-face interview and some small focus group discussions were employed. Fifteen participants enrolled in BSU during the 2nd semester of school year 2020-2021 while the world is experiencing COVID19 pandemic were added and were interviewed through google forms which consisted of an open-ended questionnaire. Results showed that uncertainty, fear and anxiety were the common feelings experienced by the participants upon knowing that they were pregnant. Most of them did not think of using any contraceptive method even when they were already sexually active with their partners. The reactions of the partners were varied. Some were happy about the pregnancy and seemed to have been expecting it to happen. Others shared the predicament on how to inform their parents. As expected, the first reactions of the respondents' parents were anger and distress. However, the parents still continued to be sources of support, their children and new family. Most of the respondents availed of the services in the rural health units in their place. They experienced several health problems ranging from common colds to high blood pressure, gastrointestinal reflux diseases (GERD) and bleeding. One experienced anxiety while another experienced postpartum depression. All the research participants experienced challenges and adjustments as parents at the same time as students. They stopped schooling after giving birth in order to take care of their baby. They were able to return to school because of the availability of other people (parents, babysitters) to look over their child while they are in school. They also arranged their class schedules and reduced their course load. For students enrolled during the pandemic when distant/modular learning was the new normal, day time was mostly devoted to child care while nighttime was dedicated to complying with school requirements. Some of the student mothers regret getting pregnant early. Nonetheless, they claimed that this experience made them mature and motivated them to pursue their studies.

KEYWORDS

Teenage pregnancy
Student mothers
Child care

Introduction

The World Health Organization (WHO) reports in one of its discussion papers on adolescent reproductive health that approximately 12 million girls aged 15–19 years and at least 777,000 girls under 15 years give birth each year in developing regions (WHO, 2020). The levels of adolescent childbearing are moderate to high in most areas of developing countries. Save the Children's Global Childhood Report (2019) reveals that teenage pregnancy affects 5.99 percent of Filipino girls which is the second highest rate in Southeast Asia.

Adolescent pregnancy and childbearing entail a high risk of maternal death for the adolescent, and the children of young mothers have higher levels of morbidity and mortality. Because of their physical and psychological immaturity, very young mothers are very susceptible to risks of malnutrition, inadequate prenatal care, abortion, unhappiness, and threats to one's mental health. These adolescents and their children may experience repercussions in the present, as well as far into the future. WHO (2020) reports that pregnancy and childbirth complications are the leading cause of death among girls aged 15–19 years globally, with low- and middle-income countries accounting for 99% of global maternal deaths of women aged 15–49 years. The report states that adolescent mothers aged 10–19 years face higher risks of eclampsia, puerperal endometritis and systemic infections than women aged 20–24 years. Additionally, some 3.9 million unsafe abortions among girls aged 15–19 years occur each year, contributing to maternal mortality, morbidity, and lasting health problems.

In addition to numerous health risks, both to the mother and her child, the demands of child-rearing often hinder or delay teen mothers from pursuing their education or from building their careers. The WHO reveals that adolescent pregnancy and childbearing have been associated with lower educational achievement resulting from the interruption and discontinuation of the adolescent's schooling. This further leads to delay in personal development and reduced earnings, aggravated by higher fertility rates. The Philippine National Youth Commission's (NYC) own National Youth Assessment Study also reveals that unplanned pregnancy is one of the main reasons that teenagers stop going to school (ABS-CBN,

2012). Pregnancy and childbearing may cut short an adolescent's education and threaten her economic prospects, employment opportunities and overall well-being. The lack of financial and emotional support may force a teenage mother to call off her studies and get a job at an early age. Because of deficient educational attainment, the teenage mother may find herself in unskilled and poorly paying jobs for the rest of her life (Feldman, 1997). Consequently, adolescent mothers may pass on to their children a legacy of poor health, substandard education and subsistence living, creating a cycle of poverty that is hard to break.

For mothers who decide to go back to school while rearing their children, the adjustments that they have to deal with are amplified by the need to meet both academic and maternal demands. A study by Yakaboski (2010), conducted at Southern Illinois University, identified perceived barriers of college student mothers to the full integration of their student and mother identities. These include financial issues, housing, childcare and student fees and conflicts in both mother and child school schedule. Class schedules conflicting with parenting duties are a common concern among the respondents. Student-mothers then cling to the alternative of bringing their child to class or finding another person to watch over their children while they attend their classes. However, bringing their children to their classes also evokes responses of disagreement from classmates and professors.

Nevertheless, many adolescent mothers try to get back on track by going back to school after giving birth and while rearing children. This choice? helps them gain enough education and land on a better occupation. However, parenting while studying poses more adjustment concerns to the student mother than what is experienced by other non-parent students. The student mother needs to balance the conflicting demands of her multiple roles as a student, mother and wife, if married. As a student, the adolescent has to devote time for her academic requirements and as a mother, she needs to give time and attention to her children.

There is therefore a growing need for programs aimed at helping these student mothers build and sustain a healthy family and a better living condition. For such programs to be more responsive to the needs of student mothers,



however, it is essential to have a more in-depth understanding of the socio-economic environment in which they live and the daily challenges they encounter.

The WHO (2007) report cites several determinants of early pregnancy. Accordingly, in some countries, young girls are initiated into sexual activity, sometimes with coercion, within the context of marriage, frequently with older men. The report also cited low rate of contraception use by adolescents in many countries, lack of knowledge about sex and family planning and the lack of skills to put that knowledge into practice. It also noted that adolescents are prohibited by law to avail of reproductive health services without parental or spousal consent. It also associated higher birthrates and higher maternal health risks with lower education level. Furthermore, gender norms that encourage young boys to acquire sexual experiences and permit violence against women or put them at greater risks for pregnancy and sexually transmitted infections likewise contribute to various reproductive health issues among adolescents.

The alarming increase of cases of early pregnancy and parenthood has already been the subject of several studies. Most of these studies, however, involve foreign and western participants. This study, therefore, endeavored to provide a more grounded view of these issues in the local setting. It is also hoped that this study contributes to the body of adolescent literature and the understanding of the parenting-while-studying phenomenon.

This study came up with a description of the common, as well as unique, experiences and outlook of student mothers regarding their multiple roles as parents and college students. Specifically, the study: 1) determined health concerns and reproductive health care services availed of by the student-mothers; 2) identified the challenges and adjustments experienced by the student-mothers in relation to their school requirements and familial roles; 3) looked into the sources of support of the student-mothers related to their reproductive health needs and to their multiple roles of parenting while studying; and 4) explored the student-mothers' reflections on early pregnancy and motherhood.

Methodology

This study employed a qualitative research design. Using life story, in particular, the study highlighted only a phase of the student mothers' life. In depth interviews were conducted with the participants who were asked to relate their specific experiences of pregnancy, childbirth and motherhood, including medical consultations and health services they have availed of for themselves and their children. They were also asked about the adjustments they had to go through as a result of having to perform parental roles concurrently with student roles. The FGDs facilitated, on the other hand, consisted only of those who were willing to answer the interview questions. Participants who were close friends and knew each other's story as student mothers requested that they be interviewed together, understanding how sensitive the matter is.

The participants were selected through purposive sampling. Only students who have become mothers when they were students were considered. Specifically, student mothers who were enrolled in Benguet State University (BSU) and the Mountain Province State Polytechnic College (MPSPC) for the School Year 2013-2014 were invited as participants. Another 15 students enrolled in BSU for the School Year 2020-2021 were added as participants, hence, a total of 25 student mothers comprise the participants of this study. Similar questions were used for all participants.

As the researchers are also faculty members of BSU, they came to know of some of their students who are also mothers. The students were contacted and asked to take part in the study. When their willingness to participate was confirmed, they were further informed of having a choice to withdraw at any point of their participation in the study and to refuse giving responses should they find the questions too intrusive or uncomfortable to answer.

For the participants enrolled at MPSPC, approval was first obtained from the President of the college and then coordination was carried out with some faculty members and the institution's guidance and counseling unit (GCU), whose assistance in contacting and seeking the consent of potential respondents was requested.



This process was done to protect the identities of students who did not want to participate in the research. After some students decided to sign the consent forms for the study, the researchers arranged schedules for interviews and Focused Group Discussions (FGD) with them. Schedules for interviews and FGDs were then set.

Furthermore, most of the students who agreed to participate in this study had their first pregnancy three or more years back, which meant that they would not have remembered some details of their experiences. This was so because most of the participants decided to leave school to give birth and to take care of their newborns. Only when their children were a few years older that they made up their minds to go back to school. Some of the responses then depended on how much information the participants could recall during the interview of events that transpired in their life several years back.

The additional 15 respondents were interviewed through google forms during the 2nd semester of school year 2020-2021 while the world is experiencing a pandemic and distant learning became the new normal. The online questionnaire consisted of open-ended questions that likewise sought to capture their experience of pregnancy, childbirth and motherhood. An informed consent was integrated in the online questionnaire.

Data gathered were analyzed thematically guided by the objectives of the study.

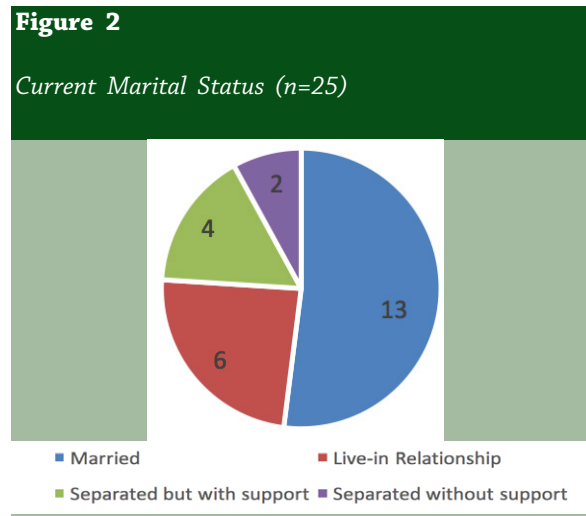
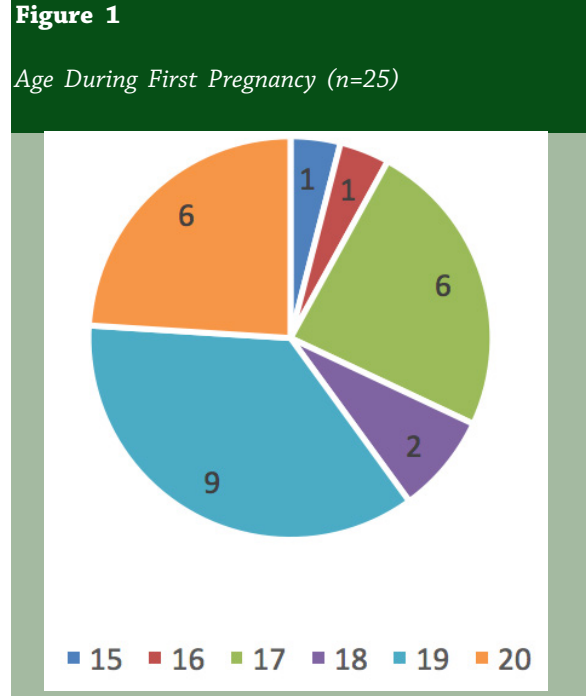
Results and Discussions

Profile of the Participants

The 25 participants have all resumed their studies at the time of the interview with them. Ten were students during the regular face-to-face classes while 15 are students under the new normal (distant/modular learning).

Figure 1 shows that the student mothers got pregnant within the age range of 15-20. The 15-year-old was at Grade 10 while those who were in their 20s were in their 2nd year of college.

Figure 2 shows that majority of the participants



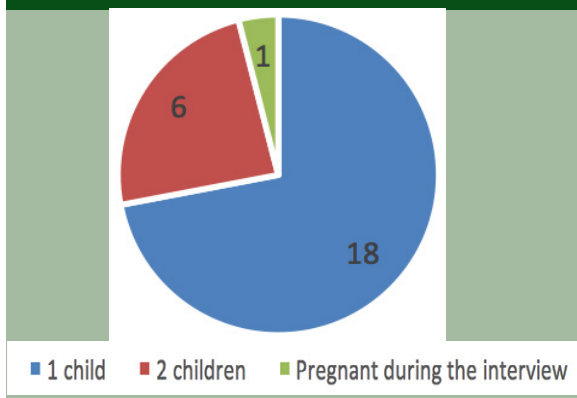
are married to the father of their children. Six are living with their partners without the benefit marriage. Four are separated from the father of their children but are receiving financial support. Two do not receive any support from the father of their children.

Figure 3 shows that 19 of the participants have only one child while six have two children already.



Figure 3

Number of Children (n=25)



Initial Reactions to the Student Mothers' Pregnancy

Uncertainty, fear and anxiety were the common feelings experienced by the study participants upon knowing that they were pregnant. The uncertainty, fear and anxiety were due to the fact that they were young, unmarried and unprepared for the situation. The following are some statements from the participants:

"Noong nalaman kung buntis ako, sobra akong natakot dahil nasa first year college pa ako at ako na lang ang inaasahan ng pamilya ko na makapagtatapos ng pag-aaral. Hindi ko alam kung ano ang gagawin ko o kung paano ko sasabihin sa pamilya ko ang nangyari (I was scared when I found out that I am pregnant because I'm just a first year college student and my family hope for me is to graduate. That time, I don't know what to do and how will I tell to my family about my situation)," student mother participant.

"Sobrang nalilito, hindi ko alam kung kanino ko muna sasabihin, paano ko sasabihin. Natatakot sa magulang. Maraming tanong, paano na ang future ko. Hindi ito pwede, ayuko, mga ganoon (I am very confuse, I don't know who to talk to and how will I explain my situation. I am scared to my parents and I have a lot of questions and I worry about my future)," student mother participant.

"When I found out that I was 3 weeks pregnant, I cried a lot. I was afraid of losing my dream and I was scared of what will people say and most of all, I was afraid to see the

disappointment on my mother's face. I was very stressed and my anxiety woke up like a hungry lion. I was swallowed by my depression. I didn't know what to do. To be honest, I was thinking of abortion but GOD did not let me to do so. He showed me situations that helped me realize that I was following the wrong path as a pregnant mother. He presented me friends who supported me all the way until I gave birth to my child," student mother participant.

"My initial reaction is that I was shocked. I'm having mixed emotions, nervous, afraid of being judge by others, and mostly takot sa parents kung among sasabihin nila. At iniisip na ipalaglag ang bata (I am afraid to my parents and I'm thinking of abortion)," student mother participant.

Most of them did not think of using any contraceptive method even when they were already sexually active with their partners. Yet, the early pregnancy was not something they planned. According to Erikson (1950), adolescence is a critical period for identity exploration and formation. The need for belongingness and identity may lead adolescents to engage in intimate relationships and explore their sexuality with the opposite sex. However, the lack of knowledge on fertility and how conception occurs make them reckless about the consequence of engaging in sexual intercourse without protection. Consequently, many of them were confronted with the challenges of early pregnancy, parenthood and marriage. The WHO 2007 report also cited low rate of contraception use by adolescents in many countries, lack of knowledge about sex and family planning and the lack of skills to put that knowledge into practice.

Aware that their parents have other expectations of them and would surely react with fury upon learning about the pregnancy, fear was a pervasive experience among the respondents. They confided that they did not know how to inform their parents of the situation and had to rely on their partner for support. They also expressed anxiety over the reaction of other people, especially their classmates and friends.

Some respondents disclosed that they attempted to terminate the pregnancy. One student mother said she tried drinking a concoction of an herb that was supposed to cause miscarriage. However, it did not work and



she discontinued after just one try. Bothered by her conscience, she decided to carry on with the pregnancy. Two interviewees mentioned a drug in tablet form which according to them was a known abortifacient and was accessible from some sidewalk vendors in Baguio City. They were able to get hold of the drug but did not push through taking it because of fear that abortion is wrong. The experience of these participants raises concern on the availability of unregulated abortifacients which may endanger not only the life of the unborn but also of the mother.

Two student mothers claimed to have felt “ecstatic” and “excited and feel blessed”. One revealed she thought she would never become a mother because she has bilateral polycystic ovarian syndrome and myoma in her uterus. For this particular participant, her fear of not becoming a mother due to her health problems is more concerning than becoming a mother at a young age.

The reactions of the partners were varied. Some were happy about the pregnancy and seemed to have been expecting it to happen. Others shared the predicament of the participants on how to inform their parents of the situation. A boyfriend reacted by saying, “*Mangpatay met dayta nga news mo*”. From the interviews and group discussions, participants whose partners were older than them appeared to have the most support from their partners, who were more decisive in planning subsequent courses of action (e.g. initiating meeting between both side’s parents) right after respondent’s pregnancy was confirmed. On the other hand, one student mother confided that her boyfriend was furious when she got pregnant because he instructed her to take in the contraceptive pills he bought for her but it turned out that she did not because she did not know how to use it. This situation highlights the students’ lack of sufficient information about the proper use of birth control methods. Meanwhile, another recounted that her boyfriend ran when she informed him of her pregnancy and have turned up only when the respondent’s father called for him through his parents. One student mother narrated that her boyfriend changed during her pregnancy. She said she got angry easily, cried too much and sought a lot of attention which her boyfriend did not understand. These led to their constant fights. It takes a certain level of maturity to face a responsibility and to handle

differences and disagreements as a couple. When both partners are young, these can become challenging. Another student mother revealed that her boyfriend almost “*gave up his life*”, revealing that early pregnancy can pose a mental health issue not only to the expectant mother but also to the young father.

As expected, the first reactions of the participants’ parents were anger and distress. Many student mothers claimed their parents shouted and cried in front of them. Some said their parents refused to talk with them for days. Their disappointment stemmed primarily from the fact their children are young and are still pursuing their studies. As with any parent, they hoped their children are financially stable before having children. They thought pregnancy would end or derail the dreams they have for their children. Most parents of boyfriends expressed concern over the health of the student mothers and assured support for their grandchildren. Talks about weddings were mostly initiated by the boyfriends’ parents. However, the parents still continued to be sources of support, both financial and emotional, for the respondents, their children, and new family.

Health Concerns and Reproductive Health Care Services Availed of by the Student Mothers

Most of the participants availed of the services in the rural health units (RHUs) in their place. The check-ups at the health centers included monitoring of blood pressure and multivitamin provisions. A few whose parents can afford or were recommended by RHUs to consult with doctors went to private clinics for their prenatal as well as for their babies’ check-ups. The student mothers’ experience reveals the important roles that rural health units play in responding to the needs of mothers who do not have the means to pay for much needed vitamins and reproductive health care services. Hence, RHUs need to be strengthened by the government by ensuring a stable supply of vitamins as well as by adding other reproductive health care services such as ultrasound. All the participants had to pay for their ultrasound in private clinics especially during the first and last trimester of their pregnancy.

Common health problems experienced were common colds, cough, fever, and urinary tract



infection, anemia which the mothers have acquired even before they got pregnant. Some of them have been through risky pregnancies - long hours and difficult labor while one mother had to give birth through Cesarean Section for both of her children. The student mother who had PCOS and myoma was immediately advised by her private doctor to have bed rest because she also had high blood pressure during her pregnancy. The veins of her eyes also ruptured while she was in labor because of her high blood pressure. This condition was the primary reason most of her school requirements were submitted late. Some students also mentioned cramps, morning sickness, backaches and headaches.

This result tends to support the WHO (2007) report that some health risks associated with pregnancy and childbearing are more pronounced among adolescents than among older women due to the adolescents' physiological and psychological immaturity. One student mother experienced anxiety and gastroesophageal reflux disease (GERD). She had three sessions with a psychologist for her anxiety and she had to take medications for GERD. Another was diagnosed with postpartum depression. Note though that this student mother is enrolled under the new normal; hence, other factors resulting from the pandemic and quarantine may have a significant impact as well on her experience of depression. "*Maligalig at biglang nawawala ako sa aking daan. Imbes ma nagsasaya at malaya ako sa edad ko, naging ina ako agad. Nagdulot ito ng depresyon sa akin sapagkat matinding adjustment ang aking ginawa*" (I felt loss and I should be free and happy with my age but now I became a mother I felt depressed and its hard for me to adjust with my situation), student mother participant.

A student mother who was pregnant during the time of pandemic experienced bleeding which triggered her anxiety.

When it comes to antenatal care and safe delivery, however, the students were able to adequately avail of the services of the rural health units as well as of private medical practitioners with the help of their parents. Three gave birth through cesarian section during the pandemic.

The young mothers were also conscious about bringing their children to regular vaccinations

and health checks. This result contradicts the WHO 2007 report which revealed that children born to adolescents aged 18 years and below in some countries are less likely to have child immunization than children born to women aged 19-23 years. Student mothers during the pandemic, however, experienced some problems on schedules of vaccination in barangay health clinics and in private clinics.

Challenges and Adjustments Experienced by Student Mothers

Studying while pregnant posed some difficulty to the student mothers.

"I cannot fathom or explain the agony that I went through during my pregnancy. I am unable to do many things and my academic performance was affected. I am unable to perform at my best because I was not allowed to stay up late and I always felt sleepy and nauseous. When I gave birth, the level of difficulty was raised 10 times and I was sleepless for two weeks and had a hard time healing," student mother participant.

Others echoed the experience of frequent tardiness in class, sleepiness during class hours and difficulty concentrating. These experiences are true to students under the regular face to face classes and under the distant/modular learning.

All of the research participants had to stop schooling after giving birth in order to take care of their baby. "*Child first before yourself*", said one of the student mothers. The WHO reveals that adolescent pregnancy and childbearing have been associated with lower educational achievement resulting from the interruption and discontinuation of the adolescent's schooling. This lower educational achievement? further leads to delay in personal development and reduced earnings, aggravated by higher fertility rates. As mentioned above the Philippine NYC's study revealed that unplanned pregnancy is one of the main reasons teenagers stop going to school (ABS-CBN, 2012). In the case of the participants, they were able to return to school because of the availability of their parents or babysitters to look over their child. Hence, their early pregnancy delayed but did not stop them from finishing their studies.



The study participants admitted that being a mother while studying pose challenges to their studies. When it comes to arranging their class schedules, most of them would try to avoid enrolling in classes scheduled early morning because they have to attend to their children's needs before they go out of the house. Assignments, projects and reviews are, as much as possible, done during breaks in between classes or in the afternoon before going home. This strategy helps them direct their attention solely to their children and other home chores. In instances where school requirements need to be brought home, the student mothers would first put their children to sleep before doing these. Doing academic requirements at home would mean staying up late at night and waking up very early in the morning. *"Another challenge when I became a mother was having no time for relaxation,"* student mother participant.

Another adjustment done by these student mothers is to reduce their course load for the semester in order to have more vacant time for review and projects. One respondent recounted that she failed in a prerequisite subject the first semester she returned to school because she enrolled in the prescribed full load for the semester. This prevented her from being able to take the subjects for which the failed course was a prerequisite. Dropping of subjects was another mentioned coping strategy. Given these adjustments, these student mothers recognize the possibility of not being able to finish their studies on time or within the prescribed period, in as much as they have earlier desired to be able to do so.

The feeling of guilt for having to leave their children at home to go to school is often mentioned by the respondents. For some of them, they have to leave their children at their parents' home which is several hours travel to the university. They then stay in boarding houses near the school and go home to see their children only during weekends. They struggle with homesickness and the nagging concern about the well-being of their children while they are away. Seeing their kids cry for them as they leave for school intensifies the guilt feelings, but this scenario also challenges them to do well in their studies. Breastfeeding was also a challenge to some of them as well as the proper way of carrying the baby to help him/her burp.

For student mothers under the new normal as a result of the pandemic, day time is often dedicated to taking care of their children while night time is devoted to doing their school requirements; hence, the persistent experience of lack of enough sleep. There seems to be no salient difference in the challenges experienced by student mothers before the pandemic when classes were conducted face to face and during the pandemic when classes were modular and/or online. The schedule for classes and child rearing simply interchanged. Student mothers during face-to-face classes took care of their children's needs during night time while student mothers during the pandemic were more preoccupied with their children during day time.

Aside from their role as mothers, the participants who eventually got married also considered their being a wife as an area of adjustment. A student mother said, *"Nag-adjust ako sa asawa ko. Pati siya nag-adjust sa akin. Sa mga unang taon ng aming pagsasama, parang nakakastress kasi hindi pa niya kayang iwan ang buhay ng single (Me and my husband tried to adjust with each other in our first year of living together. I felt stressed because he seems to live like a single man)"*.

Some of them had to ask permission from their husbands for them to return to school. For this, they claimed to have readily received full support from their partners. However, schedules have to be promptly worked out with their husbands such as instances when respondent has to stay longer in school after class because of a school activity or a group project. Expenses for school fees, transportation and other academic requirements had to be well-thought out before the decision to go back schooling was finally made.

Some of the married respondents also pointed out the need to deal with in-laws and husband's relatives as another complication. A number of them contend with misgivings of being unaccepted by their husband's family and have received comments of disapproval regarding their decision to continue their studies. Others, nevertheless, claimed to get support and care from their in-laws.

The student mothers also lament their alleged lack of or limited freedom. This experience is



captured by the following statements from some of the participants.

“Sobrang laking adjustment ang pagiging teenage mother. Yung hindi mo alam ang ginagawa mo. Yung kunting ano lang sa anak mo naiiyak ka na dahil hindi mo alam ang gagawin mo. Yung pag mature mo dahil mother ka na kahit teenager ka pa lang. Nawala yung dating freedom mo sa lahat o yung dati mong ginagawa (There's a big adjustment when I became a teenage mother. I don't know what to do even with slight matters in attending my baby needs. You need to be mature and forget the freedom of being a teenager,” student mother participant.

“Noong single pa ako, ang dami kong oras para sa pamilya at mga kaibigan ko. Ngayon, madalang na lang. Noong buntis pa ako, kailangang maging maingat sa kinakain, ginagawa at iba pa (When I was single, I have a lot of time with my family and friends but now it's hard ot gave time to them. I am very careful in choosing my food and extra careful with my actions and activities during my pregnancy,” student mother participant.

“Palagi po akong nasa bahay. Hindi makalabas dahil may baby kaya lubos akong nalulungkot at naiinggit sa aking mga ka-batch. Alam ko ang aking kakayanan at kapag may nakikita ako ay sinasambit kong kaya ko rin yung gawin pero hindi pa sa ngayon (I felt sad because I always stay at home to take care of the baby and I felt jealous with my school batchmates. Whenever I see something that I know I am capable of doing, I say to myself that I can do that but not now with my current situation),” student mother participant.

The Student Mothers' Sources of Support

For the student mothers in this study, their primary sources of emotional and financial support were their own families. Despite the initial reactions of disappointment and resentment, their parents were the ones who urged them to go back to school, even providing some of their expenses and looking after their kids. Help from in-laws are mostly for the children. This help includes diapers, clothes and food. Some parents who are engaged in business; hence, do not have the time to care for their

grandchildren, paid for babysitters to allow the participants to go back to school. Some of the student mothers also have part-time jobs like online selling. Pieces of advice on postnatal self-care were received mainly from the student's own mother or mother-in-law who would recommend traditional procedures of *tanggap*.

The collectivist nature of Filipino culture played an important role in helping the student mothers deal with their situation. All the participants continued to live with their respective families during and after their pregnancy. This arrangement proved helpful especially in terms of child rearing and provision of basic needs for the children. *“Support is from my family and I'm very thankful to them for not giving up on me. Of course, I also do part-time jobs,”* student mother participant.

“My partner is a miner and a laborer and I'm very thankful that he is hardworking. Also, they are just two. Nagtatrabaho ang kanyang ate kaya minsan kung wala siya, sa ate niya kami humihingi ng tulong (We seek help when we're financially short to his working sister). Also, my father in law is working as a mason. He gives money also as a financial support. Thanks to them we didn't struggle that much when it comes with financial matter. Moreover, we are having online class. Selling flowers online is one of my part-time while studying,” student mother participant.

Respondents whose partners were older than them appeared to have received the most support from their partners. These partners work as farmers, miners, laborers. Even as wives, the young mothers had to consult their husbands regarding their desire to return to school, they claimed to have received full backing from their partners on this. As couples, they worked out adjustments in terms of class schedules, household tasks, baby-sitting arrangements and budgeting.

Nevertheless, some of the student mothers struggle more than the others.

One participant said, *“Naghanap po ako ng sponsorship para sa aking tuition kasi hindi po ako naka-avail ng free tuition kasi, nag-enrol na ako noon. Hindi ko lang po tinuloy. Kaya ngayon po naglakas loob akong naghanap ng sponsor kaya may nagbabayad na po ng tuition fee ko. Ngunit nahihirapan pa rin ako sa araw araw na*



pangangailangan. Tulad ko, 3rd year na may mga activities na kailangang bilhin talaga, e saktong lang ang budget namin para sa pagkain kung kayat nahihirapan ako. Yung load na palaging pinagkakagastusan ay talagang mahirap, kapag nawalan ka ng pangload. Nag aapply din ako sa ibang scholarship pero hindi po ako matanaggap tanggap. (I'm looking for sponsorship for my tuition because I can't avail the free tuition anymore because I was already enrolled last sem. I took the courage to look for sponsor and luckily I got sponsor for the payment of my tuition. However, it is not enough to my daily needs for food, load allowance, and school activities as a third year student. I tried to look for other sponsorship but I failed)".

The student mothers' common fear is their parents' initial reactions. It turned out, however, that their parents were also instrumental in their efforts to continue their studies and pursue their dreams while fulfilling their role as mothers at a young age.

Student Mother's Reflections on Their Experience of Early Pregnancy

Some of the young mothers regretted getting pregnant early. They wished they have finished first their studies so they could better provide for their children. However, all of them considered their children as their motivation to pursue their degrees and make a better future for their kids. "Nu awan daytoy anak ko, haan ko nga seryosoen daytoy eskwelak (If I did not get pregnant and did not have a child, I would still not be serious in my studies)," one of them said during the interview. "Daytoy early pregnancy ti nagriing kanyak. Baka ininom ti inar-aramid ko ket inggana 30 years old ak ket ages-eskwelaak pay laeng. Haan ko nga naawatan ti biag nu haanak nga nagsikog. Diyay anak ko ti nang-buo kanyak. (Getting pregnant early was my awakening. If I did not get pregnant, I would have continued with my vices (drinking) and would still be in school even until my 30's. I would not have understood life. My child built me up)," another confided.

College student mothers have developed their own insights regarding their situation of parenting while studying. As a result, they have established an identity, a view of themselves and of their circumstances something different from that of

their fellow students who are not parents. Hence, they may have a distinct motivational orientation when it comes to their academic tasks, an approach which is shaped by the need to fulfill another set of tasks – their parental roles. These meanings and insights are essentially what this research aims to learn.

Furthermore, the social milieu in which the student-mothers find themselves also contribute to their actions and decisions regarding parenting and studying. The social environment includes the support systems available for them, the information they are provided, and the responses of people they encounter in various settings, such as the home, medical clinics and the school. These experiences help shape their knowledge, beliefs and attitudes about motherhood, family life, self and child care, and schooling.

Conclusions

The student mothers experienced various health concerns during their pregnancy which included common colds, cough, fever, urinary tract infection, anemia, cramps, morning sickness, backaches, headaches, risky pregnancy, and high blood pressure. One student mother experienced anxiety and gastroesophageal reflux disease (GERD). Another was diagnosed with postpartum depression. The availability of rural health units and the support of their parents enabled the student mothers to access antenatal and postnatal health care as well as immunization for their children.

Class schedules, class requirements, reduced course load, dropping subjects, feeling of guilt of having to leave their children under the care of their parents, performing their role as wives, dealing with in-laws are the main concerns encountered by the student mothers as they attempt to balance their student and familial roles.

The parents continued to be the main source of emotional and financial support of the student mothers. Student mothers with partners/husbands who are older received better emotional and financial support compared to those who are of the same age range as their partners/husbands.



Some of the student mothers regretted getting pregnant early. However, they claimed that their experience made them a better person and motivated them to pursue a better future for their children.

Recommendations

Schools may provide opportunities where students may discuss about responsible boyfriend-girlfriend relationships, challenges and coping strategies of student-parents, and priority-setting activities, aimed at encouraging students to prioritize their studies and defer unwanted pregnancies. These can form part of the human development trainings given to students.

Student-parents constitute one more group of students who have special needs since they have concerns that are distinct from the rest of the student population. Universities and colleges in the country may institute programs and activities that would aim at helping these students complete their studies while dealing with their parental concerns.

Schools may carry out a review of their Gender and Development action plans for possible inclusion of programs for student-parents' welfare.

During orientation to first year students, guidance and medical personnel should be invited to discuss early pregnancy, contraceptive method, parenting and sexual issues.

Research on the prevalence of early pregnancy cases in the institutions is encouraged to establish baseline data.

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