

REVIEW ARTICLE

Assessing the incorporation of Ubuntu principles and values in the interventions for the prevention of teenage pregnancy: A scoping review

DOI: 10.29063/ajrh2024/v28i10.19

Sinethemba Nyandeni, Fhumulani M, Mulaudzi and Nombulelo V, Sepeng

University of Pretoria, Faculty of Health Sciences, Department of Nursing Science

*For Correspondence: Email: ednyandeni@gmail.com; Phone +27722830151

Abstract

Despite many interventions already implemented, teenage pregnancy remains a public health problem globally. This scoping review assessed if incorporating Ubuntu principles and values in the interventions for preventing teenage pregnancy yielded favourable outcomes. The study followed methodological framework recommended by Arksey and O'Malley, which Levac, Colquhoun and O'Brien had modified. Relevant articles were searched and screened, and data was extracted and summarised. Studies searched using Google Scholar, EBSCOhost databases, APA Psyche, MEDLINE, CINAHL and Africa-wide information. The search yielded ten published papers appraised and published between 2019 and 2022. Four themes emerged from the scoping review: collectivism and solidarity, participatory decision-making, information sharing and mutual respect. The findings from this study strengthen the idea that Ubuntu principles and values should be incorporated when developing and implementing interventions for preventing teenage pregnancy. These could help improve the cooperation of teenagers and other stakeholders, promoting teamwork for effective and successful interventions. (*Afr J Reprod Health 2024; 28 [10]: 189-207*).

Keywords: Interventions; scoping review; stakeholder; teenage pregnancy; Ubuntu

Résumé

Malgré les nombreuses interventions déjà mises en œuvre, la grossesse chez les adolescentes reste un problème de santé publique à l'échelle mondiale. Cette étude de cadrage a évalué si l'intégration des principes et des valeurs d'Ubuntu dans les interventions visant à prévenir les grossesses chez les adolescentes donnait des résultats favorables. L'étude a suivi le cadre méthodologique recommandé par Arksey et O'Malley, que Levac, Colquhoun et O'Brien avaient modifié. Les articles pertinents ont été recherchés et examinés, et les données ont été extraites et résumées. Études recherchées à l'aide de Google Scholar, des bases de données EBSCOhost, APA Psyche, MEDLINE, CINAHL et d'informations à l'échelle africaine. La recherche a donné lieu à dix articles publiés, évalués et publiés entre 2019 et 2022. Quatre thèmes ont émergé de l'examen de la portée : le collectivisme et la solidarité, la prise de décision participative, le partage d'informations et le respect mutuel. Les résultats de cette étude renforcent l'idée selon laquelle les principes et les valeurs d'Ubuntu devraient être intégrés lors de l'élaboration et de la mise en œuvre d'interventions visant à prévenir les grossesses chez les adolescentes. Ceux-ci pourraient contribuer à améliorer la coopération des adolescents et des autres parties prenantes, en favorisant le travail d'équipe pour des interventions efficaces et réussies. (*Afr J Reprod Health 2024; 28 [10]:189-207*).

Mots-clés: Interventions ; examen de la portée ; partie prenante; grossesse chez les adolescentes ; Ubuntu

Introduction

The continuous rise in teenage pregnancy has led to the initiation of various prevention interventions. However, society still suffers unbearable outcomes regardless. The current statistics indicate that approximately 21 million teenagers aged between 15

and 19 and 2.5 million girls under 16 years give birth each year¹. South Africa (SA) is regarded as one of the countries that report a higher prevalence of teenage pregnancy, with about 142,704 births of mothers aged 10 to 19 recorded in 2021².

Teenage pregnancy affects adolescents negatively, as it increases the cases of irregular school

attendance and unsatisfactory school performance, which often causes pregnant girls to drop out of school³. In addition, teenage girls are at risk of related childbirth complications due to underdeveloped reproductive systems, including anaemia during birth, preterm delivery, eclampsia, fistula and postpartum haemorrhage, which often leads to death^{1,4,5}. The girls' social cycle is also affected as they suffer from stigmatisation, rejection and violence from partners, peers, family members and community members⁶.

Combating teenage pregnancy is part of the sustainable developmental goals concerning maternal and newborn health¹. Several interventions are currently in place in different countries to combat the scourge. Although this is the case, statistics for teenage pregnancy are increasing daily. The most common intervention used is the promotion of Sexual Reproductive health (SRH), which is encompassed in sex education. Sex education is offered through life skills and life orientation curriculum taught in schools to empower teenagers with self-awareness and responsibilities^{7,8}. Another intervention found to work is a peer mentorship programme implemented in England amongst the looked-after children cared for by the state as they do not have parents⁹. It is, however, unclear if parents and other stakeholders were involved in developing the interventions mentioned above.

It is important to consider the cultural and social norms of the community when developing interventions that affect children and teenagers, as parents' lack of involvement may lead to low uptake and unacceptability. The findings of a phenomenological study conducted in Zimbabwe illustrate parents rejected the use of contraceptives by teenagers to prevent pregnancy. Parents believed that contraceptive use encourages teenagers to be sexually active, therefore urging abstinence and sexual education to be key interventions¹⁰. Respecting and developing culturally relevant interventions may assist in increasing the uptake and acceptance of the interventions. Mulaudzi and Peu¹¹ developed an intervention that emanated from Ubuntu's philosophy termed "it takes a village to raise a child"

in their study on interventions to ensure success for school health projects in SA. Ubuntu's philosophy is embedded in core values such as mutual respect, humanness, trust, honesty, cohesiveness and solidarity¹². The intervention was implemented successfully in the school health project because it emphasised the principles of Ubuntu, including solidarity, collectivism, participatory decision-making and consensus. Thus, identifying and involving different stakeholders assisted in identifying and developing culturally congruent interventions. Ubuntu philosophy was also used successfully during the COVID-19 pandemic as it fostered team spirit, ensured comprehensive provision of services, and dealt with socioeconomic injustice¹³.

In South Africa, Ubuntu values such as togetherness, solidarity and respect has improved the lives of people living with multimorbidity by allowing share treatment workload and increase self-management abilities¹⁴. Moreover Akabor and colleagues recommends the cessation of competitive nature of South African schools such as rewarding individual learners for academic efforts as it does not promote collaboration and togetherness among learners¹⁵. The researcher is of the opinion that the same principle of Ubuntu values and principles can be used to combat teenage pregnancy. Therefore, this scoping review sought to assess if the principles and values of Ubuntu's philosophy are incorporated into teenage pregnancy prevention interventions.

Methods

The scoping review utilised the Arksey and O'Malley methodological framework modified by Levac, Colquhoun and O'Brien¹⁶. The review aimed to assess the integration of Ubuntu principles and values, including collectivism and solidarity, participatory decision-making, information sharing, and mutual respect, in interventions targeted at preventing teenage pregnancy. The framework employed the following five (5) stages: Stage 1. Identifying the research question; Stage 2. Identifying relevant studies; Stage 3. Study selection; Stage 4. Charting the data and Stage 5. Collating, summarising and reporting the result.

Table 1: Search strategy

Search string	Database	Limiters
("teenagers" OR "teen" OR "youth" OR "Adolescent") AND ("Pregnancy in Adolescence" OR "teenage pregnancy" OR "teen parents" OR "teenage mothers") AND ("prevention" OR "interventions" OR "best practices" OR "strategies") AND ("Social Values" OR "ubuntu" OR "ubuntu principles" OR "ubuntu philosophy" OR "African values")	Academic search complete	Publication date 2020-2024
pregnancy OR adolescent AND interventions OR strategies OR "best practices" OR prevention OR "prevention therapy" AND "African values" OR ubuntu	ProQuest	2020-2024
(pregnancy or pregnant) AND (interventions or strategies or "best practices" or prevention or "prevention therapy" or control or "control measures") AND (teenage or teen or adolescent or youth or "teen parents" or "teenage mothers") AND (ubuntu or "ubuntu principles" or "ubuntu philosophy" or "African values" or "cultural values" or "African philosophy" or humanity or "humanity towards others")	CINAHL	2020-2024

Stage 1: Identifying the research question

Scoping reviews require an identification of the research question as the first step to guide researchers with the development and effectiveness of literature search¹⁷. This scoping review attempted to answer the questions: *Are any Ubuntu philosophy principles and values incorporated into teenage pregnancy prevention interventions?*

Stage 2: Identifying relevant studies

Levac and colleagues¹⁶ state that this phase involves identifying relevant articles and initiating the search. Studies pertinent to this scoping review were identified by searching the research databases for publications, articles, principles and values of Ubuntu philosophy incorporated into teenage pregnancy prevention interventions. A search strategy was developed using key search terms and synonyms identified through the following databases were searched: EBSCO host, ProQuest, Google search and Google Scholar, CINAHL. See Table 1.

The strategy and Boolean operators were "teenagers" OR "teen" OR "youth" OR "Adolescent" AND "Pregnancy in Adolescence" OR "teenage pregnancy" OR "teen parents" OR "teenage mothers" AND "prevention" OR "interventions" OR "best practices" OR "strategies" AND "Social Values" OR "ubuntu" OR "ubuntu

principles" OR "ubuntu philosophy" OR "African values". Other search terms and Boolean operators were (pregnancy or pregnant) AND (interventions or strategies or "best practices" or prevention or "prevention therapy" or control or "control measures") AND (teenage or teen or adolescent or youth or "teen parents" or "teenage mothers") AND (ubuntu or "ubuntu principles" or "ubuntu philosophy" or "African values" or "cultural values" or "African philosophy" or humanity or "humanity towards others"). The search was conducted between October 2023- August 2024.

The search was limited to literature published in English between 2020-2024 as the authors are fluent in this language; studies conducted globally. The review aimed to include interventions that are currently implemented in a global setting to prevent teenage pregnancy. See Table 1 for summary of search strategy. The relevant articles were downloaded and uploaded to Endnote software and transferred to Rayyan for further screening.

Stage 3: Study selection

The downloaded peer-reviewed articles were then screened based on title and abstracts. These articles were filtered based on the inclusion criteria involving global studies. The search retrieved 3,567 studies. The titles were used to screen their appropriateness. After that, 3,000 publications were excluded as they did not meet the inclusion criteria.

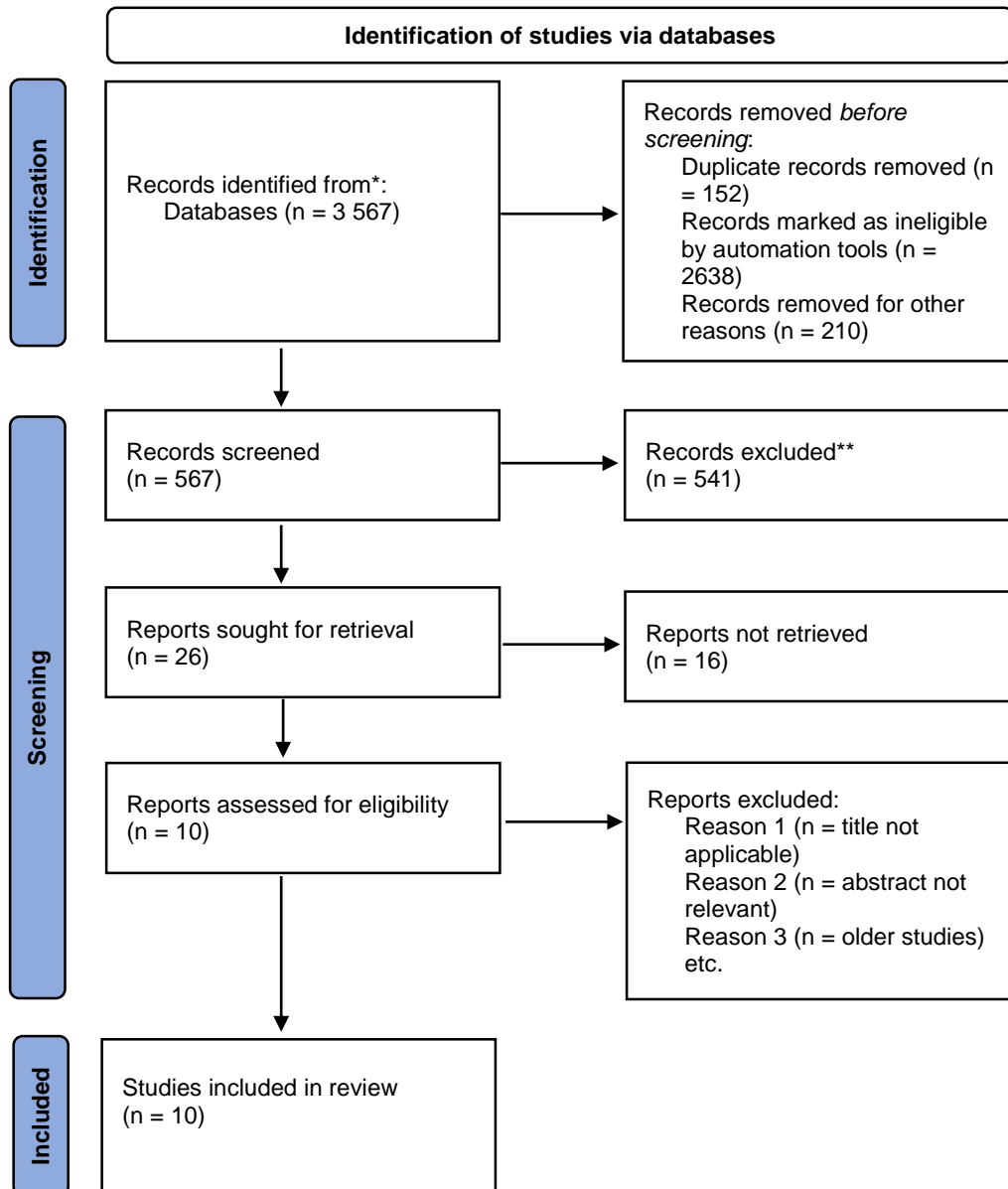


Figure 1: Selection of studies

Those that had duplicates were also excluded. The researcher examined 567 publications, scrutinised the abstracts and selected those related to teenage pregnancy prevention intervention where Ubuntu principles and values had been implemented. Following the set criteria, 541 articles were further excluded. A critical appraisal of the complete text of the outstanding 26 articles was conducted, and

another 16 articles were removed from the search as they did not address the principles and values of Ubuntu's philosophy in preventing teenage pregnancy interventions. In the end, only ten (10) publications remained within the review as they answered the research question. Figure 1 summarises the study selection process that led the ten (10) relevant articles¹⁸.

Inclusion criteria

This scoping review focused on:
Peer-reviewed publications addressing interventions for teenage pregnancy prevention
Globally published peer-reviewed articles dated 2019-2024
Included quantitative or qualitative studies, letters, editorials and commentaries published in English (translation cost was too high for publications in other languages).

Exclusion criteria

Peer-reviewed publications dated before 2019
Interventions not addressing teenage pregnancy prevention interventions
Publications in other languages except English.

Stage 4: Charting the data

Characteristics of the studies were extracted and presented in a table format using the Joanna Briggs Institute Reviewers' Manual¹⁹. This table entailed the following characteristics: author's name, study title, publication year, the aim of the study, study population, study setting, study findings and study conclusion, see Table 2.

Stage 5: Collating, summarising and reporting the result

During this stage, the study findings were collated and summarised to assess whether Ubuntu principles and values were incorporated into the interventions for teenage pregnancy prevention. The findings of this scoping review were categorised into themes in answering the research question.

Results

Of the ten (10) articles that met the scoping review inclusion criteria, see Table 2 below for details of included studies. Five (5) qualitative designs, one (1) was conducted in the United States of America (USA)²⁰, Zambia²¹, Indonesia²², and South Africa (SA)^{23,24}. Two (2) articles employed the mixed method design, one (1) was conducted in SA²⁵,

Kenya²⁶. Three (3) studies adopted quantitative design were conducted in USA^{27,28}, United Kingdom (UK)²⁹. Four (4) themes emerged from this scoping review. The themes are collectivism and solidarity, participatory decision-making, sharing of information, and mutual respect.

Theme 1: Collectivism and solidarity

A thematic analysis was conducted to identify whether the interventions included Ubuntu principles and values in the ten (10) articles reviewed. One of the Ubuntu principles, collectivism and solidarity which emphasises teamwork emanated as the first theme and emerged from two (2) studies. The studies showed teenagers' involvement, while the other two showed the involvement of teenagers and other stakeholders. The studies revealed that teenagers' involvement contributed to the interventions' acceptability and implementation.

The first study conducted in South Africa by Sobane and colleagues reports on the value of integrating indigenous and contemporary knowledge in developing communication interventions to decrease teenage pregnancy²⁴. Participants of the study were women residing in Piting Ha Tumo, a rural area in Lesotho who shared knowledge about Thakaneng is a practice of Basotho during an ethnographic discussion. Thakaneng is a home for sexually matured girls which is selected by the village chief. This home is led by women who are well mannered and are at good social status within the village. They host sleep over of these girls as a way of ensuring they are not exposed to their parents' sexual activities and preparing them for becoming a matured woman. While under the women's care the girls will be taught about maintaining their virginity, self-control, avoiding bringing pregnant and bringing shame to their families and communities as they are ambassadors, key aspects of choosing a future husband. This practice was regarded effective in preventing teenage pregnancy as teenagers would fear embarrassing their educators, peers and society. However, modernity had faded this practice away and it might not be implemented in urban areas²⁴.

Table 2: Summary of included studies

Author and publication year	Title of the study	Aim of the study	Study population	Study setting	Study findings	Conclusion
Wright <i>et al</i> 2019	Parents' beliefs of the Black Church's role in teen pregnancy prevention	To identify African American parents' beliefs of the Black Church's role in preventing teen pregnancy and promoting healthy teen relationships.	Parents	USA	Parents want their teenagers to be taught sexual information from their churches. However, they selected 'parent-child communication', 'goals and dreams', and 'relationships' as the most important topics for teen pregnancy prevention intervention. Parents emphasised that information shared during workshops should be judgement-free and realistic. Lastly, parents preferred pastors and/or youth pastors/directors should deliver sexual health information. Parents believed older adults and other parents may oppose sexual education.	Public health practitioners need to understand parents concern, beliefs to be able to gain parental support and buy in before planning and implementing teen pregnancy prevention programs.
Effendi <i>et al</i> 2021	Adolescent pregnancy prevention in rural Indonesia: a participatory action research	To identify factors associated with adolescent pregnancy in rural Indonesia and formulate intervention actions to reduce the teenage pregnancy rate	Teenagers, parents, religious leaders, community leaders, village officials,	Indonesia	Low uptake of reproductive health services is related to the low educational attainment, juvenile delinquency, poverty, and social and cultural norms. The intervention actions taken to reduce teenage pregnancy	PAR is useful to explore the causes of health issues and promote active community participation. Socioeconomic factors influence adolescent pregnancy rates. Cross-sectoral cooperation and

Author and publication year	Title of the study	Aim of the study	Study population	Study setting	Study findings	Conclusion
Khoza <i>et al</i> 2019	Acceptability and feasibility of a school-based contraceptive clinic in a low-income community in South Africa	To assess the attitudes of one community towards establishment of an SBCC in their area.	subdistrict staff, teachers, and primary health centre staff Teenagers, parents and principals	SA	rate included income generation and reproductive health education. The study shows that teenage girls, the school principal and parents with teenage daughters largely supported the idea of an SBCC. However, concerns about confidentiality, the possibility of increased promiscuity and contraceptive side effects. While legal statutes and policies in South Africa do not pose any barriers to the establishment of an SBCC, some logistical barriers remain.	active participation are needed to address the teenage pregnancy. This study provides insight of South African teenage girls experience pressures regarding perceptions about sex and sexual activity. Barriers to contraceptive services whether school based or clinic-based persist and impacts on girls' willingness and ability, to access contraceptives. Whilst parents with teenage daughters and the stakeholders favour of an SBCC, as well as legal and policy statutes of being in favour such a service: provision of an SBCC on a permanent basis, is not imminently likely or possible due to the many resource and logistical constraints. Findings recommends exploring of Alternative

Author and publication year	Title of the study	Aim of the study	Study population	Study setting	Study findings	Conclusion
Chirwa-Kambole <i>et al</i> 2020	Acceptability of youth clubs focusing on comprehensive sexual and reproductive health education in rural Zambian schools: a case of Central Province	To explore the acceptability and adoption of CSRHE youth clubs in schools during the implementation of a randomised-controlled trial on interventions that may reduce early childbearing in rural Zambia.	Pupils and teachers	Zambia	The perceived advantage of the clubs is the use of participatory learning methods, films and role plays to communicate sensitive reproductive health information. Further, the perceived compatibility of the content of the sessions with the science curriculum increased the learners' interest in the youth clubs as the meetings also helped them to prepare for the school examinations. However, cultural and religious beliefs among teachers and parents regarding the use of contraceptives complicated the delivery of reproductive health messages and the acceptability of youth	models such as school-linked service with integral support from primary health care and appropriate non-governmental services to maximise teenagers access to contraceptive services. The study indicated that CSRHE youth clubs may be acceptable in rural schools if participatory learning methods are used and head-teachers, teachers as well as parents appreciate and support the clubs.

Author and publication year	Title of the study	Aim of the study	Study population	Study setting	Study findings	Conclusion
Skosama <i>et al</i> 2020	Disconnections and exclusions of parents in the prevention of teenage pregnancy: A phenomenological approach	To explore and describe the disconnections and exclusions of parents in the prevention of teenage pregnancy.	Parents	SA	clubs' information among the learners. The study indicated that parents felt excluded from the interventions of teenage pregnancy. lack of communication skills, societal and cultural norms prevented them from engaging with their teenagers. Parents perceived that parent to child education on sexuality and contraceptives was the most important strategy in the prevention of pregnancy. furthermore, parents believe sharing information and being role models to their teenagers will help prevent teenage pregnancy	The study recommends that parent-to-child education platforms be established between parents and teenagers to prevent teenage pregnancy. These platforms should be established to prepare teenagers at an early age as part of ensuring good health and well-being.
Shirao <i>et al</i> 2020	Implementation of Life Skills Education towards Curbing Teenage Pregnancy in Public Secondary Schools in Makadara Sub County, Nairobi, Kenya	To evaluate the implementation of life skills education as a tool in preventing teenage pregnancy.	Students, teenage mothers, life skills teachers, principals, quality assurance officer	Kenya	Learners who attended life skills gained self-confidence and self-esteem to make informed decisions. The findings also indicated that teachers and learners would prefer life skills to offer more abstinence information and sex	The implementation of life skills education has potential to prevent risks of early pregnancy. And enables learners to make informed decisions, social adjustment and to cope with societal stress. However, its

Author and publication year	Title of the study	Aim of the study	Study population	Study setting	Study findings	Conclusion
Chambers <i>et al</i> 2021	Feasibility, Acceptability, and Preliminary Impact of Asdzáán Be'eená	To describe the implementation and preliminary efficacy of a program developed through an intensive community-based participatory research process.	Navajo girls and their female caregivers.	Maryland	education in the academic curriculum.	implementation depends on the teachers' qualifications and attitude. furthermore, with enhanced parental involvement in their children's academics there will be high school completion rate among girls.
Yabrra <i>et al</i> 2021	An mHealth Intervention for Pregnancy Prevention for LGB Teens: An RCT	To address the lack of sexual health programming for many sexual minority adolescents, we developed and tested Girl2Girl, a text messaging-based pregnancy prevention program tailored to the unique needs of sexually experienced and inexperienced cisgender LGB+ adolescent girls.	Cisgender LGB+ girls	USA	The study reported that Girl2Girl is linked to high utilization of condoms and contraceptives. Moreover, has no evidence of promoting sexual abstinence as information provided by the intervention was sex positive.	The study findings suggest that Asdzáán Be'eená has potential to break the cycle of substance use and teen pregnancy in Native communities by improving protective and reducing risk factors associated with this adverse health. The study recommends that regarding sex-positive programs involving sexually experienced and inexperienced youth must consider self-efficacy to consent to sex when wanted and be reserved when sex is not wanted.

Author and publication year	Title of the study	Aim of the study	Study population	Study setting	Study findings	Conclusion
Ponsford <i>et al</i> 2022	Feasibility and acceptability of a whole school social-marketing intervention to prevent unintended teenage pregnancies and promote sexual health: evidence for progression from a pilot to a phase III randomised trial in English secondary schools	To assess the feasibility and acceptability of the intervention and trial methods in English secondary schools against predefined progression criteria (relating to randomisation, survey follow-up, intervention fidelity and acceptability and linkage to birth/abortion records) prior to carrying out a phase III trial of effectiveness and cost-effectiveness.	Students and staff	England	The study found out that there is acceptability of the intervention by those who know the programme. There intervention was found to be feasible linkage to birth/abortion.	The study suggest that a whole-school social marketing approach may be appropriate for topics that are clearly prioritised by schools
Sobane <i>et al</i> 2021	The value of the Fusion of Indigenous and Contemporary Knowledge in Developing Communication as Interventions to Reduce Teenage Pregnancy in South Africa	To discuss Thakaneng practice of Basotho	Women	Lesotho	This study revealed that adults are taking responsibility in educating and mentoring teenage girls. The practice strengthens community system and communal learning.	The study proposes that designing a communication strategy that would curb teenage pregnancy is to take into consideration its social and structural predictors. Moreover, consider structural barriers influencing young women's experiences, behaviours, and how they think about their sexual and reproductive health.

United States America (USA), School Based Contraceptive Clinic (SBCC), South Africa (SA), Lesbian, gay, bisexual and other sexual minority (LGB+), randomised controlled trial (RCT)

Although this practice promotes mentorship, communal learning and strengthens community system it has excluded boys and deprived them of empowerment. In practising Ubuntu principles, a person does not work alone towards achieving a goal but works with others. Recognising male teens as important role players in teenage pregnancy and empowering them with preventative information will enable them to make informed decisions.

In the second study conducted by Ponsford and colleagues assessing the feasibility and acceptability of a whole-school and social-marketing interventions for addressing unintended pregnancy and promoting sexual health education in England, UK²⁹. Students and school staff members from selected English schools were the participants of this study. For this review, the focus is on the following components of the interventions: the student led social marketing campaigns; the parent information; and the school review of sexual health services. These components address student needs, parent-child communication through linked lessons, access to school based and local sexual health services. The school staff is responsible to lead the interventions and facilitate student led social marketing and received training from the sexual education forum²⁹. The involvement of students in the implementation of this intervention promoted teamwork and increased the interventions acceptability and effectiveness in curbing teenage pregnancy.

Contrary to the studies cited above, a study conducted in SA regarding School-based contraceptive clinics (SBCC) was initiated to provide sexual reproductive health information and contraceptive services to secondary school learners²⁵. The clinic will be operated on the school premises, and nurses will provide services for easy access to learners. Although teenagers and parents were not consulted in the planning phase, the courts, school governing bodies and parliament were consulted to clear all legal barriers affecting the functioning of the clinics²⁵. The process followed does not reflect the principles of Ubuntu, such as collectivism and solidarity, as parents and young people were not involved in the planning.

Similarly, in Zambia, comprehensive sexual reproductive health education (CSRHE) youth clubs were developed as an intervention to combat teenage pregnancy. However, parents and teenagers were not involved in planning the intervention and were only informed during the implementation phase²¹. The study revealed that the principles of ubuntu principle, such as collectivism and participatory decision-making, were not incorporated in the planning of the intervention. Processes like these may affect the success of the intervention as values such as respect and trust regarding the interventions might be compromised.

Theme 2: Participatory decision-making

Participatory decision-making is a principle of Ubuntu, which stresses respect and value input of individuals. This principle emanated as the second theme that emerged from four (4) studies. All these studies showed that teenagers' and stakeholders' inputs are essential when developing interventions for personal empowerment.

The first study was conducted in Indonesia regarding family planning village intervention. Participants of this study were teenagers and community stakeholders. During their participatory decision-making, the participants suggested the creation of income opportunities to promote family welfare and teach sexual health to adolescents. The researchers adopted the suggestions by developing family planning village interventions to educate the community about contraceptives²². When practicing Ubuntu, the researcher must acknowledge the participants' ideas and show appreciation for their contributions. Together, participants and local collaborators advocated for the intervention's existence. Therefore, they gained a sense of ownership as their inputs were respected and made a meaningful contribution to society.

The second study conducted in the USA aimed at investigating parents' beliefs about the sexual health education programme provided in black churches²⁰. Parents were given a chance to suggest topics they wanted to be part of the evidence based teenage pregnancy prevention programmes. In addition, they wanted to be involved in choosing the

individuals who would educate their children based on trust. Participatory decision-making was incorporated in this study as there was transparency in the planning phase, and participants' inputs were acknowledged and appreciated. The implementation of life skills education was effective in empowering students when delivered by skilled, knowledgeable teachers who engaged and supported their learning through utilizing internet and providing textbooks. The students developed coping strategies, enjoyed the lessons with great understanding and application in reality hence have good morals and character²⁶.

Furthermore, from the conducted by Chambers and colleagues to assess the feasibility, acceptability and impact of Asdzáán Be'eená (female pathway in Navajo girls) a program developed to prevent teenage pregnancy and substance use among Navajo girls²⁸. This program was developed through partnership with community advisory boards and cultural expert for Navajo girls and their caregivers facilitated by family health coach. The partnership rooted the cultural component of the program making it appropriate and acceptable to break cycle of teenage pregnancy through restoring cultural connectedness, positive identity, family bonding and wellbeing of adolescent girls²⁸. These studies prove that respecting and valuing participants' input promotes their commitment to developing and implementing the intervention.

In contrast, in a study conducted in SA titled Disconnection and Exclusion of Parents in the Prevention of Teenage Pregnancy²³, parents were reluctant to guide their teenagers about preventative behaviour as they lacked communication skills. The lack prevented parents from influencing their teenagers' sexual decision-making abilities. This finding does not mirror the principles of Ubuntu, such as participatory decision-making, collectivism and solidarity. This also poses a threat to teenagers' lives as parents are believed to be primary caregivers and share a special bond of influencing their behaviours. In the spirit of Ubuntu, the researchers should have involved parents from the beginning of the intervention and taught them communication skills.

Theme 3: Sharing of information

Another principle of Ubuntu is the sharing of information, which emphasises sharing without looking at financial or material gain. This principle emanated as the third theme that emerged from five (5) studies. Of the five (5), two (2) focused on sharing gained knowledge, two (2) focused on sharing information in a non-judgmental and non-stigmatised environment, and one (1) focused on empowerment through training. All this is essential to promote harmonious relationships for the prevention of teenage pregnancy.

From the Thakaneng of Basotho practice, the women hosting the girls relieved the parents from the burden of discussing sexuality with their children as it was regarded as a taboo. The woman created good platform to educate the girls in groups promoting mutual learning which strengthens their accountability in applying what they were taught²⁴. Ubuntu promotes sharing information, which is helping one another as a person is a person through others. This means through the sharing of information, and the girls will be motivated to preserve their virginity, know how to conduct themselves and avoid teenage pregnancy in society. Information sharing was also practiced in the technology based, Girl2Girl intervention as the cisgender lesbian, gay, bisexual and other LGB+ adolescents received messages that reinforce their behavioural skills; advice about sex; relationships and the LGBT+ community; and texts that provide social support from a text buddy as part of the program content³⁰.

Although the study participants were empowered, the results of the study revealed that the content promoted sex positive information evident by increased in condom and contraceptive use than emphasizing abstinence as there were pregnancy cases recorded during the study amongst this group³⁰. The findings of a study conducted in Kenya regarding the implementation of life skills education towards the prevention of teenage pregnancy indicated that students are not taught enough skills, knowledge and attitudes to empower their decision-making abilities²⁶. Life skills teachers and school

principals who participated in the study indicated that they lack time to focus on this subject as they prioritise examinable subjects while being understaffed. Although in some schools there was good content delivery of life skill content which empowered learners with adequate knowledge to deal with life's challenges the teachers are not will guided deliver this study content²⁶.

Moreover, from the CSRHE youth club, the study participants felt free to share the information taught by the youth clubs with individuals who showed interest²¹. Furthermore, parents, teachers and healthcare workers in the community were invited to attend the meetings to learn the content of the youth clubs. This act of collaboration compensated for their exclusion from the intervention's development and preparation for its implementation. With Ubuntu, if one individual cannot reach the goal of preventing teenage pregnancy, it will take the whole village to fix it. As Mulaudzi and Peu indicated, it takes a village to raise a child¹¹.

Similarly, the participants from the study conducted in the USA by Wright and colleagues advocate that sharing of information should be in a judgement free space²⁰. In another study by Skosana, parents acknowledged their roles and responsibility of sharing sexual information freely and openly with their teenagers at an early age²³. In all the studies mentioned above, the principles and values of Ubuntu, such as the sharing of information and respect, were incorporated and are important for preventing teenage pregnancy.

The Asdzáán Be'eená program has planned lessons that provides important life skills and health information to the girls and their female caregivers²⁸. Similarly, the school staff participating in the whole school social-marketing intervention received training to be able to deliver curriculum on relationship and sexual education. Moreover, student led marketing campaign utilized social and other media platforms, posters, and school assemblies to address healthy relationships, sexual rights, readiness for intimacy and access to services²⁹. This intervention promotes the principles and values of Ubuntu, such as information sharing.

In this intervention, students must work groups to ensure that they share this information, and it reaches all the learners in school. Ubuntu's collectivism and solidarity principles, information sharing, and respect were incorporated.

Theme 4: Mutual respect

Mutual respect is one of the Ubuntu principles and values that emphasises people respecting each other. The elders should respect the opinions and ideas of the young, while young people appreciate the advice of the elders. This principle emanated from four (4) studies. The presence of respect promotes effective communication and successful teamwork needed for the development and implementation of teenage pregnancy prevention interventions. Where mutual respect is compromised, there will be a lack of consensus and togetherness, which are barriers to the Ubuntu practices.

In interventions where researchers and developers successfully gained participants' consent to participate in the development and implementation of their intervention, the principles of Ubuntu, mutual respect have been incorporated.

This is evident in the study conducted to address the lack of sexual health programming for minority adolescent girls. The study obtained parental waiver to protect the cisgender LGB+ adolescents from unsafe situation by disclosing their sexual identity to their parents to gain permission to participate in the study³⁰. The researchers showed respect for the sexual identity of the adolescents and acknowledged their need for sexual health programme tailored for their unique needs³⁰. Moreover, the following interventions support existence of mutual respect, school staff showed respect for the student's ideas and abilities in leading the social-marketing campaign allowing them to host meetings and events²⁹; in Thakaneng Basoto practice, the girls and women show respect towards each other making their mentorship and education process effective²⁴; caregivers and girls in Asdzáán Be'eená programme reported improved relationships and communication after the participation in shared activities²⁸, family planning village development and implementation²².

Contrary to CSRHE youth club²¹, SBCC²⁵ interventions where Ubuntu principles, such as mutual respect and trust, had been compromised. The CSRHE youth club findings indicated that omitting Ubuntu principles and values did not meet the desired objectives. As such, researchers recommended the incorporation of participatory decision-making and mutual respect would increase the acceptability of the intervention²¹. In addition, SBCC indicated that the absence of Ubuntu values and principles compromised the implementation of their interventions and, therefore, could not help preventing teenage pregnancy^{25,31}. Teenagers and stakeholders were excluded from the development phase of these interventions. Moreover, teenagers feared utilising the designed SBCC^{23,25}, as they lacked staff confidence and parental support. Communitarianism asserts that individuals belong to a community with social bonds existing formed relationships and are responsible for the wellbeing of the society³². There is a need to remove such barriers to facilitate a sense of belonging and togetherness and promote cohesion within communities to get access to teenage pregnancy.

Discussion

The aim of this scoping review was to assess the incorporation of Ubuntu principles and values in the interventions for the prevention of teenage pregnancy. The results revealed that interventions that incorporated Ubuntu principles and values in their development and planning for implementation phases succeeded in preventing teenage pregnancies, and the communities negatively viewed the interventions that omitted the Ubuntu principles and values.

This review found that incorporating Ubuntu principles and values, such as collectivism and solidarity, was essential to developing relevant and sustainable teenage pregnancy prevention interventions. Active involvement of teenagers and stakeholders strengthens the importance of shared responsibility in grooming and nurturing of children by community members. The findings of this review revealed that this shared responsibility promotes practices that instil good morals and principles,

maintain purity of children's minds, reinforces abstinence behaviour, encourages leadership, advances problem solving skills and ownership as the teenagers and stakeholders actively participate in the interventions. Active involvement enhances acceptance and adaptation of the interventions for the prevention of teenage pregnancy.

However, the reviewed interventions were focused on empowering girls and excluded boys. This finding is consistent with that of Lohan³³, who reported a study titled "Can Teenage Men Be Targeted to Prevent Teenage Pregnancy? A Feasibility Cluster Randomised Controlled Intervention Trial in Schools" involving teenagers and stakeholders in the development phase. The trial results of the study reported on the gender sensitive approach to towards the inclusion of teenage men and a gender sensitive transformative method of promoting teenage men to share reproductive responsibility. Therefore, there is a need to include men and teenage men in the collaborative actions for preventing teenage pregnancy.

On the contrary, this review revealed that when teenagers and stakeholders are not involved in developing the interventions, their trust and respect regarding the interventions might be compromised, which may lead to rejection. Rejection of teenage pregnancy prevention might contribute to continuous rise in teenage pregnancy. This finding is supported by the study conducted in Thailand, which revealed that youth perceive the available sexual reproductive health services as inaccessible and unacceptable of due to lack of privacy and confidentiality from healthcare providers. Furthermore, recommends that nurses promote awareness amongst youth and stakeholders to participate and collaborate to design adequate SRH services³⁴. In Ubuntu, teamwork is considered the best tool to overpower any challenge, and every role is essential regardless of who is responsible. In successful teamwork, all team members learn from one another, gain confidence and promote trust and respect for the designed intervention. If stakeholders accountable for developing interventions to combat teenage pregnancy can incorporate teamwork principles and work cooperatively with teenagers, the interventions will be successful.

The review results also indicated that participatory decision-making is a principle of Ubuntu which emphasises the importance of having individuals' input valued and respected when developing teenage pregnancy prevention interventions. In the reviewed studies, teenagers and stakeholders actively participated, they made valued contributions and gained a sense of ownership through the partnership in developing teenage pregnancy prevention intervention. The meaningful contributions were in line with their lifestyles and practices to enhance their implementation. The study also revealed that participants gained sense of connectedness and interdependency as they played their roles in the interventions leading to commitment and sustainability of the interventions. In addition, teenagers and stakeholders share their challenges freely and use the skills learnt through participation in the interventions to navigate and resolve them.

This finding is supported by a study conducted in Egypt titled "Journey to Hope, self-expression and community engagement: Youth-led arts-based participatory action research"³⁵. The study found that participants achieved a sense of hope, living purpose, social respect, self-confidence, and social respect during their participation³⁵. On the contrary, this review highlighted that parents lacked communication skills and were reluctant to implement the interventions for the prevention of teenage pregnancy. The study also shows that parents were unable to use their special bonds with their teenager to guide and influence them on making good sexual health decisions to prevent teenage pregnancy. Moreover, they need to be empowered and involved in the development stage of the interventions to avoid imposing them and their contributions might help to overcome challenges and barriers that might be experienced during their implementation. Ndugga and colleagues recommends engaging stakeholders involving parents through deconstructing sociocultural norms, enhancing parents confidence to initiate and impart SRH information to their teenagers and integrate parent-adolescent communication in the interventions will encourage parents involvement³⁶. Adopting Ubuntu principles and values, when developing interventions, we don't say, "I need to",

but we say, "We need to". The unity and bond are built by individuals joining hands to stop teenage pregnancy. Everyone is appreciated for the strengths, abilities, knowledge and experience they share in combating teenage pregnancy. When developing and implementing interventions for the prevention of teenage pregnancy, participatory decision-making must be incorporated for it to be effective and appropriate.

The results show that the Ubuntu principle of sharing information emphasises sharing acquired or learned information to improve behavioural practices that encourages teenagers to make informed sexual decisions. The study findings indicated that teenagers need to be taught SRH information by elders, parents and teachers who are knowledgeable and skilled to make them participate in the process so they can understand easy and be able to apply. Furthermore, emphasis should be more abstinence rather than promoting the use of condoms and contraceptives. This information to be shared when children are still young to motivate them to keep their virginity. Moreover, the information must be shared in a non-judgmental, open, free and non-stigmatised environment. When teenagers understand the SRH content they can share and promote the interventions by engaging in awareness campaigns, events and activities. This finding is supported by Mulaudzi and colleagues³⁷, that information learned from knowledgeable persons in a group can positively impact one's behaviour and attitude. In Ubuntu, sharing information helps provide needed support and unity as stakeholders plan teenage pregnancy prevention interventions³⁸.

Furthermore, the findings revealed the importance of incorporating Ubuntu principles and values such as mutual respect, which emphasise that the young should respect the advice of the elders and the elders should respect the ideas of the young when developing interventions. Mutual respect was reported as a facilitator of effective communication and successful teamwork essential for developing and implementing interventions for teenage pregnancy. Moreover, they study indicated that mutual respect and trust promotes togetherness and increases acceptability of the interventions. When

teenagers and stakeholders give informed consent to participate in developing interventions and implementation them, researcher need to reinforce respect, trust, protect the vulnerable such as LGB+ from unsafe situations. The findings also established that when mutual respect is omitted, Ubuntu's values of communitarianism were compromised, leading to teenagers and stakeholders rejecting the intervention. This result reflects Engelman, who found that children perceive fair distribution of resources as fairness equivalent to mutual respect³⁹. This finding asserts that when participants experience equal involvement in developing and implementing interventions, they value and acknowledge their participation. Moreover, when children do not feel they are being given equal treatment and participation, they perceive it as disrespect³⁹. To ensure that teenage pregnancy prevention interventions are effective and sustainable, the principle of mutual respect needs to be incorporated into the development and implementation thereof.

Limitations

The study attempted to identify and critique English-language articles, which may have excluded studies in other languages that archive important information on integrating Ubuntu values and principles in teen pregnancy prevention interventions.

Conclusion and recommendations

This study set out to assess the incorporation of Ubuntu principles and values in the interventions for preventing teenage pregnancy. The findings support the incorporation of Ubuntu principles and values, such as collectivism and solidarity, participatory decision-making, sharing of information and mutual respect in teen pregnancy prevention interventions. The review concluded that interventions that incorporate ubuntu principles and values proved to be successful compared to those that did not. Hence, the result of this study strengthens the need to incorporate Ubuntu principles and values when developing and implementing teen pregnancy

prevention interventions. The findings of this study can be used to develop interventions aimed at the prevention of teenage pregnancy.

Acknowledgements

This scoping review received financial support from the National Research Fund (NRF), grant number PMDS22062727858. The researchers are grateful to the University of Pretoria Librarian who helped to develop search terms and keywords used in this scoping review.

Contribution of authors

S Nyandeni contributed to developing the concept, conducting document search, screening identified documents based on the predetermined inclusion criteria, abstracting data, synthesising findings, drafting the manuscript and revising it to its final form with inputs from the co-authors. NV Sepeng contributed to refining the concept, provided the overall direction for the development of the manuscript, reviewed the draft manuscript, and provided comments. FM Mulaudzi contributed to refining the concepts, revision and finalisation of the manuscript. All authors have read and approved the final version for submission and publication.

References

1. WHO. Adolescent pregnancy. 2020; <https://www.who.int/news-room/fact-sheets/detail/adolescent-pregnancy>. Accessed 17/03/2022, 2022.
2. Opinion. The 'epidemic' of adolescent pregnancy in SA. 2023;17/02/2023;<https://www.iol.co.za/dailynews/opinion/the-epidemic-of-adolescent-pregnancy-in-sa-e262e87b-7c50-4a21-a91b-2b58178802b7>. Accessed 10/05/2023, 2023.
3. Nkosi NN and Pretorius E. The influence of teenage pregnancy on education: perceptions of educators at a secondary school in Tembisa, Gauteng. *Soc Work*. 2019;55(1):108-116.
4. Indarti J, Al Fattah AN, Dewi Z, Hasani RDK, Mahdi FAN and Surya R. Teenage pregnancy: Obstetric and perinatal outcome in a tertiary centre in Indonesia. *Obstetrics and gynecology international*. 2020;2020.
5. Nash K, O'Malley G, Geoffroy E, Schell E, Bvumbwe A and Denno DM. "Our girls need to see a path to the future"--perspectives on sexual and reproductive

- health information among adolescent girls, guardians, and initiation counselors in Mulanje district, Malawi. *Reproductive health*. 2019;16(1):1-13.
6. Barron P, Subedar H, Letsoko M, Makua M and Pillay Y. Teenage births and pregnancies in South Africa, 2017-2021—a reflection of a troubled country: Analysis of public sector data. *S Afr Med J*. 2022;112(4):252-258.
 7. Ngabaza S and Shefer T. Sexuality education in South African schools: deconstructing the dominant response to young people's sexualities in contemporary schooling contexts. *Sex Education*. 2019;19(4):422-435.
 8. Mturi AJ and Bechuke AL. Challenges of including sex education in the life orientation programme offered by schools: the case of Mahikeng, North West Province, South Africa. *African journal of reproductive health*. 2019;23(3):134-148.
 9. Mezey G, Robinson F, Gillard S, Mantovani N, Meyer D, White S and Bonell C. Tackling the problem of teenage pregnancy in looked-after children: a peer mentoring approach. *Child & Family Social Work*. 2017;22(1):527-536.
 10. Chinyoka K and Mugweni R. CONTRACEPTIVES USE AMONG FORM TWO LEARNERS: INTERROGATING PERCEPTIONS OF PARENTS IN ZIMBABWE. 2020.
 11. Mulaudzi FM and Peu MD. Communal child-rearing: The role of nurses in school health. *Curationis*. 2014;37(1):1-7.
 12. Mavis Mulaudzi F, Mulaudzi M, Anokwuru RA and Davhana-Maselesele M. Between a rock and a hard place: Ethics, nurses' safety, and the right to protest during the COVID-19 pandemic. *International Nursing Review*. 2021;68(3):270-278.
 13. Chigangaidze RK, Matanga AA and Katsuro TR. Ubuntu philosophy as a humanistic–existential framework for the fight against the COVID-19 pandemic. *Journal of Humanistic Psychology*. 2022;62(3):319-333.
 14. Mbokazi N, van Pinxteren M, Murphy K, Mair FS, May CR and Levitt NS. Ubuntu as a mediator in coping with multimorbidity treatment burden in a disadvantaged rural and urban setting in South Africa. *Social Science & Medicine*. 2023;334:116190.
 15. Akabor S and Phasha N. Where is Ubuntu in competitive South African schools? An inclusive education perspective. *International Journal of Inclusive Education*. 2022:1-17.
 16. Levac D, Colquhoun H and O'Brien KK. Scoping studies: advancing the methodology. *Implementation science*. 2010;5:1-9.
 17. Arksey H and O'Malley L. Scoping studies: towards a methodological framework. *International journal of social research methodology*. 2005;8(1):19-32.
 18. Hong QN, Fàbregues S, Bartlett G, Boardman F, Cargo M, Dagenais P, Gagnon M-P, Griffiths F, Nicolau B and O'Cathain A. The Mixed Methods Appraisal Tool (MMAT) version 2018 for information professionals and researchers. *Education for information*. 2018;34(4):285-291.
 19. Peters MD, Godfrey CM, McInerney P, Soares CB, Khalil H and Parker D. The Joanna Briggs Institute reviewers' manual 2015: methodology for JBI scoping reviews. 2015.
 20. Wright LS, Branscum P, Maness S, Larson D, Taylor EL, Mayeux L and Cheney MK. Parents' beliefs of the Black Church's role in teen pregnancy prevention. *J Adolesc*. 2019;72:52-63.
 21. Chirwa-Kambole E, Svanemyr J, Sandøy I, Hangoma P and Zulu JM. Acceptability of youth clubs focusing on comprehensive sexual and reproductive health education in rural Zambian schools: a case of Central Province. *BMC Health Services Research*. 2020;20(1):1-9.
 22. Effendi DE, Handayani L, Nugroho AP and Hariastuti I. Adolescent pregnancy prevention in rural Indonesia: A participatory action research. *Rural and Remote Health*. 2021;21(3).
 23. Skosana MT, Peu MD and Mogale RS. Disconnections and exclusions of parents in the prevention of teenage pregnancy: A phenomenological approach. *International Journal of Africa Nursing Sciences*. 2020;13:100251.
 24. Sobane K, Riba I and Lunga W. The value of the fusion of Indigenous and contemporary knowledge in developing communication as interventions to reduce teenage pregnancy in South Africa. *Health Communication and Disease in Africa: Beliefs, Traditions and Stigma*. 2021:333-345.
 25. Khoza N, Zulu P and Shung-King M. Acceptability and feasibility of a school-based contraceptive clinic in a low-income community in South Africa. *Prim Health Care Res Dev*. 2019;20:e22.
 26. Shirao B, Momanyi M and Anyona J. Implementation of Life Skills Education towards Curbing Teenage Pregnancy in Public Secondary Schools in Makadara Sub County. *Nairobi, Kenya*. 2020.
 27. Ybarra M, Goodenow C, Rosario M, Saewyc E and Prescott T. An mHealth intervention for pregnancy prevention for LGB teens: an RCT. *Pediatrics*. 2021;147(3).
 28. Chambers RA, Patel H, Richards J, Begay J, Littlepage S, Begay M, Sheppard L, Nelson D, Masten K and Mitchell K. Feasibility, acceptability, and preliminary impact of Asdzáán Be'eená: An intergenerational, strength-based, and culturally grounded program to improve the health of Navajo families. *Fam Community Health*. 2021;44(4):266-281.
 29. Ponsford R, Bragg S, Meiksin R, Tilouche N, Van Dyck L, Sturgess J, Allen E, Elbourne D, Hadley A and Lohan M. Feasibility and acceptability of a whole-school social-marketing intervention to prevent unintended teenage pregnancies and promote sexual health: evidence for progression from a pilot to a phase III randomised trial in English secondary schools. *Pilot and feasibility studies*. 2022;8(1):52.

30. Ybarra M, Goodenow C, Rosario M, Saewyc E and Prescott T. An mHealth Intervention for Pregnancy Prevention for LGB Teens: An RCT. *Pediatrics*. 2021;147(3):1-14.
31. Jewkes R, Nduna M and Jama N. STEPPING STONES: A training manual for sexual and reproductive health communication and relationship skills. 2010; 3rd: <https://www.whatworks.co.za/documents/publications/86-stepping-stones-training-manual/file>. Accessed 13 May, 2022.
32. Chimakonam JO and Ogbonnaya LU. Can Afro-Communitarianism Be Useful in Combating the Challenge of Human Interaction Posed by the COVID-19 Pandemic? *Int J Environ Res Public Health*. 2022;19(21):14255.
33. Lohan M, Aventin Á, Clarke M, Curran RM, McDowell C, Agus A, McDaid L, Bonell C and Young H. Can Teenage Men Be Targeted to Prevent Teenage Pregnancy? A Feasibility Cluster Randomised Controlled Intervention Trial in Schools. *Prevention Science*. 2018;19(8):1079-1090.
34. Wiwatkamonchai A, Mesukko J, Klunklin P and Fongkaew W. Youths' Perceptions Regarding Access to Sexual and Reproductive Health Services. *Pacific Rim International Journal of Nursing Research*. 2023;27(1).
35. Lee L, Currie V, Saied N and Wright L. Journey to hope, self-expression and community engagement: Youth-led arts-based participatory action research. *Children and Youth Services Review*. 2020;109:104581.
36. Ndugga P, Kwagala B, Wandera SO, Kisaakye P, Mbonye MK and Ngabirano F. "If your mother does not teach you, the world will...": a qualitative study of parent-adolescent communication on sexual and reproductive health issues in Border districts of eastern Uganda. *BMC Public Health*. 2023;23(1):678.
37. Mulaudzi F, Sepeng N, Moeta M, Ramavhoya T and Rikhotso S. Improving Research Outputs for a University Nursing Department using Mutingati: An Ubuntu Perspective. *African Journal of Development Studies*. 2022;12(1):89.
38. Makoe M and Shandu-Phetla TP. Using Mobile-Based Social Media to Facilitate Interaction and Build Communities through the Lens of Ubuntu in Distance Education. *Journal of Learning for Development*. 2019;6(2):130-142.
39. Engelmann JM and Tomasello M. Children's sense of fairness as equal respect. *Trends Cogn Sci*. 2019;23(6):454-463.